

# Welcome to Herbal Legacy.com

HerbalLegacy.com is sponsored by [Christopher Publications](#). HerbalLegacy.com is **not** sponsored nor endorsed by Dr. Christopher's Original Formulas. We are an **educational** site only.

HerbalLegacy.com was created as a way for people to find out more information on the formulas created by Dr. John R. Christopher, and how they were originally intended for use. One of Dr. John R. Christopher's goals was to have an Herbalist\* in every home, and a Master Herbalist\* in every community. Through HerbalLegacy.com, we hope to further the knowledge of Dr. Christopher by offering detailed information on his formulas, and natural healing programs. We also detail other information that people might find useful, including various healing programs put together by Dr. Christopher.

The name HerbalLegacy was chosen because of the rich legacy passed on by Dr. Christopher. Please see the biography, An [Herbal Legacy of Courage](#), written by his son [David Christopher BA MH AHG](#), to find out more about his legacy.

At HerbalLegacy.com you will find a great deal of information on all of Dr. Christopher's Formulas, Cleansing Programs, Recipes to ensure your good health, and various writings by him. In addition there are testimonials from people who have used these methods successfully. You **will not** be able to purchase any herbal supplements from this site. This site is intended to **educate** people in the correct usage of herbs and nutrition.

**New!!** Sign up for our *free* newsletter! Each month we will be sending out a newsletter with new information on ailments, Dr. Christopher's Formulas, or other health topics. [Sign up now!](#)

Towards the bottom of this page, you will find a section titled "[New Additions](#)". This section contains a list of everything recently added to HerbalLegacy.com. Be sure to [Bookmark Us Now](#) so you can easily return for these new additions.

If there is an ailment you do not find on HerbalLegacy.com, or a section that you feel needs clarification, please e-mail [requests@herballegacy.com](mailto:requests@herballegacy.com). We are **unable to respond to individual questions**, but will continue to add useful information to the site.

\* Want to know how to become an Herbalist or Master Herbalist? Check out [The School of Natural Healing](#).



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**Herbal Education:** Your source for a Complete Herbal Education. The School of Natural Healing was established by Dr. John Christopher in 1953 and has been dedicated to providing quality herbal education ever since. Learn more today.

**Book Store:** Visit our book store to find various books written by Dr. Christopher and many others that compliment his teachings.

**Ailments:** This portion of the site lists many different health Conditions, Definitions, Symptoms, Causes, and Herbal Aids.

**Formulas:** This section describes the different Formulas created by Dr. Christopher. It covers Usage, Dosage, Ingredients, and Testimonials.

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**[Programs](#):** This area outlines the processes Dr. Christopher recommended for over 30 different ailments.

**[Recipes](#):** We have put together a number of tasty items that you can make at home to enjoy. Not only are they good, but they are good for you. We hope that you enjoy these as much as we do.

**[Herbs](#):** Learn more about Cayenne and Comfrey in our new Single Herbs section.

**[Links](#):** These are some sites that we feel are worth a look.

**[Literature](#):** Here you can read selected writings by Dr. John Christopher, a biography of Dr. Christopher written by his son David, and other interesting topics.

**[History](#):** Contains the biography of David Christopher, Master Herbalist and son of Dr. John Christopher who continues the work of his father.

**[Testimonials](#):** We love to learn what herbs and natural healing methods have done for you and your loved ones. This area is for just that. These stories are some GREAT examples of what herbs are doing for people everyday.

**[Feedback](#):** In this portion of the site you can send us your herbal success stories that can be used to help educate others in similar situations.

### Health Alert Topics:

**[Anthrax](#):** Due to the recent terrorist activities and focus on Anthrax, we decided to add valuable information about this bacteria, including information on what to do to combat it.

**[Smallpox](#):** Due to some debate over whether or not Smallpox could be used as a weapon as a result of recent events, we wanted to help you stay informed.

**[Fluoridation of our Water Supply](#):** Utah and other areas of the world are currently debating putting Fluoride into the public drinking water. This area discusses the health problems with water Fluoridation. -- Contact your [Utah county House of Representatives](#).

<b>New Additions to the Site:</b>	<b>Date Added:</b>
<a href="#">Comfrey Thesis</a> added to <a href="#">Single Herbs</a> Section.	January 17, 2003
<a href="#">Comfrey</a> information added to <a href="#">Single Herbs</a> Section.	January 6, 2003
<a href="#">Herbs</a> section added to site. <a href="#">Cayenne</a> information moved to Herbs section.	January 6, 2003
<a href="#">Tahini Cookies (2 ways)</a> in the <a href="#">Recipes</a> area. <i>(Thanks Eliyafa )</i>	Nov. 24 2002
<a href="#">Fruit Shaker</a> in the <a href="#">Recipes</a> area. <i>(Thanks Gypsy)</i>	June 10, 2002

<a href="#">Hundreds of Children Poisoned by Tap Water</a> in the <a href="#">Fluoridation of our Water Supply</a> area under <a href="#">Literature</a> .	Dec. 7, 2001
<a href="#">Milk (Almond 2)</a> and <a href="#">Milk (Rice)</a> in the <a href="#">Recipes</a> area. ( <i>Thanks Nathan</i> )	Nov. 9, 2001
<a href="#">Smallpox</a> in the <a href="#">Dr. Christopher Ailments</a> area.	Oct. 29, 2001
<a href="#">Berry Banana Breakfast Juice</a> - Located under <a href="#">Recipes</a> ( <i>Thanks Pam</i> )	Oct. 29, 2001
<a href="#">Dentists to sue over continued fluoridation of drinking water</a> located under <a href="#">Fluoridation of our Water Supply</a> in <a href="#">Newspaper Articles</a>	Oct. 26, 2001
<a href="#">Anthrax</a> and <a href="#">Corns</a> in the <a href="#">Dr. Christopher Ailments</a> area. <a href="#">2-9: Garlic: Man's Best Friend in a Toxic World</a> in the <a href="#">Literature</a> area.	Oct. 17, 2001
<a href="#">Dr. John R. Christophers "Three Oil Massage"</a> and <a href="#">Dr. John R. Christophers "Cold Sheet Treatment"</a> in the <a href="#">Literature</a> area. <a href="#">Immucalm</a> and <a href="#">Deep Heating Balm</a> in the <a href="#">Dr. Christopher Formulas</a> area.	Sept. 4, 2001
<a href="#">Dr. John R. Christophers "Incurables Program"</a> , in the <a href="#">Literature</a> area.	Aug. 29, 2001
<a href="#">Dr. John R. Christophers "Anti-Plague Formula"</a> in the <a href="#">Literature</a> area.	Aug. 28, 2001
<a href="#">Apple Crisp</a> , <a href="#">Cashew Whipped Cream</a> , <a href="#">Festive Salad Dressing</a> , <a href="#">Twice Baked Potatoes</a> , <a href="#">Whole Wheat Bread Crumbs</a> - Located under <a href="#">Recipes</a> ( <i>Thanks Traci</i> )	Aug. 22, 2001
<a href="#">El Programa de los Tres Días de Limpieza y la Dieta sin Mucosidad</a> - Spanish Translation of An <a href="#">Dr. John R. Christophers "Three Day Cleansing Program"</a> .	Aug. 20, 2001

## En Espanol

[El Programa de los Tres Días de Limpieza y la Dieta sin Mucosidad](#)

Herbal Legacy is the NEW home of the Live Streaming Radio Program of David & Fawn Christopher's "A Healthier You." Come here every **Saturday** morning to listen to the world renowned Master Herbalists talk about today's health issues using Natural Healing methods. You can also call and ask them your own questions.

## "A Healthier You"

Unfortunately, A Healthier You is not being streamed over the Internet at this time. Check back often, as we plan to resume streaming soon.

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### Disclaimer

This information here is not intended for the use of diagnosing any disease, condition or prescribing any treatment whatsoever. It is offered for informational use only, and for use in maintaining and promoting good health in cooperation with a licensed medical practitioner. No responsibility is assumed by the distributors, author or publisher of this information should the information be used in place of a licensed medical practitioner's services. There is no guarantee of any kind made for the performance or effectiveness of the preparations or methods mentioned on this web-site.

This information is to be used for educational purposes only and has been solely based on the historic and traditional use of herbs. This information has not been evaluated by the US Food and Drug Administration, nor has it gone through studies required before a particular product can be deemed truly beneficial or potentially dangerous.

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# School of Natural Healing & Christopher Publications

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**Welcome to Snh.cc:** Home of The School of Natural Healing and Christopher Publications.

Come and Join our

## [Community](#)

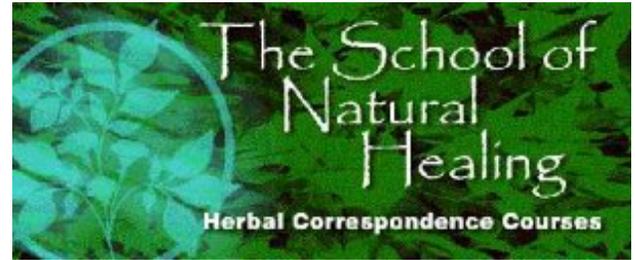
Meet many other people who enjoy living a healthy and happy lifestyle.

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The School of Natural Healing has been serving your Herbal Education needs since 1953. We look forward to serving you now and in the future.

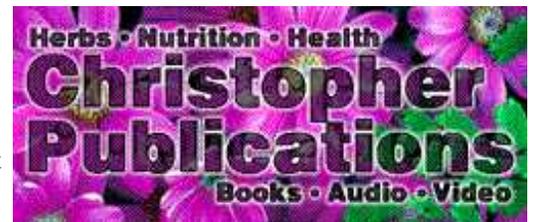


## [The School of Natural Healing](#)

Snh.cc is also home to the Christopher Publications Shopping Zone. Here you can purchase all available writings from Dr. Christopher.

The Shopping Zone also has many other titles by different authors that complement the Christopher Methodology, and make a great addition to any herbalist's library.

Check out the Zone today to get these Great Books, Videos and Audio programs!



## [Christopher Publications](#)

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# School of Natural Healing

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## Community Area

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Please remember to keep clean and appropriate.

Thanks

## Welcome to The School of Natural Healing Community

We have built this area for you to meet and converse with other students of The School of Natural Healing and people interested in using Herbs to live better and healthier lives.

### ***PLEASE NOTE:***

The School of Natural Healing is not responsible for any information offered in this community. This is an open forum for discussion and education. Any medical condition should be referred to for guidance from a proper medical practitioner.

We ask that all participants remember that herbalists **do not** diagnose or prescribe and ask that you do the same.

All participants are asked to use appropriate language in all the areas here. If The School receives any complaints regarding inappropriate chat room or message board behavior, your activity will be suspended and blocked.

## Text Chat Room

To enter, simply enter your Name and a little saying in the Profile, then click the button. Once you are in the room, place your cursor into the little box at the bottom of the screen and start typing. Press "Enter" or "Return" on your keyboard when you're done typing.

Chat with other students! Please join your fellow students and graduates of The School of Natural Healing to discuss any herbal questions. Send an e-mail to [chat@snh.cc](mailto:chat@snh.cc) to be put on a notification list for upcoming chat events.

## Bulletin Board Forum

Post your Herbal questions and maybe even help someone else with your insight and knowledge.

[Enter our Bulletin Board Forum](#) *(This will open in a new window)*

Please **do not** use this forum to sell any products, herbal or otherwise. Any links to sites selling herbal products will be removed.

We are currently using a free Bulletin Board that uses pop-up windows. Please be aware that when you enter the forum, a window or 2 may open. This is how the service earns money, the windows are ads. Also, if you don't like the banners blinking or moving, hitting the Esc. key usually stops the movement.

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Check out our friends at [Christopher Publications](#). There are special offers on various items.

Check out the shopping zone to find out what they are.

You can purchase many of the books and other educational materials that are included in our [Herbal Correspondence Courses](#).

Also see our

friends at [HerbalLegacy.com](#)

They are the best site focused on Herbal Education we have found.

## Welcome to The School of Natural Healing

The School of Natural Healing was founded in 1953 by Dr. John R. Christopher. Since that time, thousands of students have taken classes with us. This site gives information on the various correspondence courses offered by The School of Natural Healing. These courses now include: Herbology, Iridology, Reflexology, and our new Aromatherapy Program. Here at Snh.cc, you will find information on what our courses are all about. We have detailed information about each level, and the materials that come in each program. You can even register for classes via our secure server! Snh.cc is also home of The School of Natural Healing's on-line [Community](#). Students and non-students are encouraged to use our chat room and bulletin board to discuss different health topics. We also have [links](#) to other informational sites to help our students with their studies.

To get a free brochure about The School of Natural Healing, fill out our [brochure request form](#), and don't forget to [Bookmark Us Now](#).

### [Family Herbalist Program](#)

The introductory course in our program. This course is a pre-requisite for the Master Herballiast, Reflexology, Iridology, and Aromatherapy programs.

### [Available Courses](#)

At The School of Natural Healing, you can learn many things including: Iridology, Reflexology, Aromatherapy, and how to become a Master Herbalist.

### [About Us](#)

Become a Master Herbalist through our Home Correspondence Courses at The School of Natural Healing, founded by Dr. John R. Christopher, M.H., N.D.

**New!** Subscribe to our *free* bimonthly e-mail newsletter. It includes exciting updates on the School, herbal and health information, and special offers for subscribers only.

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Visit the [Archive](#) of past issues. [Remove Me](#) from the newsletter membership.

### Available Courses

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<a href="#">Reflexology</a>	<a href="#">Enroll</a>
<a href="#">Iridology</a>	<a href="#">Enroll</a>
<a href="#">Aromatherapy</a>	<a href="#">Enroll</a>

### [Live Classes](#)

Live in Utah or planning a visit? We have many different instructor led classes and workshops for you to choose from.

### [Scholarships](#)

Recently the Dr. John R. Christopher Memorial Scholarship Fund has received a large donation from a donor who passionately believes in the Dr. Christopher Methodology. The clock is ticking, so fill out your application today.

### [Payment Plan](#)

You can now make monthly payments on your tuition. Click here to print and fill out the application.

### [Contact Us](#)

Need something? Want to tell us something? Please feel free to contact us for registration information or anything else. We look forward to hearing from you soon.

### [Frequently Asked Questions](#)

Have a specific question, or are just curious? Check out our FAQ section to find out more about commonly asked questions.

### [Herbal Reference Links](#)

There are many great Herbal Information sites out on the World Wide Web. We hope that you find the information that you are looking for to live a Healthy, Happy fulfilled life.

### [Community](#)

It's time to meet other folks that share your interests. Please join our community to discuss anything about the herbal world with your new found friends.

Learn more about The School of Natural Healing using the links below:

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## Call for Educational Herbal Questions at 1-800-372-8255

Call and talk with a Master Herbalist between 1:00-2:00 PM, Mountain Standard Time, Monday thru Thursday and have your herbal questions answered for FREE!!!\* Many people call in, so please be patient if there is a hold time.

If you do not want to hold, you can also call and schedule a private tutorial for \$25 per 15 minutes. Ask the office for details.

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Have any questions for the School of Natural Healing? Go to the [Contact Us](#) page.

If you find any dead or broken links, or if you have any suggestions on how to improve this site, please contact [The webmaster@snh.cc](mailto:The_webmaster@snh.cc).

Since June 2, 2000, this site has been viewed

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Christopher Publications

& The School of Natural Healing

P.O. Box 412 - Springville, UT 84663

**(Utah)** 1-801-489-4254 - **(Toll-free)** 1-800-372-8255 - **(Fax)** 1-801-489-8341

\* Calls are limited to 3 minutes and are taken in the order received. (Typical hold time is 15 to 25 minutes)

Site was last updated September 24, 2003.

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## Christopher Publications

Welcome to the home of Christopher Publications on the World Wide Web. It is our goal to help educate everyone that wants to gain a herbal education. We are the home of all the writings of Dr. John R. Christopher, M.H., N.D.

We have our store organized into 4 parts. The first is *Items Published by Christopher Publications*, the second is items Published by *Other Publishers* and the third is *Newsletters*, both current and past. The *Damaged Books* area is the 4th. Whenever items become damaged, we are able to sell them at a discounted price.

### News:

[Dr. Christopher's Herbal Lectures](#) are now available! Formerly the New Herb Lectures, this audio lecture series is now available on audio CD!

There is a special price of The Complete Works of Dr. Christopher CD-Rom. Until September 30, 2003 you can order it for \$88.95, a savings of \$10! Order your copy today! [Click here](#) to order.

Rejuvenation through Elimination by Dr. John R. Christopher is out of print. It is being reprinted and expanded, and will soon be available under a new name. To receive a notice when this book is available, please [click here](#).

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## Herbal Education

### [The School of Natural Healing](#)

The School of Natural Healing is celebrating its *50th Anniversary* this year. Visit [www.snh.cc](http://www.snh.cc) today to learn more. Now is the perfect time to enroll as a student!

Whether your interest is in a particular skill or in certification, the School of Natural Healing has courses to fit your needs.

The School of Natural Healing was founded in 1953 by Dr. John R. Christopher. For 50 years the School of Natural Healing has been the means for thousands of students to begin and further their herbal knowledge and wisdom.

Few things are as rewarding and satisfying as being able to care for your own health and your family's health. And there is no safer avenue than herbal and natural healing. Yet many people become overwhelmed at the prospect of herbal study towards becoming their own healer.

The School of Natural Healing's Master Herbalist Program will show you that you can become your own doctor, and that it is not as difficult as you may think. In as little as an hour a day, you could become a qualified healer and teacher in less than 2 years-all in the comfort of your own home.

Our courses are designed to teach herbalism from the ground up-beginning with foundational understandings of natural methodologies, and progressing through the many aspects of herbal healing, including herb identification, horticulture, medicinal usages, methods of preparation, and more. Students who complete the Master Herbalist program are prepared to take care of both themselves and their families, and to share their knowledge and wisdom in the service of educating others.

Our School curriculum and philosophy is built upon the understanding and practice of four fundamental principles.

1. Preventative Nutrition
2. Eradicating the Cause of Disease
3. Healing the Body through Natural Methods
4. Education

#### **Nutritional Herbologist Program • Levels 100 - 500**

The Nutrition Herbologist Program will instruct you to recognize, understand, and assist the body's inherent healing power. You will learn preventative medicine through the study of basic principles of natural healing. These courses focus on cause of disease, nutrition, elimination therapies, and herbal cleansing for the entire system. Training also includes the proper application of wholesome herbs and simple therapies. Using Dr. Christopher's world-famous herbal combinations and single herbs, you will learn how to cleanse, nourish, and build the body. The Nutritional Herbologist Program begins with the popular Family Herbalist (Level 100) course and continues with a series of dynamic video classes presented by Master Herbalists. Textbooks, study guides and workbooks round out your comprehensive instruction in these first five courses. A Certificate of "Nutritional Herbologist" is awarded upon completion of the first 5 levels of the home study program.

#### **Herbalist Program • Levels 600 -1300**

In the Herbalist Program, you will build upon the Nutritional Herbologist training with in-depth instruction in the use of herbal therapy to remove the cause of disease. Within these courses you help fulfill the School's mission to see a competent natural healer in every home. You will learn

how to use the natural medicines that surround you using regional materials. In this program you will learn herb identification, selection, harvesting, horticulture, usage, herbal formulation and preparation. With enough materials to create your own herbal library, this program includes over 18 hours of herbal therapy instruction from Dr. Christopher himself. A certificate of "Herbalist" is awarded upon completion of the first 13 levels of the home study program.

### **Advanced Herbalist Program • Levels 1400 - 2200**

The final eight courses of the Master Herbalist Program give you the skills to become a qualified teacher of herbology. As more people seek natural health, the need for competent educators increases in a variety of health related areas. The Advanced Herbalist Program provides the training to place you on the highest level of herbal competency. As a Master Herbalist, you can teach others so that they are able to take responsibility for their own health. The course study and preliminary examinations are administered through correspondence and provides instruction from the highest-qualified herbal practitioners and herbal pharmacists in the field. The final examinations are only administered at the Master Herbalist Certification Seminar which is held at our facilities. This seminar gives you the opportunity of fine-tuning your skills with the clinical experience of some of the best herbalists in the country.

### **Help by Phone**

Herbalists and Master Herbalists are available to students for tutorial and study aid by toll-free phone from 10:00 a.m. to 4:00 p.m. Mountain Standard Time Monday through Friday (1-800-372-8255). Between 1:00 p.m. and 2:00 p.m. Monday through Thursday, calls are limited to 3 minutes when David Christopher, M.H., accepts calls from the general public.

### **Other Services**

The School of Natural Healing provides a number of additional education services:

- Iridology Home Study Courses with Dr. David J. Pesek.
- Aromatherapy Home Study Courses.
- Reflexology Home Study Courses.
- SNH instructors and Master Herbalists routinely travel to other locations to present seminars for your group.
- Monthly subscription to A Healthier You audio newsletter.
- Many of the SNH texts are available on CD ROM.

For information on any of these services please call or write.

The School of Natural Healing

P.O. Box 412 Springville, Utah 84663

1-800-372-8255

[The School of Natural Healing](http://www.snh.cc) - <http://www.snh.cc> - Complete Herbal Education.

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## Dr. Christopher Ailments

This portion of the site lists many different health Conditions, Definitions, Symptoms, Causes, and Herbal Aids.

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## Dr. Christopher Formulas

This section describes the different Formulas created by Dr. Christopher. It covers Usage, Dosage, Ingredients, and Testimonials.

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Choose a Formula to learn more about.

<a href="#">Adrenetone</a>	<a href="#">CSK</a>	<a href="#">Nose Ointment</a>
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<a href="#">Bee Power</a>	<a href="#">Fen LB</a>	<a href="#">Red Clover Combination</a>
<a href="#">BF &amp; C</a>	<a href="#">Garlic, Rosehips, and Parsley</a>	<a href="#">Relax-Eze</a>
<a href="#">BF &amp; C Ointment</a>	<a href="#">Hawthorn Berry Syrup</a>	<a href="#">Resp-Free</a>
<a href="#">Black Ointment</a>	<a href="#">Herbal Composition</a>	<a href="#">Sen Sei Balm</a>
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<a href="#">BPE</a>	<a href="#">Herbal Eyebright</a>	<a href="#">Smoke Out</a>
<a href="#">Bugleweed Combination</a>	<a href="#">Herbal Tooth Powder</a>	<a href="#">ULC</a>
<a href="#">Calc Tea</a>	<a href="#">INF Combo</a>	<a href="#">V.B.</a>
<a href="#">Catnip &amp; Fennel</a>	<a href="#">Juni-Pars</a>	<a href="#">VF Syrup</a>
<a href="#">Cayenne</a>	<a href="#">Jurassic Green</a>	<a href="#">Vitalerbs</a>
<a href="#">CC</a>	<a href="#">Kelp-T-Comb</a>	<a href="#">Wild Lettuce and Valerian</a>
<a href="#">Changease</a>	<a href="#">Kid-E-Mune</a>	<a href="#">X-Ceptic</a>
<a href="#">Chickweed Ointment</a>	<a href="#">Kid-E-Soothe</a>	<a href="#">Yellow Dock Combination</a>
<a href="#">CMM</a>	<a href="#">Master GL</a>	
<a href="#">Comfrey-Mullein-Garlic</a>	<a href="#">Mem</a>	
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## Dr. Christopher Programs

This area outlines the processes Dr. Christopher recommended for over 30 different ailments.

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| <a href="#">2. Blood Purifier</a>                 | <a href="#">20. Menopause</a>                            |
| <a href="#">3. Bowel</a>                          | <a href="#">21. Menstrual Irregularities</a>             |
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| <a href="#">5. Colds / Flu</a>                    | <a href="#">23. Nervous Tension</a>                      |
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| <a href="#">7. Depression</a>                     | <a href="#">25. Respiratory / Asthma</a>                 |
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| <a href="#">14. Heart</a>                         | <a href="#">32. Warts</a>                                |
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## Literature

Here you can read selected writings by Dr. John Christopher, a biography of Dr. Christopher written by his son David, and other interesting topics. Please be sure to read the [Disclaimer](#), [Biological Individuality](#), [Important Notice](#). For more of Dr. Christopher's writings, visit [Christopher Publications](#).

- [Dr. John R. Christophers "Anti-Plague Formula"](#)
- [Dr. John R. Christophers "Carrot, Citrus & Grape Cleanse"](#)
- [Dr. John R. Christophers "Cold Sheet Treatment"](#)
- [Dr. John R. Christophers "Extended Herbal Cleanse" Routine](#)
- [Dr. John R. Christophers "Herbal Home Colonic Program"](#)
- [Dr. John R. Christophers "Incurables Program"](#)
- [Dr. John R. Christophers "Mucusless Diet"](#)
- [Dr. John R. Christophers "Three Day Cleansing Program"](#)
- [Dr. John R. Christophers "Three Oil Massage"](#)

### [Herbal Legacy of Courage](#)

Learn Fascinating facts and history in the first biography written about Dr. John Christopher.

### [Newsletters](#)

These newsletters contain herbal facts and information, case histories, recipes, testimonials, formulas and more.

### [Fluoridation of our Water Supply](#)

Utah and other areas of the world are currently debating putting Fluoride into the public drinking water. This area discusses the health problems with water Fluoridation.

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## Recipes

We have put together a number of tasty items that you can make at home to enjoy. Not only are they good, but they are good for you. We hope that you enjoy these as much as we do. And if you have a favorite Healthy dish, [Please Share](#) it with the world.

---

[Almonnaise](#)

[Apple Crisp](#)

[Asparagus Soup](#)

[Berry Banana Breakfast Juice](#)

[Cashew Cheese](#)

[Cashew Whipped Cream](#)

[Crank's Nut Roast](#)

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## Single Herbs

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### [Cayenne Information from the 100 Herb Syllabus](#)

One of the most useful herbs known to man, Cayenne has many fantastic uses today. Read information from The School of Natural Healing's 100 Herb Syllabus on this wonderful herb.

### [Comfrey](#)

A good majority of Dr. Christopher's Formulas contained Comfrey. Read the information submitted to the FDA and FTC refuting their decision that Comfrey is harmful.

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## Natural Healing Sources

These are some sites that we feel are worth a look. We just felt that they have good information or products to offer.

---

### Sponsors:

The School of Natural Healing

[http://www.snh.cc/snh\\_cc.htm](http://www.snh.cc/snh_cc.htm)

Christopher Publications Shopping Zone

<http://www.snh.cc/cgi-local/SoftCart.exe/online-store/scstore/index.htm?E+scstore>

**Other Useful Links:** (HerbalLegacy.com is not affiliated with the following companies in any way, and does not take responsibility for any other their products. We have had many requests for sources of these items.)

Apricot Kernels

<http://www.americanbiologics.com/noframes/products/specialtynf.htm>

Low cost good quality water distillers:

<http://wholesalewaterdistillers.com>

Source for organic seeds and roots

<http://www.chatlink.com/~herbseed/gizhome.html>

Supplier of glass bottles for essentail oils and herbal preparations

<http://www.essentialsupplies.com>

Distributor of Dr. Christopher's Original Formulas:

<http://www.theherbshopconnection.com/>

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## History

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### Dr. John R. Christopher, M.H., N.D.

Once in a great while the earth is blessed with an enlightened soul who is able to raise the consciousness of his fellow man by his love, wisdom and honor. Our founder, Dr. John R. Christopher, M.H., N.D., intended for everyone to have the knowledge to properly care for their own body.

In his youth, Dr. Christopher became interested in natural healing when he saw the results of naturopathic healing in his mother. His enthusiasm increased when he found he was able to cure himself of cancer using natural methods. Throughout extensive legal persecution, personal counseling and rigid lecture schedule, he began formulating what would become his world renowned herbal combinations in 1945. Hailed as America's foremost herbalists, Dr. Christopher developed a training program for herbalists and organized [The School of Natural Healing](#) in 1953.



### David Christopher, BA, MH, AHG



For the last 20 years David Christopher has been a popular world wide speaker. He has generated new ideas on the management of high blood pressure, diabetes and auto-immune diseases, and was one of the first to discourage the use of Prozac in favor of natural methods. Alarmed by the growing use of Ritalin, David developed an alternative program for ADD and ADHD.

In 1974 David Christopher, M.H., took his place by his father's side at [The School of Natural Healing](#). David's book entitled [An Herbal Legacy of Courage](#) is a loving tribute to his father. Today, thousands of individuals practice the art of natural healing thanks to David's continued directorship and teaching. Many more receive herbal instruction from David and his wife, Fawn, through their weekly radio program "[A Healthier You](#)". David lectures internationally and has offered educational counseling by phone for over 16 years. He continues formulating herbal combinations, such as the Herbal Traditions line, the Kid-e-Line, [Vitalerbs](#), and the INSTEAD line including [PreTrac](#) & [MindTrac](#); to assist the natural healing process.

David is a prominent herbalist in the United States and is a founding member of the American Herbalist Guild. He received his Bachelor of Arts from Brigham Young University, and his Master's degree from The School of Natural Healing. David's herbal studies began at the foot of America's foremost herbalist, his father, Dr. John R. Christopher, MH, ND. As the director of The School of Natural Healing he ensures that the School offers the best herbal education in the field. David is also a popular radio talk show host, and his program, [A Healthier You](#), and is

now in its twelfth year. An [\*Herbal Legacy of Courage\*](#), a biography on his father's life, is David's most recent publication.

David's characteristic teaching methods have reached thousands of students through residential classes and home study programs. He has helped countless people through his unique nationwide, toll-free herbal education service. David's 23 years of experience in the field of Natural Healing and his personal approach pervades all lectures and classes, and gives those in attendance the knowledge and confidence to continue in a journey toward wellness.

## Personal Success Stories

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We love to learn what herbs and natural healing methods have done for you and your loved ones. This area is for just that. These stories are some GREAT examples of what herbs are doing for people everyday.

If you would like to share your success story, please [send it to us](#) so that someone else may benefit from your experience.

Dear Sir or Madam:

I was introduced to herbal medicine, quite by accident...literally.

I was attending a seminar on some health related issue when an elderly woman I knew fell in the parking lot breaking a bone in her shoulder.

She was taken to the emergency room of a local hospital for x-rays which confirmed that the bone was indeed broken. In fact, it was the ball of the bone that fits in the rotator cup of her shoulder that was affected. She had three hair-line fractures that radiated from the center of the ball.

After consulting a highly regarded, local orthopedist, she refused his medical treatment which was to include immediate surgery. When she refused, the MD told her that without his professional help, she would never have full motion of that joint again. He predicted that 10% to 20% motion would be the most she could expect without his help. She thanked him, but told him that it was her body and she wasn't going to allow him to perform any unnecessary surgery on it.

Instead, she asked that I go to a garden where I found fifty large comfrey plants growing. I knew them only because of the excellent directions she gave on how to get to the garden and what the plants looked like.

I quickly gathered a 5 gallon bucket of the leaves and under her direction, used a double boiler to prepare a combination of steamed leaves and a tincture of the herbal active ingredients.

When the leaves were steamed for a few moments, I let them cool, then placed them over her affected shoulder. Over this, I then placed a cotton diaper. Then I poured the rest of the cooled liquid from the double boiler to saturate the diaper. She may even have drunk some of it as tea, but I really don't remember the details. Next, I placed a sheet of flexible plastic over the diaper so that her bedding would not be damaged by the green juices. I then placed a heating pad over these layers ( leaves, saturated diaper and plastic ) and she sat there for probably a good half-hour while her skin slowly absorbed the herbs.

To relieve her pain, I would hold points on her hands and feet as she refused to take any pain medication.

I ended up moving in with her as this treatment took a good two to three weeks to be effective.

However, after new x-ray's were taken three weeks later, no one could find the original fracture lines. To top this success, this elderly woman had retained the full 360 degree motion of her arm.

It's pretty amazing that this "bone knitting" herb discovered by the American Indians had accomplished such wonderful results. It was amazing to me, but apparently not to her. However, she made a believer out of me and I've never looked back.

Alan in Ohio

---

My mother, who has had eyeglasses since before I can remember, began having trouble with inherent macular degeneration a year or two ago. Her father lost his sight to this. I told her to start using the [herbal eyebright](#) eyewash. She was using it only one time a day last summer when I went to visit her. She said it had kept the blind areas from getting any worse, but they had not healed completely. I explained, again, that she needed to go through the procedure at least 3 to 6 times a day with her condition, and to be sure to drink the tea. When we visited together during the recent holiday, she felt that her eyes had not only healed, but that she no longer needed glasses. She said she only kept them because her drivers liscence required them.

Tomorrow is her 69th birthday. She went to renew her drivers liscence and then called to tell me that she no longer needs glasses to drive. She no longer needs glasses at all.

Natalie from Mapleton, UT

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My sister has had a chronic backache for years. (The original injury began after a minor car accident.) She also has had candida on and off. Recently she began using the Red Clover Combination, NuFem, Grapefruit seed extract, and the Bone, Flesh, & Cartilage (internally and externally). She is now pain free and the candida is also gone.

Lynn from Hughesville, MD

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## Feedback

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This area is for you to tell us **your success stories**. We are very interested in hearing about your experiences using herbs and natural healing methods. Your story might be selected to become one of the experiences that we would relate to others for educational purposes. We will not publish your full name, and **do not** share lists of the contact information we receive.

Unfortunately, we are **unable** to answer herbal questions via this web-site. If you send us a health-related question, we will not be able to respond to it. If you have an educational question that was not answered in the information you found in this web-site, you can contact David Christopher at 1-800-372-8255 from 1:00-2:00 pm Mountain Time Monday-Thursday. Due to a high-volume of calls, holding time varies.

Name:

Email:

City (Optional):

State (Optional):

Comments:

Thank you for sharing your story with us!

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## Ailments

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## Abrasions

### Symptoms

The appearance of these wounds is well-known; however, certain cuts such as those that are deep and wide may require immediate attention by a doctor to prevent scarring. If the bleeding does not stop using the following methods, or if blood gushes in bright spurts, you should seek medical attention immediately.

### Cause

A spot rubbed bare of skin or mucous membrane. These are wounds to the skin common in childhood. A cut severs the skin, such as is inflicted by a sharp object; an abrasion rubs and/or scratches the surface, such as the common scraped knee; and a bruise results from forceful pressure against some object, where the skin is not broken so the blood rushes to the damaged tissue beneath the surface.

### Herbal Aids

[Wheat Grass Chlorophyll](#): It has both healing and antiseptic characteristics. The chlorophyll is applied either directly onto the afflicted surface, or, it is soaked in a cloth and bandaged to the area. At the same time, the chlorophyll should be taken internally.

[Comfrey](#): Most skin sores can be aided by the use of comfrey. Use three parts comfrey with one part lobelia to relieve pain and restore the skin.

[Comfrey](#): If a doctor is not available, apply fresh or dry comfrey root, powder or leaf, powdered, to help stop the bleeding. The comfrey can be put right into the wound; if it is powdered, pour over the area, if fresh, tear up finely and apply. Fresh or dried comfrey can be applied directly over the damaged area--just keep adding additional amounts as needed. Cover with gauze, bandage lightly to hold comfrey in place and so the area can breathe. Comfrey paste can also be applied directly over the damaged area as with burns.

[Healing Ointment](#): Made of comfrey, marshmallow, marigold, beeswax, and oils, this is an antiseptic that has been used historically on lesions, eczema (dry), poison ivy, soothes inflamed surfaces, abrasions, burns, hemorrhoids, for bruises and swellings. May be used whenever needed. Good to have on hand at all times.

[Myrrh](#): One herbalist has a favorite application of Myrrh. He combines equal parts of finely powdered golden seal and powdered Myrrh gum. He mixes a pinch of the combination with a little saliva (or water, he says, if you are squeamish), and applies the paste to cuts, sores, pimples, abrasions--any kind of skin wounds. As this dries, it forms a crusty, protective scab over the wound, just like a real scab, but with the additional antiseptic and healing properties of the herbs. He says that he has been able to wean himself from the constant use of band-aids.

[Plantain](#): (*Plantago major*) This entire plant is solvent in water or can be used directly on the external area in question and is an alterative astringent, diuretic and antiseptic. When applying bruised leaves to the wounded area, it is known to check external bleeding and aid as an anti-infectious aid as well.

[Cayenne Pepper](#): The old herbalists claimed that cayenne pepper (*Capsicum* or red pepper) should be poured directly into a fresh wound, to sterilize and stop the bleeding.

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**[Cayenne](#)**: A wound, external or internal, may stop bleeding if the individual will drink a cup of water (preferably hot) with a teaspoon of cayenne pepper (red pepper) stirred into it. The bleeding may generally stop by the time a person can count up to ten after drinking the cayenne tea. The cayenne equalizes the blood pressure from the top of the head to the feet. This keeps the pressure from the hemorrhage area so it will clot naturally, which it cannot do with heavy blood pressure pumping the blood rapidly at the hemorrhage area.

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## Abscess

### Definition

A collection of pus within a body cavity. According to Thomas Dusker, "The brighter the redness, the smaller will be the abscess. The softer the feeling and the darker the appearance the more extensive will be the destruction of the tissue. Thick yellow pus is termed 'healthy', thin watery and greenish pus is always bad, indicating prostration and difficulty in healing."

### Symptoms

In an abscess we distinguish between the body or center and the sides or edges. The secretions are of different kinds, and upon them depend the benign or malignant character of the abscess. The discharge may consist of good or bad, of a thin, watery or thick, slimy, clammy, white, green, yellowish green, yellow or bloody, variegated, foul, offensive matter. Benign abscesses heal when the discharge ceases, the cavity or center and side close, and are covered with new skin, but a scar is generally left. A malignant abscess, on the contrary, gives no sign of healing, but rather inclines to get worse, and, if aggravated, to mortify.

### Cause

An abscess is nature's way of purifying the body, bringing waste materials into a deposit that can be easily drawn out. Pus is formed by the loss of organic sulphur from cells, whereupon the cells decay. Herbs containing organic sulphur such as garlic, are used to rebuild and prevent this deficiency condition.

The causes lie either in local injuries or in a defective blending of blood and (other) juices (liquids). But generally both circumstances unite in the development of an abscess.

The basic cause of all abscesses, tumors, cysts, etc., stems back to an impure bloodstream, with its major cause being improper food intake. This condition causes poor action of liver and bowels, a faulty digestion, or disturbances in the lymphatic glands are generally responsible for the accumulation of impurities in the blood.

### Herbal Aids

Poultices: The use of poultices to bring an abscess to a head and clear it out is the most important method of relief. A poultice of slippery elm, wild sage, and lobelia (equal parts) is good; another poultice that will draw very rapidly and will relieve pain at the same time is mullein (three parts) and lobelia (one part). Others are flaxseed, lobelia, and golden seal; leek boiled in milk; sour dock, hyssop and green fennel; ground ivy and yarrow; carrot; potato. [SNH p.1]

Poultices: Over the abscess area put a poultice of three parts slippery elm bark and one part lobelia herb. A poultice of hops or a poultice of hot onions, hot pumpkins, or hot (not cooked) tomatoes is equally effective. After the abscess has burst, cover it with a poultice or fomentation of comfrey leaves or roots (powdered) for fast healing. [HHH p.25]

Burdock Root: One of the best blood-purifying teas is burdock root (*Arctium lappa*). Others are chaparral (creosote bush) (*Larrea tridentata*), Oregon grape root (*Berberis aquifolium*), and red clover blossoms (*Trifolium pratense*).

Poultices: A poultice of hops or a poultice of hot onions, hot pumpkin or hot (not cooked) tomatoes are equally effective. After the abscess has burst, cover it with a poultice or fomentation

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of comfrey leaves or root (powdered or if fresh finely chopped--trituated--for fast healing). Dosage: Be generous in making poultices, covering the afflicted areas very thickly. An abscess as it ripens will get larger and continue to expand until it bursts open and drains. After the pus and solid matters are nearly drained off, fluid--sometimes bloody--will run from the abscess. This is when you put on the comfrey poultice, or fomentation.

Abscessed Tooth: See your dentist. An old and effective treatment for abscess is tincture of myrrh, applied frequently on the gums. This tincture is also good for mouth irritations generally. Lobelia is also good for abscess.

Abscess, Dental: Cabbage is considered a healing herb in this case. [NL 4-12]

Blue Vervain: Made into a poultice with flaxseed meal, using a strong infusion of Blue Vervain instead of plain hot water, it helps promote the relief of rheumatism, neuralgia, sciatica, etc. (ShoA:276). This poultice helps to draw out boils, abscesses, and is especially useful to reduce swollen glands, a common ailment in these days of pollution and debilitated foods. Use this poultice for earache and ear abscess as well. Apply the tea externally to sores. [NL 5-10]

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## Acidosis

### Definition

Acidosis is the reduction of the alkali reserve, due to an excess of acid-forming foods which are incompletely oxidized or poorly eliminated. This leads to the cause of stomach disorders. As Otto Mausert, N.D., states in his book Herbs (Elaine M. Mhur, Eugene, Oregon 97402), the body needs sodium, potassium, calcium, and magnesium. Acidosis is the depletion of these alkali reserves. [HHH p.26]

### Symptoms

Loss of appetite, headaches, sleeplessness, acid urine, acid or strong perspiration, acid mouth, sour stomach, lassitude and vomiting. [HHH p.26]

### Cause

As Otto Mausert states:

"Stomach disorders--There are different diseases caused by acidosis coming under this heading, but the direct cause is the same for almost all of them. Eating fast, improper chewing, overloading, and eating the wrong kinds of food, are generally responsible for the troubles. The bad habits must be abandoned in order to affect a cure, as there is no medicine that can chew the food properly, or stop anybody from overloading, or prevent one from eating things that are hard to digest.

Food that is not properly masticated is retained longer in the stomach than it should be. As a result, it turns sour and ferments, creating an excessive amount of acid and gas. This in turn causes a great deal of irritation and inflammation on the mucous lining of the whole digestive system or tract. A catarrhal condition gradually sets in, and the lining becomes coated with a thick slimy mucus that interferes with the assimilation of the food. Decomposition and decay result. Poisonous matter therefrom is absorbed, which leads to severe disturbances of the stomach and bowels and gradually the whole system. The result of this is far reaching, as it finally leads to many other diseases to which the human race is heir. It is only too true, that most people dig their own graves with their teeth.

Let me therefore repeat, what we might call the Golden Rule of Health: eat slowly, chew food well, and don't overload. Eat only plain food, plenty of fresh vegetable matter, salads, ripe fruits. The richer foods, however, such as meat, eggs, starches, sweets, etc., should be taken more moderately and only in proportion to the amount of work one does. In that way the food can be balanced properly and digested more completely. Failure to live up to these simple natural rules will gradually lead to the operating table--but the operation will not remove the underlying cause, and consequently will not bring the desired relief."

We have another author who is a wise old doctor of the past, who gives his view as follows (Jethro Kloss in Back to Eden, Beneficial Books, Box 404, New York 10016):

"Acidosis Causes--Meats, fish, fowl, tea, coffee, tobacco, alcohol, pepper (cooked), mustard, spices, vinegar, excessive uses of salt, baking powder, soda, jellies, sweet desserts (not the natural sweets), candy, preserves, pancakes, hot breads, pastries, fried foods, irregular eating, eating late at night, excess starch, improperly cooked foods, starchy and poorly baked bread, foods too hot or too cold, and foods cooked in aluminum utensils." [HHH p.26]

### Herbal Aids

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Aids to help soothe and speed up the healing are slippery elm gruel, marshmallow root tea, okra, carrot and spinach juice. Peppermint tea is an excellent beverage for this condition. To assist it in its stimulating effect, add six to ten drops of tincture of lobelia, or antispasmodic tincture to each cup of tea. The use of potassium broth is a great aid; spinach juice, mixed with carrot juice, is also excellent. [HHH p.27]

Use the instructions for [Dr. John R. Christophers "Three Day Cleansing Program"](#) [HHH p.157] and [Dr. John R. Christophers "Mucusless Diet"](#), [HHH p.162]. If severe, follow instructions for the [Incurables](#) [HHH p.85] Avoid Constipation.

The food should be eaten as dry as possible, mixing thoroughly with saliva to a liquid form, not drinking liquids with the meals. The drier the food is eaten, the sooner the acid condition can be overcome. Chew! Chew! Chew! so that your food is liquified before swallowing. Sodium and magnesium foods such as oranges (whole, not the juice), beets, carrots, celery, cucumbers, okra, radishes, apples, cherries, strawberries, coconuts, figs, prunes, string beans, spinach, should be eaten in abundance. [HHH p.27]

Parsley: This is good for acidosis. [NL 1-3]

Juices used for acidosis: Spinach, celery & spinach, celery & beet, carrot, tomato. [NL 3-5]

Green Bell-Shaped Pepper: It is especially good for liver disorders, obesity, constipation, high blood pressure and acidosis. [NL 4-12]

**See Also:**

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture

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## Acne

### Definition

Acne is a chronic inflammatory condition affecting skin structures usually involving the face, back and chest. It usually affects those between the age of puberty and the twenties. [HHH p.29]

### Symptoms

The primary lesion or blackhead develops into a pinkish pustule or nodule. A teenager, sometime pre-teen, often breaks out with a horrible skin condition in which pustules and their scars may cover the skin, which is often coarse and oily. This causes an inferiority complex and other emotional disruption. At this time they may become irritable, snap and snarl at people. They are impossible to live around--why? They are growing into adulthood so rapidly that they are maturing faster than they are equipped. [HHH p.29]

### Cause

As the teenagers grow up, they, like everybody else today, eat devitalized, dead, "mucus-loaded" junk materials that could only be called "garbage food" or meals without energy and life building materials in them. The rapid change from childhood to adulthood requires foods rich in vitamins, minerals, etc., needed in the healthy body. Processed foods are low or lacking in natural hormone and estrogen materials needed in the growth transition to adulthood. The young person's body realizes the lack and the need, and tries to pull the required materials from the body. If they are not there, the strain of trying to produce them causes irritation, a nasty snarling disposition, and a pimply complexion.

We blame the child for not being cooperative, for craving sweets, excess meats and bakery products. The body is craving vitamins and minerals and basic needs for health, and that "craving" is termed "hidden hunger." To pacify this hungry gnawing feeling, the young person stuffs on junk food, adding insult to injury. From this diet comes acne, boils, irritability, the sick and sad youth. The girls have difficult menstrual periods with cramps, flooding, or off-timed cycles, and the boys have a tendency toward early prostrate trouble and unhealthy sex drive. [HHH p.29]

### Herbal Aids

See formula for acne using burdock root, sarsaparilla, yellow dock, sassafras, dandelion, prickly ash, stillingia and camomile [SNH p.67]

Sun: Helios-therapy on the skin is very important, as the sun is the Great Doctor of all times. But this therapy must always be done with caution because the sun (though being a healer) is like fire, which can either provide gentle warmth or it can burn a city down. The sun may help heal where medicinal aids, herbs and other procedures are slower. In many instances, it may help bring skin cancer to the surface; and various other skin problems (such as acne, eczema, etc.) are beneficially aided by bathing in the sun. The internal use of tea of other herbal aids are often an herbal wash before the sunbathing are congenial and excellent. When there is moisture in the body, the sunbathing is much more beneficial--for instance, burdock seed and burdock root have been historically used internally (which work on the lymphatic and oil glands of the body), while at the same time using sun therapy for the outside. Indiscreet exposure can cause third-degree burns, shock, and death. The light-skinned individual must be most careful, but even a person

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with dark skin can get a very heavy burn. Helios-therapy is used on bright days, but we do advise against sunbathing at midday, between the period 11-1, when sun might be quite toxic to the user. A blonde person who has never done sunbathing before should never be out over one minute on the first day, adding a minute each day. This should be measured by stop watch or clock, and accuracy is important, because the feel of the sun is so luxurious that one will desire to stay in it just a little bit longer, and that can cause serious trouble. This may not sound like very much, but within thirty days a person can be sunning up to an hour total time! Brunettes can often start with two minutes front and two minutes back without any injury at all, and add four minutes a day. A person who has been sunbathing years before and has sunbathed regularly each season may start with a little more, five minutes front and five minutes back for the brunette, and two minutes front and two minutes back for the blonde. If done gradually and judiciously, this can give power to the body. The propaganda in daily newspapers and national publications each year (although promoted often by people with doctoral degrees) stating that "the sun causes cancer" is as ridiculous as saying "the tonsil is poisoning the whole body"--actually it is the putrid condition of the body that is poisoning the tonsil, or the skin! All the sun does is to ripen and bring the cancer that is already there to the surface, wherein the waste matter can slough off, so that the body may heal. This is why we must work inside the body with herbs, as well as outside the body with the sun, which will harmoniously speed the curative process and eliminate the problem so there is no recurrence. [SNH p.502]

Natural Hormones for Puberty: During puberty, and preferably just before that time starts, it would be wise to have the pre-teen boy and girl take a cup or more of red raspberry leaf tea and/or (especially important) blessed (holy) thistle tea each day--six days each week. This tea will assist in supplying natural hormone and estrogen materials to the system. Puberty is also much easier to go through if the tonsils are still intact. [HHH p.30]

Dr. Christopher's [Chickweed Ointment](#): This is made of chickweed herb and bees wax and oils. Excellent for eczema and/or other skin infections, sores, burning, itchy skin or genitals, swollen testes, acne, hives, also for ulceration of mouth and throat. This is a wonderful healing ointment. [HHH p.196]

[Red Clover Combination](#): Dr. Christopher's Blood Purifying Formula: If we are just beginning a cleansing and healing program, we experience problems. Very common is acne, which is most often a manifestation of an unclean bloodstream. Red clover tea is an excellent blood-cleanser, with a very mild taste. Burdock root tea works fast and well to cleanse the bloodstream. Carrot juice, very pleasant to the taste, cleanses and builds good cell structure. Many families drink green drink, consisting of fresh greens, such as comfrey, parsley, mint, lambs quarters, marshmallow (that is, common mallow), your dandelion and other local greens, blended into a base of pineapple juice in a blender. At first you may wish to strain out the pulp, but it is good for you too, and soon you should become accustomed to it. Some people make a green drink by simply blending the wildings into water, straining out the pulp and sweetening a bit with pure maple syrup or honey. This green drink supplies vitamins, minerals, enzymes, and healing factors in a fresh, assimilable form. [EWH p.6]

Soap and Astringents: If you want to treat your acne externally, be aware that it's not an external problem. I would recommend very sparing use of soaps, which is contrary to most advice on acne. Soap removes the protective oil from the skin and upsets the acid-alkaline balance. Only use soap if your skin is really dirty; otherwise, wash with water. Instead of using thick makeup, which must be soaped off, let your natural healthy glow illuminate your skin. There are mineral-based blush powders which have no chemicals in them; they can be used as blush and as eyeshadow; just make sure when you purchase them that they really have no chemicals, as some cosmetic companies are mimicking the idea but including additives.

Some people recommend astringents to control large pores on oily skin. First of all, your skin won't produce excess oil if you follow the mucusless diet. Although you will be taking adequate oils in your diet, they are in a form assimilable by the body. Probably the worst "junk food" anyone can take is hydrogenated oil--margarine, hydrogenated peanut butter, shortening. These oils have undergone a chemical change which makes their structures unusable by the body. They clog up the digestive tract and bloodstream and cause many problems, including that oily skin that troubles you! Eliminate them from your diet, replacing them with natural oils (olive, safflower, almond, sesame--there are many choices). You'll see a real difference in just about a week.

As for the large pores, astringents only help for a little while, as they fill the pores with moisture,

seeming to close them. But after a short time, the pores return to their normal size. A good diet, plenty of steam-distilled water, exercise, and the consistent use of the blood cleansing herbs mentioned above, will help tighten those pores. In the meantime (and perhaps just for fun) you can make some astringent lotions to apply to your face. Rub some strawberries on your skin and splash them away with water! Squeeze the juice from a cucumber and do the same. Tomatoes, raspberries, and zucchini all gently tone the skin. You can make a "green drink" for the complexion, blending comfrey, fennel, geranium, lavender, marigold, nettles, peppermint, sage or yarrow (any one or combination of these) with pineapple juice to make a thick, thick mush. Put them on the face, containing them with a piece of gauze if necessary, and lie down for a half-hour or so. Rinse off and notice a glowing skin.

Good old-fashioned witch hazel (the distilled herb preserved with some alcohol), which you can still purchase at most pharmacies, is known for its skin-toning abilities. You can combine it with fresh or bottled (unsweetened) apple juice, adding a little rubbing alcohol to preserve. This fresh-smelling astringent is cheap enough for everyday use, but nice enough to bottle in a small container and give as a gift. [EWH p.8]

Aloe Vera: This penetrates the skin quickly and deeply. This allows water and other moisturizers to sink deeply into the skin, restoring lost fluids and replacing the fatty layer. It permits the uronic acids, which strip toxic materials of their harmful effects, to penetrate deeply and allows the cleansing astringent qualities of the gel to work better. By increasing the circulation of the blood to an area, Aloe Vera sloughs off dead cells and fosters the growth of new ones. This helps foster the regeneration of scarred or blemished skin tissue and provides a protective coating on the skin to prevent the growth of harmful bacteria. This antiseptic action also stops skin infections (acne) in oil-clogged pores. It heals blemishes with little or no scarring. This accounts for the multitude of cosmetic preparations these days contain Aloe Vera. [UW-Aloe Vera]

Liniment of Peppermint: This was used in the past to reduce varicose veins, and clear up acne, boils, abscesses and eczema. To do so, heat 1 pint of pure olive oil, and add to it 1 dram (teaspoonful) of oil of Peppermint, 1 dram, menthol crystals, and 1 dram of flowers of camphor. Mix in a warm jar or bottle, shaking until dissolved. Let stand until cool, then keep in a cool place. [UW-Peppermint]

Bowel and Blood Purifiers: Dr. Christopher emphasized that we need to know the source of our problems. Perhaps our toxic condition begins with a poorly functioning bowel which should be taken care of with [Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula. But suppose a person has a case of boils or acne. The [Red Clover combination](#) should be used about three times a day, six days a week for six weeks. Then you can switch to another blood purifier such as burdock or chaparral or Brigham tea. Then switch back to the [Red Clover combination](#). [UW-Red Clover]

Watercress: This like other plants which have a pungent taste, is celebrated as a blood purifier and has been used in the springtime to eliminate the toxins accumulated in the winter. It increases the appetite, frees up the bowels and causes a freer flow of urine. It is strongly alkaline and therefore treats acidity of the blood and relieves symptoms related to overacidity. It is said to help clear up acne as it cleanses the blood and relieves arthritis and rheumatism. [UW-Watercress]

[Red Clover Combination](#): Dr. Christopher's Blood Purifying Formula: There are various combinations recommended for blood purifiers. You can make the simple infusion, allowing to steep for thirty minutes, or you can combine with equal parts of red clover tops, Brigham tea, burdock and figwort, making 2 quarts of tea and reducing it down to one quart. Combine yellow dock burdock, sarsaparilla and echinacea for an excellent blood cleanser, particularly good in treating post-adolescent skin acne or eruptions related to the menstrual cycle. It will help clear up eruptions on oily skin of the neck and back. [UW-Yellow Dock]

Fruits and Vegetables for Acne: Carrot & spinach, celery & watercress, grapefruit juices are all useful to combat acne. [NL 3-5]

Unwholesome Foods: Acne, a prevalent problem among teen-aged boys would not be possible in our society if our foods were wholesome. A most sad and disgusting sight is the pus-filled pimples due to inner toxicity --- wastes trying desperately to escape through the face. This condition often turns a gentle face in the blossom of youth into a waste dump of pimples, pus

and subsequent pock marks which can be prevented. The tons of acne medications and prescriptions sold annually act only on the effect of the harmful food, and not the cause of the disease, malnutrition. The traditional teenage meal, a grease burger, french fries and a milk shake or cola simply does not provide enough nourishment for anyone, let alone a boy going through puberty to adulthood. Our highly processed foods are devoid of hormones found in fresh fruits, vegetables, grains, nuts and seeds. Blessed thistle tea given to the unfortunate souls three times a day along with a change in diet to the wholesome, mucusless foods will supply necessary hormones for growth and maturity. The aforementioned hormone and estrogen formula [Changease] will also be beneficial. The big task here will be to reeducate the tastebuds of these boys so they can appreciate real food. [NL 3-6]

**Cabbage:** Apply a lotion of freshly prepared cabbage juice preceded, if desired, by the application of leaves. The eating of cabbage leaves or juice is also helpful. [NL 4-12]

**Lemon Juice:** Skin problems such as acne... will often respond to a treatment of lemon juice. For blackheads rub lemon juice over them each night. [NL 5-1]

**Black Walnut:** Externally, Black Walnut is nearly a miracle worker in cases of ...acne, dandruff, boils, itch, shingles, ringworm--we could go on, but you can see that you can use Black Walnut whenever a skin disorder appears! The tincture is an excellent first-aid remedy for wounds. [NL 5-7]

#### **See Also:**

[Black Walnut Tincture](#): Dr. Christopher's Black Walnut Tincture

[Red Clover Combination](#): Dr. Christopher's Blood Purifying Formula

[Chickweed Ointment](#): Dr. Christopher's Chickweed Ointment

[Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula

[Changease](#): Dr. Christopher's Herbal Hormone Formula

[X-Ceptic](#): Dr. Christopher's Antiseptic Tincture

[Dr. John R. Christophers "Mucusless Diet"](#) [HHH p.162]

[Dr. John R. Christophers "Three Day Cleansing Program"](#) [HHH p.157]

## Addison's Disease

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### Definition

When a person's adrenal glands become so exhausted that they simply do not function anymore, the condition is called Addison's disease, which is a terminal disease. [UW-Licorice]

### Symptoms

It is characterized by blotchy pigment appearing suddenly on large parts of the body, intolerance to heat or cold, reduction in capacity for muscular work, weakness, inability to stand any stress or emotional excitement, whether positive or negative, sometimes nervous breakdown or even insanity, complete exhaustion, feeling that one is going to die, inability to digest food, and other similar symptoms. [UW-Licorice]

In 1855, Thomas Addison described a disorder of the suprarenal capsules, or the adrenal glands. He had the dubious honor of having the disease bear his name to this day in history. Herewith shall be presented a capsulation of the symptoms of chronic adrenal deficiency according to Ivor H. Mills, M.A., Ph.D., M.D., and F.R.C.P. and one of Great Britain's experts on adrenal function:

"The adrenal in this disease suffers from destruction by tuberculosis or progressive atrophy or, very rarely, destruction by secondary carcinoma [cancer] ... most common presenting symptom is tiredness. . . "worn out" but healthy people... loss of weight ... slowly and is not usually gross. . . gastrointestinal upset is not uncommon ... severity depends upon the degree of steroid deficiency... may have no such symptoms of gastrointestinal upset until he gets acute infection ... anorexia, vomiting and occasional diarrhoea... vague abdominal pain ... steatorrhoea [increase fecal fat excretion] to the extent of 30 gm. fat per day, without diarrhea...

Pigmentation is a striking feature of the patient with advanced Addison's disease ... widespread on trunk, face, arms, and extends to the creases of the hands and the mucous membranes of the mouth ... tan of a previous summer did not fade during the winter ... even in colored people... palmar pigmentation has increased... tendency for the blood pressure to be low .... vascular reflex responses to the fall in pressure are impaired. The periphery (hands, nose, ears) of such a patient may be warm when the systolic pressure has fallen below 100 mm Hg whereas a person with normal adrenals would usually show peripheral constriction with a fall in arterial pressure .... Hypoglycemia... does occasionally occur... They may suffer hypoglycemic symptoms some hours after a large carbohydrate meal but usually their anorexia prevents them from consuming sufficient carbohydrate to do this ...

In women of child-bearing age, some disturbance of the menstrual rhythm is occasionally seen .... loss of pubic and axillary hair is a very useful physical sign ... Impotence is rare but loss of interest in sexual activity is not uncommon ... Nocturia (night urination) is common in patients with chronic adrenal deficiency, because of the impairment of their handling of a water load .... mild neurotic traits to gross psychosis ... depression, schizophrenia, and hallucinations .... severe headache ... resemble/s/ patients with raised intra cranial pressure, but the blood pressure remains low and the pulse rate does not slow .... An X-Ray of the chest may reveal the small heart frequently seen in chronic adrenal deficiency .... A straight X-ray of the abdomen may reveal calcification above the kidneys if the adrenals have been destroyed by tuberculosis ... sodium and chloride are low or in the lower half of the normal range.... blood urea frequently raised... a low fasting blood sugar.... Low adrenal steroid excretion... [ACTH test is usually used to confirm adrenal deficiency: if no increase of steroid hormone is noted in the urine after two to four days of intravenous administration of ACTH, then adrenal deficiency is suspected rather than other diseases such as Steatorrhoea, Crohn's disease (regional ileitis), Cirrhosis of the liver, Slat losing

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renal disease, Leukemia, Anorexia nervosa, and chronic thyrotoxicosis.]" (Mills, 1964, pp. 88-100)

The special requirements of pregnancy, surgery, diabetes, and hypoparathyroidism complicate Addison's disease even more. In addition to Addison's disease there is hypopituitarism which is a deficiency of pituitary thyroid stimulating hormone, and can result in loss of pigmentation, and also in water intoxication because of the prevention of the steady drain of sodium into the urine. This may exhibit itself as confusion and disorientation, epileptic fits, hypothermia, and even coma. There is also depressed thyroid function: sensitivity to cold, slowness in mental and physical activities, loss of sexual libido, absence of menstruation in women and impotence in men. "In children, arrest of growth hormone occurs." (Mills, 1964, p. 133) [NL 2 -3]

### Herbal Aids

[Licorice](#): Licorice has been historically used in this condition, as it contains a cortisone-type substance which will help the body restore itself to the point where it will produce its own cortisone. Its sugar-like substance does not increase the demand for insulin in the body, thus giving strength without bringing on insulin shock. LaDean Griffin explains that she is certain that this works, because at a time when she thought she was making a great deal of personal progress, a sudden shock debilitated her so much that she developed Addison's Disease. She found that two capsules of Licorice each day would give her enough strength to begin healing, and to do the day's work. She needed to continue taking the herb, which is not addictive, she explained, no more than food is. You can stop taking the Licorice root without going into shock as you would if you suddenly stopped taking cortisone, she explained. [UW-Licorice]

### See Also

[Adrenetone](#): Dr. Christopher's Adrenals Formula

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## Adenoids - Polyps

### Definition

Adenoiditis is inflammation of the adenoids. The adenoid is a relaxed condition of the mucous membrane, resulting in nasal or laryngeal polyps. There will be problems continually throughout life for the mouth breather, unless this condition is cleared. [HHH p.31]

### Symptoms

The polyps are caused by a toxic and mucus condition in the body, so go back to the basic cause and use the mucusless diet. [HHH p.31]

### Herbal Aids

Bayberry: Snuff or blow powder up the nostrils 3-4 times daily (at first there is pain, then sneezing every 20-30 seconds and continuing for 5-10 minutes); there are copious discharges of thick, viscid and often stringy mucoid matter and the influence of the powder causes the adenoids to dry up--an adenoid being a relaxed condition of the mucous membrane. [SNH p.132]

Bayberry or Oak: To shrink the swellings in the nose and throat areas, many herbalists suggest that we make a tea of bayberry bark or oak bark and snuffle it up the nose. Some children can be taught to "drink it up the nose," using one side at a time. It will also be helpful to drink some of this tea two or three times a day. For some, the easier way is to use an atomizer spray up the nose. Still another procedure is to put a small amount (a pinch) of the oak bark or bayberry bark powder into a plastic, flexible drinking straw, and, very carefully, blow it up the nose (only a very small amount at a time or it will plug up the nose and get into the lungs). [HHH p.31]

Carrots: The regular use of fresh carrot juice is a fine aid to clean up the mucous membrane and reduce the "unnatural swellings" in the body such as adenoids. [HHH p.31]

Figs: Contain an active ingredient called benzaldehyde which has been found to be a very effective carcinostatic agent for reducing certain kinds of tumors found in the neck, throat, and general lymphatic system particularly the adenoids. [NL 5-1]

### Testimonials

Dr. Poskanzer suggested that some infective agent (germ or virus) originating outside the body played a role in the causation of multiple sclerosis. He believed that whatever it is, it may well be active in childhood many years before the development of the disease, and kept in dormancy by the lymphoid system which includes the tonsils, adenoids and appendix. [NL 1-9]

### See Also

[Dr. John R. Christophers "Mucusless Diet"](#)

[Bad Breath](#)

[Bed Wetting](#)

[Bee Sting](#)

[Bites, Insect Stings](#)

[Black Eye](#)

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## Adrenals

### Definition

The adrenal glands, seated on top of each kidney, are part of the endocrine system, that is: the internally secreting or ductless glands which release their secretions directly into the blood stream. The adrenals, often referred to as the suprarenal, are the Creator's most intricate chemical factories. "It would take acres of chemical plants" to synthetically manufacture "the 50 odd hormones or hormone-like substances" produced by the adrenal glands. (Ratcliff, 1975, p. 69) Not only do these hormones control all the oxidation processes of the human body through the anterior pituitary body, but they regulate growth, mental balance, sexual development and maintenance, and a host of other phenomena... The adrenals, the pituitary, and the thyroid are functionally united comprising the adrenal system. **THE ADRENALS ARE ABSOLUTELY ESSENTIAL TO LIFE.**

### Symptoms

1. Licorice & the adrenals: Most hypoglycemics have problems feeding themselves, for they crave protein and sugar, yet these substances are wearing on the adrenals, which are often exhausted in hypoglycemics. You need to feed the adrenals with licorice root and hawthorne berries, the latter being said to produce natural adrenalin. You need to take high-quality protein, as in the nuts and seeds and legumes. Sprouted sunflower seeds, sprouted almonds, and chia seeds are all high-quality sources of protein. The other seeds and nuts are good as well. You can soak and low-heat legumes, particularly pinto beans, which are high in potassium and easily digested, for satisfying and long-lasting protein. Be sure that you eat plenty of vegetables, both raw and cooked, in preference to too many fruits, which can overload the system with sugar.

When suffering with hypoglycemia, I devised a power-packed drink which helped every time. In a blender place a handful of soaked or sprouted almonds, a cup or two of water, a banana, some pineapple juice, a tablespoon of brewer's yeast, and a handful of chia seeds. Blend until the seeds thicken the drink. This is mild but very helpful in feeding high-vibration protein to the system.

2. Addison's Disease: When a person's adrenal glands become so exhausted that they simply do not function anymore, the condition is called Addison's disease, which is a terminal disease. It is characterized by blotchy pigment appearing suddenly on large parts of the body, intolerance to heat or cold, reduction in capacity for muscular work, weakness, inability to stand any stress or emotional excitement, whether positive or negative, sometimes nervous breakdown or even insanity, complete exhaustion, feeling that one is going to die, inability to digest food, and other similar symptoms. The synthetic cortisone is given to supply the need of the natural substance, but it produces complications, side effects and eventual disillusionment as it will not in any way heal the adrenals.

3. Sarsaparilla also contains cortin one of the hormones secreted by the adrenal glands. The body will die almost immediately if this hormone is stopped but if there is only a small or insufficient amount the body becomes easily ill and develops nervous depression and general weakness. So many maladies are related to adrenal weakness and exhaustion, including hypoglycemia, so people should take note if they are striving to rebuild their adrenals. Sarsaparilla may be able to help.

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4. Cell Deterioration: Anytime a person has cell-deterioration, be it called by whatever name medical science can come up with, melanoma, carcinoma, malignant or benign, the adrenal function must be investigated...so that if there is some dysfunction, it can be remedied through diet and herbs.

### Herbal Aids

[Dr. Christopher's Adrenals Formula: \(Adrenetone\)](#) Contains mullein, licorice, Siberian ginseng, gotu kola, hawthorne berries, cayenne, and Ginger. As this formula helps promote the correction of any imbalance in the adrenal gland it also compensates for any stress placed on the heart.

[Licorice:](#) The steroidal content has also brought the herb into some prominence for healing and restoring the adrenal glands. About every five hours, the adrenals need some sort of nourishment in order to continue supplying strength to the body. If a meal or some other nourishment is not forthcoming, Licorice can supply the adrenals. The armies of Alexander the Great, mentioned above as carrying Licorice with them on their long marches for allaying thirst, also benefited from this strengthening agent to give them stamina and endurance--a far cry from today's chocolate candy bar, Dr. Christopher noted, which is given to the poor G.I. in the military.

[Panc Tea:](#) Dr. Christopher's Herbal Aid for Pancreas and Companion Glands Formula: Dr. Christopher in speaking of why he developed the Pancreas Formula to help not only the pancreas, but other supporting glands. Hypoglycemia and hyperglycemia involve the breakdown of the adrenal glands as well as the pancreas...As time went on, we found that some of our ailing pancreas patients, though the sugar and insulin problem was adjusted, would have problems with the pituitary, pineal or adrenal glands. We had not, at this time, taken the thought into our mind that the pancreas doesn't work alone, but is assisted by other glands. When the pancreas was healed, toxic burdens centered more, now, into the other glands. This was the time we added additional herbs to take care of these other glands--and since then they all are rejuvenated and healed together. The formula we have used for years, with success in all age groups from children to old aged patients is as follows: Cedar berries sixteen parts and one part of each of the following--golden seal root, uva ursi, cayenne, licorice root and mullein.

[Adrenetone:](#) Dr. Christopher's Adrenals Formula: In our monthly seminars with doctors, we are asked repeatedly - "What can be done for malfunctioning adrenal glands?" A larger and larger number of their patients are suffering from this problem.

Because of so many requests for an aid to the adrenals, we formulated a group of herbs consisting of mullein and lobelia, Siberian Ginseng, Gotu Kola, licorice, Hawthorn berries, cayenne and ginger. ... I wish it noted that two of the important herbs recommended are mullein and lobelia. They are a natural pair to use in repair and rejuvenation of the glandular system. Also, the balance of each additional herb added.

This formula for the adrenal glands has done much good, but it is, as we have explained frequently before, working on the effect. In addition to this, we must go to the cause--watch the diet, the liquid intake, remembering to use deep breathing exercises, and above all, keep a positive and good mental outlook on life.

[CSK:](#) Dr. Christopher's Anti-Obese Herbal Food Combination: Licorice is used here because it decreases the desire to overeat while it gives energy to the body. The licorice root actually feeds the adrenal glands. Every 5 hours or so, the adrenal glands need a "meal", that is, some sort of nourishment. Many people try to fill this need by filling their intestines with empty calories. Licorice root provides this lift for the adrenals and thereby can sustain an individual's stamina without them having to eat a large meal for energy.

[Juices for the Adrenals:](#) Carrot & spinach, pineapple.

### Testimonials

1. LaDean Griffin, in a very interesting article on Licorice, explained the use of Licorice to build the adrenal glands. She noted that we call adrenal exhaustion hypoglycemia in today's modern world. Since we are so stressed at our modern pace of life, the adrenal glands become exhausted

easily and frequently. "In hypoglycemia, where sugar is taken to give a stimulating lift in the hope of overcoming (stress), the problem is compounded as sugar leaches the Vitamin B and calcium, causing more stress, losing more potassium and body tone. The insulin is raised to an unnatural high to take care of the sugar, somehow extending past its needs and afterwards dropping to a new low, causing a low blood sugar called insulin shock (overdose of insulin). Immediately we take sugar to lift us up again and a vicious cycle has begun. Having found the herbs that act like cortisone (cortin hormone), I feel it is important for me to make this known".

2. Poke: Malstrom tells of a young man from Salt Lake County who had been suffering from congestion of the lymphatic system for a period of time. It began from a cold that would not leave and developed into a period of tension in which he slept very little. This caused adrenal exhaustion and swollen lymph nodes over most of the body. He was listless, had no energy and could work only a few hours a day, but only inefficiently. Dr. Malstrom told him to take a mild fast, to use green drinks for a week or so and then only take raw root vegetables with the green drink and some seeds. After a time he could take some fruit. After three months of this strict regimen along with the use of Poke root and other herbs to clear the lymphatics, he got strong again and could live a normal life once more (Mal:196).

### See Also

[Addison's Disease](#)

[Depression](#)

[Diabetes](#)

[Glands](#)

[Hypoglycemia](#)

[Adrenetone](#): Dr. Christopher's Adrenals Formula

[CSK](#): Dr. Christopher's Anti-Obese Herbal Food Combination

[Panc Tea](#): Dr. Christopher's Herbal Aid for Pancreas and Companion Glands Formula

See entire Newsletter "Adrenals" [NL 2-3]

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## Ague

### Definition

A malarial fever which is attended by paroxysmal and recurrent chills.

### Symptoms

This is a condition of malnutrition and poor blood circulation. [SNH p.2]

### Herbal Aids

Diaphoretics: Moist heat and profuse perspiration or sweating with diaphoretics are needed, (yarrow is one of the best). Tonic or alterative herbs (Brigham tea, burdock, ginseng) must be used to build up the body, with special attention to a proper, healthful diet. [SNH p.2]

Tansy: Take small and frequent dosages of tansy in the form of warm infusions. [SNH p.23]

See formula for ague using bayberry, pinus bark, ginger, cayenne and cloves.

Mullein: Peter Kalm said that the Swedish settlers called it [mullein] wild tobacco and tied the leaves around their feet and arms when they had the ague. [UW-Mullein]

Yarrow: It is made into a decoction, fluid extract, infusion, oil, powder or tincture for use against ague. [NL 1-3]

Southern Man: Massage the oil of Southern Man, Old Man or Lad's Love onto the backbone for fits of ague. (All are the same herb, only different names. Latin for this herb is Artemisia Abrotanum.) [SNH p.304]

Betony: Gerard said that Betony "preserveth the lives and bodies of men from the danger of epidemical diseases. It helpeth those that loathe and cannot digest their food. It is used either dry or green--either the root or the herb--or the flowers, drunk in broth or meat or made into conserve, syrup, water, electuary or powder... mixed with honey is no less available for all sorts of colds or cough, wheezing, shortness of breath and consumption...the decoction made with mead and pennyroyal is good for putrid agues. [UW Wood Betony]

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## Alcoholism

### Definition

It is the extreme dependence on alcohol which can lead to mental changes, cirrhosis of the liver, nerve damage and heart problems.

### Herbal Aids

[Bugleweed Combination](#): Natural physicians have used bugleweed successfully in cases of ...the inflammation from alcoholism. [UW-bugleweed]

[Oats](#): In India, oats are described as a perfect food.... The tincture of the green oats is recommended for nervous strain. It is also taken as an antidote for drug addiction and alcoholism. [UW-Oats]

[Skullcap](#): This has been used in weaning people from barbiturate addiction as well as in lessening withdrawals from Valium and meprobamate abuse, avoiding some of the latter state convulsions and frenzies. In combination with white ginseng it is effective in treating delirium tremens of alcoholism. [UW-Skullcap]

[Chaparral](#): This contains a phenolic compound, nordihydroguariaretic acid (known as NDGA for short). It is found on the external surfaces of the leaves and stems in all the species of Larrea... NDGA is used in alcoholism treatment, liver disorders and geriatrics. [NL 3-4]

[Cabbage](#): Eat cabbage, steamed or raw and drink the juice. [NL 4-12]

[Cayenne](#): It is used as an accentuator with other herbs; it increases the value and healing properties of the herbs and carries them to the afflicted part of the body. Indeed, Cayenne affects every portion of the body through its marvelous action in the venous structure... It can help cleanse the system of alcoholism and even reduce the discomfort of a hangover, or worse, the miseries of delirium tremens. [NL 6-3]

[Cleansing the Bowel](#): Alcoholic beverages of all sorts tend to produce constipation, by causing chronic intestinal catarrh, ulcer of the stomach, and paralysis of the sympathetic nerves. We do not recommend laxatives such as purchased from the drug store or herbal laxatives in many cases from health stores that are just a laxative. These become habit forming and this is not the procedure we recommend. We use herbs to feed and rebuild the bowel, to activate the dormant peristaltic muscles and clean off the bowel walls for complete assimilation of foods going through the intestinal tract. (See also Cleansing) [HHH p.146]

[Alfalfa](#): This is used in Europe for many functional type diseases. It is traditional for wasting diseases in traditional European practice. It is recommended for alcoholics and drug addicts who are trying to kick the habit. [UW-Alfalfa]

### See Also

[Cayenne](#)

[Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula

[Cleansing the bowel](#). [HHH p.128]

[Bad Breath](#)

[Dr. John R. Christophers "Herbal Home Colonic Program"](#)

[Bed Wetting](#)

[Dr. John R. Christophers "Three Day Cleansing Program"](#)

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## Allergies

### Definition

Physical discomfort, irritation or reaction to specific substances which cause no hypersensitivity in the nonsensitive. [HHH p.31]

### Symptoms

The patient may sneeze and cough, suffer from a running nose and excess mucus, and have swollen or irritated eyes. The skin may erupt in rashes, and there may be headache or sore throat as in a common cold. [HHH p.32]

### Cause

When certain foods are eaten, toxins are stirred up in the body which has an excessive retention of waste matter.

Dr. Harold Thomas Hyman, M.D., in his book Handbook of Differential Diagnosis (Philadelphia, London, Montreal: J.B. Lippincott Co.) explains that despite limitations in current understanding of the problem, the state of allergy is described best as "a perversion or perversions of the mechanisms of host-defense." Several pages then continue to explain whether the allergies are histamine versus tuberculin type and the many tests, clinically, to determine the cause. The cause can be pollens, plants, micro-organisms and their products, animal tissues, digestants, cosmetics, drugs, serums, articles of clothing, dyes, industrial products, physical modalities (heat, cold, solar energy, etc.), and psychic tensions. The first step in cleaning up the cause of allergies is to work on rebuilding the bowel area to a "healthy action." [HHH p.32]

### Herbal Aids

General Instructions: Many herbalists have taught us to clean the blood stream with a good herbal tea such as the red clover combination tea, which consists of red clover blossoms, chaparral, licorice root, poke root, peach bark, Oregon grape root, stillingia, prickly ash bark, burdock root, and buckthorn bark.

Other Treatment

Use the three-day cleanse each thirty days, or at least each three months and follow [Dr. John R. Christophers "Mucusless Diet"](#).

Be sure to drink at least one gallon of distilled water per day for an adult of average size. We use one ounce of distilled water to each pound of weight per day--20 ounces for a 20-pound child. One who weighs 130 pounds would use 130 ounces per day, or about one gallon. [HHH p.21]

[Sha Tea](#): Dr. Christopher's Formula for Allergies, Sinus, Hay Fever: This is a formula to help promote the clearing up these malfunctions, a "natural and herbal help" working as a decongestant and natural antihistamine to dry up the sinuses and expel from the head and broncho-pulmonary tubes and passages the offending stoppage and mucus. This formula consists of the following herbs: Brigham tea, marshmallow root, juniper berries, golden seal root, chaparral, burdock root, parsley root and lobelia.

To speed up this cleansing procedure, use the following combination in addition to the above: blend fresh, chopped-up horseradish roots mixed with apple cider vinegar into a thick pulp and

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chew thoroughly before swallowing. Take 1/3 teaspoon three times in a day. Each three days increase this amount from 1/3 teaspoon up to one teaspoon, increasing the amount 1/3 teaspoon each three days. [HHH p.185]

**BPE:** Dr. Christopher's Blood Circulation Combination: This formula is given to assist blood purifying teas to work more efficiently and to also aid the clearing up of allergies, etc. This group of herbs feeds cayenne (a stimulant) and ginger (stimulant) into the circulatory system where the cayenne works from the bloodstream to the heart and arteries, out into the veins. The other herbs in the formula assist these two herbs and work together to equalize the blood pressure (whether high or low) and to bring it to a good systolic over the diastolic reading. Blood flow is life itself. The blood circulatory combination consists of ginger, cayenne, golden seal, ginseng, parsley and garlic. [HHH p.185]

**Colic in Babies:** Most babies stop being colicky after three full months. If yours continues, check more closely into food allergies. [EWH p.99]

**Food Allergies:** Food allergies are another very common cause of headache. The worst culprit is sugar; I have experienced sugar headaches, which are sort of a withdrawal; you eat the sugar, and then as the body is trying to eliminate the toxic substance, your head pounds. Cheese commonly causes headaches, probably the worst of the dairy products for this, although allergies to any of them may cause the pain. Meats and eggs are also common allergens. [EWH p.146]

**Onions:** Onions are eaten to help the symptoms of allergies. [UW-Onion]

**Milk:** Mr. White continues on with a statement or two from Dr. Marion T. Davidson, M.D., in Southern Medical Journal (Richmond, VA).

In my experience of twenty years in treating allergies, milk has always been one of the most frequent reactors on skin testing, only house dust exceeds it in frequency... [NL 1-4]

**A Word About Hay Fever, Pollen and Allergies:** Many folks suffer great discomfort during the pollination season of plants. They attribute their symptoms to the pollen, saying that they are "allergic" to it. What is happening is that the pollen is bringing out of their bodies years of accumulated toxins. These come out in the form of mucus running from the nose, eyes, and lungs. Symptomatic relief can be obtained by using the Hayfever Formula, but again, permanent change can only be had through faithful adherence to the mucusless diet. After one year on the mucusless diet, all allergies should disappear. For an immunity to the local pollen, a tablespoon of local raw honey may be taken daily. It won't do you any good to take honey from Hawaii or Minneapolis if you are sneezing from pollen in you are sneezing from pollen in Copperstown, North Dakota. [NL 3-9]

### Testimonials

Allergies and Milk: Another personal experience relating to the subject of milk: for a time I was a member of the Deseret Gymnasium in Salt Lake City, Utah, where I went regularly to swim, exercise, and generally keep fit. The office manager there who admitted the guests into the facilities was constantly wiping his nose until it was reddened by the irritation. One day I asked him how long he had been suffering from this continual nasal drip, swollen eyes, and stopped-up head. He told me that the condition had been with him for as long as he could remember, ever since childhood. He also told me that he had been using a box of tissue each day for years and that he had been forced to give up linen handkerchiefs. They simply did not remain clean long enough!

I asked the man, first of all, whether or not he was a heavy milk drinker. He said that he was, and that he usually drank a quart or even two per day. I promised him that if he would discontinue drinking milk for a few weeks that he would see an improvement. I also explained to him that within a year his allergies would be gone if he would follow a general mucusless diet routine.

I was so occupied with business matters in the weeks that followed that three months had gone by before I was able to return to the Gymnasium. When I went to check in for re-admission to the

facilities, I met my friend who was at his desk. He grinned from ear to ear, pulled out a folded linen handkerchief, and said, "I keep this in my pocket for days now and do not use it. No more tissues and no more running nose." He had become a happy man simply by following the advice to stop drinking milk. He had sworn up and down that he was hooked on that liquid and that he could not find the self-will to stop drinking it. He had succeeded, however, and found that his health had certainly improved. That incident took place nearly forty-five years ago; and since then we have advised many thousands of patients to follow the example of the animals of the lower kingdom who do not suckle their offspring after weaning. [NL 1-4]

### See Also

[BPE](#): Dr. Christopher's Blood Circulation Combination

[Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula

[Sha Tea](#): Dr. Christopher's Formula for Allergies, Sinus, Hay Fever

[Bugleweed Combination](#): Dr. Christopher's Heavy Metal Formula

[Red Clover Combination](#): Dr. Christopher's Blood Purifying Formula

[Dr. John R. Christophers "Mucusless Diet"](#)

[Dr. John R. Christophers "Three Day Cleansing Program"](#)

## Alopecia

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### Definition

A disease in which there are well defined bald spots on the head and other hairy parts of the body.

### Herbal Aids

[Bayberry](#): Use a strong decoction of bayberry and rub in well at night; wash off in the morning, brush the hair thoroughly and apply again (using a few drops of lavender oil with the solution that is rubbed in gives a more effective synergistic action). This will quickly help stop falling hair and remove dandruff. [SNH p.132]

[Juniper](#): Used externally, a tincture of the branches is used as a rub for some skin conditions and to combat alopecia. [UW-Juniper]

[Echinacea](#): Cases of goiter, impetigo contagiosa, local infection, urethral infection, diabetic ulcers, alopecia (baldness), and so on, are reported to have been effectively treated with Echinacea. [NL 6-12]

### See Also

[Dr. Christopher's Desert Herb Combination](#)

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## Amenorrhea

### Definition

Menstrual obstruction resulting in the absence, delay, retardation, or suppression of menstruation. [SNH p.275]

### Herbal Aids

[Chaparral](#): Use a cup of the tea as an infusion as a douche. [SNH p.71]

[Sassafras](#): Drink 1 teacupful of the infusion of Sassafras without further dilution; heat until blood-warm, then sip slowly 1 mouthful at a time over 1/2 hour, keep the lower area warm by wrapping in a blanket, and place feet in a mustard and water bath during the 1/2 hour period. NEVER TAKE SASSAFRAS WHEN PREGNANT. [SNH p.79]

[Red Raspberry](#): Drink the infusion of the leaves: 1 cupful at mealtime 3 times daily along with an intestinal tonic-laxative for 2-3 months or until the distressing symptoms have disappeared. [SNH p.143]

See formula for amenorrhea using pleurisy root, blue cohosh, wild yam and ginger. [SNH p.224]

See formula for amenorrhea using pennyroyal, motherwort, blue cohosh, life root and thyme. [SNH p.285]

[Squaw Weed](#): Make 1/2 ounce of powder or fluid extract to 1 pint of water, and take 1 wine glassful 4 times daily until the desired effect is obtained. [SNH p.302]

[Black Cohosh and Blue Cohosh](#): Give a warm infusion of equal parts of black cohosh and blue cohosh (*Caulophyllum thalictroides*). [SNH p.399]

[Gravel Root](#): Used as a douche alone or with other herbal astringents, it can help in chronic amenorrhea in a weakened female. [UW-Gravel Root]

[Bayberry](#): A weak tea may be used as a douche for amenorrhea. [NL 5-5]

[Nu Fem](#): Dr. Christopher's Herbal Aid for Female Reproductive Organs: This is an amazing combination of herbs to help promote the rebuilding of a malfunctioning reproductive system (uterus, ovaries, fallopian tubes, etc.). Over the years herbalists and patients have seen painful menstruations, heavy flowing, cramps, irregularity, etc., that have been helped and the patient now has a painless menstrual period, good menstrual timing, and a new outlook on life by using these aids to readjust the malfunctioning areas. The female corrective formula [Nu Fem] consists of golden seal root, blessed thistle, cayenne, cramp bark, false unicorn root, ginger, red raspberry leaves, squaw vine, and uva ursi.

Recommended dosage is one cup or 2 capsules or tablets morning and evening or three times a day if desired, six days a week for as long as required to get results desired. We have seen many severe cases who have had many years of suffering cleared up in ninety to 120 days. Some get relief sooner, some take longer--no two cases are alike. This is a food to rebuild the malfunctioning organs. [HHH p.190]

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## Anemia

### Definition

Anemia is a deficiency in the number of red blood cells, hemoglobin or both. [HHH p.33]

### Symptoms

The condition is marked by varying degrees of pallor and palpitation. [HHH p.33]

### Cause

When we have a good bloodstream we have a good, healthy life. It would be wise to take time to learn the principles of building good blood in the body. One of our teachers, Dr. Edward E. Shook at the Los Angeles Herbal Institute (closed at this writing), gives a fine explanation of the cause of anemia as follows:

Carbon dioxide and other waste gases are re-absorbed into the life-giving oxygen. Everyone knows that two atoms of oxygen unite with one atom of carbon to form dioxide. But when there is insufficient oxygen, only one atom unites with carbon, to produce carbon-monoxide, and that is where most of our trouble begins--anemia, low blood pressure, or where there is an abundance of calcium, high blood pressure; because calcium thickens the blood. It requires a great deal more pressure to pump thick blood than it does to pump thin blood; and please make special note, that all this is brought about because there is not sufficient iron in the blood, to carry enough oxygen to the cells, to enable them to breathe, and throw off their waste products. New cells are not produced fast enough to replace the decaying and dead ones. Pus is formed only when cells decay. Therefore, it requires no great stretch of the imagination to see how vitally necessary it is to have enough iron in the blood stream to convey sufficient oxygen to all parts.

Nearly every food we eat, or a large percentage of it, contains iron and oxygen. Wheat and most of the grains and cereals (in their whole state) contain iron in the form of iron phosphate, as do many vegetables, such as beets, turnips, tomatoes, spinach, lettuce, cabbage, celery, carrots, squash, parsley, mustard greens, dandelion leaves, watercress, etc., but our principal source of organic iron and oxygen is the fruit. The apple is loaded with these two elements, particularly the winesap. All berries, plums, prunes, grapes, raisins, dates, figs, cherries, etc., contain organic iron in abundance, and the citrus fruits, such as oranges, lemons, limes, etc., are principally composed of citric acid, which is one third oxygen. [HHH p.33]

### Herbal Aids

See Anemia formula #1 using sarsaparilla, yellow dock, yellow parilla and sassafras: [SNH p.95]

See Anemia formula # 2 using yellow dock, buckbean and comfrey: [SNH p.95]

**Comfrey:** Another great aid in anemia is comfrey. This herb can be used in the form of comfrey tea, tablets, capsules, in salads and in comfrey green drink. Make the green drink by blending into apple juice (or some pleasant-tasting vegetable juice, such as fresh carrot), comfrey, marshmallow root (mallow), parsley, spinach, and other greens. Sweeten with honey and use a cup morning and night (children in proportion). The use of grapes, grape juice and raisins in an abundance is excellent in rebuilding an iron-deficient bloodstream. Each mouthful of the juice should be "chewed" thoroughly (swished in the mouth) and mixed well with saliva before

[Bad Breath](#)

swallowing. [HHH p.34]

See formula for anemia using comfrey and garlic. [SNH p.310]

[Bed Wetting](#)

Barberry Berries: This is one of nature's greatest and most valuable medicinal herbs and is a famous Indian remedy. It is probably unequaled as a corrector of river secretions (causes the bile to flow more freely), and it helps expel and remove morbid, waste matter from the stomach and bowels. It is an excellent tonic for delicate and weakly people (particularly good for delicate and weak children), building from anemia and general malnutrition to complete recovery in just a few weeks. [SNH p.429] See formula for barberry tea. [HHH p.33]

[Bites, Insect Stings](#)

See formula for anemia using European centaury, thyme, horehound and hyssop. [SNH p.449]

[Black Eye](#)

General Instructions: Whenever the child or adult has anemia, which is a deficiency of blood in quantity as well as quality, the overall treatment should be sunshine, fresh air (plus deep breathing), and a well balanced diet including a quantity of fresh, green vegetables and the daily use of good tonics, as listed here. [HHH p.35]

[Bladder Ailments](#)

Pregnancy Anemia: Anemia may be caused by iron deficiency or other problems. Iron supplements are commonly given to expectant mothers, yet these are usually made of ferrous sulphate and cannot be utilized by the body. Being inorganic, they are absorbed but not assimilated and can cause problems in the system. In addition, they destroy vitamin E that may be taken at the same time. You can build up the iron in your system by taking yellow dock or the [Yellow Dock Combination](#). Some midwives say that yellow dock alone doesn't help for very long; its effect sometimes wears off. I have had excellent results combining yellow dock root and dandelion root; dandelion contains an excellent spectrum of minerals that enhance the 40% iron content of the yellow dock. Some good iron-containing foods include apricots, sunflower seeds, black molasses, raisins, prunes, brewer's yeast, kelp, egg yolk, grains, beets and their greens, turnip greens, dulse, and walnuts. If you do not respond to the dietary additions here, suspect folic acid anemia. Many pregnant women are woefully under-supplied with folic acid, and although you can get a prescription for folic acid supplements, this fragmented source may not be well absorbed by your body. Better to obtain this important nutrient in foods; some important sources are whole grains, leafy greens, watercress, parsley, chicory, dandelion, amaranth, and lambs quarters. Some of these can be taken in the green drink; lambs quarters is especially valuable, as it also contains a large amount of vitamin A, which helps prevent infections. [EWH p.40]

[Bleeding](#)

Aloe Vera: Other interesting claims for Aloe Vera include curing anemia. [UW-Aloe Vera]

[Blood Poisoning](#)

Onions: You should be careful about overeating onions, however. Research has shown that anemia can be induced by doing so. A group of volunteer medical students consumed over two pounds of cooked onions every day for five days in addition to their regular diet. At the end of this period all showed symptoms of anemia, which was confirmed by laboratory examination. Within one week after ending this binge, all experimenters successfully recovered. Similar experiments with animals have produced the same results (Luc:45). [UW-Onion]

[Blood Pressure](#)

Juices: Kulvinskis also cites several sources who have had success in reversing pernicious anemia through the use of juices high in chlorophyll. He suggests that vegetarians can more than meet their requirement of B-12 by ingesting several cups of sprouts a day. [NL 2-12]

[Boils](#)

Chaparral for Copper Deficiency: A copper deficiency manifests as general weakness, slow healing, greying hair, loss of hair, low blood pressure, disorders of the liver and gall bladder, splenic weakness, acne, eczema, anemia. Chaparral can help this. [NL 3-4]

[Breast](#)

Juices for Anemia: Carrot & spinach, celery & parsley, beet, fig. [NL 3-5]

[Bright's Disease](#)

See formula for use by pregnant women. [NL 3-8]

[Broken Bones](#)

Cabbage: This has been found to be of infinite value for pregnant women, and for patients with anemia. [NL 4-12] Drink one or two glasses of cabbage juice daily. [NL 4-12]

[Bronchitis](#)

Apricot: The Apricot, perhaps because of its high iron and other mineral content, is helpful in cases of anemia. [NL 5-1]

[Bruises](#)

Dandelion: Kloss claimed that Dandelion is extremely high in nutritive salts which purify the

[Burns & Sunburns](#)[Bursitis](#)

blood and destroy the acids in the blood. He said that "anemia is caused by the deficiency of nutritive salts in the blood and really has nothing to do with the quantity of good blood. Dandelion contains these nutritive salts" (Kloss:237) [NL 6-11]

### **Testimonials**

**Herbal Formulas Aid Health in Family:** I have gotten the Healthview Newsletter, and am amazed at the results that I've gotten from the MP formula, the red raspberry leaves capsules for my 14-year-old grand daughters, and the Yellow Dock root for my daughter's anemia. My husband has been blind for 22 years from the wrong use of medications. We both use the eyebright eyewash daily. I have found that my sinus problems have completely disappeared, my eyes are brighter and have found that night time driving is much easier because of improved vision. [NL 4-12]

### **See Also**

[Yellow Dock Combination](#): Dr. Christopher's Yellow Dock Combination

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## Anthrax

(malignant edema, woolsorters' disease)

### Definition

Anthrax is an acute infectious disease caused by the spore-forming bacterium *Bacillus anthracis*. Anthrax most commonly occurs in warm-blooded animals, but can also infect man. Anthrax spores can be produced in a dry form (*for biological warfare*) which may be stored and ground into particles. When inhaled by humans, these particles cause respiratory failure and death within a week. The disease could be fatal if left untreated.

The disease occurs when spores enter lungs, migrate to the lymph nodes, change to the bacterial form, multiply, and produce toxins. These toxins cause bleeding and destruction of structures in the middle of the chest (medical term: hemorrhagic necrotizing mediastinitis).

### Symptoms

Symptoms of disease vary depending on how the disease was contracted, but symptoms usually occur within seven days.

#### Cutaneous:

Most anthrax infections occur when the bacterium enters a cut or abrasion on the skin, such as when handling contaminated wool, hides, leather or hair products (especially goat hair) of infected animals. Skin infection begins as a raised itchy bump that resembles an insect bite but within 1-2 days develops into a vesicle and then a painless ulcer, usually 1-3 cm in diameter, with a characteristic black necrotic (dying) area in the center. Lymph glands in the adjacent area may swell. About 20% of untreated cases of cutaneous anthrax will result in death. Deaths are rare with appropriate antimicrobial therapy.

#### Inhalation:

Initial symptoms may resemble a common cold (Viral-like aches & pains). After several days, the symptoms may progress to severe breathing problems and shock. Inhalation anthrax usually results in death in 1-2 days after onset of the acute symptoms.

#### Intestinal:

The intestinal disease form of anthrax may follow the consumption of contaminated meat and is characterized by an acute inflammation of the intestinal tract. Initial signs of nausea, loss of appetite, vomiting, fever are followed by abdominal pain, vomiting of blood, and severe diarrhea. Intestinal anthrax results in death in 25% to 60% of cases.

### Treatment

Nosodes are vaccination alternatives that are prepared homeopathically. These nosodes were first designed by Edward Bach (the developer of Bach Flower Remedies.) They are side effect free and safe for children. Newton Labs manufactures Nosodes, contact them at 1-800-448-7256 or [Newton Homeopathics](#). Another source is at [Homeopathy Overnight!](#)

Doctors can prescribe effective antibiotics. Usually penicillin is preferred, but erythromycin, tetracycline, or chloramphenicol can also be used. To be effective, treatment should be initiated early.

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## Herbal Aids

[Dr. John R. Christophers "Anti-Plague Formula"](#)

[Garlic](#)

## See Also

[2-9: Garlic: Man's Best Friend in a Toxic World](#)

[Dr. John R. Christophers "Anti-Plague Formula"](#)

[Newton Homeopathics at <http://newtonlabs.net/>](#)

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## Apoplexy

### Definition

The sudden loss of consciousness, sensation, and voluntary motion, caused by the rupture or obstruction of an artery of the brain, very often resulting in death; also gross hemorrhage into any organ, such as the lungs, spleen, etc. [SNH p.2]

### Symptoms

This is a serious catarrhal condition of the body, wherein the normal excreting channels are blocked and the denser glutinous and fibrinous matters overload the bloodstream. [SNH p.2]

### Herbal Aids

[Cayenne](#): The suddenness with which apoplexy comes necessitates the fastest therapeutic action. Cayenne pepper (one teaspoon to the cup) may be administered quickly; tincture of lobelia (three drops to one-half teaspoon, according to the size and age of the individual) should be given regularly; the antispasmodic tincture is excellent. [SNH p.2]

See formula for apoplexy using black cohosh, wood betony, and cayenne. [SNH p.400]

See formula for apoplexy using cayenne and mustard powder. [SNH p.410]

Vegetarianism: A heavy meat and starch eater will suffer apoplexy and strokes from heat long before the heat even bothers the vegetarian or fruitarian. [SNH p.553]

Cayenne and Ginger: For an excellent bath to be used in cases of aches and pains, influenza, apoplexy, etc., mix ½ teaspoonful each of Cayenne and Ginger and add to a very hot bath. This will cleanse the pores and remove toxins. [NL 6-3]

### See Also

[Cayenne](#)

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture

[Stroke](#)

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## Appendicitis

### Definition

Appendicitis is inflammation of the appendix, sometimes resulting in rupture. [HHH p.36]

### Symptoms

The symptoms of appendicitis are an inflamed, painful condition of the appendix and the surrounding portion of the bowels. Other symptoms are nausea, pain and distress around the navel, constipation, quick pulse, and perhaps a rise in temperature to 100° or 102° F. There may be tenderness to the right of the navel and below, which is increased by pressure or movement. The patient frequently flexes the right knee to ease the pain. [HHH p.36]

### Cause

It may be caused by a faulty digestion, intestinal catarrh, fecal concretions and, in comparatively rare cases, by foreign particles being lodged in the appendix. This is the explanation given by Otto Mausert, N.D., Herbs.

Dr. Kloss states:

Constipation is one of the causes of appendicitis to an extent, and of course, wrong diet, which diet would include the use of devitamized foods such as white flour products, cane sugar, and cane sugar products (all refined sugars), greasy and fried foods, tea, coffee, chocolate, and wrong combinations of foods. These must be strictly avoided in appendicitis, as must alcoholic drinks, tobacco, and all stimulating food and drink. [HHH p.36]

### Herbal Aids

Cleansing the Colon: Dr. Kloss recommends: "Cleanse the colon thoroughly with an enema, preferably herb, take as much water as possible, as hot as possible. The treatment is of great value and will often relieve the pain immediately. If using an herb enema, use either spearmint, catnip, white oak bark, bayberry or wild alum root. When herbs are not available, use plain water. If the pain continues after the colon has been cleansed, then use a very warm enema of catnip alone. Then apply hot and cold fomentations to the region of the appendix and the full length of the spine. This will aid in the cleaning process and relieve pain. At night prepare a poultice as follows: Combine a tablespoon of granulated or powdered lobelia with a large handful of granulated or crushed mullein leaves, and sprinkle with ginger. Mix the herbs into a paste by adding powdered slippery elm or corn meal. Apply the poultice as warm as the patient can stand, leave on cool, then repeat. When suffering an attack of appendicitis, go on a liquid diet, drinking alkaline broths, fruit juices, and drink several glasses of slippery elm (or comfrey) every day. Traditional Chinese medicine advocates Chinese Rhubarb (a mild laxative) and lightly stroking the painful area. Alternating hot and cold castor oil fomentations helps bring tremendous relief."

After an individual is over an attack (which is the effect), go immediately onto the mucusless diet as suggested by Dr. Christopher in [Dr. John R. Christophers "Three Day Cleansing Program"](#) and [Dr. John R. Christophers "Mucusless Diet"](#). [HHH p.36]

Constipation: This condition generally could not happen if we were not constipated. Mucus forming foods can also bring it on. Take a hot herb enema of spearmint, catnip, white oak bark, bayberry bark, or wild alum root. Plain water may also be used if necessary. Catnip enemas will relieve the pain. Apply hot and cold fomentations to the appendix area and the full length of the

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spine. At night, apply a poultice of mullein and lobelia, sprinkling with ginger or cayenne. Mix the dried and ground herbs with boiling water to make a paste, thickening with slippery elm or cornmeal. Apply as warm as the patient can stand, leave until cool, then repeat. Go on a liquid diet, using fruit juices, potassium broth, and slippery elm gruel. Watch the symptoms closely. This approach should relieve them, but if not, be sure to see a physician. [EWH p.166]

Appendectomy: From question and answers in Dr. Christopher's Newsletter. Can appendicitis be aided without an operation? Is there any relief and aid for appendicitis?

Answer: Yes, there is. This is an important organ, even though many claim it is a useless leftover. For years doctors have considered the appendix to be a vestigial organ, that is, one used by man in some earlier stage of his history, but no longer of any apparent physiological use. The growing case against unnecessary surgery, particularly the offhand removal of parts of the body thought to be vestigial, was strengthened by a report from the Medical College of Ohio at Toledo. A study involving the case histories of 1,165 patients revealed that almost 67 percent of patients who had developed cancer of the bowel before they reached fifty years of age had their appendices removed.

We have taught for many years another valuable aid, and that is that the appendix exudes a small amount of oil, in its healthy operating state, that aids in lubricating the cecum and the ascending colon. This is the only section, the ascending colon, of the large bowel where the food particles must go uphill, and the small amount of lubrication is definitely an advantage when the fecal matter is heavy and lacking adequate moisture to move easily with peristaltic action.

According to E. H. Ruddock, M.D., Vitalogy, copyright 1931, published by Vitalogy Association, "Appendicitis is a disease of the vermiform appendix commencing as a catarrhal inflammation of the mucous lining.

"Causes-This is usually associated with a condition of chronic inflammation of the intestines caused by improper diet. Nearly one half of the cases occur between twenty and thirty years of age.

"Symptoms-Pain, sometimes acute in character, directly over the abdominal wall; rigidity of the abdominal wall; tenderness, midway between the naval and spine; the tenderness becomes generalized if the appendix is infected; chill, vomiting, constipation, rise of temperature and increase in pulse rate.

"Treatment-Absolute fast with the exception of water. One glass of distilled warm water every hour. Three high enemas per day. Cold water towel applications over the entire abdomen, changed every ten minutes. A glass of flaxseed tea strained and flavored with a little lemon juice to be given occasionally. Absolutely no exercise, emotional strain, worry, or other disturbing influence. Turn the patient to more comfortable side. Knead the muscles of the small of the back.

"After a fast of a few days give a diet of soup made from non-starchy vegetables. Strained.

"Wild yam is the most valuable remedy for this disease. The sharp pain in the lower right side of the abdomen caused by the inflammation and swelling of the vermiform appendix, is speedily relieved by the extract of wild yam. Pour a teaspoon of the extract into a tumbler two-thirds full of water, and take a teaspoonful of the mixture every half hour until relieved, then diminish the dose to one every hour or two until cured. Dr. Hale, of Chicago, says: This is the best remedy that we have for this disease. (The bowels should be kept open with magnesia.) The writer recommends prune juice and/or Dr. Christopher lower bowel formula [Fen LB].)"

Says L. A. Merriam, M.D.: "The fad for operation for what they call appendicitis exists especially in the minds of the profession, but real appendicitis exists not often in the abdomen of the patient. The operation itself is not the harmless procedure it is reported to be.

"Operations lessen the patient's vitality, and often pave the way for more operations, sickness and suffering; while more than 95% of cases so diagnosed can be better handled without using the knife.

"In most cases so diagnosed, the trouble is not in the appendix, but in the colon or large bowel, and needs no operation with the knife. The pathologic prominence given to the appendix is not in harmony with the facts.

"Removal of a healthy appendix (every day so common) does not cure a constipation or catarrhal condition of the colon, any more than the removal of a corn on the toe cures a toothache caused by ulceration."

"Don't let your appendix go if you can help it--it's an active little oil can, a lubricator for the

intestinal canal, and you'd be badly off indeed without it." So says Dr. Arthur Bullard. He declares that the appendix is neither a "chance" nor a "left over" organ, and that inflammation of it can and should be cured in "more than ninety percent" of cases, without recourse to the knife. [NL 1-12]

Juices: For chronic appendicitis are celery, carrot, carrot & cucumber. [NL 3-5]

Echinacea: It has been used in inflammation of the intestinal tract, especially satisfactory in the case of appendicitis, as it quickly overcomes local blood stasis, prevents or cures ulceration and retards pus formation. [NL 6-12]

#### **See Also**

[Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula

[Dr. John R. Christophers "Mucusless Diet"](#)

[Dr. John R. Christophers "Cold Sheet Treatment"](#)

## Ailments

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## Arthritis

### Definition

Inflammation of the joints. Arthritis is an ailment of the body that is an old chronic condition. There are many forms: such as gout or rheumatoid arthritis which are different from the common variety of arthritis. The joints become enlarged and painful, being very tender to any movement or pressure (the pain may be constant or intermittent). Often the hands draw back or to one side, and in chronic conditions, the muscles shrink and will eventually wither away. This affliction may have a decided effect on childbirth, both to the mother and the newborn child. [SNH p.2]

### Cause

Arthritis is caused by acids and waste matter in the body, which eventually become solidified and lock the joint. This condition is caused and aggravated by improper diet. Some of the worst intakes are eggs, bread, milk, meat, salt, sugar, etc., because they cause arthritic calcification. The use of extremely hard water (generally of twelve or more grains in hardness) will often accentuate an arthritic condition where softer water will help relieve it. Sometimes an individual with a good inherent structure can throw off the hardest water without arthritic effect. The weaker person may drink water that is not very hard and absorb from it relatively larger quantities of the inorganic minerals. [SNH p.2]

### Herbal Aids

**Bowels:** For eliminating toxic substances from the bowels, one may use a high enema of slippery elm or white oak bark tea. The system should be cleansed by a daily sweat bath with pleurisy root; massage (except the inflamed joints) with angelica, black cohosh, buckthorn bark, colombo, gentian root, skullcap, or valerian root. One may use poultices such as cayenne, lobelia, mullein, slippery elm for helping to promote the relief of pain of the swollen joints; liniments of oils, such as cayenne, coconut, lobelia, origanum are also good. [SNH p.2]

**Chaparral:** Drink the tea (infusion for 3 weeks, after which the capsules or tablets may be used. [SNH p.71]

See formula for arthritis using sarsaparilla, yellow parilla, distilled water and glycerine. [SNH p.85]

**Arthritis, Painful and Swollen Joints:** Cover a small quantity of mullein with boiling hot vinegar, cover closely and simmer for 20-30 minutes. Strain and add a little tincture of cayenne (powerful stimulant and rubefacient) and a tincture or fluid extract of lobelia (as a relaxant). Foment this on the affected area. [SNH p.317]

**Cayenne:** It is an old standby and is used in modern medicine yet today. It is used in counter-irritant ointments, for sore muscles, arthritis, etc.; in liniments, back plasters and in many other ways. You will see it listed as capsicum in the ingredients. [SNH p.408]

**Apple Cider Vinegar:** A fomentation of apple cider vinegar alone will often take the pains out of arthritis, rheumatism and similar conditions. Soak a Turkish towel or gauze or similar material in hot tea, lightly wring (just enough that the water will not run off the body), and place as hot as possible without causing blistering. Generally keep the fomentation moist and warm by placing plastics, oilcloth, etc. over fomentation. [SNH p.485]

[Bad Breath](#) Eggs: These are one of the main contributors to arthritis. [SNH p.489][Bed Wetting](#) Milk and Milk Products: These are harmful to many people, both adults and infants. Milk is a contributing factor in constipation, chronic fatigue, arthritis. [HHH p.14][Bee Sting](#) [AR-1](#): Dr. Christopher's Arthritis and Rheumatism Formula: This combination consists of hydrangea root, Brigham herb, yucca, chaparral, black walnut, lobelia, burdock root, sarsaparilla, wild lettuce, valerian, wormwood, cayenne, and black cohosh. Here is a combination of herbs that detoxify; act as a solvent for the accepted but not assimilated calcium deposits; herbs that relieve pain; herbs rich in new acceptable organic calcium that can be assimilated and useful; herbs that kill fungus and infection and that have the ability to give wonderful relief. This relief is not immediate because here is a long rebuilding job--gradual relief can come, and full healing, if the program is followed faithfully: a cup two or three times a day (two tablets or capsules in Brigham tea or steam-distilled water). Use as a hot fomentation over extremely painful or crippled areas (in addition to this formula), formula called bone, flesh and cartilage [BF&C]. Even though one uses these aids yet continues on with improper diet, one may get some help, but not so much as going all the way. Remember the teachings for years have been -- "No healing in this condition." We are giving you hope if you will follow through with these formulas and the mucusless diet. [HHH p.194][Bites, Insect Stings](#)[Black Eye](#)[Bladder Ailments](#)[Bleeding](#)[Blood Poisoning](#)[Blood Pressure](#) [Deep Heating Balm](#): This penetrating salve contains olive oil, cayenne, oil of wintergreen, pure distilled mint crystals, and other herb oils, in a beeswax base It is excellent for stiff necks, sore muscles, headaches, pain, stiff joints, arthritis, etc. [HHH p.196][Boils](#)[Breast](#) [Calc Tea](#): Dr. Christopher's Calcium Formula: These are almost always prescribed for muscle cramps and throughout pregnancy generally, yet calcium requires the proper balance of phosphorus, silica and magnesium to be absorbed. Otherwise the free-radical calcium flows through the bloodstream, sometimes depositing in the forms of cysts and calcium deposits. Often people who suffer from arthritis and related problems, arteriosclerosis and calcium deposits, are taking plenty of calcium supplements, but their bodies cannot assimilate the calcium in this form. The best calcium supplement you can take, other than calcium-rich foods, is Dr. Christopher's Calc Tea formula, which contains exactly the right proportion of silica because of the horsetail grass. Carrot juice is a good source of calcium, and green leafy vegetables contain lots of it. The darker the green, the more calcium it contains. Turnip greens and kale--though not everyone's favorite, it is true--contain several times the calcium contained in milk. [EWH p.48][Bright's Disease](#)[Broken Bones](#)[Bronchitis](#)[Bruises](#)[Burns & Sunburns](#) Alfalfa: Some people wishing to treat arthritis or rheumatism take a tea made of the Alfalfa seeds, but we consider this a waste of the germinating power of the seeds. It is better to sprout them and eat the sprouts. Alfalfa tea made from leaves purchased in the health food stores may have an insipid taste or even taste like nothing at all. If you wish to obtain the best results from Alfalfa leaf tea, you should go and gather your own from the very common plants all around. [UW-Alfalfa][Bursitis](#) Aloe Vera: Interesting claims for Aloe Vera include ...relieving the pain of arthritis. [UW-Aloe Vera] Yucca: Among the Southwestern Indians, Yucca fibers were used to ease many illnesses. A patient with a cold, rheumatism, or a wound would crush Yucca leaves into fibers. Then he would enter the sweathouse where he induced vomiting to expel the poisons by inhaling large quantities of steam and chewing the leaf fibers (Ibid.).

In recent times the Yucca saponin, which is extracted from the root, has been used to treat arthritis. At the National Arthritis Medical Clinic in Desert Hot Springs, California, many patients have found relief from arthritis symptoms by taking the tablets. The doctors made no therapeutic claims in the tests on the herb, only asking patients to test it to see if it would have any beneficial effects along with other treatments including diet and vitamin therapy.

About 20 percent of the patients, chiefly those with joint pains alone or joint pains and minimal swelling and inflammation, showed complete remission of symptoms. About 30 percent showed improvement and relief of some of their joint pain, stiffness and swelling. About 50 percent said they could not detect any change in their arthritic symptoms from taking Yucca extract but this included many who tried it for only two weeks. The patients most helped seemed to be those who had early symptoms of arthritis or rheumatism in their joints, with pain, stiffness and swelling

which had been present for less than one year. Patients with symptoms from one year or longer seemed to have less response. Patients with stiffness alone, enlarged joints and limitation of motion but without much pain and inflammation did not seem to notice any benefit from the product (Let's Live, February, 1975, p.63).

The director of the clinic, Dr. Robert Bingham, said that Yucca works by purifying the intestinal tract, improving the bacterial digestion and absorption of foods with a reduction in the production of inflammatory toxins. These inflammatory toxins from certain types of bacteria are the cause and aggravating agents in certain types of arthritis, particularly those related to and including rheumatoid arthritis. The saponins improve circulation by lubricating the joints, which gives them greater flexibility.

Although the herb has had many industrial uses,...it was first used for health in industrialized society when a few years ago, race-horse owners began using it to limber up their animals before races. Then someone thought if it works on horses, it should also work on humans. Officials of several pharmaceutical companies began using Yucca to treat friends and relatives suffering from arthritis, finding the herb amazingly effective at reducing joint inflammation. Dr. George Michel, a chemist at Truett Laboratories in Azusa, California, says, "We have put a lot of research into Yucca, and have proven that it reduces inflammation, especially that caused by rheumatoid arthritis". But he adds that lack of money is holding back further research and manufacture of Yucca tablets.

Because the extract is classified as only a food supplement by government regulations, it can only be manufactured and distributed by smaller drug companies and sold to health-food stores. If it were reclassified as a drug, doctors would be encouraged to prescribe it. However, because it is not a high-paying drug, the large firms have not been interested in investigating it. [UW-Yucca]

Eliminating Arthritis: This comes from a question and answer section in Dr. Christopher's Newsletters: Can something be done besides just working on the effect of arthritis? Can't something be done to eliminate arthritis instead of just bringing temporary relief of pain?

Answer: Yes. Many people have had permanent relief from arthritis, not just temporary. When we speak of arthritis we speak of a general term. Actually there are over forty different forms of this disease. They all stem back to a toxic condition of the body. The treatment of this condition must be from the point of reversing the cause by rebuilding the entire body to a higher non-toxic condition, as mentioned in the article on rebuilding and cleaning the bowel. It is inevitable that when an arthritic is badly constipated, the stiffness and pain are worse. The procedure is: (1) clean the bowel, and (2) detoxify the body by clearing the blood stream of poor blood, and have a good powerful flow of healthy blood coursing through the body to deliver food to the area and carry off toxic waste. This is done by using a good blood purifying tea, high in organic copper, such as Burdock Root, Ephedra (Brigham Tea), Chaparral, our arthritis formula [AR-1] and our Blood Purifying formula [Red Clover combination]. The tea should be used in proportions of one cup three times in a day, six days a week, week after week as needed to get relief, then continue on until no traces of this condition are evident. (Very important: always make herbal teas with distilled water!) It is best to change the type of tea each six weeks to another kind, then come back to a former one. The effect of this change of type of tea, we have found with patients over the years, has speeded up the process. To each cup of tea it is beneficial to add six to ten drops of tincture of Lobelia.

Cayenne should be used six days a week, each week of program. This herb is, as are the others, a food and not a drug. Work up to a teaspoon of Cayenne three times a day.

Apple cider vinegar and blackstrap molasses are also beneficial. Use a tablespoon of each in a glass of distilled water three times each day. Take a tablespoon or more of wheat germ oil three times a day.

Remember to drink no less than one gallon of pure steam-distilled water for a person 130 lbs. or over, every day (less or more, one ounce of distilled water to each pound the person weighs).

For severe and painful joints or areas, the use of [BF & C](#) is good.... The reaction on arthritis is this: the Oak Bark is an astringent and tones up the area, and it is also high in Potassium Chloride to keep the fibrin in motion and not allow further deposit accumulations. The Mullein and Lobelia work on the glands and lymph system to keep the area clear and ready to carry off unwanted debris; Wormwood relieves pain; the Scullcap keeps the spinal cord alert and working smoothly to assist in body motion; Comfrey Root is a cell proliferant, causing the good cells to grow rapidly and push off the dead cells and unwanted accumulations; Walnut Bark is high in iodide

and is one of the few plants specific in clearing fungus and is extremely high in Potassium Chloride for the blood and lymph, Potassium Sulfate for skin and mucous membrane, and Potassium Phosphate for the brain and nerve food. The Gravel Root is a solvent to leach off the inorganic calcification (from tap water and processed foods, etc.) and make place for the organic calcium derived from the Comfrey, Oak Bark, and some of the other herbs used in this combination.

We use this formula ([BF & C](#)) as a fomentation over the painful areas, and if the case is severe, follow the fomentation procedure mentioned in the [Incurables](#). Some of this tea, a cup or more daily, is taken internally with good results.

To make the fomentation stronger simmer the strained tea down to 1/2 its original amount (called 3 power) or simmer down to 1/4 its original amount (called 7 power). If you wish to drink some of the concentrated tea, dilute it with distilled water. Drink a cup or more of this tea each day.

There are many other aids to help, but space does not allow more to be given to this subject. Never use dry heat for arthritis, always use moist heat such as a hot water bottle wrapped with a damp towel, fomentations, etc. Dry heat solidifies the inorganic minerals into place, while moist heat aids in dispersing them. [NL 1-1]

Cervical Arthritis: From question and answer section of Dr. Christopher's Newsletters: What could be done in a case where cervical arthritis is present, where X-rays show a narrowing of the interspace between C-5, C-6 and C-7, and where anterior and posterior spurs, heading for spondylosis, are present? Is there any way whereby the calcium deposits can be removed, extracted or eliminated to free the body from its painful burden?

Answer: We have seen numerous cases of the condition described in this question in most areas of the spine all the way from the Atlas Axis down to the tail base. After beginning the therapy with cleaning and mucusless dieting, they followed this procedure: make a fomentation of a tea combination which we call "Bone, flesh and cartilage." [BF&C] It is also called "comfrey combination", and consists of six parts oak bark, three parts marshmallow root, three parts mullein herb, two parts wormwood, one part lobelia, one part scullcap, six parts comfrey root, three parts black walnut bark or leaves and three parts gravel root. Soak the combined teas in distilled water at a rate of one pint of distilled water to one ounce of combined herbs. Continue the soaking from four to six hours and then simmer the preparation for thirty minutes followed by a straining. After the straining, simmer the tea down to one half of its volume. If desired, a volume of natural vegetable glycerine equivalent to one fourth the volume of the tea may then be added. For example, if there is a gallon of the tea after the straining, simmer it down to two quarts and add one pint of the vegetable glycerine.

Soak some flannel, cotton or other material except for synthetics which should never be used and wrap the soaked cloth fomentations around the malfunctioning area and then cover with plastic, oil paper or oiled silk. In turn cover the area with toweling and leave on all night. Repeat this for six nights a week until relief is accomplished and the calcified deposits disappear. Also, drink 1/4 cup of the finished tea, with or without the glycerine, but diluted with 3/4 cup of distilled water. This should be done three times a day for six days of each week until relief occurs. [NL 1-3]

Juices: These help arthritis: Celery & cucumber, carrot, endive, apple. [NL 3-5]

### Testimonials

1. Young Man with Arthritis and Polio Out of Wheelchair in One Year: Using the [Incurables](#) program, we are able to relate the following story. In Mesa, Arizona, a young man in his middle twenties was brought into our lecture hall in a wheel chair. He was badly crippled with a combination of polio and arthritis. He was lifted out of his chair and placed on a pile of pillows. I would glance over at times and could see the severe pain he was suffering.

During the lecture we discussed the program we have just outlined. After the lecture he said he would like to try it. A practical nurse from another town offered to take him to her home and help him get well.

They followed the routine accurately and one year later we saw him again. Just before the lecture started, in the same hall as the year before, a young man walked down the aisle to the front of the hall and asked to speak. We granted him the permission. In his short talk he advised the people to listen to the lectures and put them to use. He told how he had listened one year before as he sat on the pillows in the hall and had the desire to start on this natural program. Prior to this night he had

been told he would never be out of the wheelchair, unless it was to be in a hospital bed, the rest of his days.

With the help of the kindly nurse, he was now able to walk so well that he was traveling on foot, house to house, selling, to try and pay off his large hospital and doctor bills. As he walked back to his seat he had tears of gratitude in his eyes.

There are many outstanding cases but these two can give you a picture of what can be done with the good, wholistic program. Use it carefully and accurately for complete, long-lasting health. [HHH p.93]

2. Yucca: The following people took the Yucca saponin mentioned in # 14 above: A forty-six-year-old woman who had had arthritic pain in her hands and knees for several years took two tablets twice a day for two weeks. The pain was relieved after one week, with no side effects. A 57 year old man had had bursitis for six months in both elbows; he was a tennis player and the pain became severe after playing tennis. He took one tablet per day for three weeks, then a half tablet per day for four months, then one tablet per day thereafter. Within three days he had a slight reduction in pain. The pain was completely eliminated after 21 days. The pain returned when the Yucca was discontinued for two days, and left within 24 hours when it was resumed. After five months use was stopped, the symptoms did not return for two weeks. There were no side effects. A female who had had arthritis for nine years, with enlarged joints in her hands, which she couldn't close, had to take aspirin every day for the pain. She was 75 years old. She began to take a half tablet twice a day for 70 days. After 30 days, the pain left, and she was able to close both hands except for one finger. The swelling reduced, and she had no side effects. A 75-year-old male had had arthritis for many years, with pain in the joints of the legs, especially the right knee. He took one tablet twice a day in coffee for one month. There was a slow reduction in pain and stiffness. Both gradually returned when the use of Yucca was stopped. However, some people who had had arthritis for many years took two to four tablets a day for months, and received no effects on the arthritis, though no side effects, either. As Moore says, "Arthritis being such an idiosyncratic disorder no single treatment will help more than a percentage of people, but if Yucca tea is effective, it can relieve pain for several days afterward" (Moore:170). In the research reported above, many more people who took Yucca were helped than those who were not (Let's Live, February 1975, page 64). [UW-Yucca]

3. From a Letter to Dr. Christopher's Newsletter: "We like the herbs very much, the oil of garlic has done wonders for arthritis in the knees." [NL 1-8]

4. From a Letter to Dr. Christopher's Newsletter: "I have a friend who had had eight major surgeries. She lived in constant pain, very seldom was she able to go places and her physician had told her their was nothing more they could do.

"She went on [Dr. John R. Christophers "Three Day Cleansing Program"](#) and [Dr. John R. Christophers "Mucusless Diet"](#). She started on herbs to cleanse the colon, [Fen LB](#) the blood [Red Clover Combination](#), [Cayenne](#), [Calc Tea](#), [AR-1](#), [Herbal Eyebright](#), etc. In a matter of about three weeks, her pain was gone. She was able to start living again. In about 3 or 4 months her arthritis left her. [NL 1-1]

5. From a Letter to Dr. Christopher's Newsletter: "I have tried your comfrey herb combination for dissolving calcified bone spurs (caused by arthritis when a teenager). My metatarsal arch in left foot was in such bad shape, it had become very painful to walk. The herb began bringing results immediately." [NL 3-7]

#### See Also

[AR-1](#): Dr. Christopher's Arthritis and Rheumatism Formula

[BF & C](#): Dr. Christopher's Bone, Flesh and Cartilage Formula

[Calc Tea](#): Dr. Christopher's Calcium Formula

[Red Clover Combination: Dr. Christopher's Blood Purifying Formula](#)

[Cayenne](#)

[Bursitis](#)

[Dr. John R. Christophers "Mucusless Diet"](#)

[Rheumatism](#)

## Ailments

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## Asthma

### Definition

Asthma is a chronic respiratory disease which affects the bronchial tubes. [HHH p. 37]

### Symptoms

In Asthma the system is filled with waste matter and mucus. Asthma is characterized by labored breathing (dyspnea), wheezing with dry and painful coughing which is often due to an extreme irritation of the mucous membranes in the nasal passages or bronchial tubes. The symptoms are accompanied by constriction of the chest (bronchiolar spasm) and expectoration of mucus (mucoïd sputum). Asthma may result in an excessive development (hypertrophy) of the glandular elements. This affliction is commonly believed to be due to hypersensitivity to inhaled or ingested substances such as odors, pollen, dust, smoke, etc. [SNH p.3]

### Cause

Asthma is caused by malnutrition. Only by diligent and consistent effort to change embedded habits will one get permanent relief. The cough is a result of nature's effort to expectorate mucus from the lungs, after which breathing becomes easier. Ofttimes the cause of asthma is basically a nervous condition because the nerves are irritated.[SNH p.3]

### Herbal Aids

Convulsions: When a person is in a convulsion there are certain herbs that will help promote very fast relief. One of these is tincture of lobelia, and a valerian decoction with a little cayenne added to relieve spasms. If such an attack comes after a meal one should use an emetic, such as a large dose of lobelia or use the Yoga finger method. (see # 2 below) [SNH p.2]

Yoga Finger Method: Drink several cups of warm water, then place the middle finger deep down the throat and press the tongue until regurgitation starts. Mustard is also good to clean the stomach and lungs. Prior to the emetic a peppermint or spearmint tea should be used to soothe the area and alleviate the discomfort of continual vomiting. Hot fomentation of castor oil, comfrey, lobelia, mullein, etc., may be placed over the stomach, liver, spleen and lung areas. Frequent hydrotherapy baths or lengthy sweat baths are beneficial, followed by a cold shower or sponging. [SNH p.3]

Vapor Bath: Another helpful method is to take a vapor bath twice a week, inhaling steam from a decoction of cudweed ragwort, wormwood, or a decoction of the following herbs, taken warm, (equal parts) will help prove very beneficial: elecampane root, horehounds, hyssop, skunk cabbage root, vervain, wild cherry bark (and to this preparation add tincture of lobelia or antispasmodic tincture. Clear the bowels with an injection of catnip or barberry bark. This affliction also calls for plenty of outdoor exercise, deep breathing, and good ventilation while sleeping. The whole body system should be built up with tonic herbs such as chickweed, comfrey, marshmallow, mullein, etc. Diet should be mostly fruits and vegetables, avoiding all processed devitalized foods.[SNH p.3]

[Resp-Free](#): Dr. Christopher's Herbal Formula for Lungs and Respiratory Tract: It is wonderful for asthma. This combination of herbs in tea and capsule form is an aid to help relieve irritation in the respiratory tract--lungs and bronchial. This is an aid in Emphysema as well as

[Bad Breath](#)[Bed Wetting](#)[Bee Sting](#)[Bites, Insect Stings](#)[Black Eye](#)[Bladder Ailments](#)[Bleeding](#)[Blood Poisoning](#)[Blood Pressure](#)[Boils](#)[Breast](#)[Bright's Disease](#)[Broken Bones](#)[Bronchitis](#)[Bruises](#)[Burns & Sunburns](#)[Bursitis](#)

other bronchial and lung congestion such as bronchitis, asthma, tuberculosis, etc. Suggested amount for an adult is a cup two or three times a day, or 2 or 3 capsules two or three times a day with a cup of comfrey tea. For additional help in the program, it is good to add three to six drops of tincture of lobelia to each cup of tea. This formula consists of comfrey root, mullein, chickweed, marshmallow root and lobelia. [HHH p.187]

[Sha Tea](#): Dr. Christopher's Formula for Allergies, Sinus, Hay Fever: It is good for asthma also. This combination is a natural herbal aid working as a decongestant and antihistamine to help dry up sinuses and expel from the head and broncho pulmonary tubes and passages the offending stoppage and mucus. Combine this with the respiratory combination to speed up the process. The wise person will turn to fresh wholesome food and beverages to keep the body in a perfect state. This will guarantee permanent relief, by going to the cause. [HHH p.38]

[Elder](#): The inner bark is used, although it should be aged before used. The fresh bark is violently irritating and poisonous to children. It is specifically used for spasmodic asthma with copious phlegm and stringy mucus. For asthma, take a tablespoonful whenever an attack threatens. Powdered Cloves can alleviate excessive vomiting when using the bark. To avoid bowel cramps, add a tablespoonful of powdered Ginger to the infusion. (ShoA:58). [UW-Elder]

[Lobelia](#): Most people agree that Lobelia is a specific treatment for asthma, as well as other bronchial or spasmodic troubles. Because the herb removes obstructions, giving it when an attack comes on will often cause vomiting; matter will accumulate in the stomach which will cause obstructions. When the person vomits, it removes the intestinal blockage and often removes the mucus accumulations in the bronchial system as well. [UW-Lobelia]

[Lobelia](#): It is one of the best plant expectorants, but as it is a stimulant to the vagus nerve it can easily produce nausea and vomiting when taken in excess. If a teaspoonful of the tincture produces nausea, cut down; it can easily be overdone, says herbalist Moore (Moore:98). The leaves and flowers have strong antispasmodic effects on the bronchials when smoked, and certain individuals with asthma can find it a reliable herb to smoke at the first signs of spasms (Ibid.). [UW-Lobelia]

[Mullein](#): This herb soothes the lungs and helps bring up the phlegm. It can be combined with sage and plantain for use in asthma. Sometimes a vapor treatment of Mullein is good for asthma, which is made by simmering a strong pot of Mullein tea and inhaling the steam with a towel over your head. This is also good for bronchial troubles of various kinds. [UW-Mullein]

[Skunk Cabbage](#): Because of its antispasmodic properties, is well known in many cough problems. Foremost in this use is its application in asthma. It can help control the coughing and sneezing in hayfever. Many claim that it is useful in cases of tuberculosis. For people who have chronic dry coughing spells, skunk cabbage can offer relief. It will also clear up a chronic cold, with a cough which will not leave because of mucus accumulations and bronchial problems of all kinds. [UW-Skunk Cabbage]

[Milk Products](#): One of the best ways to prevent and therefore treat Asthma is not to use milk products. Dr. N. W. Walker, in his book Raw Vegetable Juices (Norwalk Press Publishers), says about cow's milk, "Cow's milk is probably the most mucus-forming food used by human beings. The casein content of cow's milk is exceedingly high, being about 300% more than is contained in mother's milk. [Casein, by the way, is a milk byproduct and is considered to be one of the most tenacious adhesives used for gluing wood together.] This is one of the reasons for the mucus condition of children and adults brought up to drink quantities of such milk and for the resultant colds, running noses, tonsil, adenoid, and bronchial troubles--whereas carrot juice is one of the greatest aids in the elimination of mucus! [NL 1-11]

[General Program for Clearing Up Asthma](#): Hayfever may end in an attack of bronchial asthma, and those two are often associated, as both are based upon a nervous predisposition and an unusual susceptibility to small amounts of albumins. "Home Physician," 1923 edition, page 482

To get to the root of the matter, the system must be cleared of toxins and the nerve energy restored to normal; then the cause does not exist.

The cause starts with the customary unclean bowel, take care of this with the [Dr. John R. Christophers "Three Day Cleansing Program"](#) and using the [Fen LB](#): Dr. Christopher's Lower

Bowel (Colon) Formula, follow the [Dr. John R. Christophers "Mucusless Diet"](#) and use a gallon (for an adult) of steam distilled water daily. For those who do not understand what is meant when the words "mucusless diet" are used should read the booklet "Dr. C's Three Day Cleansing Program and Mucusless Diet" The following is an excerpt from same:

"The [Dr. John R. Christophers "Mucusless Diet"](#). We should not put mucus into the body faster than it can be taken and eliminated. With this preventative diet, not only are the sinuses, the bronchi, and the lungs cleared, but also the constipating mucus (catarrh) in the tissues of the body from the head to the bottom of the feet.

"Harmful or mucus-forming foods. Secondary, denatured, or inorganic food substances are to be eliminated from the patient's diet.

"Salt: For those who are accustomed to large amounts of salt, this may sound difficult, but if you will substitute coarsely ground pepper and savory herbs, adding powdered kelp, you will find that the craving for salt will immediately begin to disappear. The black pepper is a good nutritional herb and helps rebuild the body when used in its natural state. But, when pepper is cooked in food, the molecular structure changes, so it becomes an inorganic irritant (as high heat changes the cayenne, black pepper, and spices from organics to inorganic irritants), and this is the only time when damage results. The use of salts of a vegetable or potassium base (such as Dr. Jensen's, Dr. Bronner's, and other various ones, which in some cases contain some sea salt) is all right, providing it is not overdone.

"Eggs: No eggs should be eaten in any form.

"Sugar and all sugar products: You may use honey, sorghum molasses or blackstrap molasses, but no sugar of any type.

"Meat: Eliminate all red meats from the diet. A little white fish once a week, or a bit of young chicken that has not been fed commercial food or inoculated with formaldehyde and other anti-spoilage serums, would be all right (as these are the higher forms of edible flesh), but do not use them too often.

"Milk: Eliminate all dairy products, which include butter, cheese, cottage cheese, milk, yogurt, etc. These are all mucus-forming substances and, in most cases, are extremely high in cholesterol. As a substitute for butter or margarine (hardening vegetable oils, etc.), you can train your taste buds to enjoy a good, fresh, bland olive oil on vegetables, salads, and other tools and you will discover this is one of the choicest foods there is.

"Flour and flour products: When flour is heated and baked in high temperatures, it changes to a mucus-forming substance. This is no longer a food, which means it has no life remaining therein. All wholesome food is organic, where unwholesome food or dead food is inorganic. This is the key to our whole mucusless program."

Rebuild the nervous system with the [Relax-Eze](#): Dr. Christopher Nerve Herbal Food Combination, consisting of black cohosh, capsicum, hops flowers, lobelia, scullcap, valerian, wood betony and mistletoe. The suggested amount for an adult's use would be one to three cups of the tea, or two or three capsules or tablets three times in a day, taken with a cup of celery juice or steam distilled water. Here is a formula we have used with great success for well over thirty years. It is used to help promote the relief of nervous tension and insomnia; it is mildly stimulating and yet lessens the irritability and excitement of the nervous system and also lessens or reduces pain. This formula contains herbs that help feed and revitalize the motor nerve at the base of the skull (medulla area and upper cervicals) and also rebuilds the frayed nerve sheath, the nerve itself, and its capillaries.

To finish up the package, of getting to the cause we need to add our formula for hayfever, sinus and allergies. This is an aid for clearing up these malfunctions, a "natural and herbal help" working as a decongestant and natural antihistamine to dry up the sinus and expel from the head and broncho- pulmonary tubes and passages the offending stoppage and mucus. This formula consists of the following herbs: Brigham tea, marshmallow root, juniper berries, golden seal root, chaparral, burdock root, parsley root and lobelia.

To speed up this cleansing procedure, use the following combination in addition to the above: Blend fresh, chopped up horseradish roots, mixed with apple cider vinegar, into a thick pulp and chew thoroughly before swallowing. Take 1/3 teaspoon three times in a day. Each three days increase this amount from 1/3 teaspoon up to one teaspoon, increasing the amount 1/3 teaspoon each three days. As with all wholistic procedures follow the program faithfully six days per week--week after week until desired results are obtained. [NL 1-11]

For irritations of the respiratory tract, lungs, and bronchials, the following formula can be used: comfrey root (*Symphytum officinale*), mullein (*Verbascum thapsus*), chickweed (*Stellaria media*), marshmallow root (*Althea officinalis*), and lobelia (*Lobelia inflata*). Emphysema, bronchitis, asthma and tuberculosis sufferers have been helped by using this formula either as a tea (three cups a day), or in capsules (two or three capsules or tablets three times a day with a cup of comfrey tea). Three to six drops of tincture of lobelia may be added to the tea for additional aid. [NL 3-9]

**Dangerous Drugs Prescribed for Asthma:** You should know that the drugs doctors prescribe for the condition can be very dangerous. Theophylline is the standard ingredient for the most anti-asthmatic medicines, and it has a long list of possible side-effects, including nausea, stimulation of the central nervous system, irritability, sleeplessness and over excitement. We do not know what the long-term effects of the drug might be.

More dangerous still are the steroid drugs, such as Vanceril and Prednisone. If taken by children, these drugs can adversely affect growth and sexual maturation. It encourages yeast infections both locally and systemically. Adrenal insufficiency has been traced to this drug, so severe that death could result. Broken bones become more common among recipients of this kind of drug. And when you are ready to get yourself off the drug, you can suffer all kinds of side effects (withdrawal symptoms), such as inability to maintain body warmth, extreme tiredness, faintness, exhaustion, heart palpitations, and so on.

If you are an asthma sufferer, you should examine the natural way very carefully before exposing yourself to these powerful drugs. (Dr. Christopher has an excellent asthma formula). A natural source of ephedrine, which is used for congestion, is Brigham tea. This herb, combined with the peppermint/lobelia treatment and an altered lifestyle (including getting rid of problematic tension, which can sometimes bring on asthma attacks), might bring you relief safely. [EWH p.127]

### Testimonials

1. **Man Who Couldn't Sleep Lying Down for 20 Years Because of Asthma--Cured:** Dr. Christopher used the tincture of Lobelia to clear people of asthma, although they have had it many years. A couple of young fellows brought an old, old man into the Doctor at about two o'clock one morning in Evanston, Wyoming. The old man had had asthma for 26 years. For 20 years of the 26, he had never been able to work. He had never laid in a bed for 20 years. They had to build a special chair so he could sit up at night with his feet stretched out. He had a doctor at the home an average of once a week, either to give him some drug orally to keep him alive, to give a shot, or to administer oxygen. Since the family couldn't locate the doctor that night, they came in desperation to Dr. Christopher. Since the doctors did not want a naturopathic physician in town, most people had never heard of such a thing. The young fellows asked, "Do you treat human beings?" The Doctor said, yes, and to bring him in.

As the man sat down, the Doctor gave him a cup of elderleaf tea to drink gradually. He told him how he had asthma. He had been quite independent, but lately they had had to mortgage their home in order to go on with the doctoring. After he had had the elderberry tea for about ten minutes, the Doctor gave him a teaspoonful of the tincture of Lobelia. He waited ten minutes--being sure to be very accurate about this--and gave him a second teaspoonful of the tincture. After another ten minutes he gave him the third. In forty years of practice, the Doctor commented, he never had to use the tincture of Lobelia more than three teaspoonfuls to a patient. He explained that this was so because each time he was called it was at a crisis, at the climax of the disease, the right time for clearing the disease. They just sat around and chatted. The Doctor had buckets and pans around, and all of a sudden, the man started to heave. This was a little after two o'clock in the morning and he heaved on until five o'clock, for three full hours. At the finish it was dry heaves, but he brought up everything he had eaten for days, plus nearly a cup of phlegm and pus from his lungs and bronchi, from yellow to green. After he was done, the Doctor told his sons to take him home. "Should I bring him back tomorrow", he asked. "No", answered the Doctor, "it's a do-it-yourself-kit; it's all finished".

They took him home and started to walk him to his chair, but the man said, "No, boys, I'm sleeping in the bed tonight". "But, Dad, it'll kill you!" they pleaded. "No, I'm the boss-- take me to bed". They were afraid to stretch him out in case he should choke up and die. This was at five o'clock in the morning. He slept through until five o'clock the next morning--which is twenty-four hours--and slept on past noon--thirty hours he slept! When he woke up, for the first time in over

twenty years he took a deep breath of air. He could take it without choking or coughing, and he said, "I'm healed". The boys were quite pleased about this. Twenty years later, one of them touched Dr. Christopher on the shoulder in Salt Lake City. He said, "My name's Workman; remember me?" Dr. Christopher said, "No". "We brought our pap into you in Evanston, Wyoming at two o'clock one morning." The Doctor then remembered him. He asked, "What happened to your dad?" The young man answered, "He never had an asthma attack from that day to this, and he went to work as a gardener and never missed a day's work since that time. The family thanks you very much". [UW-Lobelia]

2. Choking Phlegm in Pregnant Women Relieved: Dr. Nowell told the story of a woman who at forty years old was pregnant with her first baby. She was suffering terribly with asthmatic spasms, unable to lie in bed, fighting for breath; both she and her husband begged their doctor to stop the cough. They were told that nothing could be done until the child was born.

Dr. Nowell gave them a bottle of tincture of Lobelia, telling her to take a teaspoonful whenever the coughing began. The next morning, the patient told the Doctor that almost immediately after taking the first dose, the patient brought up long, thick masses of phlegm from the lungs the size of a man's fist. No further dose was taken and the patient never had a trace of any chest trouble since and lived a long and fruitful life (Klo:272). [UW-Lobelia]

### See Also

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture

[Comfrey-Mullein-Garlic](#): Dr. Christopher's Asthma Formula

[Sha Tea](#): Dr. Christopher's Formula for Allergies, Sinus, Hay Fever

[Resp-Free](#): Dr. Christopher's Herbal Formula for Lungs and Respiratory Tract

[Bugleweed Combination](#): Dr. Christopher's Heavy Metal Formula

[Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula

[Relax-Eze](#): Dr. Christopher Nerve Herbal Food Combination

[Nose Ointment](#): Dr. Christopher's Nose Ointment

[Dr. John R. Christophers "Mucusless Diet"](#)

## Athlete's Foot

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### Definition

A long term fungal infection of the foot occurring especially between the toes.

### Herbal Aids

[Garlic](#): Wash the parts in hot, soapy water; rinse and dry well; massage in the garlic oil 2-3 times daily. After the affection is cleared, apply once a week to prevent reoccurrence. [SNH p.101]

[Onions](#): For athlete's foot, rub onion juice between the toes two or three times a day until the condition clears. [UW-Onion]

[BF & C](#): From questions and answers to Dr. Christopher in his Newsletter: What do you do herballly for athlete's foot?

Answer 4: This is a toxic condition in the body proper and must initially go back to cleansing the bowels and blood stream, and staying on a mucusless diet. To aid this condition, first always dry between the toes and do not wear nylon or synthetic socks or hosiery. A small piece of dry cotton, with a few drops of lemon juice or apple cider vinegar placed between the toes for ventilation. Do not wear rubber soled shoes, gym shoes, etc., for daily use. Gym shoes for gym, not for street and regular wear. Go barefooted as much as possible (not at social functions, please) and bathe the feet one or more times each day with warm distilled water and apple cider vinegar half and half. Dry the feet well before putting on hosiery and shoes. If the condition is severe, use the bone, flesh and cartilage formula [BF&C] ... Soak a pair of white cotton or wool socks in the bone, flesh and cartilage [BF&C] tea, put on foot before retiring each night (six days a week each week), put a plastic bag over the socks and leave on all night. Continue this each night until healed. [NL 1-6]

[Black Walnut Tincture](#): This is one of the best known remedies for fungus. Use externally and apply frequently. [HHH p.43]

[Tea Tree Oil](#): Externally apply tea tree oil to affected areas with a cotton ball, or find a good quality tea tree oil spray.

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## Bad Breath

### Definition

Smelly breath also referred to as halitosis.

### Cause

In speaking of constipation and the need for three bowel movements a day: The wiser way is to work on the cause by unplugging and cleaning out the sewer line so there will be no more backing up of sewage. Within the human body, we find a sewage line that is backed up (constipation) and the horrible odor of halitosis comes out the front door (the mouth) as it is opened. If someone said, "Your breath is horrible," the average person works on the effect, and in order to cover up the bad breath, pops in a mint or runs for the mouth wash. If someone said--"Whew-you need a bath, the smell from your body is awful," you work on the effect again and use underarm deodorant, perfumes, colognes, etc., and never think of cleaning up the cause, and thus having a permanently sweet smelling body and breath. [HHH p.128]

### Herbal Aids

Bad Breath, Indigestion, or Poor Digestion: Carry cloves in pocket and chew on them, but go into the cause to get rid of the bad breath. [SNH p.421]

Myrrh: Take a little myrrh internally. [SNH p.455]

See formula for bad breath using myrrh and golden seal. [SNH p.456]

Cleansing the Bowel: When a person suffers from halitosis or bad breath, this is simply nature's way of saying, "You have a toxic bowel condition [HHH p.132] See Cleansing the bowel. [HHH p.128]

Parsley: The whole herb is effective against bad breath and people who take garlic often take Parsley to avoid offending. [UW-Parsley]

Spearmint: It would serve as a gargle for bad breath and sore gums and mouth. [UW-Spearmint]

Cloves: These are sometimes chewed to temporarily treat bad breath, although their carminative and digestive properties may help to get to the cause. [NL 6-6]

### See Also

[Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula

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## Bed Wetting

### Definition

Bedwetting is the inability to withhold urine during sleep. [HHH p.40]

### Symptoms

Aside from the obvious difficulty, the child is often nervous and may suffer from digestion troubles. At times it is difficult for children (and adults) to control voiding of urine. They urinate unconsciously, wet the bed, or cannot get to the restroom quickly enough. Ads in the magazines recommend special guards (diapers) to wear during the day for these youths and adults. This is working on the effect! Let's get to the cause. This condition of incontinence or enuresis (involuntary flowing of urine) can be helped by feeding the malfunction organs (kidneys, bladder, urethral tubes, etc.) with herbal foods rich in the elements missing for a good healthy body and organs of elimination. [HHH p.40]

### Cause

The kidney is very sensitive and sometimes acts at the wrong time with fear or panic. Children quite often have problems when their nervous systems are damaged, and I have seen acute kidney problems from other causes. Tommy is a bed-wetter, and his parents bring him to me to see what is the problem. I, in checking the iris of the eye, not only find the invariable severe nerve rings, but in the kidney area we also find scar tissue where the kidney has been bruised. Why? Because he couldn't keep from wetting his bed he got paddled. And instead of on the buttocks, it was just a little higher on the kidney area. We have seen kidneys torn loose from the body and floating because of these severe beatings, which have been called "spankings." Many parents do not realize it, because such is a lack of education, but the greatest part of enuresis trouble is from the nerves. And a lot of it is psychosomatic, so we have given quite a few severe lectures to the parents before we have started working on the child. [SNH p.257]

Bedwetting or incontinence of urine is frequently due to the presence of inorganic oxalic acid crystals in the kidneys or bladder.

This disagreeable trouble is due to an involuntary relaxation and weakness of the muscle that closes the bladder. This is also known as enuresis (kidney and bladder trouble), caused by wrong diet. Weak and undernourished children with a lack of wholesome food are most likely to have this habit. Other causes are late suppers, constipation, worms, gas in bowels, and general nervousness. Do not scold or spank the child for bedwetting, as this causes the child to become more nervous because of the scoldings and punishments. Why not try to kindly remonstrate and then help them as we will explain, by "going to the cause!" This embarrassing habit is one any child dislikes, but needs help from the parents to overcome. [HHH p.40]

### Herbal Aids

Plantain: Drink one teacupful of the tea four to five times daily until relief is obtained. [SNH p.53]

See formula for bedwetting using yarrow, beth root, sumac berries, agrimony and white pond lily. [SNH p.216]

**Bed Wetting**[Bee Sting](#)[Bites, Insect Stings](#)[Black Eye](#)[Bladder Ailments](#)[Bleeding](#)[Blood Poisoning](#)[Blood Pressure](#)[Boils](#)[Breast](#)[Bright's Disease](#)[Broken Bones](#)[Bronchitis](#)[Bruises](#)[Burns & Sunburns](#)[Bursitis](#)

Uva Ursi: With a child, when you first start them off with uva ursi, don't expect the cure to be instantaneous from one night to the next morning. The problem has been a long time coming on, and this herb will assist with the regulation of the organ. Whenever a child lies sleeping while on the back, pressure irritates the kidneys, and that is when the bed-wetting generally takes place. So we always prescribe that a ball of cotton (or cloth rolled into a ball), large enough to make an uncomfortable protrusion, be taped or fastened to the bed clothes or pajamas right in the small of the back. Then, when the child is asleep and unconsciously rolls from the side onto the back, he will roll back to the side position again. This will keep the child off his back and thereby lessen the irritation and help speed the healing process. [SNH p.259]

See formula for bedwetting using uva ursi, white poplar and marshmallow root. [SNH p.260]

See formula for bedwetting (tea) using uva ursi, white poplar, sumach berries and yarrow. [SNH p.261]

See formula for bedwetting (capsules) using uva ursi, white pond lily, yarrow, sumach berries, white poplar, ginger and golden seal. [SNH p.261]

Liquids: Do not let the child eat late at night or eat any stimulating foods, such as tea, coffee, soft drinks, white flour or white sugar products. It is best to give the child no food or liquids after four or five o'clock. Use a gentle olive oil massage daily over the kidney area. Do not give bed-wetters liquids just before retiring, but have them take the last teas or beverages several hours before going to bed. They can always eat ripe fruit for quenching the thirst and this will often give more satisfaction. [HHH p.41]

**DRI:** Dr. Christopher's Formula for Bedwetting: For more severe cases of incontinence, enuresis (bedwetting, etc.), a formula we have used a long time is as follows: parsley root, juniper berries, marshmallow root, white pond lily, gravel root, uva ursi, lobelia, ginger root and black cohosh root.

This formula is a specific for helping control or overcome bedwetting and to strengthen the entire urethral canal, kidneys, bladder, etc.

Recommended dosage two No. 0 capsules three times a day with a cup of parsley tea. Upon retiring at night fasten about a six or eight inch ball of yarn or string or cloth onto night clothes in the middle of the back. This is for the purpose of preventing the individual from lying on the back, as this is generally the time the valves release to void urine. [HHH p.184]

**See Also**

[DRI:](#) Dr. Christopher's Formula for Bedwetting

[Kidney](#)

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## Bee Sting

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## Bites, Insect Stings

### Definition

A sharp prick with an acute burning sensation. It is caused by the fine hairs in the stinging nettle; by the tail of the wasp, bee, etc.; from the head of gnats; from the claws of centipedes. Usually the sting causes a local, reversible inflammation. When the sting carries pollen, it may cause violent constitutional reactions in victims who are hypersensitive to that pollen. Death has occurred. [HHH p.97]

### Symptoms

Symptoms are caused by insect stings or bites; a sharp prick with an acute burning sensation. Can be caused by the fine hairs in the stinging nettle; by the tail of the wasp, bee, etc., from the head of gnats; from the claws of centipedes. Usually the sting causes a local reversible inflammation. When the sting carries pollen, it may cause violent constitutional reactions in victims who are hypersensitive to that pollen. Death has occurred in some instances. [NL 3-1]

### Herbal Aids

[Pennyroyal](#): The oil of pennyroyal is a first-rate protection against insect bites (mosquitoes, gnats, and other similar winged pests). It should not be used during pregnancy. [SNH p.283]

[European Pennyroyal](#): This is useful against venomous bites, stings, etc.: Drink internally (especially an alcoholic) daily tincture, and foment on the wound; a poultice of the freshly bruised herb is also highly commended. [SNH p.284]

[Plantain](#): Bruise with a mortar and pestle or juice in a juicer fresh plantain (*Plantago major* or *lanceolata*) and place over the sting or bite. Relief will generally come within a very short time, the pain and itch will stop and the swelling will leave. Rub the bruised leaves or juice over the exposed parts of the body, and it will discourage the insects from annoying you. The juice or crushed leaves of elderberry, walnut, lilac, and hounds tongue will assist in keeping bites and stings to a minimum. [HHH p.97]

[Nervine Tea](#): Drink a nervine tea such as skullcap, black cohosh, wood betony or valerian and/or pennyroyal and parsley, taken with a few drops of tincture of lobelia, as often as needed. [HHH p.97]

[Plantain](#): When using the fresh herb, as an example plantain (*Plantago major*) that grows almost everywhere, take the freshly gathered herb--leaves, root, blossoms, etc., and use a mortar and pestle to bruise and make the herb into a pasty form. If not equipped with mortar and pestle, use a spoon in a bowl, a rolling pin on a board, a hammer on a solid surface. If you have a centrifugal juicer like an Acme, a Champion or a Norwalk with tritcherator and press, use these. Within a few minutes of using the plantain, the pain leaves and the swelling starts to recede. [HHH p.97]

[Crushed Onions](#): Ant bites stop stinging with a poultice of crushed onions. [UW-Onions]

[Pine Gum](#): Indians used the heated resin to bring boils to a head and to treat sores, insect bites, swellings and cuts. [UW-Pine]

[Senna](#): Bark and leaves mixed and rubbed with oil are applied to pustules, ringworm, chilblains, insect bites, facial paralysis and rheumatism. [UW-Senna]

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Insect Repellent: Juliette de Bairacli Levy recommends an insect repellent oil consisting of equal parts Wormwood, Rosemary, and Rue. These are infused in olive oil three times and prevent bites even when mosquitos are terrible. She recalls sleeping out of doors without mosquito nets among the tropical groves of Mexico, using only this oil to protect herself and her children, and they rarely got bitten! [UW-Wormwood]

Oil of Anise (*Pimpinella Anisum*) and Oil of Sassafras: Mixed together are effective, as is [Black Walnut Tincture](#) and oil of elderberry. Plantain bruised, or juiced in a juicer, and placed over the sting or bite will generally bring relief within a short time. The pain and itch will cease and the swelling will leave. Rub the bruised leaves or juice over the exposed parts of the body, and it will discourage the insects from annoying you. The juice or crushed leaves of elderberry, walnut lilac (leaf) and hounds tongue will assist in keeping bites and stings to a minimum. [NL 3-1]

Insect Repellents: As we go on our outings and picnics this summer, we dread the thought of insects: their stings, bites, annoyances, and the like. We invest in gallons of insect repellants which are expensive and possibly toxic. It is our purpose here to suggest some natural remedies to the problem of being bugged. Some of the simplest insect repellants can be made from our local herbs. Chamomile and yarrow are two of the best insect repellants in the field. Make a tea of either of these and wash the skin with them and insects will avoid you like the plague. This includes flies, mosquitoes, and their ilk. Because the cosmetic industry uses chaparral as an antiseptic lotion for insect bites, the tea of chaparral may also be tried as a repellent. A member of the family that includes potatoes, cayenne, and eggplant, also includes tobacco, which was used as a successful insect repellent for centuries. In fact, the Indians gave White man tobacco in order to drive them away from the continent. That is why we are taken aback at the reference to Indians smoking a "peace pipe" containing tobacco. [NL 3-6]

Chiggers: These are the scourge of the midwest. To repel them, use the aforementioned herbs. To allay the itch produced by their bites, either chickweed or plantain ointment can be applied. Plantain is an excellent remedy to apply to the site of the bite. It is a blood purifier that will even rally to the occasion of a scorpion bite. It will reduce the red streaks of blood poisoning like no man-made remedy can. [NL 3-6]

Insect Repellent: See "high octane" formula for insect repellent containing rue, rosemary, basil and wormwood. [NL 3-6]

Feverfew: A tincture of the herb, applied locally, is used to relieve pain and swelling caused by bites of insects and vermin. An effective insect repellent is claimed by adding two teaspoonfuls of tincture to one half pint of cold water and then sponging any exposed parts of the body with it. [NL 4-10]

Cabbage Leaves: for insect bites rub a crushed cabbage leaf over the bite. [NL 4-12]

### Testimonials

1. Plantain Leaves and a Sting on the Neck: A 2-year-old was stung on the neck, and the part swelled to enormous size. Again, the remedy was simple, yet wonderfully effective: four plantain leaves were bruised and bound around the neck, and within one hour there was no sign that anything had been wrong with the child. [SNH p.54]

2. Plantain to the Rescue Again: We have gone on a house call where the hand and arm were swollen up and up the enlarged arm was a red streak with a lump under the arm pit. The individual had blacked out with pain from the wasp sting and swelling. It was early spring and the plantain was not up, so I could not use it fresh. I put plantain ointment, about the size of a dollar, over the sting and within a half an hour the pain was gone. This was in the morning, and they reported back later that the swelling and red streak were gone by afternoon and this boy was out playing ball later that day. [HHH p.97]

### See Also

[Itch](#)



# Black Eye

## Definition

A bruise on the eyelid.

## Herbal Aids

Hyssop: for cuts, inflammations, black eye, wounds: Bruise the green herb or leaves and apply to the affected area as a poultice. [SNH p.232]

European Pennyroyal or Pudding Grass: for bruises, foul ulcers, black eye, facial burns, skin problems, leprosy, etc. Make an apple cider vinegar tincture with the freshly bruised herbs apply as a fomentation outwardly and drink internally. [SNH p.284]

Parsley: It was helpful to clear up a black eye when applied, mixed with egg white. [UW-Parsley]

## See Also

[Herbal Eyebright](#): Dr. Christopher's Herbal Eye-Health Formula  
[Eye Ailments](#)

# Ailments

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## Bladder Ailments

### Definition

Bladder trouble, retention of urine (due to bladder weakness), cystitis (inflammation of the bladder), ulcerations (stomach, intestines, bladder, genito-urinary organs, mucous membranes), bladder stones, catarrh of bladder and burning urine.

### Herbal Aids

Bladder Trouble: Drink one teacupful of plantain tea four to five times daily until relief is obtained. [SNH p.53]

Retention of Urine (due to bladder weakness): Apply a garlic poultice on the abdominal and pubic regions. [SNH p.101]

Cystitis (inflammation of the bladder): See formula using wormwood, squaw weed and camomile. [SNH p.108]

Ulcerations (stomach, intestines, bladder, genito-urinary organs, mucous membranes): See formula using cranesbill root, golden seal, echinacea and glycerine. [SNH 155]

Fevers, Irritated Conditions of the Bladder: Infuse sumac(h) berries for 1/2 hour; strain and sweeten to taste; mix with fresh pineapple juice. [SNH p.158]

Inflammation of Bladder: Yarrow makes an excellent douche for this problem (use cool). [SNH p.215]

Bladder: Make at least 2 quarts of the parsley root strong decoction and drink copiously. [SNH p.246]

Bladder Stones: See formula using parsley leaves, cleavers, juniper berries, flaxseed and ginger. [SNH p.247]

Kidney and Bladder: See formula using uva ursi, mountain mahogany, couchgrass, buchu leaves, juniper berries, Prince's pine, shavegrass and celery seeds. [SNH p.260]

Catarrh of Bladder: See formula using uva ursi, white poplar and marshmallow root. [SNH p.260]

Wild Carrot: Highly valuable for gravel, stricture, or any obstruction in the urinary passages or bladder. It will often help aid the body when all other means have failed. [SNH p.263]

Cystitis (inflammation of the bladder): See formula using wild carrot, uva ursi, juniper berries, tansy, licorice root, buchu and cayenne. [SNH p.264]

Buchu: This is effective in helping with chronic irritability of the bladder, when there is a frequent desire to urinate. [SNH p.270]. See formula for gravel, kidney and bladder problems using buchu, uva ursi, parsley root, gravel root and ginger. [SNH p.272]

See formula for catarrh of bladder using slippery elm, horehound, garden thyme, red clover, yerba santa, lobelia, resin weed, cayenne, blackstrap molasses and glycerine. [SNH p.339]

Burning Urine: From questions and answers to Dr. Christopher in his Newsletter: Question: Is there a help for burning urine? Answer: "This is often caused by cystitis, which is an infection of the bladder characterized by inflammation, a burning sensation during and after urination, and

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a need to void frequently. The bladder may have a feeling of being full even when it has just been emptied. When the infection is severe enough to affect the kidneys (which is rare), fever is usually present."

"The urethra is the route by which the infection travels to the bladder. Since the female urethra is only about one and a half inches long and the male urethra is approximately eight and a half inches long, it is much easier for germs to reach the female bladder. So cystitis is more common among females." (The Encyclopedia of Common Diseases, by the staff of Prevention Magazine).

Here is an excellent formula for infection and malfunction in the kidney and bladder area: [White Mallow] It consists of juniper berries, parsley, uva ursi, marshmallow root, lobelia, ginger and golden seal. Suggested use is a cup morning and evening, or two tablets or capsules morning and evening taken with a cup of parsley tea.

The marshmallow root is an emollient and demulcent herb that eases the urine flow and is extremely soothing and healing; golden seal is anti-infectious; juniper berries will aid the condition when a difficulty is found in voiding the urine; uva ursi is a solvent for any inorganic calcified accumulation, such as kidney or bladder stones; parsley is one of the greatest herbs known for rebuilding the urethral area; ginger here is used as a stimulant to accentuate the herbal combination's power; lobelia is the herb acting as an antispasmodic and also as a catalyst. This formula has aided many with burning urine and also those suffering from incontinence (lack of urine control). [NL 1-8]

Bladder Condition: 1/3 oz. powdered oak bark and one teaspoon crushed juniper berries. Simmer for 5 minutes in 1/2 pint of water. Use honey to sweeten. Take 3 tablespoons a.m. and p.m. [NL 2-10]

Juices for Kidney and Bladder Troubles: Cucumber & parsley, dandelion, spinach. [NL 1-8]

Cabbage Leaves: Applied to an infected wound, ulcer, or oozing eczema should be layered like roof shingles, allowing secretions to drain between the layers. When treating lumbago, joint pain, or various afflictions of the nerve or bladder, poultices of cabbage leaves bring rapid relief. A poultice is prepared as follows: Boil for 20 minutes 2 to 4 cabbage leaves and two whole chopped onions with 3 or 4 handfuls of bran and a little water. After evaporation of the water, place the poultice on gauze and apply hot for one or two hours, or even for the whole night. (Never apply heat to a painful abdomen. Only the physician can properly diagnose the cause of abdominal pain, and the application of heat to appendicitis or infection of the ovary may be harmful.). [NL 4-12]

Vegetables to Eat for Bladder Ailments: Cabbage, cauliflower, kale, kohlrabi, mustard greens, spinach, summer squash, turnip greens. [NL 4-12]

In Making Our Food Our Medicine: Remember the usual remedy for kidney, bladder, and edema is to make at least two quarts of a strong parsley tea and drink copiously. If the urine is suppressed drink one half to one teacupful, hot, every hour. [NL 4-12]

### Testimonials

1. **Alfalfa:** Frank Bower conducted many interesting experiments with Alfalfa. Three hundred soldiers at Sawtelle, California, used the Alfalfa tea with remarkable improvement in bladder, prostate and other problems. [UW-Alfalfa]

2. **Juni-Pars:** Dr. Christopher's Kidney Formula: Almost a month ago I was having a problem with my bladder (burning on urination, etc.) In order to avoid spending money on a physician which I didn't have, I went to the health food store and asked what would be good for my ailment. It was suggested that I try KB Combination and garlic capsules. They were out of KB so I bought some garlic capsules. I also took Vitamin C and drank large quantities of water. Unfortunately it must have been too late for these remedies. I was forced to go to a night clinic and they prescribed an antibiotic. I must admit that I didn't take them faithfully, but finally felt that they had cured me. A few weeks later it flared up again. I had had quite a few drinks on a Sunday and the next day at work I began to have severe pains in the region of my bladder. I left work momentarily and walked across the street to the Blue Chip Nutrition Health Food Store. I inquired about the KB Combination and they had it in stock. I started taking two capsules three times a day. My pain was so bad I had to leave work early and go home. I took aspirin, a pain pill, a lot of water and

laid down with a heating pad on my abdomen. I thought I was going to have to go to the hospital the pain was so bad. Anyway, I toughed it out till morning, and much to my amazement, I was miraculously cured. I couldn't believe it. Anyway, I have been taking your formula ever since then and will continue to do so as a preventive measure. I know my problem is not drinking enough water and I also indulge occasionally in too much alcohol.

I just wanted to write to you and let you know what a great product you have (as if you didn't know). Too many people write about bad products but I think more should commend the good.  
[NL 2-3]

**See Also**

[Juni-Pars](#): Dr. Christopher's Kidney Formula

[Kidney](#)

## Ailments

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## Bleeding

### Definition

The escaping of blood internally or externally. Blood coughed from the lungs is generally of a bright red color and is usually mixed with sputum. The problem is often preceded by nausea and stomach disorder with blood passing through the bowels. [SNH p.5]

### Cause

Bleeding, unless it is by injury, is caused by a calcium deficiency in the body. Bleeding from the nose (epistaxis) is generally caused by the rupture of a small vessel in the nose due to pressure in the head (with a rupture occurring at the weakest point). Diet is very important in this case. [SNH p.5]

### Herbal Aids

[Cayenne](#): This will take care of most bleeding problems, external or internal by the time you can count to ten. For bleeding of the lower bowel (commonly called dysentery) use mullein (preferably in milk). In the urinary tract, marshmallow (preferably in milk) is generally faster. Other excellent herbs; comfrey root, European golden rod, self-heal, shavegrass, shepherd's purse, and wild alum root may be used. In bleeding of the nose, raise the arms above the head and administer cayenne dissolved in hot water, or the extract of witch hazel may be sniffed in the nostrils. A decoction of equal parts of bistort root, cranesbill root, avens or raspberry taken internally works well. [SNH p.5]

Hemorrhage: This throws many people into shock and can bring on death very rapidly. If the wound is small, the blood usually coagulates and the area seals itself, but if the rupture is large, some herbal aid is needed. The first thing one should think about is cayenne as quickly as possible. Using one teaspoon to the cup, as hot as can be taken without scalding. This will stop any hemorrhage, internal or external, by the time a person can count to ten. If the rupture is external and cayenne is not available, comfrey placed over the wound will stop bleeding quickly. [SNH p.30]

Bleeding of Minor Wounds; Cuts, Scratches, Bruises, etc: Apply a poultice of the fresh, bruised or mashed plantain leaves; drink the tea internally. [SNH p.53]

Ulcers, Spongy and Bleeding Gums: Use the decoction of bayberry as a wash. [SNH p.133]

Bleeding (lungs, stomach or bowels): See formula using white oak, tormentil, shavegrass and shepherd's purse. [SNH p.140]

Sore Mouth, Bleeding Gums: Use cranesbill (also known as crowfoot or wild geranium) as a decoction or strong infusion as a mouth rinse. [SNH p.153]

Bleeding (wounds, cuts, tooth extraction): Sprinkle cranesbill powder onto the affected area; rub powder into the tooth cavity. Also as a local styptic, apply the special strong decoction to the affected area on the lint or cotton without dilution. [SNH p.153]

Special Strong Decoction (Hemorrhage of the lungs, internal wounds, excessive menorrhagia): See formula using cranesbill, comfrey and glycerine. [SNH p.153]

Bleeding and Internal Hemorrhoids, Bowel Problems: Inject 3-4 ounces of the undiluted

tormentil decoction and retain as long as possible. [SNH p.168]

Cuts, Wounds: Both the fluid extract and the powder of tormentil applied to bleeding surfaces will serve as powerful styptics. [SNH p.168]

Stomach Bleeding: Witch hazel - Drink the infusion of the dried leaves or chew them when green. [SNH p.171]

Bleeding of the Bowels: Boil 1 ounce of mullein in 1 pint of milk for a few minutes, strain and give in 1/2 cupful doses after each bowel evacuation (and if you don't have a scale or the time to calculate the equivalent measure, just grab some and go to work). [SNH p.317]

Cayenne: In wounds, though the wound is cut and exposed to the bone, that wound may be filled with cayenne pepper (and if cayenne is not available, black pepper) and it will heal beautifully and stop the bleeding. Many people, when they see the skin ruddier by cayenne, believe that the skin is irritated; but cayenne is a counter-irritant; there is no itching involved with it. What cayenne is actually doing is bringing the blood to the surface to take away any toxic poisons, or to start the healing; so the redness comes to the skin from the blood that has rushed to the surface to assist in carrying off wastes. [SNH p.410]

Gums (tender, bleeding, spongy): Apply diluted tincture of myrrh or use as tooth powder. [SNH p.455]

False Unicorn & Lobelia: Dr. Christopher's Anti-Miscarriage Formula: False Unicorn, 3 parts, and Lobelia, one part, constitute this combination. Unless otherwise specified, teas are always made with one teaspoon of herbs to a cup of distilled water (if obtainable). If hemorrhaging starts during pregnancy, stay in bed, use a bed pan when needed, and use 1/2 cup of this tea each 1/2 hour until bleeding stops, then each waking hour for one day, while in bed as much as possible and then three times in a day for three weeks. If bleeding continues instead of decreasing, see a doctor. [SNH p.532]

Nosebleeds: Unless it is from injury, nosebleed results from a calcium deficiency. It is caused by the rupture of a small vessel in the nose due to pressure in the head. There are many causes for nosebleeds, but the weakness stems from calcium deficiency. Of course, it does not matter how much calcium is in the body if one is hit in the nose with a good blow; bleeding will start. A teaspoon of cayenne in a cup of water (hot preferred) taken internally will stop most nosebleeds quickly. In an emergency such as this we use cayenne. As mentioned a teaspoon of cayenne pepper in a glass of water and drunk right down will stop a nosebleed in nearly every instance, by the time you can count to ten. This is not a miracle; it is the principle of the cell stimulant cayenne traveling through the entire blood stream and regulating the pressure so the pressure of the flow is the same in the feet as in the head or any other part of the body. This takes the heavy pressure off the hemorrhaging area and allowing a quick coagulation. One of our very finest herbal foods is our calcium formula [[Calc Tea](#)] of four parts comfrey root, six parts horsetail grass, three parts oat straw and one part lobelia. Make this into a tea, using a cup (one teaspoon of combined herbs to cup of distilled water) morning and one evening or two or three capsules or tablets two or three times in a day. [HHH p.110]

Aloe Vera: Other external uses for the herb include treatment for all kinds of wounds--scrapes, cuts, etc. The gel seems to mildly kill the germs on the surface and promote healing. The herb is high in calcium, which reduces bleeding with its coagulating action, at the same time helping to stimulate circulation of blood in the surrounding areas to bring oxygen to the surface. [UW-Aloe Vera]

Stopping Bleeding: Questions to Dr. Christopher in his Newsletter: What is the fastest method to stop bleeding from wounds? Answer: There are a number of herbal aids to stop the flow of blood from wounds. One of the most efficient procedures is to fill the wound and poultice over with comfrey root or leaf. This may be powdered, cut (in the dried) or whole chopped or bruised in the fresh. Put the comfrey directly onto the wound, then put gauze over the area, and bandage it on. This will stop the bleeding quickly and as the healing proceeds there will often be no scar showing at all. Stories of many hundreds of healings have been related to us, using this amazing comfrey plant. Another life saver is cayenne pepper. This will stop bleeding by applying it directly to the wound, and again--most often--no scar! Another way cayenne will stop bleeding (exception: bleeding from uterus) or a hemorrhage, is to take a teaspoonful of cayenne, put it into

a glass of preferably hot water (or any other temperature will do if hot is not available) and drink it right down. As I have taught for over thirty years, if you will drink a cup of cayenne tea it will stop any unnatural hemorrhage due to injury, etc., by the time you can count to ten. One patient contradicted me on this, laughing as he said it, "You said a cup of cayenne tea will stop a hemorrhage by the time you count to ten--you were wrong. I tried this when I had a "nose bleed" and I started to count, but I only got up to six instead of ten." [NL 1-9]

Ulcers: We need to go to the cause of ulcers and eliminate those but we can begin by relieving the pain and healing the tissues. Cayenne pepper should be taken by the teaspoon (start with 1/4 tsp. three times a day and work up to 1 teaspoonful three times a day). The cayenne pepper will even cauterize a bleeding ulcer. [NL 3-10]

Stinging Nettle: In Russia, it is used as a valued antiseptic and astringent. The pulverized dry herb is sniffed to stop nose bleeding. [NL 4-10]

### Testimonials

1. Cayenne: A person in our audience told how he had cut deeply with a sharp instrument the inside of his hand, fingers and palm. The blood spurted out in streams. He poured a large amount of cayenne pepper into the wound, and within seconds the blood flow slowed down to congealed dripping and the bleeding stopped entirely before many seconds had passed. With a goodly amount of cayenne covering the wound, he then wrapped it. He was so excited about the rapid results he could hardly wait for the regular herb meeting. But, as he said, the "punch line" was lost, because instead of a nasty ragged scar to show how severely he had been hurt, the area was healed and there was no scar. [NL 1-12]

2. Molars: One of our students used a combination of comfrey root powder, oak bark powder, and cayenne to stop hemorrhaging from the mouth in a child who had seven healthy molars pulled out in one day. Her mother was told by the dentist that this was normal procedure before braces. When they arrived home, the mother couldn't stop the bleeding from the child's mouth. 1 1/2 inch gauze pads were dipped in water, folded and then dipped in the combined herbal powders. These were placed between the bleeding gums and held there. They were changed about three times in 20 minutes. Shepherd's purse tea was given through a straw. Healing was rapid. [NL 4-3]

3. Stomach Ulcer: I had symptoms of a stomach ulcer and I drank the Cayenne Pepper and now I have no more symptoms. Thank you again for your information on Cayenne and how it works for bleeding and heart attacks. [NL 4-7]

4. Cayenne and the Gunshot Wound: Once a child was shot in the abdomen; a bullet hit the spine, ricocheted, and made a second wound leaving the body. One of Dr. Christopher's herbal students, living next door, heard the shot and raced over, as she knew that the parents were not home and that the children, ages eight and four, would not be shooting guns. There was the eight-year-old gushing blood out both sides. She ran to the cabinet and mixed a tablespoonful of cayenne in a glass of water; she poured it down the boy and immediately called the ambulance, which was eighteen miles away. The emergency room attendant said that the boy would probably bleed to death, being that the distance was so great. The ambulance arrived and rushed the child (who had been playing "Cops and Robbers" with his father's pistol, which he had found under the pillow of the bed, to the Primary Children's Hospital eighteen miles away. When he arrived, he was the center of attraction, not because his case was so dangerous, but because he was chatting a mile a minute--and there was no bleeding. The bleeding had stopped by the time they arrived at the hospital. The chief doctor said to the parents, "I have seen many accident victims in my life, but this is the first time in such an emergency operation that I have opened an abdomen to find no blood, except for a small amount that was there before the bleeding stopped so quickly. This has saved your boy's life."

In that same year, Dr. Christopher treated four other gunshot victims, and each case responded the same, although sometimes the blood coagulates and comes out in clumps before it stops completely. By the time you count to ten, however, the heavy bleeding should stop completely after administering Cayenne. The Doctor even used tincture of Cayenne on open wounds and, as

he put it, "There may be a bit of muttering about it," referring to the burning feeling of the Cayenne, but the bleeding stops. [NL 6-3]

5. Damaged Eye: A woman fell while descending stairs to the basement and struck her head on the overhang above the staircase. She fell on her elbow and hip as well, but she had hit her eye so badly that it was oozing blood down her face. She found her way upstairs, and "dumped a pile of Cayenne into her hand and pressed it against her wounded eye" (Herbalist:March, 1978:30). She also took Cayenne internally and applied an ice pack. By this time the bleeding had stopped, and she applied Dr. Christopher's Comfrey Poultice, made with wheat-germ oil and honey, to her eye wound and other facial wounds. When she went to the doctor, he cleaned out the wound and told her that she would bruise very badly and that, if she wished, he would recut the wound and stitch it, as she had passed the eight-hour limit for stitches.

She kept taking the Cayenne and rubbing wheat-germ oil and other oils and herbs on the wound. She also applied wet hot packs for the itching associated with healing. After a few days, the marks of the accident were nearly cleared up, although the doctor had predicted many days of discolor and discomfort. This lady--who has teenage grandchildren--credits her quick healing to Cayenne. [NL 6-3]

#### See Also

[Abrasions](#)

[Cayenne](#)

[False Unicorn & Lobelia: Dr. Christopher's Anti-Miscarriage Formula](#)

## Blood Poisoning

### Definition

An infection of the whole body caused by germs spreading from an infected area through the bloodstream.

### Herbal Aids

See formula using bayberry, pinus bark, ginger, cayenne and cloves. [SNH p.133]

Chickweed: Drink the chickweed decoction internally and apply a chickweed poultice externally over the affected part. [SNH p.323]

Lobelia: Tincture of lobelia is also very useful in combating blood poisoning. [SNH p.365]

Lobelia: Dr. Christopher usually used Lobelia in the form of the acid tincture, which is made by soaking the herb or seed of Lobelia in apple-cider vinegar, one ounce of herb to one pint of vinegar. Incidentally, in recent years it has become all but impossible to obtain the seed, so most tinctures are made from the herb. Dr. Christopher was once called out on a case where an old man had a terrible case of lockjaw. The Doctor poured a small amount of the tincture into his mouth through his clenched teeth and within minutes he opened his jaws and was able to thank the Lord for the relief. Lobelia solved the effect; when the man could speak, he described working out on his farm, where he stepped on a rusty spike left out in the field by someone years ago. It had penetrated through his boot and now blood poisoning had set in. Dr. Christopher then went to work on this case. He used plantain ointment to help draw out the poison, and other herbs to cleanse the bowel and the bloodstream of the poison. [UW-Lobelia]

Plantain: Blood poisoning, use the Plantain preferably as a poultice but also possibly as a fomentation, and increase internal dosage as needed. [UW-Plantain]

Plantain, Lily of the Valley or Lilac: When we have a case of blood poisoning in a specific area of the body resulting from the sting of an insect, bee, hornet, or black widow spider, the bite of a "mad" dog, or infection from a cut or sliver, we need a powerful blood purifier that will give immediate relief to that area. Plantain (Plantago Major), Lily of the Valley leaves (Convallaria Majalis), and the common Lilac leaves have this power of purifying the blood stream in such an isolated area. [NL 1-2]

[Red Clover Combination](#): Dr. Christopher's Blood Purifying Formula containing red clover, chaparral, licorice root, poke root, peach bark, Oregon grape root, stillingia, prickly ash bark, burdock root, and buckthorn bark. Over the years we have used a very unusual Alterative -- a combination of herbs that has the ability of aiding many people who have found nothing else to help them in advanced diseases caused by bad blood. We have had hundreds of people express gratitude for the remarkable results they have received from following this program of a mucusless diet and the use of herbal aids...This formula creates, not only a generalized blood purifier, but also includes a group of herbs that aid in building strength and cleaning out the entire body, by helping break loose toxic deposits and flush them out, and also acting as a food for the organs. [NL-1-2]

Lock Jaw: When there is blood poisoning and/or lock jaw, use tincture of lobelia (tincture of lobelia seed is stronger) then after clearing the lock jaw by pouring a few drops on the lips, then go to the cause and clean up the infection that caused the lock jaw to become evident. Use plantain as a poultice (fresh) or plantain ointment. [NL 3-1]

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[Abrasions](#)

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[Bursitis](#)

[Echinacea](#): One of the first uses for Echinacea was therefore as an herbal aid for septic conditions of the body, particularly blood poisoning. A crushed hand, thought to be beyond aid, with the intolerable stench of putrid flesh, was saved by the application of Echinacea. [NL 6-12]

### Testimonials

1. Plantain and Blood Poisoning: We had a man come to us for help who had blood poisoning. Red streaks were running up his arm; he had a large lump under the arm pit, and he was in extreme pain. His fingers were swollen so large that his hands were spread wide. We simply bruised some leaves of the plantain herb, made them into a poultice and applied it over the entire arm. Within twenty-four hours the fingers were normal, the lump was gone, and the tell-tale red line had entirely disappeared. The herb had drawn the poison completely out. [SNH p.54]

2. Poison From a Cut From a Sea Shell: In another case, a girl cut her foot on a poisonous sea shell, and her leg swelled up with the usual red streaks and a knot formed in the groin as large as a baseball. A plantain poultice was put on her leg, and within one hour pain was gone. The poultices were repeatedly applied every hour and she was completely healed in a very short time. [SNH p.54]

3. Woman Doesn't Want to Lose Other Arm: Dr. Shook tells of a woman with only one arm came to me in great distress. She had been stung by a bee on the only hand she had left. Several years previously, she had been similarly stung by a bee. That time she had gone to a Doctor because the whole arm was swollen and she was in grave danger.

The Doctor lanced and drained the pus from the infected hand, but still the arm had continued to swell. Ultimately, the arm was amputated. This lady was in abject despair, believing she would lose her other arm.

Outside my door there was some Plantain (*Plantago Major*) growing. I picked some of the leaves and gave them to the woman, telling her to wash and crush them, make a poultice and apply to the part where she had been stung. Next day this lady returned to thank me and pay for my advice. The hand was entirely well. No sign of poison or inflammation was to be seen, where, but twenty-four hours before there was swelling, inflammation and risk of amputation.

The word "Alterative" is intended to mean that certain herbs gradually alter and correct a bad condition of the blood, without necessarily producing evacuations of the bowels beyond normal evacuation.

They change the process of nutrition and excretion and restore the morbid organs of the system to healthy action. They promote absorption of inflammatory deposits chiefly by stimulating the lymphatic glands, though this is not all. The purification of the entire blood stream, by means of better digestion and regular secretion requires the maintenance of a mild alterative influence to be continued for some time. Therefore, it follows that the term "Alterative" is property applied to those agents, which slowly, moderately and steadily expend their influence upon badly functioning organs, thus bettering the condition of the blood. [NL 1-2]

4. I Have Had a Long History of Poison Oak. I would get it from my children's clothing, our dog, or sitting on a couch the dog managed to get on for a short time. Once it went internal and I was in bed six weeks because I could not take cortisone, being in first six weeks of pregnancy. Once I got it, it just got worse and worse until I took cortisone. The doses became larger and larger. Large doses of Vitamin C and Niacin help a few times, then no longer helped, as did other things I tried. Twice I got blood poisoning in my arm from poison oak. I was desperately searching for a cure when someone led me to herbs and Naturalife. It took me about three years to find the cure but I did. As soon as I realize I have poison oak, I start taking licorice root, which is a natural cortisone and use Dr. Christopher's [CMM Ointment](#). This dries it up in just a few days. I usually take rose hips for good measure. As for the blood poisoning, the first time my poison oak went into blood poisoning, I took penicillin. The second time, my arm was swollen, big red swollen, full of fever and painful. I put chickweed ointment [[Chickweed Ointment](#)] on a bandage, taped it on my arm over the affected area and went to bed. In the morning the swelling was gone, the pain was gone, the fever was gone, and the large red area was gone. This has really been exciting to

me to find natural cures. [NL 1-8]

**See Also**

[CMM](#): Dr. Christopher's Healing Ointment

[Red Clover Combination](#): Dr. Christopher's Blood Purifying Formula

## Blood Pressure

[A - B](#)   [C - E](#)   [F - I](#)

[J - P](#)   [Q - Z](#)

### Definition

The pressure exerted by blood upon the walls of the arteries, depending upon the force of the heart beat, the elasticity of the vessel walls, the resistance of the capillary network and the volume and viscosity of the blood. In Back to Eden, p. 448, we find the following: "Blood pressure shows the contractile powers of the heart and resistance of the blood vessels. The blood pressure increases every two years about one degree. The normal blood pressure is approximately 125 and at sixty it is 140. Persons who are weak physically have a slightly lower pressure. Those who exercise have higher blood pressure" The old accepted routine of taking the blood pressure count has been 100 systolic plus the age, wherein a person of thirty years, it was felt, should have a normal blood pressure of 130, and a person of forty a blood pressure of 140, etc. But this is very erroneous, because at any age heavy meat eaters will have a higher blood pressure than vegetarians. There is actually no hard and fast rule on blood pressure. [SNH p.6]

### Symptoms

Excessive pressure is exerted on the valves and the pumping muscles of the heart. A pressure is also exerted on the functioning lifelines in the body--the arteries, the capillaries, etc. This condition is characterized by a red or flushed complexion, excess weight, discomfort, and sometimes skin pallor. High blood pressure is the result of improper living habits which cause a rundown condition in the body. [SNH p.31]

### Cause

High Blood Pressure: There is a thickening of the blood from catarrhal and excess glutinous and fibrinous matters loading the circulatory system. Generally there is a clogging of the bowel with putrid body waste, making it necessary to cleanse the excretory systems in order to purify the blood. [SNH p.30]

Low blood and high blood pressure are both due to malfunction of the circulatory system. High blood pressure in many cases works just like low blood pressure. Cholesterol must be eliminated from the system in order to get the blood flowing more freely. The condition is brought about by improper diet, insufficient rest and exercise and a lack of vitality within the system. [SNH p.35]

### Herbal Aids

High Blood Pressure: With high blood pressure, cholesterol and mucus form a sludge within the body. Avoid the mucus-forming foods and take herbs that act as a solvent by liquefying impurities such as cayenne, garlic or sassafras. Take cayenne, working up to a teaspoon three times a day. This increases the power of the heart and corrects the circulation problems. Garlic in copious amounts will bring down high blood pressure. Pure tomato juice is very good as a nutritional and a medicinal herb. Wheat germ oil is excellent for feeding the heart and helps cut the cholesterol and smoothens its removal from the area. Avoid the use of liquor and tobacco, do not keep late hours, and avoid over-tiredness and worry. There is an intricate inter-relationship between ones living habits and his body condition. [SNH p.30]

Low Blood Pressure: More oxygen is needed to correct this condition. Garlic is a good oxygen carrier. One of the greatest aids for low or high blood pressure because of oxygen starvation is deep breathing, which serves as a catalyst and helps the herbs react more rapidly. An immediate increase in circulation may be obtained by the use of cayenne and non mucus-forming

[Abrasions](#)[Abscess](#)[Acidosis](#)[Acne](#)[Addison's Disease](#)[Adenoids - Polyps](#)[Adrenals](#)[Ague](#)[Alcoholism](#)[Allergies](#)[Alopecia](#)[Amenorrhea](#)[Anemia](#)[Anthrax](#)[Apoplexy](#)[Appendicitis](#)[Arthritis](#)[Asthma](#)[Athlete's Foot](#)[Bad Breath](#)

foods. Grape juice as well as other juices rebuild and give endurance to the system. [SNH p.35]

Shock: Cayenne should be taken internally to equalize the blood pressure and insure that the internal functions will remain stabilized during the intense systemal distress. [SNH p.44]

Dr. Shook's High Blood Pressure Formula (hardening of the arteries, etc.): See formula using sassafras, European goldenrod, buckbean, black cohosh, poke root, Indian senna, buckthorn and cassia bark. [SNH p.81]

Dr. Shook's High Blood Pressure Compound: See formula using valerian root, licorice root, buckthorn, speedwell, linden flowers, rue and golden rod. [SNH p.379]

**BPE:** Dr. Christopher's Blood Circulation Combination: This formula feeds calcium and ginger into the circulatory system, the cayenne working from the bloodstream to the heart and arteries, out into the veins. The other herbs included are to cleanse, heal and give natural elasticity to the venous structure. It is a group of herbs working together to equalize the blood pressure whether high or low and to bring it to a good systolic over the diastolic reading. Blood flow is life itself. This combination contains: Ginger, Cayenne, Golden Seal, Ginseng, Parsley, Garlic. [SNH p.531]

Vitamin K: The blood clotting properties of Vitamin K, it has been found effective in preventing and curing high blood pressure in test animals, and may turn out to be important for the same use in humans. It is important that in the plant kingdom, only Alfalfa contains a significant amount of Vitamin K; most plants are quite deficient in the vitamin. [UW-Alfalfa]

Kelp: It is an arterial cleansing agent and gives tone to the walls of the blood vessels. It is helpful in some cases of arterial tension (high blood pressure). Practitioners believe that it helps to remove deposits from the walls of the arteries and restore their elasticity, thereby lengthening life (Powell:17). Sufferers from low blood pressure can also have this condition normalized with the use of Kelp. {UW-Kelp]

Shepherd's Purse: Acts to constrict the blood vessels and thus can raise blood pressure but it has also been said to regularize blood pressure and heart action whether the pressure is too high or too low. [UW-Shepherd's Purse]

Valerian: The herb has a beneficial effect on the heart and on blood pressure. One man felt "jittery and woozy" taking his blood pressure medicine and asked an herbal practitioner for something to help him. He didn't say that he was going to stop taking his medicine but a few weeks later, he said that he had been to his doctor, and that his blood pressure was down to normal. He didn't have the nerve to tell the doctor that he had stopped taking the medicine and was drinking a tea composed mostly of Valerian and hawthorne. [UW-Valerian]

Hawthorn Berries: A celebrated cardiac tonic for many centuries. Under conditions of stress, the heart often "works overtime." Hawthorn berries can help in treatment of high or low blood pressure, tachycardia, and arrhythmia. It is also anti-spasmodic, sedative, and soothing to nerves, especially in nervous insomnia. [NL 2-3]

Garlic: Many people have been helped in ridding the body of worms by inserting a peeled button of garlic as high as possible into the rectum. Do this just before retiring at night and it will come out with the first bowel movement in the morning. (This is also a fine aid in adjusting high blood pressure and low blood pressure). [NL 2-9]

Water: It is very beneficial to drink a gallon of "steam distilled water" each day. This will aid to cut down the hardening of the arteries, adjust high and low blood pressure, and retard body dehydration. The amount of water depends on the weight of the individual. Use one ounce of "steam distilled water" to each pound of body weight. i.e. a one hundred and thirty pound individual should drink a gallon of the water (132 oz.) or a twenty pound child, twenty ounces of the water. [NL 2-9]

Juices for High Blood Pressure: Celery-garlic-parsley, celery, dandelion, grapefruit. [NL 3-5]

Juices for Low Blood Pressure: Beet, grape, pomegranate. [NL 3-5]

Ephedra: Excessive amounts of ephedra should not be used by those people who have high blood pressure, but the small amounts in Dr. Christopher's formulas will have no adverse effects.

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Ephedra is great for those suffering from low blood pressure. [NL 4-9]

Vegetables for Blood Pressure: The green bell-shaped pepper is especially good for ... high blood pressure and acidosis. The Sweet Potato used... for problems of low blood pressure and poor circulation. [NL 4-12] Peaches are considered valuable in cases of ...high blood pressure [NL 5-1] Pineapple is considered good for... high blood pressure. [NL 5-1] Strawberry is recommended for ... high blood pressure. [NL 5-1] Ample consumption of tomatoes is considered to improve ... high blood pressure. [NL 5-1]

Pecans: These have been used where there is a problem with low blood pressure...Pinon nuts have saved the life of many an Indian baby when made into a nut soup and used as milk for the baby when the mother had no milk. The nut is considered to be effective where there are problems with the lungs such as tuberculosis, impotence, paralysis, low blood pressure, and emaciation. The Pinon nut is one of the best sources of protein in the nut family. [NL 5-1]

### Testimonials

1. Dr. Christopher Tells the Story: I traveled with a man younger than myself several years ago all over the western part of the United States on business. He marveled at the stamina that an older man could have on long drives without displaying the usual fatigue. Each morning I would get up and have my cayenne and my wheat germ oil (I don't pay attention to anyone else, I just take them, regardless). Finally he got curious and said, "What's that stuff?" So I gave him an illustrative lecture, and he responded, "Well, I have hemorrhoids; my mother died of high blood pressure, and I have high blood pressure; and with the hemorrhoids I have to wear a belt, as you probably noticed, to keep my hemorrhoids up in place. Do you think that (meaning cayenne) will help?" "Not unless you take it," I replied. "Well, I will start taking it." Then I added, "I don't think you're man enough; I don't think you are brave enough," and I turned and walked away. Now, he was well-proportioned and a weight lifter, so after I left, he went over and got into my can and started using the cayenne along with the wheat germ oil, and by spring he did not have to wear a belt any longer as his hemorrhoids were cleared. Then he had an amazing surprise when he went to his doctor for a regular check-up; the doctor took his blood pressure three or four times and said, "This is supposed to be progressively worse. I don't know what has happened; your systolic and diastolic are near perfect. You don't need to come back any longer --I don't know what happened!" Well, he did not have to go back, and today this gentleman who lives in the Salt Lake City area has no high blood pressure, for he kept on taking his cayenne. [SNH p.412]

2. Dr. Christopher's Own Story: Because of my own experiences I must tell you that I am a firm believer in the use of cayenne for the circulatory. I suffered ill health in my youth and from my middle twenties to the middle thirties it was impossible for me to purchase life insurance, even a thousand dollar policy. This was due in part to the hardening of the arteries and a disposition to high blood pressure which I suffered from.

During my middle forties I tried again for a substantially large policy of life insurance. Because of the amount of the insurance I had requested, I was required to see two different doctors, each of whom gave me an examination. After one examination the doctor exclaimed that he was astounded at my blood pressure which resembled that of a healthy teenager though I was forty-five years old. The second doctor measured my blood pressure five times, in each instance shaking his head and repeatedly scrutinizing my case history chart. I was becoming irritated and asked him if his equipment was broken, seeing that he had repeated the reading over and over. He told me that the equipment had been used without trouble for some time, but since my age was forty-five and I had a perfect systolic over diastolic pressure he had to wonder if the reading was correct. I assured him that it was and related what the other doctor had said. I got an O.K. for the policy from both practitioners.

Last year as I neared seventy years of age I told this story to a class I was instructing. One of the pre-medicine students asked if my blood pressure was still as good as it had been then. So I gave him permission to take my blood pressure. Amazingly, the group saw the blood pressure reading of a healthy young man and not the average reading of a seventy-year-old individual. This was very gratifying to me to say the least. The main reason for this good blood pressure of mine, besides my close adherence to the mucusless diet, was the use of cayenne as a food each day. I take one to three teaspoons or more of cayenne every day of my life and the resulting healthy

blood pressure is what I call a good pay-off for a total effort. [NL 1-5]

3. Dr. Christopher's "Hawthorn Berry Syrup has been doing us so much good. It's difficult to find adequate thank you expressions for you. In addition to help for heart problems it has also been stabilizing a high blood pressure problem of long standing which is really worthy of praise. We take it only twice a day, but perhaps if it was taken three times, it would bring the blood pressure to normal ... At least we are not using the drug prescription for some time now." [NL 3-11]

**See Also**

[Cayenne](#)

[BPE](#): Dr. Christopher's Blood Circulation Combination

[Hawthorn Berry Syrup](#): Dr. Christopher's Hawthorn Berry Syrup

[Cholesterol](#)

[Heart](#)

[Garlic, Rosehips, and Parsley](#)

[2-9](#): Garlic: Man's Best Friend in a Toxic World

## Ailments

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## Boils

### Definition

A pus making skin infection in a gland or hair gland, marked by pain, redness and swelling.

### Cause

When the blood stream is flowing "clean" and doing an efficient job by feeding the system properly and carrying off the wastes, the whole body benefits...When a "good clean blood-purifying program" is being used, we will see that the toxic poisons are being removed and boils, acne and other skin diseases will start clearing up. [NL 1-7]

### Herbal Aids

Boils, Carbuncles, Tumors: Bruise the fresh leaves of plantain and apply to the affected area, cover and keep moist (juice); change poultice before dry. [SNH p.53]

Rashes, Pimples, Boils, Scurvy, Eczema: Use a decoction of equal parts burdock root and yellow dock (*Rumex crispus*) as a wash, and drink the combination as a tea. [SNH p.65]

See formula for boils poultice using burdock root, sarsaparilla, yellow dock and black alder. [SNH p.67]

Boils, Carbuncles: Make an external application of equal parts of echinacea and ground pine or club moss (*Lycopodium clavatum*), while taking the echinacea tea or syrup internally; another effective poultice is to use flaxseed (*Linum usitatissimum*), lobelia (*Lobelia inflata*), slippery elm powder (*Ulmus fulva*), and cayenne (*Capsicum minimum*; *C. fastigiatum*) with echinacea tea and apply fresh 2 times daily for 4 days. [SNH p.89]

Boils, Carbuncles, Gangrenous Sores: Apply the powder of bayberry in a poultice. [SNH p.133]

Boils, Tumors, Scrofulous Ulcers, Ulcers of Mouth and Throat, Inflamed Skin and Mucous Membrane, Infection, Cancer: Apply a poultice of the fresh roots and leaves of white pond lily; also the strong decoction makes an excellent base for mixing other ingredients for application; the powder is often mixed equal parts with crushed flax seed (linseed) or powdered slippery elm. [SNH p.165]

Inflammation, Bruises, Sprains, Swellings, Suppuration of Boils: Apply a fomentation made from the comfrey root or leaves. [SNH p.310]

Boils: Paint the part with pure olive oil to prevent sticking, then saturate a thick layer of cotton with comfrey mucilage and apply to the affected parts. Cover with plastic or waxed paper, bandage, and leave on until nearly dry. Make a fresh application by following the same process. If pus is present, paint the part with oil of garlic instead of olive oil and take 1 teaspoonful of the oil, internally. This will prevent or stop putrefaction and pus formation, which will hasten the healing process. Give fomentation wrung out of a strong decoction. [SNH p.310]

Boils: A comfrey fomentation or fresh poultice is excellent when it is necessary to resort to cutting and draining. This will draw and drain the boil. [SNH p.310]

Drawing and Healing Poultice (inflamed surfaces, ulcers, wounds, burns, boils, skin diseases, purulent ophthalmic, chilblains, etc.): Add water to the powder to make an application of due

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consistence (use alone or in combination with other healing agents discussed) and place on the affected part. Stripping the bark straight from the tree and binding the inner side to a bad wound will work. [SNH p.335]

Swellings, Pneumonia, Pleurisy, Boils, etc.: Make a compress or plaster of lobelia, of hops, bran, or lard. [SNH p.363]

See formula for maturation poultice for boils using ginger and flour. [SNH p.415]

[Black Ointment](#): Dr. Christopher's Black Ointment: This is an excellent drawing ointment. For use externally on old ulcers, tumors, boils, warts, skin cancers, hemorrhoids, excellent for burns and as a healing agent. This is made with chaparral, comfrey, red clover blossoms, pine tar, mullein, beeswax, plantain, olive oil, mutton tallow, chickweed, poke root. [HHH p.196]

Gargle for Sore Throat, Swollen Tonsils, Fomentation of Boils of Skin Eruptions. (Also useful for feet with unpleasant odor). 1 oz. powdered oak bark simmered in 3 pints of water for about 30 minutes. Simmer to 2/3 of original volume. [NL 2-10] Staph: From a question to Dr. Christopher's Newsletter: What will, in a natural way, aid to clear up staph?

Staph is an abbreviation for Staphylococcus. The definition for this word is bunch of grapes. A genus of spherical cells arranged in irregular groups and short chains, and very rarely in packets. These are the bacteria most commonly found in boils, abscesses, carbuncles, and similar suppurative processes.

As can be seen here, we do not have a local problem, but an internal one. I have had many cases of long suffered and continual of furuncle (boil) types that have been cleared by cleaning up the blood stream. The initial cause stems from "food" intake.

The first step is to clean out the bowels (using [Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula and [Red Clover Combination](#): Dr. Christopher's Blood Purifying Formula.

After getting on the right start, it is also good to stay on the mucusless diet for long range good health and freedom from staph infections.

As an aid to help clear a staph condition as quickly as possible, it is wise to use an abundance of garlic and onions, raw as much as possible, in salads and low heated foods. We have in our aids a formula for infection. [\[INF Combo\]](#) Two or three of these capsules, three or more times a day, will be of great help. To assist this formula add three of six drops of Black Walnut Tincture and three to six drops of Tincture of Lobelia to each cup of steam distilled water being used in drinking down these capsules. [NL 2-10]

Vegetable Juices: Useful for the treatment of boils and carbuncles are carrot & spinach, carrot & cucumber, carrot. [NL 3-5]

Black Walnut: Externally, Black Walnut is nearly a miracle worker in cases of scrofula, eczema, impetigo (as related above), acne, dandruff, boils, itch, shingles, ringworm--we could go on, but you can see that you can use Black Walnut whenever a skin disorder appears! The tincture is an excellent first-aid remedy for wounds. [NL 5-7]

### Testimonials

1. Boils Under Both Arms: While serving in the army during World War II, we had a soldier come to us with a bad case of boils under both arms. We lanced and treated them as usual, but in a week or so he was back with another crop. When questioned about it, he said that he had been plagued with the problem all his life. I asked him if he wanted to rid his body of the boils, and he said he did. So I gave him a prescription, to the mess sergeant (not to the druggist): no fried foods, no milk, no meat, no potatoes, no soft drinks, but all fresh fruits and vegetables. Needless to say, the boils promptly cleared up and he had no recurrence of them. So these types of diseases must be treated by clearing up the blood stream and keeping it clean if healing is to be realized. [SNH p.70]

2. Boils Suffered for Nearly a Year: Dr. Shook also related, at length, the story of a young man who was suffering for nearly a year with boils on different parts of his body, two under one arm and one under the other, several scattered about on his wrists, buttocks, and legs, and nine on his

neck. It was the worst case of Furunculosis (boils caused by blood impurity) that Dr. Shook had ever seen.

He told the man to gather a large sackful of fresh burdock leaves and to dig up the roots of first-year plants. His wife washed and chopped the leaves and made them into a poultice with Oil of Eucalyptus and applied wherever the boils appeared. The roots were cleaned, chopped, and boiled, four ounces to a quart of water, for twenty minutes. This was strained and reduced to one pint and taken in small doses throughout the day till the pint was gone.

In three weeks, the boils were gone, and in one month the young man was completely well, although he had suffered so much for so long. The boils did not recur (ShoA:46-47). [NL 5-12]

#### See Also

[Black Ointment](#): Dr. Christopher's Black Ointment

[Black Walnut Tincture](#): Dr. Christopher's Black Walnut Tincture

[Skin Problems](#)

## Ailments

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## Breast

### Definition

Cancer of the breast, mastitis, breast tumors, breast infection while nursing, sore nipples.

### Herbal Aids

Cancer of the Breast (poultice): See formula using poke root and bayberry. [SNH p.62]

Breast Tumors: Use the expressed juice of cleavers herb mixed with linseed meal, and apply to the breast; take 1 teaspoonful of the juice while fasting in the morning. [SNH p.268]

**Mullein & Lobelia:** Dr. Christopher's Glandular Formula: Through the accumulation of toxic waste in the body from improper diet, poor blood stream and sluggish circulation of the blood system the glands become congested and infected, and swell up to cause much pain and misery. (There are glands that swell on the neck, breast, groin, under arm pits, etc.) Make a tea of three parts mullein and one part lobelia herb and use as a fomentation over swollen or malfunctioning glands. Leave on all night (covering fomentation with plastic), six days a week until relief is obtained. Use a fresh fomentation as warm as possible each night. This can be used as an aid to help relieve mastitis, thyroid malfunction, etc., etc. In addition to the external fomentation, also drink a cup of this tea two or three times in a day or take two of the capsules or tablets with a cup of steam-distilled water. [SNH p.187]

Breast Infection When Nursing: Some women use a hot compress of parsley herb, but this can cut down the supply of milk. A hot compress of comfrey leaves, or of marshmallow roots are excellent; the latter is especially good to draw out poisons and infection. Echinacea and garlic can help up an infection; take these internally. My midwife has suggested that a calcium imbalance in the system can cause breast infection; instead of taking calcium tablets, take Dr. Christopher's Calc formula, which consists of four parts comfrey root, six parts horsetail grass, three parts oat straw and one part of lobelia. This can be taken in tea, tablets, or capsules. Take lots of liquids, take hot baths, and be sure to get plenty of rest. Many breast infections result from an exhausted mother. Vitamin C-rich foods, such as rose hip tea or, my favorite, hot lemon toddy, which you make by squeezing the juice of one lemon into hot water and adding honey to taste, can help heal you up. [EWH p.85]

Sore Nipples When Nursing: If your nipples get sore, you can rub on pure lanolin, available at pharmacies. You can sun your breasts briefly, but be careful, because the tissue is tender and sensitive. Honey, comfrey ointment, wheat germ oil, and aloe vera leaf can all be applied, although you should be careful to wash off the honey, as no infant should take raw honey which causes infant botulism, and to remove the aloe vera, because it is very bitter. [EWH p.85]

Poke: It is a dependable herb to treat breast swelling, from which so many women suffer following childbirth, making nursing impossible. Dr. Kloss described this use. He said to grind fine the fresh root and roll this out into a poultice to cover the breast completely, cutting out a hole for the nipple. Using a piece of cheesecloth or other thin (cotton) material to cover the breast, apply and once daily moisten the poultice with Poke root tea made fresh each time. Do this for three days, each time putting on a fresh poultice. You can continue the treatment for fifteen days which should pull little sores filled with pus. In some weeks, he said, the hardness should leave the breast although we consider that it works much faster in many cases (Klo:298). This same treatment has worked wonders in cases of breast cancer. [UW-Poke]

Calcium for Mastitis: We have also noted, in the problem of mastitis, that a calcium

[Bed Wetting](#)[Bee Sting](#)[Bites, Insect Stings](#)[Black Eye](#)[Bladder Ailments](#)[Bleeding](#)[Blood Poisoning](#)[Blood Pressure](#)[Boils](#)[Breast](#)[Bright's Disease](#)[Broken Bones](#)[Bronchitis](#)[Bruises](#)[Burns & Sunburns](#)[Bursitis](#)

deficiency in the body is sometimes a cause. A midwife informed us of this and said that if we would saturate the body with a good quality calcium supplement such as the Calc tea or perhaps Dr. Christopher's eggshell formula, using Vitamin C and blood-cleansing herbs to eliminate infection, we would quickly get over any breast infections. Dr. Christopher made his eggshell formula by covering clean eggshells, with their inner lining removed, with apple-cider vinegar allowing this to set for several days. He then strained it and combined it with honey and water for a pleasant source of good calcium. [UW-Poke]

Poke Root: It has been recommended for other women's ailments. Sore nipples and breast tenderness during the menstrual period will be remedied by the use of Poke root. [UW-Poke]

Squaw Vine for Sore Nipples: The berries are highly recommended to treat sore nipples. The crushed berries are added to tincture of myrrh for a highly potent cure (Cly:113). Another method is to make a strong decoction of two ounces of the herb, fresh if possible, with a pint of water, then strain and add as much good cream as there is liquid of the decoction. Boil the whole down to the consistence of a soft salve and when cool, anoint the nipple with it every time the child is removed from the breast (Felk:1274). Olive oil is sometimes substituted for the cream. [UW-Squaw Vine]

Gathering of Breasts, Tumors, Sores (poultice): See formula using ground ivy, camomile flowers and yarrow. [SNH p.161]

Sore Breasts: Apply a comfrey poultice of the fresh, bruised leaves. It relieves pain in an hour. [SNH p.310]

### Testimonials

1. [Mullein & Lobelia](#) for Dr. Christopher's Daughter: Dr. Christopher's daughter, Ruth, told the story of nursing her baby during a hot night, so she left the window open. A cold breeze came in during the night, and since she had not covered up very well, the cold air blowing on her gave her a cold in the breast. It was very hard and sore, to the point that she could hardly nurse the baby. She tried until she felt like screaming. She called her dad, then about eighty miles away, who came with the mullein/lobelia fomentation [Mullein & Lobelia]. She made it up and covered her breast with it, as hot as she could stand it, and put some plastic over it and then a towel. By morning she was nursing the baby again, with no pain and no more hardness. [EWH p.85]

2. To Start Breast Milk for Adoptive Mother: One blizzardy day, this lady came into the office, wearing a purple robe with a white fur collar on it. She shook the snow off and was admitted to Dr. Christopher's office. She threw back the robe, and there she had in her arms, at her breast nursing, a beautiful little Navajo baby. She was so blonde that the contrast was amazing. She said she took the baby and put it to her breast, and it started nursing right off. She had taken the blessed thistle tea a few days before the baby was received. Although she had adopted three other Indian children, she felt very close to this one and felt it was a part of her because it was receiving her own milk. [EWH p.91]

3. Mastitis: A woman in Roy, Utah, had mastitis; she was a nursing mother. Her breast was double its regular size, with red streaks. Anyone experiencing mastitis knows that it is terribly painful, and accompanying symptoms resemble flu. A mastitis fever is really uncomfortable. Her baby had nursed from the other side, but the mother couldn't let it get near the inflamed breast, which sometimes can relieve the pain and swelling if possible. The baby was crying from hunger; the mother was crying from pain; what misery for the two of them! The Doctor made a fomentation of three parts of Mullein and one part of lobelia. Plastic was put over the fomentation, and the mother was told to drink half a cup of the tea each half hour until time to sleep, then a half cup each hour the next day if needed, which the Doctor did not think would be necessary.

The next morning she called Dr. Christopher, happy to tell him that the swelling was all gone, as well as the soreness and flu symptoms, and the baby was nursing happily again on that side. [UW-Mullein]

**See Also**

[Calc Tea](#): Dr. Christopher's Calcium Formula

[Mullein & Lobelia](#): Dr. Christopher's Glandular Formula

[Cancer](#)

[Nipples](#)

## Bright's Disease

### Definition

A kidney disease.

### Herbal Aids

[Cranesbill](#): Drink the decoction in combination with golden seal (*Hydrastis canadensis*). [SNH p.152]

[Bright's Disease](#): (chronic nephritis): See formula using juniper berries, blue cohosh, couchgrass and buchu. [SNH p.251]

[Yarrow](#): Yarrow has also been recommended in pancreas problems, including Bright's disease and diabetes. [UW-Yarrow]

[Uva Ursi](#): Uva ursi or bearberry (*Arctostaphylos uva-ursi*: Ericaceae) is an excellent herb for the adrenal, for diabetes, Bright's disease, and assists in controlling kidney and bladder congestion. [NL 1-6]

[Alfalfa](#): According to May Bethel, author of *The Healing Power of Herbs*, 1968, alfalfa contains 8 known enzymes which are instrumental in food assimilation. Bethel also quotes Dr. W. H. Graves, D.C., who has successfully used alfalfa in cases of diabetes, rheumatism, bright's disease. [NL 2-12]

### See Also

[Juni-Pars](#): Dr. Christopher's Kidney Formula

[Diabetes](#)

## Ailments

[A - B](#)   [C - E](#)   [F - I](#)

[J - P](#)   [Q - Z](#)

[Abrasions](#)

[Abscess](#)

[Acidosis](#)

[Acne](#)

[Addison's Disease](#)

[Adenoids - Polyps](#)

[Adrenals](#)

[Ague](#)

[Alcoholism](#)

[Allergies](#)

[Alopecia](#)

[Amenorrhea](#)

[Anemia](#)

[Anthrax](#)

[Apoplexy](#)

[Appendicitis](#)

[Arthritis](#)

[Asthma](#)

[Athlete's Foot](#)

[Bad Breath](#)

[Bed Wetting](#)

[Bee Sting](#)

[Bites, Insect Stings](#)

[Black Eye](#)

[Bladder Ailments](#)

[Bleeding](#)

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**Bright's Disease**

[Broken Bones](#)

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## Ailments

[A - B](#)   [C - E](#)   [F - I](#)

[J - P](#)   [Q - Z](#)

### Cancer

[Canker Sores](#)

[Chicken Pox](#)

[Cholera Morbus](#)

[Cholesterol](#)

[Colds, Catarrh, Coryza, Influenza](#)

[Cold Sore](#)

[Colic](#)

[Colitis \(Colon Trouble\)](#)

[Constipation](#)

[Convulsions](#)

[Corns](#)

[Coughs](#)

[Croup](#)

[Cuts](#)

[Cysts](#)

[Dandruff](#)

[Deafness](#)

[Debility](#)

## Cancer

### Definition

New tissue cells that lack a controlled growth pattern.

### Cause

For many years Dr. Christopher taught that cancer is not an isolated problem in the body. If the cancer breaks out in a place where we have an old injury or a weakened portion in the body it only indicates that the cancer is in the bloodstream. It only accumulates, like a boil or an ulcer, in a weakened area and drains the poisons in the area. The medical profession cuts it out and says, "Well, the cancer's all gone!" The cancer breaks out in another place. The bloodstream must be cleaned. The [Red Clover Combination](#): Dr. Christopher's Blood Purifying Formula or even Red Clover alone has a powerful alterative effect to clean the bloodstream. [UW-Red Clover]

### Herbal Aids

Red Clover: is a very useful and wonderful alterative agent for counteracting scrofulous and skin diseases, as an antidote to cancer, and as an efficient remedy in bronchitis and spasmodic affections. Its healing properties make an excellent addition to alterative compounds. You will find this an effective and reliable remedy in wasting-disease and for weakly and delicate children. The warm infusion is soothing to the nerves. [SNH p.56] Anal: Inject a strong infusion of the tea five or six times daily, and also drink internally. [SNH p.56] Drink four or more times daily on an empty stomach. [SNH p.56] Vaginally: Inject a strong tea with a bulb syringe (holding the vagina closed after insertion to force the tea around the head of the womb), retain several minutes before expelling, five or six times daily. [SNH p.57] Dr. Thomson suggested a cancer plaster which is widely recommended. Cover the Red Clover flowers with water and boil for one hour. Then strain and reduce the liquid until it is the consistency of tar. It can be spread on a clean cloth and applied to external cancers. This is not one hundred percent verified in all cases where it has been tried, but together with the tea administered internally there have been many reports of successful healing with the treatment. If there is a cancer in the rectum you can give an injection (small herbal enema). Bethel says she has seen many cancers disappear with treatment of Red Clover (Beth:136). [UW-Red Clover]

Dr. Thomson's Famous Cancer Plaster: "Take the heads of red clover, and fill a brass kettle, and boil them in water for one hour; then take them out and fill the kettle again with fresh ones, and boil them as before in the same liquor. Strain it off and press the heads to get out all the juice, then simmer it over a low fire, till it is about the consistency of tar, when it will be fit for use. Be careful not to let it burn. When used it should be spread on a piece of bladder, split and made soft. It is good to cure cancers, sore lips and old sores." [SNH p.57]

Anti-Cancer Remedy: See formula using red clover, poke root, licorice root, cascara sagrada, sarsaparilla, prickly ash, burdock, buckthorn, stillingia, Oregon grape root, peach bark and chaparral. [SNH p.57]

Cancer of the Breast (poultice): See formula using poke root and bayberry. [SNH p.62]

Cancerous Sores (ointment): See formula using poke root, yellow dock and blood root. [SNH p.62]

Chaparral or Creosote Bush: It is especially known for specific action in cancer and arthritis. It was considered to be a cure-all by many Indians. It is a potent healer to the urethral tract, and to

[Depression](#)[Diabetes](#)[Diarrhea](#)[Digestion](#)[Diphtheria](#)[Dizziness](#)[Dropsy](#)[Dysentery](#)[Dyspepsia](#)[Dyspnea](#)[Earaches](#)[Eczema](#)[Edema](#)[Enuresis](#)[Epilepsy](#)[Eye Ailments](#)

lymphatics. It tones up the system and rebuilds the tissue. It cleanses the lower bowel and tones peristaltic muscles. It is very bitter, but to the needy and courageous, it works fast for difficult conditions. [SNH p.70] Cancer, arthritis, rheumatism, etc.: Drink the tea (infusion for 3 weeks, after which the capsules or tablets may be used. [SNH p.71]

More on Chaparral: The Kelly Research Foundation in Grapevine, Texas has been active in cancer research. The following is a statement concerning chaparral by Dr. William Kelly:

"I've found that chaparral is very effective in 7% of the cases of malignancy. The action is not as many researchers believe--a specific activity against the cancer cell, but rather an indirect one. In about 7% of the cases of malignancy, the pancreas and the liver as well as other tissue of the body are so congested with poisons such as medications, sprays, drugs, metallic poisons, and pollutants, that these tissues cannot carry on normal activity. This is basically an antagonist to the enzyme and vitamin and mineral metabolism that goes on in the body. In cancer specifically, we find that the pancreatic enzymes are locked with the antagonists and are rendered totally ineffective. By chelating these antagonists from the pancreatic enzymes, we find that normal activity takes place and the person's own cancer defenses take over and destroy the tumor in malignant conditions. It has been found further and should be seriously investigated by the Federal Government that Chaparral works well in chelating the toxins out of the bodies of those who have been drug addicts. We recommend taking two Chaparral tablets before each meal. This seems to be an effective way of chelating antagonists from the body that otherwise could not be accomplished." [NL 2-2]

White Pond Lily: Cancer of the uterus. Drink the decoction and use the decoction as a vaginal injections. [SNH p.165] Boils, tumors, scrofulous ulcers, ulcers of mouth and throat, inflamed skin and mucous membrane, infection, cancer: Apply a poultice of the fresh roots and leaves; also the strong decoction makes an excellent base for mixing other ingredients for application; the powder is often mixed equal parts with crushed flax seed (linseed) or powdered slippery elm. [SNH p.165]

Thyme: May be taken internally or used externally with amazing and beneficial results. Internally: 1 teaspoonful in 1 cupful of water, sweetened with 1 tablespoonful of honey 3-4 times daily; good for infectious bronchitis, diarrhea, cancer. [SNH p.230]

Cleavers: Skin cancer: Apply a poultice of the bruised green herb, and take 2 ounces of the expressed juice 3 times daily. [SNH p.268]

General Nutrient, Emollient, Healing Formula (ulcers, cancer, syphilis, skin diseases): See formula using comfrey, burdock and distilled water. [SNH p.314]

Chickweed: For rectal cancer. Bathe the area 2-3 times daily with the decoction, infusion, or diluted tincture (as warm as possible), then apply [Chickweed Ointment](#) or [CMM](#): Dr. Christopher's Healing Ointment. [SNH p.322]

Cancer Preventative: An example of a common emulsion is: 1 ounce sweet almonds, 1 teaspoon bitter almonds, 2 pints water; blanch almonds (remove skin by scalding) and beat up, adding water little by little to form an emulsion; strain and bottle. This particular formula (using a teaspoon a day, six days a week, over the years) is a wonderful cancer preventative. [SNH p.483]

Helios-Therapy: (Sun) on the skin is very important, as the sun is the Great Doctor of all times. But this therapy must always be done with caution because the sun (though being a healer) is like fire, which can either provide gentle warmth or it can burn a city down. The sun will heal where medicinal aids, herbs and other procedures are slower. In many instances, it will bring skin cancer to the surface... The propaganda in daily newspapers and national publications each year (although promoted often by people with doctoral degrees) stating that "the sun causes cancer" is as ridiculous as saying "the tonsil is poisoning the whole body"--actually it is the putrid condition of the body that is poisoning the tonsil, or the skin! All the sun does is to ripen and bring the cancer that is already there to the surface, wherein the waste matter can slough off, so that the body may heal. This is why we must work inside the body with herbs, as well as outside the body with the sun, which will harmoniously speed the curative process and eliminate the problem so there is no recurrence. [SNH p.502]

Meats and Nuts for Cancer: Dried fruits and nuts are very nourishing and beneficial, and the latter are better (as a whole protein) when used in combination with the garden greens. If a person

has cancer or is inclined towards cancer, do not overdo eating protein (such as nuts). This is one thing that does damage to the pancreas and in these cases, eat nuts only in the morning. Stay away from peanuts and concentrate on almonds. A person with a cancerous condition should use from 8 to 10 almonds in the morning and the same at noon. But do not take any protein from evening time until the next morning, allowing 16 to 18 hours for the pancreas to clear and start to work on enzymes again. All protein should be taken early in the morning. In cancer cases never use any second-hand or secondary protein (such as meats). [SNH p.521]

Potassium: Max Gerson, in his very effective treatment of cancer, found that almost all seriously ill persons were very deficient in potassium. He supplemented his cancer patients' diets with significant amounts of potassium, usually in a liquid concentrate. A cancer patient we know learned that both the seaweeds Kelp and Dulse are the highest in potassium among all foods and herbs. He mixed a brew of Kelp, apple cider vinegar and honey and took a large amount of it in his daily cancer regime, which also utilized raw juices, fruits and vegetables, and herbs. He found that this was a potent--albeit somewhat unpleasant tasting!--source of potassium and other trace minerals. Gerson also employed iodine in his cancer treatment and Kelp is high in this element. We cannot, of course, claim that Kelp is a cancer cure. But it is a powerful source of necessary elements for healing. [UW-Kelp]

Poke: Authorities differ as to its value on cancer. Great relief towards the close of a difficult case of cancer of the uterus was obtained by an external application of 3 ounces of Poke root and one ounce of the tincture in the strength of 1 tablespoon to three pints of tepid water for bathing the part (Gri:649). Hutchens reports that "the juice of the berries dried in the sun until it forms the proper consistency for a plaster, applied twice a day, has cured cancer" [UW-Poke]

Chaparral: From a question to Dr. Christopher in his Newsletter. Does chaparral really cause acceleration in the growth of cancer? Answer: The healing reaction of chaparral is one that causes concern to those watching results if they do not understand the method of progress.

The herb chaparral is a powerful cell proliferant, causing the good cells to grow rapidly. During their fast new growth, the good cells push the dead cells and their waste into a deposit. This growth of waste material has an alarming appearance and frightens the uninformed into believing the cancer is growing rapidly. We have seen this condition a number of times. As it reaches a crisis condition, after the growth loads up with toxic materials it then starts decreasing in size and the healing process takes place. This is a slow procedure in some cases and demands good continued care and understanding. [NL 1-8]

Prostate Cancer: Red clover and dietary changes, plus other formulas. [NL 3-6]

Cancer Surgery: Just a word about cancer. It is a systematic disease. It depends on filth in the bowel and the blood stream. Our understanding of cancer is different from that of the surgeon's. We see the body being able to "clean up its act" and stop recycling the same old toxins around and around in the body. All channels of elimination (including the skin) must be functioning. The food intake must be pure.

Even though a person is operated upon for a cancerous tumor, there is no guarantee that the cancer will not return simply because the cause was not studied.

"Cancer" is a frightening word. The one we use is "cell deterioration." This explains the process in the body more clearly than the word, "cancer."

Sometimes, during an operation for a tumor, blood spills over into the rest of the body. This blood contains some of the tumor cells. The doctors sometimes say, "Oh, the body will take care of those." Mendelsohn suggests that surgery would be unnecessary if the body could take care of the cells by itself.

The medical alternative to cancer surgery, chemotherapy, presents side effects that sound like horrors out of an old Frankenstein movie.

Our program, "The Incurables ([Dr. John R. Christophers "Incurables Program"](#))," is a safe, nontoxic method to restore health and strength. It is not as easy as surgery, however, it involves retraining the little tyrants known as the tastebuds.

Remember the old Biblical statement from the Old Testament, "If the eye offends you, pluck it out!" This phrase seems to be the general rule in most allopathic treatment from tumors to tonsils. We now view the old medical practice of bloodletting (to let out the bad blood) to be primitive.

How much more primitive it is to exclude an entire organ from the body as punishment for its diseased condition. An automobile will not function without a carburetor. A faulty carburetor can be replaced, rebuilt, or cleaned out and the car will run again. The design of the auto makes it necessary for each part of the engine to be integral. Parts cannot expect to be ripped out of the system and still have good driving possibilities. Every human organ is functional and contributes to the smooth operation of the entire organism. It's erroneous to think that removal of an organ is standard procedure. Surgery is no replacement for cleansing and rebuilding the body. We need to work with Nature instead of trying to second guess it. [NL 4-2]

### Testimonials

1. Garden Carrot: Dr. Loretta Foote was one of the sweetest women we ever knew; and all she did was try to help people. She was an herbalist, and when we had our offices on 1st South in Salt Lake City, she was on our staff as the obstetrician. She was a woman that delivered thousands of babies and most of them were delivered in the home; in fact, our five were delivered in our home by natural childbirth, assisted by Dr. Loretta Foote. Dr. Foote had a friend, and a very prominent lady of Salt Lake (most people would know the name were mentioned), who was told by her doctors that she was dying of cancer, and this was before the days of the juicers. Dr. Foote grated carrots for her with the old "knuckle-skinner" (grater) and squeezed out the juice by hand with cloths, until she would get a quart or so every day (and sometimes 2-3 times per day), so you can imagine how much dedicated effort that this took. Dr. Foote fed this to her friend, and she was completely cured, to the astonishment of the doctors. This prominent lady later wrote a booklet on how she was healed of cancer, and we have one of the very, very few of those left in existence. Then this fine lady sponsored Dr. Foote in a health store, the first health store in America, and they went broke! So this appreciative lady said, "They don't want us here; let's go to the coast." Many of you have been to the coast and have seen the many, many juice bars, health stores--well, these two great ladies started the first health store and juice bar on the coast, the first ones that were successful in the United States. And these started to gain in popularity. Later Dr. Foote returned to Salt Lake City and started another health food store, and this time it was a success. Here is a wonderful pioneer lady who did wonders with the juice of our common garden carrot! [SNH p.266]

2. Spider Cancer Drops Out of Woman's Body: Sometimes it takes time and patience for these herbal aids to truly work. For example, a lady who had come to Dr. Christopher began the full routine as described above. A number of months later she began to think, "Look, I have been on that program for months now; I have taken the herbs orally; I've used the vaginal bolus [V.B.], including the yellow dock combination, and I am getting sick of this!" She felt somewhat better but didn't notice much change, so she was going to quit that day. That very morning she made the decision, as she was at home, sitting on the toilet. When she got up, she happened to turn around and glance into the bowl, and there was something about the size of a half dollar, with legs on it, swimming around in the water. This something had dropped out of her! She screamed, and her husband came in. They put it in a bottle and took it right over to the family doctor. He examined it under the microscope, and said he had never seen one of these whole like this, because they have to cut them out of a person. This was a spider cancer. They never give up and leave by themselves; usually they must be cut out. The doctor was amazed that it had come out of her. It had done so because her body was now so healthy that the spider cancer didn't have any waste materials to work on. When she saw that cancer, she vowed to continue the program, even if it took six months or years. Dr. Christopher reminded us that some people heal quickly, but sometimes it takes a long time. If we know we are on the right track, we should just continue. [EWH p.17]

3. One Armed Woman Delivers Own Baby After Being Cured of Cancer: Long before home birth became as accepted as it is today, Dr. Christopher was advocating it; he and his wife had all five of their children at home. A very dramatic example: One lady came to Dr. Christopher's office in Orem with a severe case of cancer. Parts of her body had been cut out; she had lost one arm--her right arm, which was particularly sad because she was an artist. However, she decided that she was going to fight the cancer naturally, and came to Christopher's to learn to be an herbalist. She planned to learn to use her left hand for her art, and she learned iridology and reflexology. She did some art work for Dr. Christopher's charts and books, and was learning to use her left hand very

well. But the doctors had told her that she should never get pregnant, because there was cancer all through her body, which would kill both her and the baby. One day, however, she decided that she wanted another baby; she already had three or four children, but she wanted another. She had been in the cleansing program and mucusless diet for some time, and had become stronger. She conceived, the baby developed, and the herb class watched her with admiration. One day of class, a bad snowstorm came up, and through the swirling snow came this lady. She said that she had to come this morning and show them what she had. She threw back her shawl, showing one of the most beautiful babies Dr. Christopher had seen. She had birthed it the night before. She had delivered the baby herself, with one hand, and didn't bother her husband, although when it came time to tie and cut the cord, she had to wake him for help. Dr. Christopher considered this most unusual, for a woman who had had cancer and suffered all the operations that she had, and yet here she had delivered her own baby at home. [EWH p.52]

4. Woman Cures Her Cancer with Fruits, Vegetables and Nuts: So many people feel that if they have cancer, there is nothing to do but wait and die. Dr. Christopher's program has proved otherwise. I personally have seen cases of diagnosed cancer that have been turned around and the patient become completely well, by faithfully following Dr. Christopher's program.

He had an interesting experience on an airplane. He boarded in Salt Lake City, had buckled up, and was ready to enjoy a little free time on the plane, reading, studying and meditating. A lady sat down beside him. As the plane took off, she began to talk.

"Hello, where are you going?"

To Toronto, Canada," he replied.

"Why?"

"I lecture, and will be lecturing there."

"What do you lecture on?"

Dr Christopher could see that he wouldn't be getting much quiet meditation, and began to feel a little irritated, but he answered that he was an herb doctor, lecturing on healing the body.

"Isn't that interesting?" she responded, and began to tell him her story. She said that two years before she had had pains in her breasts, so bad that she went to the doctor. She had severe cancer of the breast, so the physician took her right to the hospital, and when she came out she had only one breast. They assured her that he had cleaned out the cancer very thoroughly, but six months later her other breast started hurting. It got so severe that she again went to the doctor, who said that he must have missed some of the cancer, so he rushed her to the hospital and they removed her second breast. She went home with the assurance that this would be it, no more problems. But within six months, she was having abdominal pains; in her organs and lower cavities, she was in terrible pain. When she was examined, the doctor told her that she would have to have her reproductive organs removed and part of her bowels, because the cancer had spread throughout her body. She said that she wouldn't let them do any more cutting on her. They suggested chemotherapy, but she wouldn't allow that either. She said that if she was going to die, she didn't want to be in pieces. She would die on her own. She went home, not knowing where to turn, knowing nothing about diet, medicine, or anything. She said she knelt down and prayed, and the answer came to her. Did the Doctor want to know what it was?

By this time, Dr. Christopher was all ears, and yes, of course, he very much wanted to know what it was!

She changed her diet to eat fruits and vegetables, grains and seeds, as much as possible raw. A few months went by and she was feeling better, like a different person entirely. She went back to the doctor, who claimed that she had improved amazingly. There was just a little cancer showing in her pap smear. The doctor said to wait and see what happened. She went back home, and in a few months on this diet of natural foods, she said even the pap smear cleared.

The thought went through Dr. Christopher, "Lord, what kind of a God are you? It takes me forty years, and this woman kneels down and the answer comes immediately to her! This is exactly what I've been teaching all these years, and learning it gradually."

This woman traveled all over the United States, speaking to women's groups, women who fear they might get cancer or women who already have it, telling them to go to live foods and change their diet.

Dr. Christopher felt that their conversation was time well spent! [EWH p.118]

5. Vertebrae Grow Back With [BF & C](#): One lady had bone cancer. Her cancerous condition had gone throughout her whole body, but had settled in the bone, and one-and-a-half vertebrae were completely gone. The bone in her body was disintegrated to a point that she could not sit up or walk around anymore; she had to lie in bed. The X-rays showed that the vertebrae above and below the lumbar area were perforated with cancer, so they couldn't even fuse the missing vertebrae to give her support. She had to lie in bed helpless with her little children running around, and a lady coming in the home to help as much as she could.

This lady also had to manage a china shop in Provo, Utah, so she couldn't spend all of her time helping in that home. She called one day, and told Dr. Christopher about the situation. The woman, she said, was just lying in bed waiting for the rest of her spine to deteriorate. Could the Doctor help at all?

He replied that if this woman would follow instructions, there could be some help. The herbs would do nothing but good, and if the woman followed the program in the right frame of mind, she could be healed.

She was started in the [Incurables program](#). The lady had to clear her bowels with the lower bowel formula [[Fen LB](#)], and take the red clover combination to clean her bloodstream. She had to switch from mucus-forming foods to the mucusless diet, and to go on the three-day cleanse every two weeks, in her case. She had to use a gallon of steam-distilled water each day.

Now that the basic body condition was improving, they concentrated on the spine. Before Dr. Christopher came upon the [BF & C](#) formula, he used comfrey paste for external applications (and this paste, comprised of wheat germ oil and honey in equal parts, blended thoroughly and combined with powdered comfrey root or leaf to make a paste, is still super for use on burns, wounds, etc.). They put this paste down the lady's spine, from the medulla at the base of the skull down to the bottom of the tailbone, about four or five inches wide, with flannel over this and plastic over the flannel to keep it from saturating the bed. This was applied each night, six nights a week, week after week--and it took a lot of patience. Many people have gone through this procedure for curvature of the spine, arthritis of the spine, and various ailments, with great success. This woman followed through, and in under six months the back was feeling so good that she went back to her osteopathic physician for an X-ray. He said that originally where the bone had been eaten away--that was one and-a-half vertebrae--the good Lord had healed her. Cartilage had come in and formed perfect vertebrae and a half to replace the eaten-away ones--not bone, but cartilage. It gave her enough support that she could get up and take care of her family. At the end of the year, the cartilage had turned to bone, and she had a perfect spine from the top to the very bottom. All that had been perforated formed back solid, and the X-ray showed a spine as good as a teenager's. The physician was astounded! This case proved that even cancer of the bone can be healed with the proper program. [EWH p.120]

6. Natural Juices to Prevent Cancer: Although many women feel obliged to check their breasts regularly for lumps, and to have X-rays if they suspect anything might be wrong, this approach sometimes can present more problems than help. During 1977, at least 100 women lost breasts unnecessarily because they had been misdiagnosed for breast cancer. Sometimes a cell may appear cancerous under the microscope but behave like a benign tumor. And women who undergo radical mastectomy do not have a better survival rate from cancer than those who have less than radical surgery.

From a natural point of view, cutting out the cancer does not solve the problem, anyway. Cancer appears because there is something basically wrong in the body. Cutting it out may stop it in that particular area for the time being, but it can and does appear somewhere else.

Far better to follow Dr. Christopher's three-day cleanse, mucusless diet, and herbal formulas, such as his red clover combination. Of particular importance is his liver and gall formula, because a healthy liver plays such an active role in combating cancer.

Incidentally, many assert that prolonged breastfeeding helps prevent breast cancer.

Other herbs used to combat cancer are calendula, red clover, wheat grass juice, soaked figs and fig juice, blue violet, parsley, poke root, buckthorn, yellow dock, soaked and ground apricot pits (with their fruit), flaxseed, garlic, chaparral, burdock root, licorice root, echinacea, pau d'arco.

Many have had excellent results taking regular doses of carrot juice, perhaps mixed with celery

and red beet juice. Exercise is paramount to recovery and swimming is indicated as the best exercise for diminishing cancer in the breast. [EWH p.122]

7. **Man Cures Cancer with Carrot, Celery and Grape Juice:** A man at eighty years old was diagnosed with cancer throughout his body. The family gave him carrot and celery juice along with the blood cleansing formula [[Red Clover Combination](#)] in capsule form. They would alternate the carrot and celery juice with grape juice. In four months' time the doctors could not find any cancer cells. They didn't believe it was the same man. [UW-Red Clover]

8. **[Black Ointment](#):** Dr. Christopher's Black Ointment: From a letter to Dr. Christopher. "We have used your Black Ointment with great results--I had skin cancer on my forehead--in six weeks it healed up Beautifully." [NL 2-12]

9. **Comfrey:** Dr. Charles MacAllister, M.D., was interested in the use of comfrey as a healing agent. He had written a paper in the 1896 edition of the British Surgical Journal, Lancet. In it, he gave his philosophy concerning the bloodstream and irregular cell growth. Dr. MacAllister wanted to look up his paper and noticed an article in the same issue by a Professor William Thompson, President of the Royal College of Surgeons in Ireland. Thompson recorded a case of a man who had been diagnosed as having a malignant tumor on his face. The patient had undergone surgery of the palate in an attempt to remove the cancer.

A month later, the cancer returned. This time it ran rampant throughout the patient's head. They gave up on cutting it out. It had gone too far, and they sent him home. Three months later he returned to Thompson's office and was examined. Thompson noted that the cancer had completely disappeared. The patient told Dr. Thompson that he had been applying comfrey poultices to the swelling and that it had gradually disappeared. The patient had a custom-made palate to fill in the hole left by surgery of the hard palate. Thompson states in the report that although he knows nothing of the use of comfrey, he does not believe that it would remove a sarcomatous tumor. This story goes on in detail about what MacAllister learned about comfrey. [NL 4-3]

10. **[Black Ointment](#):** From a letter to Dr. Christopher: A few years ago, about 2, I wrote to tell you that I used the black ointment for skin cancer and got perfect results. The Hershey Medical Center doctor wanted to refer me to a Skin Cancer Specialist, but I told him I was going to try the home remedy that an Herbalist Doctor recommended. Needless to say, he was persistent, and wanted me to go to the Specialist, but I was also persistent and told him it was my body and I would try the remedy you recommended, first. Praise the Lord-in 6 weeks it was all cleared up and that was over 2 years ago. My husband is presently using the Black Ointment on his nose for Skin Cancer. [NL 4-7]

#### See Also

[Black Ointment](#): Dr. Christopher's Black Ointment

[CMM](#): Dr. Christopher's Healing Ointment

[Red Clover Combination](#): Dr. Christopher's Blood Purifying Formula

[Yellow Dock Combination](#): Dr. Christopher's Yellow Dock Combination

[Dr. John R. Christophers "Three Day Cleansing Program"](#)

[Dr. John R. Christophers "Mucusless Diet"](#)

[Dr. John R. Christophers "Incurables Program"](#)

[Tumors](#)

Newsletter "Cell Deterioration"

Newsletter "Chaparral: The Governor's Herb"



## Canker Sores

### Definition

Ulceration, chiefly of the mouth and lips; aphthous stomatitis. [HHH p.47]

### Symptoms

Painful sores on cheeks (inner), lips, etc. [HHH p.47]

### Cause

Canker is a condition not only in the mouth, but all through the entire system. This is a toxic condition, and the sooner cleared the better. [HHH p.48]

### Herbal Aids

Dr. Thomason's Canker Remedy: See formula using bayberry, white pond lily and pinus. [SNH p.133]

Canker sores: See formula using red raspberry leaves, shavegrass and agrimony. [SNH p.143]

Relaxed Sore Throat, Canker in Mouth or Throat, Spongy Gums, etc.: See formula using raspberry leaves and bayberry. [SNH p.149]

Sumach: Mouth affections (sores, canker), spongy gums: Use the infusion of berries as a mouth rinse. [SNH p.158]

Children: Keep the child on juices, distilled water and red raspberry-leaf tea for three days (the child will not starve), and you will see the general improvement of the condition. If the child wants more to eat, give him comfrey green drink, slippery elm bark tea, or marshmallow root tea. So there will be no recurrence, keep the child on a mucusless diet and keep the bowels clean and free moving. [HHH p.48]

White Pond Lily: Sore eyes and canker sores have benefited from being bathed frequently in a brew of the herb. Be sure to make it with distilled water for this purpose. [UW-White Pond Lily]

### See Also

[CSR](#): Dr. Christopher's Cold Sore Remedy

[Dr. John R. Christophers "Mucusless Diet"](#)

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## Chicken Pox

### Definition

Chicken pox is an acute contagious disease of childhood. [HHH p.49]

### Symptoms

Chicken pox is marked by a slight fever, characterized by a superficial eruption of macular transparent vesicles appearing in successive crops on different parts of the body. They rarely become pustular, but dry up, and are only occasionally followed by scars. The duration of the disease is about a week, during which time it usually runs a very mild course. The chicken pox virus propagates in a medium of excess mucus. In the absence of such medium (mucus from excessive starches and sugars, etc.), the virus cannot exist. [HHH p.49]

### Cause

Actually as long as the child has been exposed, the condition is there. A good break-out of chicken pox (as with most childhood diseases) is a blessing. This is the indication that the body has toxic materials in it that must be removed. [HHH p.49]

### Herbal Aids

Tansy: Use the infusion or decoction as a wash, etc. [SNH p.123] Infusion of tansy: See formula using tansy and distilled water. [SNH p.124]

Natural Cleansing of the Body: It is alarming to hear a mother say, "When my child was breaking out with chicken pox (measles, or some other childhood disease), he was given some suppressive medication, and only two or three small spots broke out on his body." Here, unknowingly, the parents have gone against nature's procedure for cleaning out the toxins of the body. They have locked in the harmful condition, which may give the body trouble, perhaps many years later. [HHH p.21]

General Instructions: Give the child a warm catnip tea enema. Herbal teas such as catnip and peppermint, pleurisy root and catnip, red raspberry leaf, and yarrow or pennyroyal, elder flowers and peppermint with vinegar and water will relieve the itching. Also, bathe or sponge skin with tea made of burdock root, golden seal and yellow dock root in case of severe itching. [HHH p.50]

More General Instructions: The proper program is to cleanse the body and to follow the program of moist heat and bring out a good showing of the pox. Use the following instruction for all types of high fever diseases. (See aids to fevers and their causes, Appendix D.) [HHH p.170] If the child is slow in breaking out, give him a good hot (warm) bath. Have him drink lots of liquids throughout the day--fruit and vegetable juices, lemonade sweetened with honey (no sugars), and fruits. If this program is followed, the disease should follow a mild course with little discomfort. [HHH p.50]

Skin Eruptions: When rashes and pus eruptions of disease break out on the body, do not stop them. This is poison in the body that should be released. Keeping the skin from breaking out is again defeating nature's efforts for a complete healing and housecleaning. The larger the breakout of rashes (chicken pox, measles, etc.) the better off the child! If the body is in a fairly clean condition and you follow these suggestions of natural therapy you may see that the rash is not as heavy as you might expect--because there was not that amount of toxic waste to eliminate. In other cases the body can be well covered with the dermal or dermatitis breakout. There is nothing

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to fear as long as you are willing to work with nature. [There is much more information about skin eruptions in the appendix on p. 174.] [HHH p.174]

Yarrow: If you give the tea to children during the early stages of eruptive diseases, such as measles, chicken pox, smallpox, etc., the tea will help the disease to break out more quickly and thus shorten the time. Dr. Christopher recommended a mixture of Yarrow, pleurisy root and lady's slipper (or skullcap) for the measles. Anytime there is a fever, no matter what the disease, Yarrow can help break it and bring the disease to a speedier ending. [UW-Yarrow]

Vinegar: A child suffering from the itch of chicken pox or measles can be sponged with a solution of 1/2 apple cider vinegar and 1/2 distilled water. [NL 4-7]

**See Also**

[Itch](#)

- [Depression](#)
- [Diabetes](#)
- [Diarrhea](#)
- [Digestion](#)
- [Diphtheria](#)
- [Dizziness](#)
- [Dropsy](#)
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## Cholera Morbus

### Definition

A serious bacterial infection of the small intestine.

### Symptoms

An acute, infectious affliction characterized by profuse, purging evacuations, vomiting, prostrating collapse, muscular cramps and suppression of the urine. Symptoms develop rapidly and become dangerous in six to twelve hours. Children may be restless and go into stupor or have convulsions. [SNH p.9]

### Cause

Cholera is a deficiency condition from improper diet, unsanitary conditions, and often occurs in hot weather. As future foreboding problem conditions continue to afflict our society there will be more epidemics, so we must be prepared to handle cholera. The only way to avoid this deadly killer is to build up the body so that the cholera organisms will not effect the system. [SNH p.9]

### Herbal Aids

Rice Water will check the diarrhea as will peach leaves, raspberry leaves, and sunflower leaves. A warm bayberry and catnip enema is very soothing. Antispasmodic tincture is soothing and relaxing and the slippery elm tea is nutritional and cleansing. [SNH p.9]

Cholera, Fevers: See formula using purple loosestrife and ginger. [SNH p.92]

Tormentil: for cholera give 1 wine glassful every 1/2 hour until the excessive discharges are checked. [SNH p.168]

Peppermint Enema. This form of administration is excellent for cholera, colon problems, and for convulsions and spasms in children. [SNH p.418]

See formula using cloves and milk. [SNH p.421]

See formula using black pepper, sea salt and apple cider vinegar. [SNH p.425]

Lemon-Grass (cymbopogon): Citral is the principle constituent of lemon-grass oil. This substance kills even the most acute influenza viruses and for fever-induced diseases it is unparalleled, and has also become renowned for quickly treating cholera. [NL 5-1]

### See Also

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture

[Depression](#)

[Diabetes](#)

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[Digestion](#)

[Diphtheria](#)

[Dizziness](#)

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## Cholesterol

### Definition

A monohydric alcohol found in the body as a glistening white, crystalline substance. It is insoluble in water and found in bile, gall stones, and nerve tissue. [SNH p.9]

### Cause

This is a mucus condition stemming from improper foods. [SNH p.9]

### Herbal Aids

**Diet:** The diet must be changed. Herbs that reduce cholesterol will help but not correct the condition. Apple cider vinegar and honey, cayenne, or any of the cleansing herbs are good. [SNH p.9]

**Wheat Germ Oil:** is excellent for feeding the heart and helps cut the cholesterol and smoothens its removal from the area. [SNH p.31]

**Balm of Gilead:** For cholesterol use the Oleo-resin of balm of Gilead buds: See formula using balm of Gilead buds and olive oil. [SNH p.202]

**[Red Clover Combination](#):** Dr. Christopher's Blood Purifying Formula: This herbal blood rebuilder is made up of herbs that help cleanse the blood, but also herbs that help give astringency, others help aid in removing cholesterol, help kill infection, or help build elasticity in the veins and to strengthen the vein and artery walls. It consists of red clover blossoms, chaparral, licorice root, poke root, peach bark, Oregon grape root, stillingia, prickly ash bark, burdock root, buckthorn bark, cascara sagrada and sarsaparilla. [SNH p.182]

**Lecithin:** helps break down cholesterol, as does natural-source vitamin C. [EWH p.157]

**Alfalfa:** Alfalfa, along with other foods, is known to help remove cholesterol from the system. [UW-Alfalfa]

**Garlic:** It has been known for centuries to function as a natural antibiotic. It destroys the unnecessary and harmful bacteria throughout the human system. It help emulsifies cholesterol and loosens it from arterial walls. [NL 2-9]

**Tomatoes:** contain nicotinic acid which helps reduce cholesterol in the blood. [NL 5-1]

### See Also

**[Red Clover Combination](#):** Dr. Christopher's Blood Purifying Formula

**[Dr. John R. Christophers "Mucusless Diet"](#)**

**[2-9:](#)** Garlic: Man's Best Friend in a Toxic World

**[Blood Pressure](#)**

[Depression](#)

[Diabetes](#)

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## Colds, Catarrh, Coryza, Influenza

### Definition

A cold is a disorder in the respiratory tract resulting from exposure, with catarrh and invasion of microbial cleansers. [HHH p.53]

### Symptoms

Common cold, coryza, cold in the head, etc., these symptoms are evidenced by an inflammation of the upper respiratory tract, marked by an acute catarrhal condition of the nasal mucous membrane, a slight rise in the temperature, chilly sensations and general indisposition. [HHH p.53]

### Cause

It is caused by viral or bacterial infection feeding on excessive or copious secretions of mucus (waste materials) often due to the body's inability to properly assimilate milk and concentrated starches. When a cold or fever just gets started, it can be cleared up very easily, if the procedures are started early, before it becomes too advanced. [HHH p.53]

### Herbal Aids

[Burdock](#): To help promote perspiration (diaphoresis) in colds and fevers: Double the dose in hot water, adding 1/8 - 1/4 teaspoon of ginger (*Zingiber officinale*) to each teacupful. [SNH p.65]

[Sarsaparilla](#): As a diaphoretic for colds and fevers. Drink the decoction or compound decoction hot. [SNH p.84]

[Garlic](#): At the onset, place a clove of garlic on each side of the mouth between the teeth and cheek. The cold will disappear within a few hours or within a day. [SNH p.100]

[Tansy](#): For low fevers, ague, colds. Take small and frequent dosages of the warm infusion. [SNH p.123]

[Bayberry](#): Colds, flu, fever, etc. Use bayberry in combination with diaphoretics (yarrows, catnip, peppermint, sage, etc.); it is very effective here. [SNH p.132]

See formula for colds using bayberry, pinus bark, ginger, cayenne and cloves. [SNH p.133]

[Diaphoretics](#): The old herbal practitioners were wonderfully successful in their practice because they sought to restore the circulation to its equilibrium. It was they who made the vapor bath famous, for along with herbal diaphoretics there is nothing more effective than the vapor bath in the treatment of fevers, inflammation, colds, congestions, etc. [SNH p.211]

[Yarrow](#): Taken freely in the hot infusion form at the beginning of a cold, alone or preferably in combination with other herbal remedies (such as elder flowers and peppermint), it will help break up a cold overnight or within 24 hours; wrap the patients feet in flannel that has been wrung out in apple cider vinegar, keeping it warm with a hot water bottle. [SNH p.214]

[Camomile](#): Give a warm infusion with a little ginger (*Zingiber officinale*) added. [SNH p.219]

[Boneset](#): Influenza, colds, fevers, etc. Give the patient 1/2-1 teacupful hot, every hour until freely perspiring and the fever begins to subside- then give in smaller dose as a tonic (cold) every

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2-3 hours and keep closely-covered in bed 24-48 hours until all signs of the fever are gone. [SNH p.225]

See formula for colds and pneumonia using pennyroyal and elder flowers. [SNH p.285]

Blue Cohosh: Recent colds (children). Give 1 dessert spoonful - 1 tablespoonful of the infusion in 1/2 teacupful of sweetened hot water, while closely covered in bed, if the first dose does not produce free perspiration within an hour, repeat hourly until it is produced. [SNH p.292]

Motherwort: for influenza, severe colds, low fevers: Give 2 tablespoonfuls in 1/2 pint of boiling hot water (or as hot as can be taken), watch for beads of perspiration to appear on the forehead within 1 hour; if they do not, repeat the dose until the patient is perspiring freely (this is a specific and effective cure). [SNH p.299]

See formula for colds using mullein, boneset, pennyroyal, hops, chestnut leaves, catnip, cudweed, wintergreen, peppermint, bloodroot and coltsfoot. [SNH p.319]

Horehound: Children's cough, croup, and chest colds. Make a syrup of the infusion (or concentrate, etc.) and honey (as much as desired) or take the warm infusion freely. [SNH p.347]

[Garlic and Rosehips](#): These capsules are to act as an aid, to assist in relieving colds, etc., or wherever garlic aid in relieving infection can be used as an aid. These are made up of garlic with parsley, watercress, rosemary, and rosehips. The adult amount to be used can vary from one to six or more as needed several times in a day. [SNH p.528]

Dr. Christopher's Program for Colds etc. Especially for Children: One of the most simple remedies is to stop the use of all foods and beverages, take a high herbal enema (catnip is good), and drink only red raspberry leaf tea. Between cups of this tea, distilled water may be used, and, if desired, give the child some good organic (natural) vitamin C. It is possible to use quarts of red raspberry tea during the day and nothing else. For children, use according to age. The runny nose, fever, headache and weariness will leave and you will feel like a new person. Even after feeling greatly improved, continue on with the red raspberry leaf tea all that day and well into the next day. If an adult would stay on the tea for three days it would do a wonderful cleaning job for the body.

To make red raspberry leaf tea use one heaping teaspoonful of cut or granulated (powdered) raspberry leaves into a teacup. Fill the cup with boiling distilled water, cover and let stand in a warm place for five or ten minutes. Strain, and drink it while it is very warm.

Another simple procedure: If you feel a cold or flu coming on in the evening, use boneset tea ). This herb is a nervine stimulant, tonic, diaphoretic, diuretic, and in large doses, emetic, aperient. Here is another wonderful remedy for breaking a chill in intermittent fever (so-called break-bone fever), muscular rheumatism, bronchitis, influenza, dyspepsia, sore throat, etc.

To use boneset tea take one ounce of cut boneset herb and over it pour 1 1/4 pints of boiling distilled water. Cover and set in a hot place to steep (not boil) for thirty minutes.

As one of our favorite teachers, Dr. Shook, expressed it: In our long experience with herbs, we have learned an important fact and that is that if the American Indian approves of an herb, we can be sure that it has outstanding merit. The Indians knew all about influenza, and some of their people were stricken with it long before the great world war. But it was then not called "influenza," but "break-bone fever" because the pain attending it produced the sensation of breaking bones, probably because of the unbearable tension and contraction of ligaments which, when temporarily relaxed in clonic (convulsive) spasms, produced the sensation that the bones were breaking.

We explain this because boneset immediately relieves that clonus and sets and rests the bones. Therefore it is a superb remedy for not only "break-bone fever," but also for every other kind of fever man is subject to. In all cases of influenza, severe colds, chills and fever, the patient must be in bed warmly covered, and hot drinks of the infusion of boneset given in one half teacupful doses every half hour until a copious perspiration sets in. If it produces vomiting at first, so much the better. In that case wait until vomiting has completely subsided, then proceed until free perspiration is produced.

We have never known this herb to fail to overcome influenza and we are of the opinion that there would never be another death from this disease if boneset were at hand and freely used.

Another great flu remedy: For the treatment of fevers of all kinds, colds, and influenza, this

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remedy of elder flower and peppermint leaves is a safe, sure and speedy remedy. Aside from being anti-febrile, elder is an all around alterative, blood purifier and general systemic cleanser. [HHH p.53]

The great herbalist, Henry Box of Plymouth, England, says: For colds, influenza, fevers, inflammation of the brain, pneumonia (inflammation of the lungs), stomach, bowels or any part, this is a certain cure. I have never known it to fail, even when given up, and at the point of death. It will not only save at the eleventh hour, but at the last minute of that hour. Besides, it is so safe and harmless that you cannot use it amiss. This wonderful, wise old man had been a physician of herbs for over sixty years and was known as one of the great doctors of all times. See preparation of elder and peppermint tea. [HHH p.57]

[Garlic, Rosehips, and Parsley](#): Dr. Christopher's Formula for Colds, Flu and Infections: This combination of garlic, parsley, watercress, rosemary, and rosehips is to act as an aid to help promote the relief of colds, etc., or wherever garlic is needed to help stop infection! The adult amount can vary from one to six or more cups in a day or two or more capsules six or more times per day taken with a cup of steam-distilled water. [HHH p.188]

[Herbal Composition](#): Dr. Christopher's Herbal Composition Power: Herbal composition powder is made of bayberry bark, cloves, ginger root, cayenne and white poplar bark. As Dr. Nowell, our instructor at the Dominion Herbal College, Let. of Vancouver, British Columbia gave in our textbook, quote: "We have made and used composition powder for over forty years. When we state we regularly mixed it in batches of sixty pounds the student will readily see that we have had at least some experience with it. As a remedy in colds, beginning of fevers, flu, hoarseness, sluggish circulation, colic, cramps, etc. We believe it has done more good than any other single preparation ever known to man. If this compound were kept in every home, and used as the occasion arose, there would be far less sickness. Give it freely in your practice and your patient will bless you. Look over the ingredients, and consider how it will clear canker, ease cramps and pains in the stomach and bowels, raise the heat of the body equalizing the circulation, and remove congestions. It is safe. It is effective. We have on numberless occasions given a cup of composition tea every hour as warm as the patient could drink it, until the patient has perspired freely, and after four or five doses have seen our patient in a free perspiration, thereby removing colds and febrile trouble." [HHH p.189]

Juices for Colds: Carrot & garlic, carrot, grapefruit, lemon. [NL 3-7]

Vegetables for Colds: Carrots, broccoli, brussels sprouts, cauliflower, collards, kale, spinach, turnip greens. [NL 4-12]

Apples: Research has proven daily apple-eaters show a reduced incidence of colds and other minor upper respiratory ailments. [NL 5-1]

Grapefruit: Grapefruit rinds can be dried and later used for colds. A tea is made by steeping a teaspoonful of the dried grated rind in a cup of water and drinking a cup each hour until relief is obtained. [NL 5-1]

Ginger: Ginger tea is commonly used for indigestion, cramps, and nausea. One ounce of the fresh root is grated into a pint of boiling water. You can add honey and lemon to this to make quite a nice drink; this also helps break up colds and flu. [NL 7-3]

### See Also

[Garlic, Rosehips, and Parsley](#): Dr. Christopher's Formula for Colds, Flu and Infections

[Herbal Composition](#): Dr. Christopher's Herbal Composition Power

[Nose Ointment](#): Dr. Christopher's Nose Ointment

[2-9](#): Garlic: Man's Best Friend in a Toxic World

Colds, Flu and Related Nuisances Newsletter

## Cold Sore

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See [Canker Sores](#).

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## Colic

### Definition

(Pertaining to the colon) Acute abdominal pain or gas pains, often due to improper combination of food and retention of waste matter in the system. Enemas will usually give immediate (if temporary) relief! [HHH p.50]

### Symptoms

Paroxysmal abdominal pain due to smooth-muscle spasm, obstruction by calculi, nervous indigestion, or distention or enlargement of any of the hollow viscera. [SNH p.10]

### Cause

In all cases, this is due to improper diet, digestive disorder, and poor elimination. [SNH p.10]

For a more through discussion of colic in very small children see Every Woman's Herbal. [EWH p.99]

### Herbal Aids

**NOTE: THIS IS NOT JUST THE COLIC ASSOCIATED WITH BABIES. MANY OF THE FOLLOWING FORMULAS ARE MEANT FOR ADULTS AND ARE GIVEN IN ADULT DOSES.**

General Instructions: Wild yam, cramp bark, some nervines and antispasmodic tinctures relieve cramping. The bowels should be cleansed with a catnip injection. Hot bran fomentation over the stomach-abdominal area will give ease and comfort. For gassy colic, the following decoction is excellent; dandelion root, fennel seeds, marshmallow root, sweet flag root (with cayenne and ginger added as stimulant carriers). For bilious colic, use a decoction in equal parts of agrimony, barberry bark, centaury, dandelion root, or an infusion of a handful of fresh parsley will decoction in equal parts of agrimony, barberry bark, centaury, dandelion root, or an infusion of a handful of fresh parsley will do the job. [SNH p.10]

See Dr. Coffin's Formula for Colic with Stoppage of the Bowels using raspberry leaf, lobelia, cayenne, myrrh, valerian and sugar. [SNH p.144]

Ground Ivy: Lead-colic (from painting). Drink the infusion of the leaves. [SNH p.160]

See formula for colic using camomile, caraway, valerian and peppermint. [SNH p.220]

Boneset: Bilious colic. Give 1 wine glassful (warm) every 1/2 hour until vomiting results; then, after 1/2 hour give a small dose as a tonic (cold), and every 2-3 hours thereafter. [SNH p.225]

See formula for babies and children for colic (as an injection) using catnip and pleurisy root. [SNH p.237]

See formula for colic flatulence using spearmint and ginger which will intensify and accelerate the action. [SNH p.240]

See formula for a soothing syrup for babies (stomach and bowel pains, aches, cramps, colic, spasms, convulsions, flatulence and common ailments) using parsley seed, caraway seed, rhubarb, cinnamon, sugar, peppermint and water. [SNH p.248]

[Diabetes](#)

See formula for flatulent colic (stomach distension, rumbling bowels, griping pains, and constipation) using marshmallow, sweet flag, fennel, dandelion, cayenne, and ginger. [SNH p.328]

[Diarrhea](#)

See formula for Convulsions, hysteria, colic, cramps, and dysmenorrhea using valerian, wild yam, blue cohosh, anise and ginger. [SNH p.378]

[Digestion](#)

See formula for biliousness, nervous troubles, heartburn, stomach cramps, colic pains using wood betony, rosemary, scullcap and yarrow. [SNH p.390]

[Diphtheria](#)

See formula for colic, convulsions and spasmodic nerve troubles (children's syrup) using black cohosh, water, glycerine and sugar. [SNH p.400]

[Dizziness](#)

See formula for biliousness, colic using wild yam and pleurisy root. [SNH p.404]

[Dropsy](#)

See formula for bilious colic using bayberry, dandelion, agrimony, centaury, composition powder and cayenne. [SNH p.430]

[Dysentery](#)

See formula for colic and flatulence using myrrh, nutmeg, cayenne and brandy. [SNH p.456]

[Dyspepsia](#)

General Instructions for Children: A tea or tincture of catnip and fennel [[Catnip & Fennel Tincture](#)] is especially helpful for infants. As an infusion, a pint of boiling water (distilled preferred) over a handful of fresh parsley is good.

[Dyspnea](#)

A good formula for children's colic is equal parts of wild yam, pleurisy root, cinnamon and anise. Mix and use one teaspoon of the combined herbs to a cup of boiling water, cover and steep twenty minutes, strain and add honey, and give dose of one or two tablespoons of tea each fifteen minutes or as needed.

[Earaches](#)

[Herbal Composition](#): Dr. Christopher's Herbal Composition Power: Dosage: Drink the clear liquid as needed according to age. For example, only part of a teaspoon every hour or two for a very small child.

[Enuresis](#)

In addition to taking teas orally, give a rectal injection of teas, two ounces at a time, of catnip, catnip and pleurisy root, garden sage and catnip, or catnip and peppermint. It is an advantage to add three to ten drops of tincture of lobelia to the teas per cup and one-half teaspoon or more of the tincture of lobelia to the rectal injection. [HHH p.51]

[Epilepsy](#)

[Catnip & Fennel](#): Dr. Christopher's Catnip and Fennel Tincture: A blessing for infants. A fine combination for colic, biliousness, flatulence, spasms, etc. Use a few drops, or as much as needed, when desired. [HHH p.196]

[Eye Ailments](#)

Papaya and Peppermint: As an aid (after resolving to cut down on the wrong types of foods) start using papaya and/or peppermint tea. [Dr. Christopher's] Catnip and fennel tincture is also an emergency aid in colic and stomach upsets. [NL 3-1]

Juices for Colic: Carrot & celery, papaya. [NL 3-5]

Spices for Colic: Anise, caraway, cardamom, ginger, mint, savory and thyme. [NL 4-12]

Brown Rice: This contains an easily digested starch, is beneficial for stomach or intestinal ulcers and for the relief of diarrhea. A poultice of rice flour can be used to relieve skin inflammations of various kinds. We have seen serious cases of diarrhea respond most effectively to rice water made by boiling one ounce of rice to one quart of water for 20 minutes, strained and drunk. This drink is also used in cases of congestion, acute head pain, nausea, fainting, difficult breathing, stomach cramps, colic, worms, and a sedative. [NL 5-1]

Dr. Christopher's Formula called Kid-e-Col combats colic. [NL 7-1]

### See Also

[Catnip & Fennel](#): Dr. Christopher's Catnip and Fennel Tincture

[Herbal Composition](#): Dr. Christopher's Herbal Composition Power

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## Colitis (Colon Trouble)

### Definition

Inflammation of the colon or large intestine, especially its mucous membrane.

### Symptoms

This is characterized either by runny or constipated bowels, mucoid discharge from the bowel, weakness felt in the abdomen, often headache, pain, dizziness, etc. [SNH p.11]

There is often a connection between colitis and stress. We see diarrhea, pain, cramps, and even in the later stages, bleeding and dehydration. Calcium deficiency is common. [NL 4-8]

### Cause

This is caused by faulty diet, too many food mixtures irritating the stomach and bowels, hasty eating (insufficient mastication and saliva), taking liquids while eating, excessive use of cathartics, and foods cooked in aluminum. [SNH p.11]

The infection of the bowel which results from meat-eating also gives rise to colitis and causes a spastic or contracted condition of the descending colon, a condition found in the most obstinate forms of constipation. [HHH p.140]

### Herbal Aids

Garlic Oil for Chronic Colitis, Ulcerated Stomach, etc. Take the garlic oil internally over a period of time, 1 dessert spoonful 3-4 times daily. [SNH p.100]

See formula for cathartic injection for colitis using bayberry, African ginger and pinus. [SNH p.135]

See formula for colitis using white oak, golden seal and myrrh. [SNH p.140]

[CC](#): Dr. Christopher's Colitis Formula: Contains marshmallow, slippery elm, comfrey root, lobelia, ginger, wild yam. This formula helps promote the relief of colitis, and should be used in conjunction with the lower bowel formula [Fen LB] and the mucusless diet. [HHH p.197]

Slippery Elm: Many recommend beating up an egg with a teaspoonful of the powdered bark, pouring boiling milk over it and sweetening it. Taken three times a day this way or in the form of a mucilage it is said to be wonderful in curing gastritis, gastric catarrh, mucous colitis and enteritis. [UW-Slippery Elm]

From Questions to Dr. Christopher's Newsletter. Question: Is there a natural treatment for mucous colitis (spastic colon) where one could not eat raw vegetables or use laxatives? Answer: Colitis is an inflammation of the colon or large intestine and especially of its mucous membrane. This is characterized either by runny or constipated bowels, mucoid discharge from the bowel, weakness in the abdomen, recurrent headache, pain, dizziness, etc. The cause of this condition is a faulty diet, too many food mixtures which irritate the stomach and bowels, hasty eating with insufficient mastication and salivation, consuming excessive liquids with meals, overuse of cathartics and eating food prepared and served in aluminum kitchenware.

The best and quickest way to treat the condition is to reverse the habits listed above: (1) Eat only when hungry and not between times of hunger. (2) Drink no fluids while eating and this includes a period of fifteen to twenty minutes before meals and thirty minutes after eating. We suggest this

[Depression](#)[Diabetes](#)[Diarrhea](#)[Digestion](#)[Diphtheria](#)[Dizziness](#)[Dropsy](#)[Dysentery](#)[Dyspepsia](#)[Dyspnea](#)[Earaches](#)[Eczema](#)[Edema](#)[Enuresis](#)[Epilepsy](#)[Eye Ailments](#)

so that the chewing of food will produce a thin paste of liquid out of the food and natural saliva. The flowing saliva will act as a signal causing the digestive juices to start for better assimilation. (3) Follow the instructions given in The Three Day Cleanse and Mucusless Diet preferably using the carrot or apple juice as the cleansing agent. Chew the juices by swishing them around in the mouth. As suggested in the booklet, use as juice as is desired. (4) Each day have a cup, three times per day, of tea or green drink made up of three parts comfrey root or leaves, slippery elm bark, mullein leaves and one part lobelia. (5) Have a dish or more of gruel made with presoaked, low heated, uncooked grains, singly or grouped. Barley, wheat, rye, millet or buckwheat are all excellent choices. To one of the grains or a mixture of several of them add 1/4 or 1/3 of their volume in flaxseed and/or psyllium seed. When eating this gruel, honey or a fresh, first pressed, mild tasting olive oil may be used. (6) Breath deeply each day for ten minutes or more to aid digesting. (7) Use as much of our lower bowel tonic [Fen LB] as is needed to produce three or more bowel movements per day. Think health and watch the improvement. [NL 1-3]

Juices for Colitis: Carrot, carrot & coconut, pear, fig. [NL 3-5]

Cabbage: Apply 3 or 4 layers of cabbage leaves over the abdomen each evening and secure in place to be left on overnight. Drink also the juice between meals. [NL 4-12]

Vegetables for Colitis: Cabbage, carrots, parsnips, winter squash. [NL 4-12]

### Testimonials

It's been a long time since I have written you and I feel that I must tell you that I have gotten rid of the colitis I had for years and the doctors diagnosed as a nervous stomach and prescribed tranquilizers, which of course I didn't take. At that time I came across an article written by you, entitled, "Does Your Colon Feed or Poison You." I immediately started to take Red Clover Combination plus Naturalax 2 [Fen LB], it took about six months but it finally went. The pain was very bad but all I heard from doctors was "you have a nervous stomach." but I knew it had to be more than that. I thank GOD and you. Dr. Christopher for cure that I have had due to that wonderful pamphlet that came my way, just when I needed it most. [NL 4-11]

### See Also

[CC](#): Dr. Christopher's Colitis Formula

[Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula

[Red Clover Combination](#): Dr. Christopher's Blood Purifying Formula

[Dr. John R. Christophers "Three Day Cleansing Program"](#)

[Dr. John R. Christophers "Mucusless Diet"](#)

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## Constipation

### Definition

Over ninety percent of all diseases and malfunctions of children's bodies (as with adults) stem from the unclean intestinal tract, constipation (Latin constipatio meaning crowding together), with infrequent or difficult evacuation of the feces, retention of the feces, and lack of coordination in the nerve and muscle functions of the colon and bowel.

The [mucusless diet](#) will eventually clear the body of old fecal matter that has accumulated and become dehydrated and hard and cause so much trouble. Sometimes the body needs faster help than can be given with diet alone.

The body of man must be kept clean inside and out, to perform his daily tasks efficiently and smoothly. This body is the housing of the spirit and operating force of life. With the spirit commanding a good clean structure, a smother, happier life is evident. The scriptures tell us that God will not dwell in an unclean tabernacle. We have been told that the body is a temple, or tabernacle of God. This structure must be kept in good repair, and clean, to be a comfortable abode. [HHH p.128]

### Symptoms

1. A condition of peristaltic malfunction in the bowels wherein the fecal matter becomes condensed and compressed and the evacuations are infrequent and difficult. This condition is produced by our modern way of life--the eating of highly refined and demineralized foods instead of a plain and coarse diet, the strain and stress of rapid living, hastily eaten meals, and lack of exercise. When toxic waste matter is left to stagnate in the lower bowel tract, the system becomes polluted with poisonous gases which congest and irritate the surrounding organs, causing adhesions, and other ailments. A person should have bowel movements as often as regular meals are eaten. [SNH p.12]
2. Dizziness can be caused by constipation when pressure causes the nerves to become impinged. [SNH p.18]
3. Hives: The bowels must be cleared since the worse cases of hives can come from constipation. [SNH p.31]
4. Bronchitis: Constipation is one of the chief causes of the problem. [HHH p.42]
5. Diarrhea: It is the most severe form of constipation and should be dealt with immediately. [HHH p.63]
6. Headaches: Headaches can stem from several sources. Very common is the constipation headache, where compressed fecal matter presses on the nerves that affect the head. We have seen severe migraine headaches cured by taking a catnip enema. For longer-term relief, the lower bowel formula [Fen LB] can heal the bowel so that there is no constipation. [EWH p.146]

### Cause

1. The impurities accumulate with improper diet and living, and then when nature makes an increased effort to clear that wastage out, the dirty channel holds back the larger materials similar to the overgrowth and trash that can dam an irrigation ditch. [HHH p.131]
2. Meat also causes constipation through the fact that it encourages putrefaction of the colon both by introducing putrefactive organisms in great numbers and also by providing material which is best calculated to encourage the growth of putrefactive organisms in the colon. [HHH p.140]
3. Most persons who suffer from constipation habitually drink too little water. [HHH p.141]

4. Alcoholic beverages of all sorts tend to produce constipation, by causing chronic intestinal catarrh, ulcer of the stomach, and paralysis of the sympathetic nerves. [HHH p.146]

### Herbal Aids

Lower Bowel Tonics: ([Fen LB](#)) You may get quick, temporary relief by using an herbal laxative to clear the lower bowel tract, but only the lower bowel tonics will get at the cause. With the lower bowel tonic, we help feed the eliminative organs and allow them to work on their own and eventually eliminate the use of enemas, colonics, and laxatives. The proper procedure is to build up the body, to cleanse it, and see that the bowels work freely. Often prune juice or fruits will give relief and start the peristaltic motion coming again with ease. The afflicted person can assist in restoring natural bowel action by drinking copious amounts of water between meals (one-half hour before and two hours after eating) and by eating proper foods at regular intervals, especially bulky foods. Avoid any inorganic or concentrated foods. One should be wary of an incorrect use of laxatives and purgatives, because liquefied fecal matter is immediately absorbed by the intestinal villi into the bloodstream, and if there be excess, some of it will be thrown out of the bloodstream into the lungs, skin, kidneys, or other organs, producing a chronic toxemia thus laying the foundation for chronic disease. [SNH p.12]

Chronic Constipation: It is useful here to combine Oregon grape root (2 parts) with cascara sagrada (*Rhamnus purshiana*) (1/2 part). Take in doses of two fluid ounces, but if this relaxes the bowels too much, reduce the dose, but take regularly. [SNH p.73]

See formula for constipation using raspberry leaves, mountain flax and dandelion root. [SNH p.144]

Butternut: For Chronic Constipation use the aqueous extract of Butternut which is free of astringency. Diarrhea, dysentery: The astringent alcoholic extract containing properties is best for these problems; use 1-2 teaspoonfuls. [SNH p.179]

According to Dr. Shook, this formula is especially useful...for constipation of long standing. See formula using turkey rhubarb, myrrh and ginger. [SNH p.186]

See formula for Constipation Capsule # 1 using mandrake, turkey rhubarb, myrrh and cayenne. [SNH p.197]

See formula for Constipation Capsule # 2 using mandrake, socotrine aloes, turkey rhubarb and golden seal. [SNH p.197]

Habitual Constipation: Combine wahoo with butternut bark (*Juglans cinerea*), or use alone. [SNH p.200]

Chickweed: Take 1 cupful of the warm decoction of chickweed (fresh herbs every 3 hours or softer until bowels are regulated. [SNH p.323]

See formula for constipation using marshmallow root, sweet flag, fennel, dandelion, cayenne and ginger. [SNH p.328]

[Cayenne](#): And if you are brave, you can use it as an enema for obstinate constipation. [SNH p.411]

Dr. Christopher's Lower Bowel Formula ([Fen LB](#)) [HHH p.151]

Kelp: So many of our illnesses result from constipation, and such a large portion of our population suffers from this ailment! Poisons accumulate in the large bowel and are absorbed back into the bloodstream, causing a host of disorders which are not specific in themselves but stem back to the toxic colon. Many people subscribe to enemas and colonics to cleanse the colon, and Dr. Christopher agreed that these may have a place in an emergency, but they should absolutely never be relied upon. In addition to his formula for toning the colon, Kelp can take an important place doing this job. Because of its high natural mineral salt content, Kelp builds the walls of the colon and the iodine, being highly antiseptic, deals with the toxic condition. For this reason, Kelp can be used in all cases associated with auto toxemia, especially in pregnancy. All constipated people should take Kelp daily, with the addition of blackstrap molasses if needed. Few people are really free from constipation, so almost everyone could benefit from the addition

of Kelp to the daily diet. [UW-Kelp]

Juices for Constipation: Rhubarb, prune, fig. [NL 3-5]

Vegetables for Constipation: Several glasses a day of cabbage broth. [NL 4-12]

More Vegetables for Constipation: Red Beet, chard, Jerusalem artichoke, green pepper, pumpkin, radishes, summer squash and zucchini. [NL 4-12]

### Testimonials

1. 45 Capsules to Blast Her Loose: One day a lady stomped into Dr. Christopher's office in Evanston, Wyoming. As she came to a screeching halt before his desk, she said she had female problems, and she understood that he had helped other women with female problems. She wanted him to clear her up. She was extremely demanding and abrupt. Because she wore a nurse's uniform from the Evanston General Hospital, he knew she was a registered nurse.

He looked at her and said, "Ma'am, how long since you have had a bowel movement?"

She snapped back at him, "Nine days, so what?"

He apologized about being crude, but he knew that there was something wrong with her. Before they did anything about her female problems, they would have to clear up the bowel area.

She agreed to do anything that he asked her. He told her about the three-day cleanse, mucusless diet, using a gallon of steam-distilled water each day, and to keep her diet as raw as possible. She was also to use the herbal lower bowel formula [[Fen LB](#)]. He didn't want her to come see him again until she was having three or more bowel movements on her own without using enemas or laxatives. He gave her a large packet of the lower bowel tonic [[Fen LB](#)]. The average person uses two capsules three times a day, but he told her to use five or more capsules three times a day, and more if needed. He said to keep using them until she got movements. She agreed and left. This woman had gone from nine to thirteen days between bowel movements for 26 years. That accounted for her being such a nasty individual.

He didn't see her for ten days, and when she came in, instead of stomping in and growling at him, she glided in and said, "Oh, good morning, isn't it a beautiful morning?"

"You must have been using the lower bowel tonic [[Fen LB](#)]."

She said that she had, and that it was working.

"How many did you have to use to get started?"

"I had to use forty to forty-five capsules a day before I broke loose, and now I am down to five or more three times a day."

In a month, she was down to two capsules three times a day. At the end of a year, she was having three or more bowel movements a day without using any bowel tonic at all. The lower bowel tonic [[Fen LB](#)] is not a habit-forming laxative; it is a food. It rebuilds the peristaltic muscle in the bowel, and gets it working again, and also cleans up the liver and gall bladder. It changed her whole life.

At the end of the year, she was moving her bowels regularly and easily, with no aids at all except the foods, which were of a mucusless type. She was a different woman entirely. In fact, she was so changed that other nurses and interns came to get the lower bowel capsules [[Fen LB](#)] from Dr. Christopher, because they said anything that could change that woman's horrible disposition must be a good thing. [EWH p.140]

2. Constipated Child: My friend has a granddaughter about seven years old. Her parents told me she was born with constipation. She had one bowel movement a week, (all of her life). For two days each week before her bowel movements, she could not eat because she was in so much pain. They had spent hundreds of dollars to physicians trying to help her. They were told not to worry. One bowel movement a week was normal for her granddaughter.

They changed the granddaughter's diet and put her on cleansing herbs [[Fen LB](#) and [Red Clover Combination](#)]. In two or three weeks she was having three bowel movements a week. They then added Cascara Sagrada, and in another two weeks, the granddaughter was having three bowel movements a day. [NL 2-1]

3. 30 Years of Constipation: "I'm writing to tell you thank you for my mother and myself. I'm a registered nurse that has tried all the normally prescribed remedies for constipation (chronic) to no avail. More water, exercise, bulk, plenty of fresh fruits, and vegetables, etc., simply did not help.

"In discussing the problems with my friend who works in a health food store, she suggested I try Naturalax 2 [[Fen LB](#)], explaining that it was not primarily a laxative and would help break the cycle of enemas and laxatives to which I'd become dependent--it worked!

"I can't find words to tell you what a miracle it is for me, and my mother who has had the problem 30 years or longer than I, to again have normal bowel function. We are both awed and amazed that a simple herbal remedy could be so miraculous. I had feared all sorts of maladies from aganglionic colon, to cancer. We both consider it an absolute miracle that our bodies are functioning normally for so long. The response was immediate, whereas my friend had said it might take awhile since the problem was long standing. She was drawing on information she had forgotten from a tape of one of your seminars. Needless to say, I am quite impressed. [NL 4-1]

4. Constipation Despite Fiber: I am writing to tell you how much my health has been helped with your Naturalax #2 [[Fen LB](#)]. I ate a good diet full of fiber, but still had constant problems with constipation - I read about you and the products that you had developed in Healthview Newsletter. I thank God for men like you and may he continue to bless people thru you. [NL 4-12]

#### See Also

[Cayenne](#): Dr. Christophers many Cayenne Combinations

[Kelp-T-Comb](#): Dr. Christopher's Kelp Combination

[Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula

[Red Clover Combination](#): Dr. Christopher's Blood Purifying Formula

[Dr. John R. Christophers "Three Day Cleansing Program"](#)

[Dr. John R. Christophers "Mucusless Diet"](#)

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## Convulsions

### Definition

Violent and involuntary muscular contractions. [SNH p.13]

### Cause

Some irritation of the nervous system, such as afflictions of the spinal cord or brain; head injury; a toxic condition of the blood; teething, worms, hysteria, intense pain, griping of the bowels, fear, etc. [SNH p.13]

### Herbal Aids

Know the Cause Before Administering Any Herbal Remedy. If convulsions are caused by poisons taken into the body through the stomach, then emetics must be used quickly. If they are from fright or fear, an antispasmodic tincture with cayenne will usually stop the attack at once. If the convulsions are caused from an impacted bowel, catnip injection will relieve the constipation and soothe the nervous system. Often the individual is in no condition to take oral aids. In such cases give an enema or an injection of antispasmodic, nervine or catnip, which will ease and soothe the convulsive condition. [SNH p.13]

Soothing Syrup for Babies: See formula using parsley seed, caraway seed, rhubarb, cinnamon, brown sugar, essence of peppermint and water. [SNH p.248]

Baby Convulsions: Place a drop or two of the Antispasmodic tincture on the tip of the finger and thrust it into the baby's mouth. This will stop the problem immediately. [SNH p.362]

Restlessness in Measles and Scarlet Fever, etc. (children, infantile convulsions): Give small doses of Valerian infusion 2 to 3 times daily. A sound sleep will generally result. [SNH p.377]

Antispasmodic Powder (fits, convulsions, hysteria, cramps, etc.): See formula using valerian, scullcap, skunk cabbage, lobelia, cinnamon and cayenne. [SNH p.378]

Convulsions, Hysteria: See formula using valerian, wild yam, blue cohosh, anise seed and ginger. [SNH p.378]

Convulsions and Epileptic Fits: See formula using mistletoe, lady's slipper, valerian, scullcap and horsenettle. [SNH p.389]

Cloves: Infantile convulsions place poultice of cloves on nape of neck. [SNH p.421]

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture: To be used in cases of convulsions, fainting, cramps, delirium tremors, hysteria, etc., also good for pyorrhea, mouth sores, coughs, throat infections, tonsillitis, etc. Dose 1/2 to one teaspoon to glass of steam distilled water as a gargle and use until throat clears, also take one teaspoon in steam distilled water morning and evening. [HHH p.195]

### See Also

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture

[Depression](#)

[Diabetes](#)

[Diarrhea](#)

[Digestion](#)

[Diphtheria](#)

[Dizziness](#)

[Dropsy](#)

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## Corns

### Definition

Hardened, mound-shaped areas of increased growth on the skin of the toes. Hard corns occur on the toes, while soft corns arise between the toes.

### Symptoms

Corns on the top and sides of the toes usually appear whitish with a pale yellow build up of hard skin with a darker shaped central cone (nucleus). They are normally hard, dry and round in shape. Pain can be felt when the nucleus presses on the nerve ending.

Soft corns are found between the toes and usually appear white and soft as they are kept moist by perspiration. These are often found in pairs.

The nucleus is shaped like an inverted cone and usually lies in the center of the corn.

The thick nucleus of the corn points downwards onto the nerve endings. This is what causes the intense discomfort and pain associated with corns.

### Cause

Corns are caused by excessive pressure - when the area affected is subject to forces in the same place at intervals over time. This usually comes from wearing shoes that are too tight and irritate the skin.

### Herbal Aids

[BF & C Ointment](#): Rub the ointment on the afflicted area. Put an additional amount of the ointment on a bandage. Wrap the bandage around the toe with the corn. The bandage will need be changed every day or so. You should begin to see results within a couple of days, and the corn should be gone by the end of the week.

### Testimonials

When I realized I had a corn on my foot, I immediately went to see what Dr. Christopher said about corns. I couldn't find anything about corns in his writings, but I thought that if any of his formulas could help, it was the BF & C ointment. I asked his son David Christopher if he thought BF&C would help get rid of corns, and he said "absolutely." So I put some BF&C Ointment on my toe, wrapped it up, and walked funny for the next couple of days. Immediately I felt relief from the pain, and by the end of the week the corn had disappeared!

### See Also

[BF & C Ointment](#): Dr. Christopher's Bone, Flesh and Cartilage Ointment

Corns

[Depression](#)

[Diabetes](#)

[Diarrhea](#)

[Digestion](#)

[Diphtheria](#)

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## Coughs

### Definition

The sudden involuntary and violent expulsion of air after deep respiration due to irritation. [SNH p.13]

### Cause

This is often caused by a stomach disorder that comes from overloading the system with food, wherein fermentation in the stomach causes phlegm. It may also be induced by inflammation in the bronchial tubes due to a neglected cold. Worms may be the cause. Many coughs are from a nervous condition, where coughing may eventually become habitual. Coughs are highly misunderstood. Usually a sore throat and coughing are caused by the sinuses draining the eustachian tubes, which is like pouring acid down the throat. A cough usually comes from a lowered vitality in the system from improper diet, loss of sleep, lack of exercise, and fresh air, improper breathing, poor elimination, or improper night clothing and bedding. [SNH p.13]

### Herbal Aids

General Instructions: Acute coughs can often be relieved with a little honey and onion syrup. When it is the result of an old acute condition, clear out the morbid condition as rapidly as possible without causing irritation. In old cough conditions, comfrey with vervain or mullein are very good. The antispasmodic tincture is also excellent, and it is good to massage the chest area across the back with an antispasmodic tincture during attacks of spasms. Antispasmodic tincture may be used both internally and externally as a liniment on the throat. If this is due to a neglected cold, any of the diaphoretic herbs are excellent. To help relieve the coughing spasms, use horehounds, comfrey, or a small amount of lobelia. High enemas of herbal laxatives will relieve congestion of the bowels, and if the cough is severe (asthma, whooping cough) load the stomach with liquids and induce vomiting. [SNH p.13]

Bronchitis, Bronchial and Spasmodic Coughs, Whooping Cough: Drink the infusion of red raspberry leaf tea freely. [SNH p.56]

Comfrey: Coughs, raw or sore throat, slight hemorrhage. See formula for 1 wine glassful of mucilage of comfrey root every hour until tissues are healed and coughing stops. [SNH p.311]

See formula for coughs, asthma and bronchitis using elecampane, skunk cabbage, aniseed, pleurisy, licorice, lobelia, ginger and cayenne. [SNH p.344]

See formula for coughs, consumption and tuberculosis using cayenne, slippery elm, lemon and honey. [SNH p.410]

See wonderful old time recipe for cough syrup made with onions and honey. [HHH p.57]

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture: is useful for coughs. [HHH p.195]

You can massage the chest with antispasmodic tincture, and give a tea made of equal parts wood betony, spearmint, peppermint, and catnip. [EWH p.165]

[Herbal Cough](#): Dr. Christopher's Cough Syrup: is a fine old fashioned combination for coughs. [EWH p.207]

See recipe for garlic syrup which is very useful for coughs. [NL 2-9]

[Depression](#)

Juices for coughs : Carrot, carrot & spinach, blackberry, fig. [NL 3-5]

[Diabetes](#)

**See Also**

[Diarrhea](#)

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture

[Digestion](#)

[Herbal Cough](#): Dr. Christopher's Cough Syrup

[Diphtheria](#)

[Throat](#)

[Dizziness](#)

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## Croup

### Definition

Croup is a childhood disease characterized by laborious and suffocative breathing and a harsh, brassy, crowing cough. Usually occurs at night, during the course of an upper respiratory infection. [HHH p.59]

### Symptoms

When the child takes a breath there is a whistling sound and often it sounds like he is strangling. [HHH p.59]

### Cause

Croup may be caused by the overeating of mucus-forming foods, or in fact by the overeating of any food, with fermentation in the stomach causing phlegm. [SNH p.59]

### Herbal Aids

Croup: See formula using pennyroyal and lobelia. [SNH p.284] Administration of formula: Croup is inflammation of the larynx and windpipe accompanied by spasmodic cough and great difficulty in breathing a loose membrane forms in the windpipe or trachea which can choke the patient, and the attacks are often sudden, with a harsh cough, rapid pulse, impeded breathing, and the face may be flushed with fever; it is caused from wet feet, damp clothes, sudden changes in temperature, etc., where the vitality of the system is greatly lowered and results in inflammatory congestion and obstruction; and the healing effect should be to raise the body heat, relax the spasms, and stimulate the blood through the parts as rapidly as possible. A hot mustard and cayenne foot bath (in a vessel deep enough to get the water up part of the legs), and hot flannel fomentation of cayenne (1 teaspoonful in 2 quarts of water) will be very beneficial. [SNH p.284]

Mullein: Drink the strong decoction of leaves and flowers, or combine with comfrey root and garlic juice. [SNH p.316]

Croup (fomentation): See formula using mullein, lobelia and cayenne. Foment as warm as is convenient over the lungs, or over the affected part. [SNH p.318]

Asthma Syrup (bronchitis, croup, whooping cough, etc.): See formula using slippery elm, boneset, licorice, flaxseed or linseed and blackstrap molasses. [SNH p.337]

General Instructions: Give the child a few drops of tincture of lobelia in catnip and peppermint tea, then a warm bath or hot foot bath, followed by a catnip tea enema. [HHH p.59]

More General Instructions: Follow the bath with a thorough rubdown with olive oil, and apply anti-spasmodic tincture to the chest and back as a liniment. Keep the air moist--a good steam room (vaporizer) is a great help for quick relief. Keep the bowels open with mild laxative herbs (as explained earlier) and give a tea of catnip, cubeb berries, senna and black cohosh with a few drops of tincture of lobelia to help relieve the spasms. Give by the teaspoon or tablespoon according to age every half hour until relief is obtained. The child should be kept on a fruit and fruit juice diet for a few days. An oatmeal and slippery elm gruel is also nourishing and helpful. [HHH p.59]

Oats and Slippery Elm: An oat and slippery elm gruel is sometimes useful in cases of croup,

where overeating or eating of the wrong kinds of foods sometimes brings on the spasms. [UW-Oats]

[Onion](#): We have used a raw onion poultice on a child for a serious case of croup. Rub the chest first with Vaseline ointment so that the onion will not burn the skin. Finely chop, shred or mince the onions and warm them gently. Place them on a clean cotton cloth and bind this onto the chest. Be sure to keep the chest area warm, either with plenty of covers or with a hot water bottle. This will stop the croup and relieve the inflammation. [UW-Onion]

[Onion Syrup](#): Dr. Christopher's onion syrup, described in the introduction, is an excellent syrup for coughs and colds, bronchitis, croup, whooping cough, etc. He recommended adding licorice root powder, horehound and cherry bark to the syrup, and said to add 25% glycerine to the syrup if you plan to keep it. Keep it in a cool place or it will sour. [UW-Onion] Formula for Onion Syrup: Here is the way you make the syrup. Dice up big dried onions, whatever amount you want, and put them into a stainless steel, unchipped enamel, or Pyrex pan. Don't use aluminum. When you have about the amount you want, pour liquid honey over them until they are covered. Add nothing else. The honey extracts the Onion power, which is the greatest antihistamine known. This goes into the honey solution and provides a wonderfully effective cough syrup. [UW-Onion]

[Stillingia](#): For croup, 1 drop of the oil on the tongue three or four times daily has been found successful for severe attacks (Gri:664). This oil is also a good external rub, being very stimulating, but is generally considered too acrid for internal use. [UW-Stillingia]

### Testimonials

1. [Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture: I'm very interested in learning more about herbs and one day studying it so I would feel more confident using them as I do, medicinally. I've used lobelia tincture for my son's teething problems and on insect bites and rubbing on body for fever, etc. I've used antispasmodic tincture for his croup and coughing. It works great!! I wish the medical profession would accept this miracle remedy for croup and get off their high horse! [NL 3-3]

2. Early Childhood Memory of Dr. Christopher (Raymond): One of his favorite memories of old Highland Drive, and the deep snows of that "then country place" was the story his mother told him of one cold winter night when young Raymond was choked up with the croup. A knock came at the door. His father answered it to find, standing in the cold, a bearded man in shirt sleeves (no coat) who announced a young child was ill but was not to die; he had an important mission here. "Now do this and this to cut the phlegm", he said. They turned to do his bidding, then turned back again to thank him and invite him in, but he had gone--no footprints were found in the deep snow. [NL 4-4]

### See Also

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture

[Herbal Cough](#): Dr. Christopher's Cough Syrup

[Depression](#)[Diabetes](#)[Diarrhea](#)[Digestion](#)[Diphtheria](#)[Dizziness](#)[Dropsy](#)[Dysentery](#)[Dyspepsia](#)[Dyspnea](#)[Earaches](#)[Eczema](#)[Edema](#)[Enuresis](#)[Epilepsy](#)[Eye Ailments](#)

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## Cuts

### Definition

These are wounds to the skin common especially in childhood. A cut severs the skin, such as is inflicted by a sharp object; an abrasion rubs and/or scratches the surface, such as the common scraped knee; and a bruise results from forceful pressure against some object, where the skin is not broken so the blood rushes to the damaged tissue beneath the surface. [HHH p.61]

### Symptoms

The appearance of these wounds is well-known; however, certain cuts such as those that are deep and wide may require immediate attention by a doctor to prevent scarring. If the bleeding does not stop using the following methods, or if blood gushes in bright spurts, you should seek medical attention immediately. [HHH p.61]

### Herbal Aids

General Instructions: The old herbalists claimed that cayenne pepper (Capsicum or red pepper) should be poured directly into a fresh wound, to sterilize and stop the bleeding. Also, if a doctor is not available, apply fresh or dry comfrey root, powder or leaf, powdered, to help stop the bleeding. The comfrey can be put right into the wound; if it is powdered, pour over the area, if fresh, tear up finely and apply. Fresh or dried comfrey can be applied directly over the damaged area--just keep adding additional amounts as needed. Cover with gauze, bandage lightly to hold comfrey in place and so the area can breathe. Comfrey paste ...can also be applied directly over the damaged area as with burns.

A wound, external or internal, will stop bleeding if the individual will drink a cup of water (preferably hot) with a teaspoon of cayenne pepper (red pepper) stirred into it. The bleeding will stop generally by the time a person can count up to ten after drinking the cayenne tea. The cayenne helps equalize the blood pressure from the top of the head to the feet. This keeps the pressure from the hemorrhage area so it will clot naturally, which it cannot do with heavy blood pressure pumping the blood rapidly at the hemorrhage area. The leaves, moistened chewing tobacco, shave grass, shepherds's purse, wild alum root, yellow loosestrife will all aid in stopping bleeding and assist in healing, but comfrey is one of our favorites and should be in everybody's yard or in a flower pot in the apartment or house, or keep a good supply of the powdered leaf and root on hand. Bruises respond equally well to a pack of fresh, crushed comfrey, or the powdered leaves or roots made into a paste with water. [HHH p.61]

Plantain: Apply a poultice of the fresh, bruised or mashed leaves; drink the tea internally. [SNH p.53]

Chaparral: Use the infusion as a wash. [SNH p.71]

Cranesbill: Use the decoction as a wash, or apply the bruised leaves directly on the affected part. [SNH p.153]

Cranesbill: Bleeding (wounds, cuts, tooth extraction): Sprinkle powder onto the affected area; rub powder into the tooth cavity. Also as a local styptic, apply the special strong decoction to the affected area on the lint or cotton without dilution. [SNH p.153] Special strong decoction: See formula using cranesbill root, comfrey root and glycerine. [SNH p.153]

Bistort: Apply the powdered root directly to the injured part. [SNH p.162]

[Depression](#) [White Pond Lily](#): The bruised leaves applied directly are very healing. [SNH p.166][Diabetes](#) [Tormentil](#): Both the fluid extract and the powder applied to bleeding surfaces will serve as powerful styptics. [SNH p.168][Diarrhea](#) [Hyssop](#): Bruise the green herb or leaves and apply to the affected area as a poultice. [SNH p.232][Digestion](#) [Fresh Cuts](#): See formula using myrrh tincture, cayenne tincture and echinacea tincture. [SNH p.456][Diphtheria](#) [Burn Ointment](#): Cleanse the wound and use Dr. Christopher's burn ointment, which is made by blending equal parts of wheat germ oil and honey in a blender, and adding comfrey leaves, fresh or dried, until the mixture becomes thick. I sometimes add a little slippery elm. This mixture is fantastic. [EWH p.160][Dizziness](#)[Dropsy](#) [Aloe Vera](#): Other external uses for the herb include treatment for all kinds of wounds--scrapes, cuts, etc. The gel seems to mildly kill the germs on the surface and promote healing. The herb is high in calcium, which reduces bleeding with its coagulating action, at the same time helping to stimulate circulation of blood in the surrounding areas to bring oxygen to the surface. [UW-Aloe Vera][Dysentery](#)[Dyspepsia](#) [Myrrh](#): One herbalist has a favorite application of Myrrh. He combines equal parts of finely powdered golden seal and powdered Myrrh gum. He mixes a pinch of the combination with a little saliva (or water, he says, if you are squeamish), and applies the paste to cuts, sores, pimples, abrasions--any kind of skin wounds. As this dries, it forms a crusty, protective scab over the wound, just like a real scab, but with the additional antiseptic and healing properties of the herbs. He says that he has been able to wean himself from the constant use of band-aids (Neb:118)! [UW-Myrrh][Dyspnea](#)[Earaches](#)[Eczema](#) [BF & C](#): Dr. Christopher's Bone, Flesh and Cartilage Formula: The paste can be used for cuts, abrasions, burns, bruises, sprains, and an external aid to spread the healing up of broken bones.[Edema](#)

If kept in a wide-mouth closed jar the paste will keep in a ready-to-use condition for many months. This is one of the fine emergency first aid helps you can have on hand. It is good to have some in your cars and in various places in the home or where you work, in case of an accident. [NL 1-8]

[Enuresis](#)[Epilepsy](#) [Cayenne](#): Many of the old herbalists claim that in cases of severe cuts, gunshot wounds, etc., cayenne can be taken internally as a tea and the bleeding will stop by the time, in most cases, you can count to ten. Cayenne goes immediately into the blood stream and adjusts the blood pressure from the top of the head, to the bottom of the feet, equalizing pressure over the whole body. This takes the high pressure, which causes rapid bleeding, away from the wound and clotting starts immediately. Cayenne has been accepted by some of the orthodox medical profession, as mentioned in Merck Index, Materia Medica and Pharmacology and other standard volumes. [NL 1-12][Eye Ailments](#) [X-Ceptic](#): Dr. Christopher's Antiseptic Tincture: A few drops of the liquid antiseptic formula, consisting of oak bark, golden seal, capsicum, comfrey, garlic, and myrrh, can be dropped into the throat. This is one of our most wonderful formulas used on cuts and wounds. [NL 4-1] [Lemon](#): Some of the many medicinal problems treated with the lemon are as follows: Cuts or other areas of infection are helped when lemon juice, a natural antiseptic, is applied. [NL 5-1] [Black Walnut](#): the iodine found in Black Walnut is organic, much more antiseptic and healing than the usual poisonous iodine so commonly used for infections, cuts, etc. [NL 5-7]**See Also** [BF & C](#): Dr. Christopher's Bone, Flesh and Cartilage Formula [Black Walnut Tincture](#): Dr. Christopher's Black Walnut Tincture

[Cayenne](#): Dr. Christophers many Cayenne Combinations

[X-Ceptic](#): Dr. Christopher's Antiseptic Tincture

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## Cysts

### Definition

A pouch or sac without an opening, having a distinct membrane enclosure, and containing fluid or semi-fluid morbid matter. This usually develops within an organ or a body cavity. [SNH p.14]

### Cause

Calcium tablets are almost always prescribed for muscle cramps and throughout pregnancy generally, yet calcium requires the proper balance of phosphorus, silica and magnesium to be absorbed. Otherwise the free-radical calcium flows through the bloodstream, sometimes depositing in the forms of cysts and calcium deposits. [EWH p.48]

The body needs plenty of potassium chloride to keep the fibrin in solution and build muscles and tissue where needed instead of coagulating and forming fibrin cysts or tumors under the skin, in various organs, or in other words where we don't want them. [NL 1-1]

### Herbal Aids

[Black Walnut Tincture](#): Dr. Christopher's Black Walnut Tincture: In breaking up a cyst, the use of walnut herbs (leaves, bark, or the green hull or dried pulp around the shell of the nut) are excellent. The use of chaparral may be used internally or externally. [SNH p.14]

Useful herbs: Apple cider vinegar, Brigham tea, burdock root, cayenne, chaparral, honey, mullein, plantain, sarsaparilla, yellow dock (ovarian or genital areas). [SNH p.14]

[V.B.](#): Dr. Christopher's Vaginal and Rectal Herbal Bolus: One of the valuable procedures in the healing program for a woman is the vaginal bolus. The bolus is inserted into the rectal area. There are two types of bolus: one that dissolves at body temperature and the other acts as a poultice. The poultice-type is made with healing herbs to help draw the poisons and toxins; and to help break loose cysts, tumors, and cancerous conditions even as far up as the abdominal area as the bolus has a widespread influence, effecting not only the vagina, but also other organs, such as the bowel and the urinary tract. This drawing-type bolus generally consists of a group of herbs. [SNH p.503]

[Dr. John R. Christophers "Extended Herbal Cleanse" Routine](#): This cleansing program is for the purpose of helping to purify the human body for healing. ...Clean the mucus out of the body, which is the problem source that develops polyps, tumors, cysts, etc. This is an entire program. More can be read at the source. [SNH p.514]

Castor Oil Fomentation: In order to get rid of hardened mucus in the body, which may appear as cysts, tumors or polyps, the following fomentation is to be used. [SNH p.525]

[V.B.](#): Dr. Christopher's Vaginal and Rectal Herbal Bolus: Here is another excellent aid for the woman (or rectal bolus for the man) who have problems in the reproductive areas. Boluses are made with healing herbs that help (1) draw out the toxins and poisons, (2) aid (with herbal foods) in making the malfunctioning area healthy, so that cysts, tumors, and cancerous conditions will not have waste material to survive on or live in, because they are all scavengers. Herbalists have found that they will release and will be dispersed. Herbalists have found that some will come out through the orifices and others disperse into the blood stream and will be eliminated if the program is followed faithfully. (3) The bolus spreads its herbal influences widely from the vagina or bowel through the entire urinary and genital organs. The formula consists of one part each:

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squaw vine herbs, slippery elm bark, yellow dock root, comfrey root, marshmallow root, chickweed herb, golden seal root, mullein leaves. These herbs are all in powder form. Coconut butter should be melted down so that it will mix well with the herb powder. Mix a small quantity of this powder, and wet to pie dough consistency with coconut butter (which can be purchased from the drug store, health food store, or herb shop). Next, roll this mass between hands until you have a pencil-like bolus approximately the size of the middle finger and about inch-long pieces. Harden in a refrigerator. Then these are to be inserted into the vagina much the same as suppositories would be. It will be necessary to wear a sanitary napkin in order to hold the bolus up in the vagina (or rectum). Insert upon retiring and leave in all night, six nights a week. The coconut butter melts at body temperature, leaving only the herbs, and these are easy to douche out. [HHH p.191] The following morning use the Dr. Christopher Slant Board Combination: ([Yellow Dock Combination](#)) As an aid in prolapsed uterus, bowel, or other organs, to assist in giving relief, make concentrated tea (simmer down to half its amount) of six parts oak bark, three parts mullein herb, four parts yellow dock root, three parts walnut bark or leaves, six parts comfrey root, one part lobelia, three parts marshmallow root. Inject with a syringe (while head down on slant board) into vagina, 1/4 to 1/2 cup or more; or rectum, one cup or more; for prolapsus or hemorrhoid problems and leave in as long as is possible before voiding. Dose suggested is one fourth to one cup, one or more times in a day, and drink one fourth cup in three fourths cup of distilled water three times a day. When the tea is injected into the abdominal area and while on the slant board, knead and massage the pelvic and abdominal area to exercise the muscles, so the herbal tea (food) will be assimilated into the organs. [HHH p.192]

Potassium Deficiency: Hundreds of women have wondered why they have tumors and cysts in their bodies. The cause, according to Dr. Christopher, is potassium deficiency. When a patient takes plenty of potassium foods (not supplements) you can remove the cause of the cysts and tumors. Other foods, which are lower in potassium, must not be increased when you are trying to increase the potassium in the system. When patients go on the three-day cleanse and mucusless diet and take the female corrective formulas [Nu Fem], they receive nourishment which is high in potassium. Miraculous things happen to them. For even faster results, you can add to each cup of herb tea six to ten drops of elderberry tincture or six to ten drops of black walnut tincture, both of which are extremely high in potassium. Cysts and tumors are like leeches, but they stay in places where there is a body deficiency. As soon as the body is balanced and well, the cysts and tumors have to go, because the material is too healthy for them to live on.

This is why so many patients brought Dr. Christopher cysts and tumors in various sizes that they had expelled from their bodies. There is not enough food, in the form of dying or deficient body materials, so they just decide to leave.

There are several ways to receive your potassium. Dr. Bernard Jensen sells a potassium broth made from dehydrated vegetables. Dr. Bronner makes a similar, excellent product. You can also make your own potassium broth by simmering equal parts of red potatoes, celery, carrots, onions, and herbs to taste. Raw vegetable and fruit juices also flood the system with potassium.

When cysts or tumors grow in places where they can be seen outside the body, often we react by having them cut out. This defeats healing by working on the effect instead of the cause. You can cut cysts out, tumors off, and burn warts off (which are also a potassium deficiency), or get rid of as many moles as you wish, but unless you go to the cause, they will grow back again, and you may end up with as many or more cysts, tumors, moles as before. Different signs of potassium deficiency will keep popping out on the body because the condition that needs correcting is on the inside. You have to go into the cause, Dr. Christopher always insisted, which is the way we have been eating. Other herbs used for cysts are corn silk, apple cider vinegar, wormwood, cramp bark, camomile, gravel root, slippery elm, wild carrot, and garlic. [EWH p.125]

Cleaning the Blood Stream: The blood of each individual is as different from that of another individual as is the iris of the eye or the fingerprint. As we build our lives for better or worse, so do we change and build our blood stream.

For many years we have taught that all disease stems from the blood stream. ...The impurities and poisonous waste accumulations in a boil are brought to that point by a blood stream loaded with waste and mucus materials, and to work only on lancing the boil is a case of "working on the effect", when one should clean up the blood stream, i.e., "work on the cause".

The same principle applies with tumors, cysts, dermatitis, cancer and most other isolated malfunctions. The weakened or injured areas accumulate toxic waste, because there is not enough

vitality to discard this low vibrating material, and here we have evidence of "disease".

Instead of using just an external application, we have recommended to our patients that they also do the most important part of the entire program - that of going into the cause by cleaning up the bowels, the blood stream, and keeping this "cleaning condition" permanent. This is done by following the mucusless diet, as we explain it in "[Dr. John R. Christophers "Three Day Cleansing Program"](#)" and [Dr. John R. Christophers "Mucusless Diet"](#)" booklet, using the three day cleanse each month, or more often, and by strictly following the recommended "fast" each seventh day. (Of course, on the fast, use only steam distilled water in abundance.) [This information goes on extensively. Go to the source for more detail.] [NL 1-2]

[Dr. John R. Christophers "Three Day Cleansing Program"](#) with Dr. Christopher's Slant Board Routine ([V.B.](#): Dr. Christopher's Vaginal and Rectal Herbal Bolus and [Yellow Dock Combination](#): Dr. Christopher's Yellow Dock Combination): With severe gynecological problems involving infection, cysts, tumors, the herpes simplex, prolapsed transverse colon, tipped uterus, swollen glands under arms and on breast, yeast infection, etc., the vaginal and rectal bolus may be employed. We suggest using the slant board routine as explained in the booklet Three Day Cleanse and Mucusless Diet. [NL 1-3]

**Malnutrition:** We have on file hundreds of letters from women who have received relief by this simple procedure of feeding the areas of the body suffering malnutrition.

By having a weakened reproductive system many things can happen to the body in retaliation. This is caused from weakened tissue inviting disease, cysts, tumors, etc., into the body. These are scavengers and must have toxic, low type cells and tissue, weak and dying organs to feed on. All this is the result of malnutrition! We must reverse the condition, strengthen the cells and tissues, making them so healthy they are to "rich" for scavenger diseases to live on. Herpes simplex, yeast infection, leucorrhea, flooding, cramps, swollen and painful breasts, miscarriages, inability to conceive, etc., etc., stem from the reproductive organs or systems being in an unhealthy condition. [NL 1-7]

[Red Clover Combination](#): Dr. Christopher's Blood Purifying Formula and [Mullein & Lobelia](#): Dr. Christopher's Glandular Formula: When there is any problem with the breast, and this should be noticed early, we use the fomentation of 3 parts mullein and one part lobelia over the affected area. It may be taken internally as well. Many Indian tribes have historically used a fomentation of poke root externally to help draw out the cancer. As with all cancers, they begin in the blood stream and radiate out to other parts of the body where they are manifested. The Red Clover Combination can be used to purify the bloodstream, the nutrient transport system of the body. Cysts and tumors will not grow in an atmosphere where there is enough potassium. Elderberry tincture can be taken for potassium increase along with foods that are high in potassium. [NL 4-2]

### Testimonies

**Woman Heals Tumors and Cysts:** When Dr. Christopher was traveling, using chiropractic offices and naturopath's offices, diagnosing, reading eyes, and helping with herbs, [a] lady ... came to see him. In addition to the prolapsed transverse colon infecting the entire reproductive system, it had impinged on the bladder, so that whenever she laughed, sneezed, or coughed, she would void her urine, a very embarrassing problem. In addition, one of her breasts was so infected that the doctors were urging her to have it removed.

Dr. Christopher told her he could give her advice as to what to do, but that he was traveling and wouldn't be able to guide her or see her for several months. She agreed to follow his instructions, and asked to see him when he returned.

He put her on the full program. She was to clear the bowel with the lower bowel formula [[Fen LB](#)], to clean the bloodstream using the red clover combination, and to rebuild the reproductive organs with the female corrective [Nu Fem] and the hormone-estrogen formula. [[Changease](#)] She was to continue the whole program, six days a week.

When he returned to that city six months later, she had called and prearranged an appointment. She bounced in, looking years younger, all smiles. She said her urine loss was under control now, with no unwanted voiding. She had no pains in the ovaries; in fact, she had dropped some stones from the three-day cleanse. She had also passed some tumors, one almost the size of a grapefruit,

and cysts as well. When she went to the family doctor for an examination, he was astounded, because her body was rebuilding itself. The breast they were going to cut off had healed itself, with no more infection. She felt that it was a new world, and that life was worth living again. Although she healed rapidly and consistently, Dr. Christopher pointed out that herbs don't work all at once, but you have to apply yourself and be patient to wait for the results of your hard work. [EWH p.113]

### See Also

- [Black Walnut Tincture](#): Dr. Christopher's Black Walnut Tincture
- [Changease](#): Dr. Christopher's Herbal Hormone Formula
- [Mullein & Lobelia](#): Dr. Christopher's Glandular Formula
- [Nu Fem](#): Dr. Christopher's Herbal Aid for Female Reproductive Organs
- [V.B.](#): Dr. Christopher's Vaginal and Rectal Herbal Bolus
- [Yellow Dock Combination](#): Dr. Christopher's Yellow Dock Combination
- [Dr. John R. Christophers "Extended Herbal Cleanse" Routine](#)
- [Dr. John R. Christophers "Mucusless Diet"](#)
- [Dr. John R. Christophers "Incurables Program"](#)
- Entire Newsletter "Blood Stream - River of Life" [NL [1-2](#)]

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**Dandruff**

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## Dandruff

### Definition

Dead skin (scaly material) shed from the scalp.

### Cause

Inorganic soaps are very damaging to the skin and obstruct the pores. A little dandruff scraped off the scalp, for example, and placed into distilled water (which is zero grain hardness) will often shake into a heavy foamy lather or suds, showing that the major part of dandruff is composed of soap that has not been washed out. There are very few rinses that can thoroughly cleanse the soap out, and the best cleansing agent of this type is biodegradable type, such as Dr. Shaklee's Basic-H Bestline products, Amway, etc., all of which are made of soluble vegetable bases. But the inorganic, commercial-type soaps will often cause rashes and do considerable damage to the skin tissue and the body itself (through epidermal absorption). If biodegradable soaps are unavailable, then lemon juice, vinegar, and wild sage are very effective. The commercial soaps give the appearance of beauty by cleaning and perfuming the surface, while the pores remain dirty, still, from toxic matter. [SNH p.501]

### Herbal Aids

Bayberry: Use a strong decoction of bayberry and rub in well at night; wash off in the morning, brush the hair thoroughly and apply again (using a few drops of lavender oil with the solution that is rubbed in gives a more effective synergistic action). This will quickly stop falling hair and remove dandruff. [SNH p.132]

See formula using balm of Gilead, castor oil, eucalyptol and anhydrous lanolin. [SNH p.202]

General Instructions: From a question and answer in Dr. Christopher's Newsletter. This is a disease more commonly affecting people than one would think. Dr. Lubowe in his book *The Modern Guide to Skin Care and Beauty* (E.P. Dutton and Co., 1973) says: "The body malfunctions related to dandruff are similar to those related to acne." However, while one might expect that they would occur simultaneously, they don't. Dandruff usually begins to show at about age 20, when acne has become a painful memory, and it is not seen much after the age of 40. That does not mean that you can't have dandruff after 40. If you do, Dr. Lubowe noted, it is not necessarily evidence of prolonged youth. However, within the ages of 20 to 40, dandruff affects 80% of the population.

Dandruff itself is not a disease, but only a symptom of one that is less visible. Far more serious than the snowflakes on your shoulders is the fact that dandruff can lead to hair loss and even to baldness. But there are steps that you can take at your very next meal that will help you overcome your dandruff problem and, at the same time, overcome some other problems. One of the most important is to reduce your consumption of starchy foods and also reduce, or better still, eliminate sugar completely. Sugar and starch are two of the dietary excesses which Dr. Lubowe scores as triggers of the internal difficulties which can lead to dandruff. An increased volume and activity of the bacteria and fungi normally residing on a human scalp is another cause. But sugar particularly, could well be the substance that triggers the condition that causes dandruff.

For keeping the scalp clean and the pores free from dirt and substances that plug up the hair gland openings, use a good biodegradable shampoo and rinse with a diluted lemon juice or apple cider vinegar rinse. A final rinse of sagebrush, chaparral, and yarrow (in equal parts) tea is a healthy food for the hair and scalp. Massage this rinse in well to the hair and scalp and leave on the head.

It is good also to drink some of this tea, (a half cup, more or less) night and morning. [NL 1-9]

[Lemon Juice](#): Dandruff has been helped by applying lemon juice to the scalp and afterwards shampooing. After the shampoo, wash again and apply lemon juice to remove soap from the hair and scalp. [NL 5-1]

[Black Walnut](#): Externally, Black Walnut is nearly a miracle worker in cases of scrofula, eczema, impetigo (as related above), acne, dandruff, boils, itch, shingles, ringworm--we could go on, but you can see that you can use Black Walnut whenever a skin disorder appears! [NL 5-7]

[Dr. Christopher's Hair Conditioner Formula and Procedure: \(Desert Herb Combination\)](#) Each day, as an aid to restimulating the hair growth, for two days massage scalp deeply with warm castor oil, apply hot wet toweling over head thirty minutes or more.

Leave oil on all night. Next morning wash hair with Packer's tar soap or a good biodegradable soap and rinse. Repeat second wash, rinse with tea made of sagebrush, chaparral and yarrow. Do not rinse again but leave tea in hair and scalp (massage in well). The next two nights use same procedure but use olive oil, and the next two nights use wheat germ oil. Rest one night and repeat six days a week as needed. Use shoulder stands. Drink one or two tablespoons of wheat germ oil morning and night, and also drink 1/4 cup of this tea made with distilled water, two times a day.

#### See Also

[Black Walnut Tincture](#): Dr. Christopher's Black Walnut Tincture

[Desert Herb Combination](#): Dr. Christopher's Hair Conditioner Formula

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## Deafness

### Definition

Inability to hear clearly.

### Cause

1. It has been proven that certain types of drugs, including aspirin, can cause hearing loss. Antibiotics such as kanamycin, dihydrostreptomycin, and gentamycin can contribute to deafness. The side and after effects of inorganic drugs take their toll on the body. This is why we prefer to work with herbs and foods which operate synergistically (in harmony) with the body. [NL 4-6]
2. When a child cannot hear well, it may be from several causes, i.e., injury and concussion, nerve-loss, ears plugged with wax and/or debris. [HHH p.82]

### Herbal Aids

**B & B Tincture:** Dr. Christopher's Nervous System Formula with Black Cohosh and General Program for Deafness: In many cases, a person can help have his or her hearing enhanced by following Dr. Christopher's program. One patient had lost her hearing, and could only hear if someone screamed at her when she had her hearing aids turned up full. She couldn't use the phone anymore, and felt discouraged with life in general.

She decided to use the B & B tincture and garlic oil routine. With an eyedropper, you insert into each ear at night four to six drops of oil of garlic and four to six drops of B & B tincture, plugging ears overnight with cotton, six days a week, resting on the seventh day. This can continue for four to six months, or as needed. On the seventh day, flush the ears with a small ear syringe using warm apple cider vinegar and distilled water half and half.

Dr. Christopher commented that many cases where the person was considered legally deaf, by using this program they were able to hear again. Hundreds of people have thrown their hearing aids away after rebuilding their hearing with this simple program.

This same program is used for earaches and roaring in the head, ringing in the ears, etc. Dr. Christopher originally got this formula when he was working with an epileptic. He was searching for something that could really help the case, and received the formula by inspiration, as if a voice were saying it to him. An old gentleman thought that it might help his hearing, so he put it in his ears, too. In that same household, one of the little children had a terrible earache one night. The mother used this combination in the ears, and the pain stopped and the infection cleared up. Many children have been relieved from this simple program of garlic oil and B & B tincture. [EWH p.137] With some folks we have seen the hearing restored and hearing aids discarded in just a few months. In other cases, this program must be followed for far longer periods of time before results are noticed. No two people heal alike, so be patient and follow instructions, then see what happens! [NL 1-6]

**Marjoram:** The juice of Marjoram, both wild and cultivated, dropped into the ears helped deafness, pain, noise, and ringing. [NL 4-6]

**Mullein:** The oil is often used in the ears to relieve earache. The ointment, which is made from the oil, is used in the same way. We have had earaches in our family which resulted from congested lymph glands and colds. Although we treated the problem with garlic oil and B & B tincture, the problem did not clear up. By inserting oil of Mullein into the ear, however, we were able to stop the irritation in the ear as well as in the accompanying glands. The oil can be inserted

into the ears to soften hard ear wax, or to moisten the area where the ear wax is insufficient; hearing losses due to ear wax have sometimes been thus alleviated. [UW-Mullein]

**Ear Candles:** The cautious use of "ear candles" can help clear the wax. Ear candles are an old invention. A pointed dowel rod is wrapped with a cotton or linen strip of cloth which has been dipped in melted paraffin wax. The rod should be about 8 inches long and about 3/4ths of an inch thick. When the paraffin hardens, a long, thin, cone-shaped form will result and the dowel rod can be removed. The pointed end of the linen cone is put into the ear canal and the other end is lit. The person should be sitting upright so the wax doesn't drip into the ear. To avoid injury, be sure to put the fire out before the burning candle reaches the head. When the ear candle is removed and unwrapped, it is usually filled with ear wax. The Amish people use these candles and it is a tradition with them. [NL 4-6]

### Testimonials

1. **Hearing Program:** I have four other patients on the program for hearing loss and all are making fine progress. One, however, is really amazing.

This patient has been getting a new pair of hearing aids every year for the last twelve years, they're always giving her a stronger pair. The right one she has full blast and hears nothing--she has been diagnosed as nerve deafness.

After only five days she has turned this right hearing aid almost completely off and can hear the radio. She is the happiest woman I have ever seen. by the way, she drives to my office in Chicago twice a week nearly fifty miles each way, even in blizzards and could hardly hear the horns blow on the other cars. She is an amazed woman today." [NL 2-8]

2. **Hearing Restored After 39 Years:** A good many years ago- probably about 1940 my husband was struck by lightening which left him very hard of hearing. We tried several times to have him fitted with hearing aids, but no one seemed to think these would help his problem. Then in about 1973 Bell Tone fitted him, which helped some. In March 1979 we tried the herbal tincture as per your instructions: 6 days, 5 drops oil of garlic, then 5 drops herbal tincture; then the 7th day the cider vinegar and distilled water. Immediately he said to me, "Why! The clock is ticking!" From that day on he has not needed his hearing aids (over \$1,100)! We did continue the procedure for another week. We need to know should we continue, and if so, for how long do you suggest? We continue to Praise God and give Him our thanks for this healing blessing. We want to thank you also, for our publication, and the research you have done, that has been such a blessing to us. [NL 1-10]

3. **Hearing and Tic Improves with B & B Tincture:** At the time of this writing, there is no surgical cure for nerve hearing loss. The causes are fetal damage, trauma at birth, infections, drugs, thyroid disease, diabetes, injuries, noise exposure, or nerve deterioration from age or malnutrition. Just last month, a woman said to us, "I wish they (medical science) would hurry and find a cure for nerve deterioration." We said, "For the nerves in the body?" She said, "No. For the nerves of the ear! I'm having a terrible time with hearing loss and it's getting worse. It's driving me crazy!" We told her that if she didn't have eardrum breakage, there were some herbal nervines that could be used directly in the ear as ear drops. She agreed to try the B & B tincture. As she spoke, her face exhibited a spastic dance of small nervous tics. A month later, on the B & B tincture, her hearing began to gain momentum while the nervous tics faded into the background. [NL 4-6]

4. **Deaf Since 1 Year Old:** Thanks to your formulas, I was able to cure several persons known to me. Also, my son, deaf since 1 year old, now 30 years old, has improved his hearing thanks to B & B Tincture. [NL 4-10]

### See Also

**B & B Tincture:** Dr. Christopher's Nervous System Formula with Black Cohosh

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## Debility

### Definition

Weakness, absence or loss of strength (asthenia), loss of vital strength or muscular power (adynamia). [SNH p.15]

### Cause

In debility, the condition is generally caused by a rundown body as a result of an improper diet. Do not overfeed since the body is already overworked and the heart is already overburdened, and the organs are tired from trying to digest heavy foods. The kind "angels of mercy" that bring in cakes, pies, and the little "goodies" to the invalid and say "Now you must eat to get your strength you must eat to get your strength build up," are not really "angels of mercy" since they only aggravate the problem. [SNH p.15]

### Herbal Aids

General Instructions: In some cases the whole digestion must be rebuilt. A speedy recovery may be had with juice therapy alone or with slippery elm gruel. Other nutritional herbs such as Irish moss or comfrey may be used successfully. [SNH p.16]

Wormwood: Take 2 fluid ounces of the infusion 3-4 times daily. [SNH p.108]

Bitter Root: Take 5 grains of powder 3 times daily; it has also been used successfully in combination with yellow parilla (*Menispermum canadense*). [SNH p.208]

Rue: for systemal debility. (Never take if you are pregnant) Take small doses of the infusion at least 1 hour before meals. [SNH p.295]

See formula using comfrey root, elecampane, horehound and beth root. Strain, sweeten, bottle and keep in a cool place. The mixture may be preserved with glycerine or with 1 pint of honey. [SNH p.312]

See formula using scullcap, camomile and gravel root. [SNH p.372]

See formula using white poplar bark, barberry bark, balmony bark, golden seal, cloves, cayenne and loaf sugar. [SNH p.447]

Dr. Coffin's Bitters: See formula using white poplar bark, balmony, bayberry, ginger, cayenne and cloves. [SNH p.448]

Prickly Ash: The herb is a valuable herb nerve stimulant and may be used for a long period of time without ill effects. It is valued in all cases of nervous prostration or debility after illness or whenever the vital forces of the body have for some reason been depressed. [UW-Prickly Ash]

Skullcap: It is called a food for the nerves, strengthening and supporting them as it gives immediate relief of all chronic and acute diseases stemming from nervous affections and debility (Tie:115). It is high in calcium, potassium and magnesium, which may account for its remarkable effect on the nervous system. [UW-Skullcap]

Skullcap: Lucas reports the case of a gentleman who was otherwise in good health but was continually suffering nervous debility and insomnia. Treatment by other doctors had not helped him at all. He was encouraged to try natural medicine and was given a combination of an ounce of Skullcap, an ounce of hops, and a half ounce of gentian root. He took this as an infusion and

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within a week he was sleeping well. At the end of two months he was fully recovered. Lucas mentions that Skullcap, catnip and peppermint work the same way for many people (Luc:Herbal:25). It is said to give natural sleep to morphine addicts, especially when combined with catnip, lime blossom and hops (Lev:Common:134). [UW-Skullcap]

Gentian (*Gentiana Lutea*) is considered one of the most useful tonics in cases of exhaustion from chronic disease and in all cases of general debility, weakness of the digestive organs and want of appetite. The herb has been used in both England and Europe for treatments to humans as well as in veterinary practice. [NL 4-10]

Echinacea: Prof. Webster, an early practitioner who used it in these cases, asserted that as a stimulant to the capillary circulation, no remedy is comparable with it, and it endows the vessels with a recuperative power or formative force, so as to enable them to successfully resist local inflammatory processes due to debility and blood depravation (Ibid), which we think is extremely interesting in view of the toxic conditions caused by pollution and low-quality food in today's world. [NL 6-12]

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## Depression

### Definition

An emotional state where there are extreme feelings of rejection, emptiness, sadness and lack of self worth.

### Herbal Aids

**Julep:** This is a stimulating drink-type preparation flavored with aromatic herbs (but this is not the alcoholic drink referred to by the same term), and could be defined as "a large draft." An example of a julep would be: Four ounces (eight tablespoonfuls) cinnamon water, two ounces (four tablespoonfuls) Jamaica cayenne, two drams (one-fourth ounce or one dessert spoonful) compound spirit of lavender, one ounce (two tablespoonfuls syrup of orange peel, mixed; (this is for general weakness and depression).

Dosage: Wineglass to one-half glass at a time. [SNH p.486]

**Motherwort:** Motherwort tea will eliminate the swelling (it is also good for nervousness and depression). [EWH p.44]

**Brigham Tea:** In modern usage, the prized constituents, ephedrine and pseudoephedrine, are extracted from the plants for medicinal use....The pharmacological action of ephedrine is similar to adrenalin. Its pressor and vaso-constrictor activity is slower and less than adrenalin, but it lasts longer. Unlike adrenalin, it can be given orally. It stimulates the respiration, increasing the depth of respiration, reinforces heart action and dilates the bronchi, especially during spasms, hence its use in bronchial asthma. It contracts the uterus and dilates the pupils. It also helps stimulate the central nervous system, this attribute being the basis for its use in the treatment of depression and for the relief of narcolepsy. It is used in vasomotor rhinitis, coryza, congestion of the mucous membranes, acute sinusitis, and hay fever. It has a slight local anesthetic action. [UW-Brigham Tea]

**Gotu Kola:** It can treat depression and mental weaknesses; many claim that it is a marvelous memory herb. If you take too much of the herb, you will experience headache and stupor; thus, you must regulate your personal dosage. [UW-Gotu Kola]

**Lemon Balm:** Others assert that the herb can truly alleviate depression, helping us accept difficult situations. [UW-Lemon Balm]

**Lady's Slipper:** It has been found to be very efficient in cases of hypochondria and mental depression which often accompanies digestive trouble, especially among women. Whenever a person feels like he cannot settle down, cannot sleep, cannot think properly, feels depressed, often from sexual overindulgence, Lady's Slipper can be a calming and balancing influence. [UW-Lady's Slipper]

**Red Rose Petals** are official in nearly all Pharmacopeias, often in syrup or honey form. They were formerly employed as an astringent and tonic, but are mainly used now as a pleasant odifereant to other pharmaceutical preparations. However, the acid infusion is used to treat night sweats resulting from depression (Gri:688). [UW-Rose]

**Sage:** Another British herbalist claimed that Sage "will retard that rapid progress of decay that treads upon our heels so fast in the latter years of life, will preserve the faculties and memory, more valuable to the rational mind than life itself without them; and will relieve under that

**Depression**[Diabetes](#)[Diarrhea](#)[Digestion](#)[Diphtheria](#)[Dizziness](#)[Dropsy](#)[Dysentery](#)[Dyspepsia](#)[Dyspnea](#)[Earaches](#)[Eczema](#)[Edema](#)[Enuresis](#)[Epilepsy](#)[Eye Ailments](#)

faintness, strengthen under that weakness and prevent absolutely that sad depression of spirits, which age often feels and always fears, which will long prevent the hands from trembling and the eyes from dimness and make the lamp of life, so long as nature lets it burn, burn brightly" (Hyl:560). [UW-Sage]

Sarsaparilla also contains cortin one of the hormones secreted by the adrenal glands. The body will die almost immediately if this hormone is stopped but if there is only a small or insufficient amount the body becomes easily ill and develops nervous depression and general weakness. So many maladies are related to adrenal weakness and exhaustion, including hypoglycemia, so people should take note if they are striving to rebuild their adrenals. Sarsaparilla may be able to help. [UW-Sarsaparilla]

Bach Remedies: Dr. Bach left his lucrative medical practice and retreated to the Welch countryside where he began to observe human nature full time. He experienced a wide range of negative states of mind himself which were relieved by the administration of his especially prepared flower tinctures. At first Bach discovered twelve basic tinctures to alleviate depression, anger, worry, self-distrust and the like. He called them the twelve healers and wrote a short paragraph on each of them. The non-toxic flower remedies were tried on his patients who responded beautifully to treatment. The twelve remedies were finally expanded to 38. They were designed to be used and administered by even the simplest folk. Bach continued to successfully treat diseased conditions with these remedies until his death at 50 years of age.

Bach's legacy has been a blessing to many people. Although he had great results with the flower remedies, his new remedies were not accepted by the orthodox medical men of his day who once held the doctor in high esteem. Perhaps the simplicity of the Bach Flower Remedies was too great to bridge the credibility gap between medic and mystic.

Healers throughout the world benefited from Bach's discoveries. Heretofore incurable cases have been won over to the side of health.

Dr. Bach's work is now being carried on at his humble home near London, England. Mr. John Ramsell and his sister who had apprenticed themselves to Dr. Bach's assistant, Nora Weeks, create the remedies from English countryside flowers according to the instructions left by the good doctor. Bach Flower Remedies are shipped all over the world. From the stock bottles of 38 remedies an individual may have a custom-made remedy which suits his individual emotional needs. [NL 4-7]

Vegetables for Mental Depression: Broccoli, cabbage, collard greens, corn, kale, peas, potatoes, turnip greens. [NL 4-12]

Depression After Giving Birth: For the depression that sometimes occurs after birth, Black Cohosh seems to be an almost miraculous specific - perhaps because of its hormonal content. An English doctor in the late 1800's Sir James Y. Simpson, related that a mother of several children suffered the most severe depression and despondency about a month after giving birth to perfect children. She tried the tincture of cimicifuga, and after eight or ten days, her condition had completely changed; she had energy, good spirits, zest for life. She continued taking it for six or eight weeks, and prescribed it to other depressed new mothers, with equal success (BC:AGT:2 1). [NL 5-6]

[Cayenne](#) and Lobelia: Cayenne will increase a person's feeling of vitality and activity--as it is a stimulant--without any bad after-effects, such as do other stimulants. Combined with Lobelia, it is wonderful in cases of depression or low spirits. [NL 6-3]

**See Also**

[Relax-Eze](#): Dr. Christopher Nerve Herbal Food Combination

[Adrenals](#)

[MindTrac™](#)

[PreTrac™](#)

[Dr. John R. Christophers "Mucusless Diet"](#)



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## Diabetes

### Definition

The origin of this disease, as is known so far, can be traced back to derangement of the functions of the pancreas gland. Contributing factors, however, are undoubtedly severe nervous disturbances, or improper function of stomach, liver and bowels. The patient feels tired and weak. Usually complains about pains in the limbs, feeling depressed and down-hearted, and an abnormal thirst is often experienced. Dizziness and headaches are common. The skin is dry and often itchy. The digestion is often upset, due to the unusually abnormal increased appetite. The eyesight may be impaired or weak. The urine is generally very pale and plentiful. Sugar is present in the urine in more or less quantities. [HHH p.62]

Today diabetes is said to be one of the top killers in the world. It is supposedly one of the incurable diseases, but it can be definitely cleared if one approaches it properly. Diabetes stems from a disorder in the pancreas, so you shouldn't just treat it by giving insulin, which is working on the effect; you should instead go to the cause of the disease. Pancreatic malfunction can manifest in one of two ways: diabetes, which is high blood sugar, or hypoglycemia, which is low blood sugar. Though they are completely different, they both stem from the same cause, a malfunction of the pancreas, which is what we have to treat. [EWH p.133]

### Symptoms

This is a constitutional disease where carbohydrates are not used properly due to failure in the pancreas to secrete sufficient insulin. The body tissue cannot oxidize carbohydrates at a normal rate. This is characterized by excessive discharge of urine, sugar in the urine, excessive thirst and hunger, and progressive emaciation. [SNH p.16]

### Cause

Malnutrition and malfunction in connection with a bad pancreatic condition cause diabetes. Stay away from sugars and starches which will go into diabetes very quickly due to a weakened pancreas. Baking soda and aluminum cookware greatly aggravate diabetes. [SNH p.16]

### Herbal Aids

General Program: Diabetes is a forerunner for Bright's disease. Heavy users of insulin have been able to cut their intake rapidly by a number of herbal remedies such as verde cactus and ginger, and chaparral. Clean the colon area with a high enema of burdock root, yellow dock root, or bayberry bark. Assist nature in its elimination of sugars and body poisons through the skin by taking long hot baths and soaking in the bathtub. Accompany the baths by taking internally diaphoretic teas. Finish off with a cold shower or by sponging with cold water and vinegar. Use the lower bowel tonic herbs [[Fen LB](#)] to help promote regular elimination. Hot fomentation of castor oil, etc., may be used on the spine, stomach, and pancreas areas to obtain relief. The patient should avoid all processed denatured foods and "secondary" foods such as animal by-products--meat, milk, eggs, fish, etc. Herbs such as Irish moss and slippery elm are nutritive mucilages that soothe while they feed the irritated digestive areas. In general, the diet for diabetes should consist of the fresh fruits and tender greens and vegetables "in the season thereof" from the garden, preferably raw or cooked at low heat. Deep breathing and plenty of vigorous outdoor exercise are also vital. [SNH p.16]

See formula using raspberry leaves, myrrh and cayenne. [SNH p.144]

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**Sumach Berries:** Diabetes, bowel complaints, catarrhal affections of the stomach, fevers. Drink the infusion of the sumac berries alone. [SNH p.158]

**Panc Tea:** Dr. Christopher's Herbal Aid for Pancreas and Companion Glands Formula: An aid to help promote the normal function of the pancreas and other affiliated glands that through malfunction cause high or low blood sugar (namely diabetes or hypoglycemia). This combination has assisted many that have had hypoglycemia after six months or more of using two to three capsules three times a day six days a week (all herbal aids give faster results in six days a week instead of seven) using the same day of each week for rest. They have had a glucose tolerance test with a clean bill of health on the pancreas area. Many reports came in of heavy insulin users who continue using the insulin but by watching litmus paper or other types of diabetic checking, have gradually tapered down on the insulin and many, within a year of using two to three or more three times a day, six days a week of this combination, have reported to have found complete relief. Of course, the closer a person stays on the mucusless diet and eliminates the sugars (unnatural), soft drinks, candies, pastries, bread, etc., the quicker the results. The herbal formula is golden seal, uva ursi, cayenne, cedar berries, licorice root and mullein. [HHH p.95]

**Water:** Persons suffering from obesity or diabetes are sometimes restricted in the drinking of water, with the result that constipation is produced, if this condition does not already exist. This should never be done. [HHH p.141]

**Juices that Help Diabetes:** Carrots & spinach, dandelion, cabbage. [NL 3-5]

**Testimonials**

1. Diabetes and Hypoglycemia Both Cured by [Panc Tea](#): Dr. Christopher's Herbal Aid for Pancreas and Companion Glands Formula One day a man and his sister, both middle-aged adults, came into Dr. Christopher's office. She had severe diabetes, and his hypoglycemia was so bad that doctors' tests indicated that he could not get any worse, without offering any hope to help him. They both were told to use the mucusless diet and to take the pancreas formula, although they took the lower bowel formula [\[Fen LB\]](#) and blood cleansing formula [\[Red Clover Combination\]](#) before they began on the pancreas formula.

The woman was using around 80 to 85 units of insulin a day, being a severe case. Despite her initial condition, within a year her pancreas was furnishing its own insulin, and she tapered off gradually until she didn't need it at all. Her brother took a glucose tolerance test in six months and received a clean bill of health; his hypoglycemia was completely cleared.

Despite the fact that they had opposite diseases, diabetes and hypoglycemia, both were cleared because each had a family weakness in the pancreas. When their pancreas was cleared, the diseases were removed. [EWH p.134]

2. Parsley and Juniper Berries: One gentleman in his sixties was in great distress because he was unable to urinate. The doctor catheterized him several times and told him that he would have to undergo an operation. It was then discovered that the man had sugar in his urine and the operation was deemed too dangerous until the diabetes was under control. The patient's osteopath finally prescribed Parsley tea. The results were astonishing. Not only was he able to urinate freely but every trace of sugar disappeared from his urine. After first drinking the tea a lot of offensive substance came away in his urine. But it soon became normal and the patient was soon playing his normal rounds of golf with enjoyment and with no further thoughts of an operation (Luc:84). To void urine Dr. Christopher specifically recommended combining the Parsley with Juniper berries. [UW-Parsley]

3. Dr. Christopher Discovers Cedar Berries Will Help Cure Diabetes: I had been concerned for years about how to get to the cause, in this condition, and get the pancreas, and other assisting glands, to become healthy and again make its own insulin and control the high or low blood sugar on its own, or as was originally intended.

The breakthrough came a number of years ago by accident (divine providence, I believe). A patient came to me with the problem of "having trouble in voiding his urine." This was years ago when I would mix my formulas, as needed, in my own herb laboratory. As I was in a hurry that

day and did not have time to mix up a regular diuretic formula for him, I told him to use some juniper berries, and, if they were fresh to chew them, or make them into a tea. His response was that he had some growing in his own backyard and would use them.

Weeks later he returned and said the juniper berries were not giving him much help in voiding his urine. Knowing how efficient they really were in doing this, I asked him to let me see the juniper berries he was using. He took some from his pocket (as he carried them around, chewing on them during each day) and showed them to me. I laughed and said those are not what I meant. The true juniper berry I had recommended to him would have five or seven small stones in each berry, but the ones he had been using had only one. It was actually of the juniper family but was a "Utah monostone" cedar berry (*Juniperus monosperma*). It grows in the West such as in Arizona, Nevada, Utah, Texas, and in the national cedar forests but entirely different from our regular juniper berry (*Juniperus communis*; Pinaceae).

When I told him about the "mistake," I gave him some juniper berries which eventually worked and did the job. I was astounded about his reply because after thanking me, he stated he would continue using the cedar berries anyhow. When I asked him why, he said, "Well, since using what you call cedar berries, I have been able to cut down on my insulin as I am a diabetic. I wasn't sure I heard him right (after looking for something like this for years) and asked him to repeat what he had said. Upon his verification of what I hoped he had said, I was very excited and asked him to increase the amount he was using and keep in touch. He did so, and in a few months his pancreas, which had found the right food (cedar berries), was healed and producing its own insulin.

I then tried it on a number of my patients, who were diabetic, with great results! One of them was a lady using about eighty-five units of insulin a day. She was put on the mucusless diet, given the lower bowel formula [Fen LB], and told to use at least six cedar berries three or more times a day. She was instructed to continue on using her insulin but to watch the litmus paper carefully and taper her insulin intake gradually as the litmus paper would act as a gauge. So she had gradually tapered off her insulin and by the end of the year was not using any more. Her own body (pancreas) was supplying it as she required its use. She had no reoccurrence, but of course she stayed on the mucusless diet, because a faulty diet is the cause of pancreas malfunction. We have had remarkable success over the years with diabetes, using this system.

As time went on, we found that some of our ailing pancreas patients, though the sugar and insulin problem was adjusted, would have problems with the pituitary, pineal or adrenal glands. We had not, at this time, taken the thought into our mind that the pancreas doesn't work alone, but is assisted by other glands. When the pancreas was healed, toxic burdens centered more, now, into the other glands. This was the time we added additional herbs to take care of these other glands--and since then they all are rejuvenated and healed together. The formula we have used for years, with success in all age groups from children to old aged patients is as follows: Cedar berries sixteen parts and one part of each of the following--golden seal root, uva ursi, cayenne, licorice root and mullein. [NL 1-6]

4. PC formula and Diabetes: (Panc Tea) In 1979 I discovered I had diabetes. I was in the hospital for a broken leg so they put me on insulin, 45 units each morning. I had heard your cassette tapes and decided that when I got home, I'd try herbs. I use the P.C. formula [[Panc Tea](#)] for diabetes, CA-T [[Calc Tea](#)] and BF&C to strengthen my bones, Naturalax No. 1 and 2 [[Fen LB](#)], and EZ [[Relax-Eze](#)] for my nerves.

In April, 1980, I had gotten so I didn't need insulin anymore. I just kept taking P.C. [Panc Tea] and testing and reducing the units of insulin gradually. Now I don't even need to take P.C. Once in a while I feel the need for EZ [[Relax-Eze](#)] when I've had a busy day. But otherwise, I feel great. I have your large herb book and through it, and the cassette tapes, I am able to help others. [NL 4-7]

#### See Also

[Adrenetone](#): Dr. Christopher's Adrenals Formula

[Juni-Pars](#): Dr. Christopher's Kidney Formula

[Panc Tea](#): Dr. Christopher's Herbal Aid for Pancreas and Companion Glands Formula

- [Adrenals](#)
- [Bright's Disease](#)
- [Hypoglycemia](#)
- Cleansing the Bowels

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## Diarrhea

### Definition

Diarrhea is the abnormal frequency and liquidity of fecal discharges. [HHH p.63]

### Symptoms

A common symptom of gastrointestinal affliction, either from acute infection, inflammation of the mucous membrane, or psychogenic causes. It is characterized by frequent, morbid and profuse bowel evacuations. [SNH p.17]

### Cause

1. Diarrhea is the most severe form of constipation caused by a complete blockage in the lower intestine. Liquids only will come through while solids are retained. The body must be cleansed as quickly as possible or diarrhea will go into dysentery. [SNH p.17]
2. Diarrhea has a number of causes: too much fruit, digestive upset, stressful emotion. It may be the body ridding itself of toxins. It is the most severe form of constipation and should be dealt with immediately. [HHH p.63]
3. Caffeine intoxication, or caffeinism, has symptoms which include among others diarrhea. [NL 4-1]

### Herbal Aids

- Rice Water: Rice water will check the diarrhea as will peach leaves, raspberry leaves, and sunflower leaves. [SNH p.9]
- Peach Leaf Tea or Ripe Peaches: The use of peach leaf tea or ripe peaches themselves will often help stop common diarrhea. Sunflower leaf tea is one of the most potent but must be used in very small amounts. [SNH p.17]
- Plantain: Use a strong tea (steep one ounce of the granulated herb for twenty to thirty minutes in one pint water), inject one tablespoonful three or four times daily (or more frequently in bad cases), and especially after each bowel movement. [SNH p.53]
- See formula for diarrhea using plantain, silver weck and knotgrass. [SNH p.54]
- See formula for diarrhea using bayberry, African ginger and pinus. [SNH p.135]
- See formula for diarrhea using white oak, raspberry and cinnamon. [SNH p.162]
- Infant Syrup for Diarrhea: See formula using bistort, marshmallow, cloves, angelica and ginger. [SNH p.163]
- Witch Hazel: Give a rectal injection of the fluid extract (distilled aqueous extract) or decoction; take internally. [SNH p.171]
- Acute Diarrhea: Give the syrup of Turkey rhubarb according to the dosage specified. See formula for syrup of Turkey rhubarb using turkey rhubarb, sugar and glycerine. [SNH p.185]
- Mucilage of Comfrey: Diarrhea, dysentery, and cough [delicate children]. Give the mucilage sweetened with honey in teaspoonful doses frequently (it helps strengthen, nourish, sooth and heal). See formula doe mucilage using comfrey root, water, honey and glycerine. [SNH p.310]

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Mullein: for diarrhea, dysentery, and bleeding of the bowels. Boil 1 ounce of mullein in 1 pint of milk for a few minutes, strain and give in 1/2 cupful doses after each bowel evacuation (and if you don't have a scale or the time to calculate the equivalent measure, just grab some and go to work). [SNH p.317]

Wild and Domestic Sunflower Leaf: An excellent and easy-to-find herb for diarrhea is the common wild and domestic sunflower leaf. Make up a tea of this, and start giving a teaspoon of the tea at a time. Increase the amount gradually if needed, but not too fast, as it will cause constipation if too much is taken. This is children dosages. [HHH p.64]

Oak Bark Tea: A real life saver is a rectal injection of oak bark tea, also drinking this same type of tea. This works in the most severe cases. We must always go back to the cause, after relieving the effect, by checking the diet. [HHH p.64]

Serious Diarrhea in Children: Should the diarrhea be a more serious nature, keep the child on nothing but teas for six, twelve or twenty-four hours or more, depending on the age of the child. The following herbs are suitable for this purpose: red raspberry, yarrow, oak bark, bayberry bark, sage (garden), mullein, marshmallow, nettle, slippery elm, strawberry leaves, ginger, plantain. [HHH p.64]

Cleansing the Bowels: See the entire appendix in Herbal Home Health Care p.128. [HHH p.128]

Schizophrenia in Children is often characterized by diarrhea. See Dr. Christopher's answer to this in his newsletter. [NL 1-3]

Juices for Diarrhea: Carrot, cranberry. [NL 3-5]

[Colitis](#): This is often accompanied by diarrhea. [NL 4-8]

Vegetables for Diarrhea: Apply cabbage leaves to the abdominal region during the day and a fresh application for overnight and drink a cabbage broth. [NL 4-12]

Vegetables for Diarrhea: Sweet potatoe [NL 4-12] , winter squash [NL 4-12] , and ginger [NL 4-12]

Brown Rice: We have seen serious cases of diarrhea respond most effectively to rice water made by boiling one ounce of rice to one quart of water for 20 minutes, strained and drunk. [NL 5-1]

Fruits for Diarrhea: Apricot, blackberry, blueberry and apple. [NL 5-1]

### Testimonials

Dr. Daniel B. Mowrey, a research psychologist from the NMC Behavior Research and Development Labs, has discovered a formula including Ginger which seems to work extremely well in the treatment of flu. Although he is hesitant to proclaim it as a cure-all, he presents the history of finding this remedy as very interesting. He was not too sure that herbs could break up quite a siege of flu, and spent a few days reading about herbs for the ailment and making up experimental mixtures. He never took any of them, recovering in bed instead. However, his wife caught the bug, and she reported that their herbal mixtures she took seemed to have little effect. The afternoon of the first day of the flu, though she reported a remarkable relief of the symptoms. She took more of the combination and felt even better. She got out of bed and stayed out, taking more of the herbs anytime she began to experience diarrhea and nausea. He was impressed, and tested his formula on sixteen flu-stricken subjects with 100% remission of symptoms. Still, Dr. Mowrey doesn't claim that this combination will work for everyone, but he is very excited about the possibilities. The combination includes Ginger, cayenne, golden seal, and licorice. [NL 7-3]

### See Also

[Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula

[Constipation](#)



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## Digestion

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## Diphtheria

### Definition

A serious contagious disease that produces a poison throughout the body and a false membrane lining of the throat.

### Symptoms

An acute febrile and contagious affliction common with children, characterized by the formation of a fibrous, inflammatory membrane (yellowish or greenish) on the mucous membrane of the air passages, usually the pharynx, larynx, and trachea. The tonsils become inflamed and are dark red, but the uneven swelling gives the appearance of white patches. This is further characterized by pain, swelling and obstruction, fever, prostration, and often cardiac damage, which sometimes results in paralysis and death. [SNH p.18]

### Cause

Diphtheria is caused by impure blood, improper diet or contaminated foods, and unsanitary conditions. A deficiency of organic calcium and vitamin C is the basis for diseases of this type. [SNH p.18]

### Herbal Aids

General Instructions: With diphtheria the throat area should be cleared of the false mucous membrane. Historically speaking, many herbalists have used the following: bayberry and raspberry combination, garlic, or a purified type of turpentine as a fomentation. Take a few drops in a tea. Quick relief is given through antispasmodic and cayenne fomentation on the chest and the lung area. Antispasmodic tincture and cayenne can be taken internally (this will also ward off the danger of paralysis). One should always give an emetic before allowing the patient to go to sleep, and the bowels should be cleaned of the poisons with high enemas accompanied with stimulant herbs. Any of the following may be used as enemas: bayberry bark, raspberry leaves, catnip, chickweed, white oak bark, shepherd's purse, wild alum root, echinacea, strawberry leaves, raspberry leaves. A hot vapor bath is beneficial as is a hot foot bath of mustard and water. Also apply fomentation of mullein and ragwort to the throat. Decoctions of raspberry leaves, mullein, agrimony, bayberry bark or lemon juice will relieve the soreness in the throat. Ample fresh pineapple juice is also very good. [SNH p.18]

Oak Bark: Where one suspects a light attack, a gargle with oak bark, with a little cayenne or composition powder added may arrest further development. [SNH p.139]

See formula using white oak bark, persimmon bark and mullein leaves. [SNH p.140]

Sumac Berries: Infuse the berries for 1/2 hour in a quantity of water, strain and sweeten to taste with honey; mix with fresh pineapple juice; use as a gargle. [SNH p.155]

See formula for fomentation using mullein, cudweed and ragwort. [SNH p.319]

See decoction using mullein, raspberry leaves, agrimony, bayberry, cayenne and myrrh. [SNH p.320]

Cayenne: Apply tincture of cayenne around the neck, then cover with a flannel fomentation of cayenne infusion, and drink cayenne internally. [SNH p.409]

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**Diphtheria**

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**See Also**

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture

[Cayenne](#): Dr. Christophers many Cayenne Combinations

## Ailments

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## Dizziness

### Definition

A swimming or swirling sensation of the head; a sensation of lack of equilibrium. [SNH p.18]

### Cause

Dizziness can be caused by constipation when pressure causes the nerves to become impinged. There are many other reasons for dizziness such as the menstrual period, an injury or a fall on the head, compacted sinuses, or blood pressure problems. [SNH p.18]

One vulnerable area in the human body for this "hardening of the arteries" is found in the brain. Regardless of how intelligent an individual has been in the past, when the arteries in the brain area become hardened there is a resulting slowness in thinking, loss of memory, headaches, dizziness, dimming eyesight, paralysis, and one of the saddest conditions of all - senility. [NL 2-1]

### Herbal Aids

[Cayenne](#): Cayenne help promote relief. [SNH p.19]

European Pennyroyal: Apply the tincture preparation with apple cider vinegar to the nostrils. [SNH p.284]

Rue: Chew 1-2 freshly-picked leaves. [SNH p.295]

See formula using valerian, tansy, caraway and rue. [SNH p.378]

Mistletoe: Historically speaking, mistletoe is said to cure stubborn headache, even migraine. The extract is also used in headaches which are accompanied by dizziness, in spells of vertigo when there is a tendency to fall backwards, in people whose gait is wavering, who are afraid of open places, get attacks of "pins and needles" in the limbs and suffer from cold feet (Ibid.). [UW-Mistletoe]

Vertigo: Question to Dr. Christopher in his newsletter. Is there any help for vertigo?

His answer: Yes, it can be helped. This condition of vertigo is, to most people, a frightening condition. As is explained in The American Illustrated Medical Dictionary (Dorland, copyright 1947), vertigo is a sensation as if the external world were revolving around the patient (objective vertigo) or as if he himself were revolving in space (subjective vertigo). The term is sometimes erroneously used as a synonym for dizziness. Vertigo may result from disease of the middle ear (Menere's disease), from cardiac, gastric, or ocular disorders, from some peripheral irritations (as laryngeal vertigo) as a precursor on an epileptic fit, in hysteria, from toxemia (as Bright's disease), from an organic brain disease, and from unrecognized causes (essential vertigo).

Use [B & B Tincture](#) as follows: place four to six drops of oil of garlic in the ear with our eyedropper and follow this with four to six drops of B & B in ear, then plug ear with cotton. Turn the other ear up and do the same as with first ear-plug this one also and leave in all night, or night and day if desired, and flush ears on the seventh day. This is done by using a small ear syringe and flush with warm apple cider vinegar and distilled water (half and half) then continue on. Apply garlic oil and B & B tincture this same way week after week until desired effects are acquired.

Have the patient drink six to ten drops of the B & B tincture three or more times a day. (This could be done each hour in severe cases.) Massage B & B tincture on the cords back of the ears

down the neck area and on the base of the skull (medulla area) several times a day.

The program as given above has aided many having problems with their equilibrium and locomotion. When more severe, in addition use the "bone, flesh and cartilage" formula over the skull area above eyes and ears area soaking and sponging out a cap made of flannel, cotton or wool and leave on the head area overnight, as before, six days a week, week after week until results are received. This fomentation should not only cover the skull area front and sides but also down the back to cover the medulla and down over the upper cervicals to cover the motor nerve area.

This type of a patient with vertigo should also use the nerve herbal food combination [Relax-Eze]. [NL 1-12]

**See Also**

[B & B Tincture](#): Dr. Christopher's Nervous System Formula with Black Cohosh

[BF & C](#): Dr. Christopher's Bone, Flesh and Cartilage Formula

[Cayenne](#): Dr. Christophers many Cayenne Combinations

[Relax-Eze](#): Dr. Christopher Nerve Herbal Food Combination

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**Dizziness**

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## Dropsy

### Definition

Abnormal and excessive accumulation or infiltration of diluted lymph serum in the interfibrillar spaces of the subcutaneous connective tissue or in the serious (peritoneal or pleural) cavities of the body which do not drain. [SNH p.19]

### Symptoms

This condition is accompanied by swelling, scanty urine, poor appetite, sluggishness, and debility. The swelling usually begins in the feet and ankles and proceeds up the legs towards the abdomen. [SNH p.19]

### Cause

Heavy salt users often have dropsy as do diabetics. We do not pinpoint the symptoms as to locality (hydrocephalus, hydrothorax, ascites, etc.), as does orthodox medicine, but the general problem is that fluid does not eliminate properly through the kidneys and skin. Dr. Edward Shook had the following to say about dropsy: "When sulfuric acid is generated within the organism, it immediately unites with water and swells up. This action produces heat, which expands the capillaries. The osmotic pressure forces the serum through the walls of the blood vessels, producing inflammation and dropsy. Hence the using of inorganic matter is always poisonous to the human organism in spite of all the apparent evidence to the contrary." (Advanced Treatise on Herbs, p.132) [SNH p.19]

### Herbal Aids

General Instructions: Exceptional results have been attained with dropsy by the use of parsley, parsley root, juniper berries, verde cactus, ginger, and chaparral. Diet is the key to eliminating the cause. Meats, pastries, salt, etc., should be avoided. Eat fruits (grapes and coconut especially), sprouts, leafy and green vegetables, (do not mix fruits and vegetables). Use vapor baths and diaphoretics to open the pores, stimulants to increase and regulate circulation, diuretics for kidneys, and be sure to treat the whole digestive system with tonics. Also rub the body with vinegar and cold water and be sure to keep the bowels cleaned. [SNH p.19]

Plantain: Drink the tea from the seeds. [SNH p.53]

Dropsy, Heart Disease: See formula using parsley seeds, lily of the valley root, garlic, sugar and glycerine. [SNH p.102]

Bitter Root: Cardiac dropsy. Give 5-15 grains of powder 3 times daily. [SNH p.209]

Parsley: Make at least 2 quarts of the parsley root strong decoction and drink copiously. [SNH p.246]

Parsley: Mix equal parts of parsley root tea, and glycerine, saturate cloths and apply to swollen areas; keep patient warmly-covered in bed with tepid air circulation (this brings water through the skin and helps relieve the burden on the kidneys). At the same time, give the parsley root tea without the glycerine as a drink, 1/2 cupful each hour. [SNH p.246]

See formula using juniper berries, parsley seed and distilled water. [SNH p.252] For renal dropsy, avoid taking too large doses [of juniper berries], as the stimulating effect may irritate the urinary passages; usually administered in combination with demulcent agents. [SNH p.250]

See formula using wild carrot, haircap moss and watermelon seeds. [SNH p.264]

Dropsy (adult): See formula using cleavers, raspberry leaves, agrimony, juniper berries, wild carrot, barberry and cayenne. [SNH p.269]

Dropsy (child): See formula using cleavers, juniper berries, centaury, raspberry leaves, senna and ginger. [SNH p.269]

Note: ...With dropsy, the kidneys must be watched, but also the digestive system strengthened; also sponging the body with cold water and apple cider vinegar is an excellent skin tonic. [SNH p.269]

[Digestion](#)[Diphtheria](#)[Dizziness](#)[Dropsy](#)[Dysentery](#)[Dyspepsia](#)[Dyspnea](#)[Earaches](#)[Eczema](#)[Edema](#)[Enuresis](#)[Epilepsy](#)[Eye Ailments](#)

See formula using buchu leaves, hydrangea, broom tops, couchgrass, uva ursi and saw palmetto berries. [SNH p.272]

Blue Cohosh: Drink the warm decoction. [SNH p.292]

See formula for the fomentation using mullein, lobelia and cayenne. Foment as warm as is convenient over the lungs, or over the affected part. [SNH p.318]

Dropsy # 1: See formula using horseradish root and apple cider vinegar. [SNH p.424]

Dropsy # 2: See formula using horseradish and crushed mustard seed. [SNH p.424]

Alfalfa: It's no wonder that so many interesting cures are attributed to Alfalfa. It has been acclaimed as a diuretic. In fact, one woman who was suffering extremely from dropsy began to take the tea faithfully, and with no other remedy was relieved of the problem. [UW-Alfalfa]

Elder: The inner bark is also used, although it should be aged before used. The fresh bark is violently irritating and poisonous to children. It is specifically used for cardiac and renal dropsy, as an emetic in biliary disorders, and for spasmodic asthma with copious phlegm and stringy mucus. It is also used for epilepsy. The infusion is used, one wineglassful every three hours until the bowels move or, in the case of severe dropsy, until urine is voided. If emesis is desired to cleanse the stomach, increase the dose until this effect is produced. After evacuation and urination begin, reduce the dose to continue treatment as watery stools are not desired where there is no dropsy. [UW-Elder]

Juniper: The tea has been given to dropsical patients, often combined with parsley seeds, as a sure and safe way to effect water release through the urine and through the skin. In England, patients are often prescribed Hollands Gin, which is flavored with Juniper berries and which retains some of the medicinal properties to help dropsy and similar ailments. It is said to be particularly useful in dropsy when it is caused by heart, liver or kidney disease. [UW-Juniper]

Parsley: Dr. Shook reminded us that Parsley is one of those herbs that have to be taken abundantly to be of any permanent benefit. That is all right because it is such a pleasant herb! He mentioned that when there is suppression of the urine and dropsy a treatment similar to the one described in the introduction as employed by Dr. Christopher could be used but he also said that after applying the fomentation to cover it with a sheet of plastic and a towel, and then with an electric hot pad, leaving this on for twenty or thirty minutes. After removing the hot application, he said, apply a cold but not iced towel for just one minute. He said that this application was very important and not to omit it although Dr. Christopher's treatment got very good results without it (Hei:60). [UW-Parsley]

Rosemary: Father Kneipp, who is known as a water healer but also endorsed other important healing methods, considered Rosemary an important remedy for the heart and stomach. He wrote, "Prepared as a tea, it cleanses the stomach from phlegm, gives a good appetite and good digestion. Whoever likes to see the medicine glass, this comforter in illness, shining on his table, let him fill it with Rosemary tea and take from two to four tablespoonfuls morning and evening. The stomach will soon become sensible, that is, will not stick fast much longer in phlegm...Rosemary wine, taken in small doses, has also proved an excellent remedy against heart infections. It operates in a sedative manner and in cases of heart dropsy it works strongly on removal through the urine...The preparation of this wine is exceedingly simple. A handful of Rosemary is cut up as small as possible, put into a bottle and good, well kept wine poured upon it. White wine is preferable. Even after a half a day's standing it may be used as Rosemary wine" (Luc:109). [UW-Rosemary]

What Can be Done for Dropsy? This was a question put to Dr. Christopher in his newsletter. His answer: For mild or beginning forms of dropsy caused by urinary malfunction, we have the following:

For a severe case let us cite a good case of how it can be handled in most cases.

A lady came into our weekly Tuesday night lecture a little late, after we had barely started. She asked if she could interrupt and tell something that had happened to her since the last lecture, a week ago. We said we'd be happy to hear her story, so she told us the reason she was a little late was because of a long distance phone call she had just received.

Just after the last lecture, the Tuesday before, she received a call from her brother-in-law in Chicago. He told her that if she wanted to see her twin sister alive she had better fly back there immediately because the doctors had said she had only a day or two to live.

Our student took a few days off from work and arrived in Chicago on the following Friday. She went in to see her sister and would not have recognized her if she hadn't been told who it was. Her sister was so badly swollen from edema (dropsy) that she seemed to be only a bloated, unrecognizable mass of flesh. She had been under doctors' care for a number of months, and they had been unable to give her anything but temporary aid from the water accumulation. Now they were utterly baffled and had, at the family's request, sent her home from the hospital to die (being given a day or two or slightly more grace).

The sick and suffering twin was in a coma, not recognizing anyone, and our student cried when she saw her favorite sister lying there helpless, with little school children needing their mother so much, so she asked the

husband if he would allow her to use an herbal routine she had heard about at a lecture recently. He said the family's doctor was just waiting for her to die anyway, so go ahead!

Our lady found a little health food store nearby and bought some parsley root and glycerine (this was animal glycerine, we now use vegetable glycerine which is superior).

When she got back she made up parsley root tea (one teaspoon of herb to a cup of water, or one ounce of herb to the pint of water), making up about one gallon of the tea. (Steam distilled water is 30% more efficient than tap water and is our choice.)

One quart of the tea was used straight to give to this patient orally, and three quarts of the parsley root tea was mixed with equal parts of glycerine (making six quarts of the mixture) for fomentations.

They would give a cup of parsley tea each one half hour to the patient to drink, and the heated combination (of parsley and glycerine) was used as a fomentation over the badly swollen legs, arms and abdomen. This was done by soaking white flannel cloths and laying them over the areas. (Use cotton or wool, never use synthetic cloth.)

As the patient lay there so helpless, her sister remembered instructions given to follow the progress of the treatment. She was to lift the corner of the cloth, after the fomentation had been on for a short time, and watch to see if the pores were starting to take the water from swollen areas. She said that as she looked it was like seeing hundreds of little springs coming from the body. She had made this trip and was walking by faith, using a formula she did not know about or had ever used before. She had just heard of it at our lecture that previous Tuesday. She had to fly back to work on Monday, so she left all the instructions with the husband to continue on with the program that had been started.

After work Tuesday she rushed home to get ready for the regular Tuesday night herb lecture and the phone rang. It was her brother-in-law from Chicago. He said, "There is someone here who would like to talk to you." He put his wife on the phone. Even though she had laid helpless for months and part of the time in a semi-conscious condition, she was on the phone now, so happy she was crying. The swelling had gone down, and she was recovering rapidly--in fact she said she got the children's breakfast and fixed their school lunches that day and was so grateful "to be a mother again"--not a dying patient. There were not many dry eyes in the lecture room that Tuesday night when she finished her story.

Yes, parsley tea is a blessing to people who have dropsy. [NL 1-12]

Dropsy with Heart Involvement: Boil 8 ounces lily of the valley root (cut) (*Convallaria majalis*) in 3 pints of distilled water for 20 minutes. Strain then boil slowly till reduced to 1 pint. Set aside to cool, and while still warm, add 8 ounces of expressed garlic juice, 8 ounces of brown cane sugar, and 1 pint of glycerine. When cold, bottle and keep in a cool place.

This is one of the most potent remedies for dropsy and heart disease ever devised.

Dose: 1 teaspoonful to a dessertspoonful in water, as required. The dose should be regulated and given every 3 hours to bring about diuresis. Also, a slowing of the heart action, and an increase in the tone of its contraction. After this effect has been produced, administer 1 teaspoonful in water 3 or 4 times a day. [NL 2-9]

Juices: Celery, dandelion, carrot & spinach, onion & milk. [NL 3-5]

Lobelia: The relaxant or releasing quality of Lobelia is related in a case handled by an associate, Richard Schultz M.H., N.D., when a three-year-old child was brought to him, after receiving no help from medical doctors. The little girl was swollen so badly with edema that a person could not see her eyes through the puffiness. Schultz administered previously successful herbal diuretics to no avail. Knowing that she must release these fluids, he administered Lobelia seed tea, one teaspoon three times per day, which gave some immediate pain relief and reduced the swelling gradually, clearing the condition completely within two weeks. [NL 6-9&10]

### Testimonials

1. A New Life Through Proper Diet and Herbs: Not long ago, we had an experience that we will not forget for a long time. A gentleman came to visit us on his way through the area with his wife, and when we saw him the previous year on a business deal, he was so bad that rigor mortis had almost set in. In fact, the medical doctors had refused to give him any more medication. He had a heart condition that had gone into dropsy, and his blood pressure was so high that he was just tottering around. There was so much mucus in his body that the tissue was completely loaded to suffocation. At the time, knowing of my profession, he asked what could be done. We started him off with a very simple procedure: We put him on nutritional herbs (fruits and vegetables--our Regenerative Diet) and on Medicinal herbs. Now, a year later, the man had just finished 8,000 miles of touring! He had the finest skin-color you ever saw, and it was a thrill to see a man so full of pep and energy. Tears dropped from his eyes in our meeting, because he was so happy to be alive. These are times that make it worth all of the trouble we have suffered to assure others (seeking vibrant life today or in the future) and to have the legal right to use and obtain healing with medicinal herbs. And here is a living example of our chief message that health begins in the bowel, for when the colon is clean, when we are free from the morbid matter that is toxifying and defiling the system there, then the system can be fed properly, and we begin to live! [SNH p.177]

2. [Hawthorn Berry Syrup](#): Dr. Christopher's Hawthorn Berry Syrup: Hawthorn is also known for its specific action on edema. During one of Dr. Christopher's lectures, a young man asked if he could relate an experience of his mother's. He said that his mother had had such edema in the ankles that they were so swollen you couldn't even see the bones. Many remedies prescribed by various doctors had made no difference at all. The young man asked his mother to come up to the front of the lecture hall and stand on a chair so the audience could see her feet. She now had well-defined ankle bones after less than a week of using the syrup. [UW-Hawthorn]

3. From the Writings of Priddy Meeks about Lobelia: "Brother Nobles' wife was in about one month of her expected sickness and had the dropsy so bad she thought she could not live till that month was out, so that she could be doctored without injury to her offspring. The doctors in the valley held a consultation over her case and President (Brigham) Young with them. They could devise no means to save the woman without destroying the infant, and she could not live but a few days without help, but they would not make a move until they sent for me. When I come, they told me they could not see how the woman could be saved without destroying the child. I told them there would be no difficulty in bringing about that object. They wanted to know if I thought that I could take the water out of that woman and save both alive. I said, 'Yes, certainly I can. And Lobelia is the thing that will do it'. I just give her the Thomsonian Courses of medicine, and soon had all the water out and in due time she had a fine boy, to the joy of all who was watching to see what the result would be. I do not think the medicine is yet found and probably never will be that will act in accordance with the laws of life and the intentions of nature like Lobelia. No difference what the matter is nor where the obstructions are, Lobelia will find it and remove the obstruction and create a healthy action... [UW-Lobelia]

4. Parsley Saves Sister: A lady came into the weekly herb lecture late, just a few minutes after they had gotten started. She asked if she could interrupt and tell something that had just happened to her. Dr. Christopher invited her to tell her story. Just after the last week's lecture she received a call from her brother-in-law in Chicago. He told her that if she wanted to see her twin sister alive she must fly back there immediately because the doctors had given her only a day or two to live. The student took a few days off from work and arrived in Chicago on the following Friday. She went in to see the sister and would not have recognized her if she hadn't been told who it was. Her sister was so badly swollen from edema (dropsy) that she seemed to be only a bloated, unrecognizable mass of flesh. She had been under doctor's care for several months and they had been unable to give her anything but temporary aid from the water accumulation. Now they were utterly baffled and had, at the family's request, sent her from the hospital to die in a day or two.

The sick twin was in a coma, not recognizing anyone. The herb student wept to see her favorite sister lying there so helpless. With little school children needing their mother so much she asked the husband if he would allow her to use an herbal routine she had heard about at a lecture recently. He said the doctor was just waiting for the sister to die so to go ahead!

The herb student found a little health food store nearby and bought some parsley root and glycerine. At that time she was only able to get animal glycerine but now the herbalists use vegetable glycerine which is superior. When she got back she made up Parsley root tea, one teaspoon of herb to a cup of water (or one ounce of the herb to the pint of water), making up about one gallon of the tea. One quart of the tea was used straight to give the patient orally and three quarts of the tea were mixed with equal parts of glycerine, making six quarts total of the combination, for fomentations.

They would give a cup of Parsley tea each half hour to the patient to drink and the heated combination of glycerine and tea was used as a fomentation to the badly swollen legs, arms and abdomen. This was done by soaking white flannel cloths and laying them over the area, not allowing them to become cold, but replacing whenever they cooled down. One can also use a hot water bottle over fomentations if they are not over a large area.

As the patient lay there so helpless her sister remembered how to check the progress of the treatment. She was to lift the corner of the cloth, after the fomentation had been on for a short time, and watch to see if the pores were starting to take the water from the swollen areas. She said that as she looked it was like seeing hundreds of little springs coming from the body. She had never used this routine before and was walking by faith and it was a miracle to see it working. She had to fly back to work on Monday so she left all the instructions with the husband to continue on with the program that had been started.

After work Tuesday she rushed home to get ready for the regular Tuesday night lecture. The phone rang. It was her brother-in-law from Chicago who said, "There is someone here who would like to talk with you." He put his wife on the phone! She was so happy that she was crying. The swelling had gone down and she was recovering rapidly. In fact she said she had got the children's breakfast and fixed their school lunches that day. She was so grateful to be a mother again and not a dying patient. There were not many dry eyes in the lecture room when the student finished the story and it is a great routine to remember. One should store Parsley root or grow plenty of it so as to have it available in an emergency. Vegetable glycerine is also available and should be stored. [UW-Parsley]

**See Also**

[Hawthorn Berry Syrup](#): Dr. Christopher's Hawthorn Berry Syrup

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## Dysentery

### Definition

An affliction characterized by inflammation of the large intestine or colon.[SNH p.20]

### Symptoms

The symptoms are griping pains, constant strain to evacuate the bowels (tenesmus), intense diarrhea, and frequent discharge of mucus and blood. These are symptoms of impure blood, fever, sleeplessness, lack of appetite, and sometimes a swollen abdomen. In advanced cases, there is pallidness, rapid breathing, slow pulse, and hot urine. [SNH p.20]

### Cause

The cause is improper diet, liquids with meals, overeating, wrong food combinations, impure water, use of liquor, tobacco, coffee, tea, eating fruits or vegetables that have begun to decompose or chronic constipation. [SNH p.20]

### Herbal Aids

**General Instructions:** Bleeding from the bowels is quickly healed by mullein in milk. Give a warm, very high enema with an astringent such as white oak bark, bayberry bark, wild alum root, etc. Use fomentation of lobelia, castor oil, etc., placed on the abdomen and spine, followed by a liniment application of wormwood oil. The patient should be nurtured with a diet of light alkaline foods and mucilage herbs, such as slippery elm and Irish moss, barley or oatmeal water. [SNH p.20]

**Cayenne:** Cayenne will take care of most bleeding problems, external or internal by the time you can count to ten. For bleeding of the lower bowel (commonly called dysentery) use mullein (preferably in milk). [SNH p.5]

**Stems from Constipation:** Diarrhea is the most severe form of constipation caused by a complete blockage in the lower intestine. Liquids only will come through while solids are retained. The body must be cleansed as quickly as possible or diarrhea will go into dysentery. [SNH p.17]

**Sassafras:** Give the mucilage of sassafras pith. [SNH p.79] Mucilage of sassafras pith: See formula using sassafras pith, powdered and distilled water. [SNH p.80]

**Purple Loosestrife:** Give 2 fluid ounce doses as required. [SNH p.91]

**Dysentery (cathartic injection - anal):** See formula using bayberry root bark, African ginger and pinus. Have the patient lie on the right side so that the liquid may readily fill the colon; where the patient has a weak rectum and cannot hold the water, have him take the inclined position with the head lower than the hips; females with a retroverted condition of the uterus may take the knee-chest position, which will help throw the uterus right over and allow the liquid to enter. [SNH p.135]

**Red Oak:** Use the injection in small and frequent doses. [SNH p.139]

**Cranesbill and Golden Seal:** Combine equal parts of cranesbill and golden seal (*Hydrastis canadensis*) and inject a small amount of a strong infusion into the rectum. Diarrhea, dysentery, cholera infantum: Use the injection as required. [SNH p.152]

[Diabetes](#)[Diarrhea](#)[Digestion](#)[Diphtheria](#)[Dizziness](#)[Dropsy](#) **Dysentery**[Dyspepsia](#)[Dyspnea](#)[Earaches](#)[Eczema](#)[Edema](#)[Enuresis](#)[Epilepsy](#)[Eye Ailments](#) White Pond Lily: Use the decoction without sweetening as a cool injection (anal). [SNH p.165] Tormentil: Give 1 wine glassful every 1/2 hour until the excessive discharges are checked. [SNH p.168] Butternut: The astringent alcoholic extract containing properties is best for these problems; use 1-2 teaspoonfuls. [SNH p.177] Thyme: May be taken internally or used externally with amazing and beneficial results. Internally: 1 teaspoonful in 1 cupful of water, sweetened with 1 tablespoonful of honey 3-4 times daily; good for ...dysentery. [SNH p.230] Squaw Vine: Use the infusion or decoction as an anal injection. [SNH p.279] Comfrey: Give the mucilage sweetened with honey in teaspoonful doses frequently (it strengthens, nourishes, soothes and heals). [SNH p.309] Mucilage of comfrey root: See formula using comfrey root, distilled water, honey and glycerine. [SNH p.310] Mullein: Boil 1 ounce of mullein in 1 pint of milk for a few minutes, strain and give in 1/2 cupful doses after each bowel evacuation (and if you don't have a scale or the time to calculate the equivalent measure, just grab some and go to work). [SNH p.317] Marshmallow: Boil the powdered root in milk and drink freely. [SNH p.326] [Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula: The injection and enema are useful for helping conditions such as piles, hemorrhoids, colitis, etc., and for cleaning putrid congestions from the intestinal tract as in diarrhea and dysentery. Suppose you have a case of diarrhea--the majority of people want a remedy that will stop it right away. But diarrhea is simply a bad condition in the intestinal tract, where it is so badly clogged that the fecal solids are being held back and only the eliminative liquids are getting through. Would you believe it possible for people to have filth in them four, five, and ten or more years? It is a fact that we have seen with our own eyes. Read much more about cleansing the bowel. [HHH p.131] Juices: Blackberry, cranberry. [NL 3-5] Chill Pepper and "Montezuma's Revenge": In Mexico today, Chilis of various kinds supplement the daily diet and, in addition to providing spice and essential nutrients to an otherwise bland and repetitious diet of tortillas, beans, squash, pumpkins, potatoes and the like, they perform important medicinal functions. Visitors to Mexico often suffer from "Montezuma's Revenge," a particularly devastating kind of amoebic dysentery. However, if they will eat hot chill with their meals the way the native Mexicans do, they will not suffer this disease. Juliette de Bairacli Levy, when living in Mexico with her small children, did not hesitate to let them drink raw milk--a practice frowned upon by most because of the certainty of dysenteric infection. She spiked the milk with a generous dose of Cayenne and the children were never infected. She noted, too, that eventually the children came to relish the hot-tasting milk. It is reported that the Mexicans, who ingest such quantities of Chili that their bodies are infused with it, are not attacked by predatory birds, if they happen to perish by accident in the deserts; vultures won't touch the Chili-laden body. [NL 6-3]**See Also** [Cayenne](#): Dr. Christophers many Cayenne Combinations [Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula

## Ailments

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[Dandruff](#)

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[Depression](#)

## Dyspepsia

### Definition

Disturbed or deranged digestion, sour stomach, acid stomach, indigestion, poor assimilation. [SNH p.21]

### Cause

Dyspepsia is a hyperacidity condition in the body, where certain cooked and secondary substances cannot be digested. The problem may also be with the liver, or the gall bladder. This is caused by eating processed and devitalized foods. [SNH p.22]

### Herbal Aids

General Instructions: Instead of using those aids which are highly advertised and are high in aluminum, which cause aluminum poisoning, use the herbs for the nerves, stomach and bowels. Carminatives will assist the stomach herbs to improve elimination. Alternatives will cleanse the blood and tone up other excretory organs. Stimulant-diuretics will help eliminate waste matter that may be causing the problem. Demulcents or emollients will soothe the irritated stomach lining. [SNH p.22]

See formula using wormwood, shavegrass, aniseed and thyme. [SNH p.109]

See formula for decoction using cascara sagrada and water. [SNH p.176]

See formula for compound using mandrake root, ginger root and glycerine. [SNH p.196]

Elecampane: Give in small and repeated doses. See information about this herb. [SNH p.342]

See formula using lobelia, cayenne, acacia vera and anise seed. [SNH p.364]

See formula using American Colombo, golden seal and leptandra. [SNH p.436]

Golden Seal: 10 grains of the powdered root; or a tablespoonful of decoction 3 times daily; or 1-2 teaspoonfuls of tincture 3 times daily. [SNH p.438]

Juices: Carrot & celery, papaya, pineapple. [NL 3-5]

Vegetables: Jerusalem Artichoke, cabbage, celery, potato, radish, squash. [NL 4-12]

Spices: Caraway and cloves. [NL 4-12]

Echinacea: Echinacea is a good herbal aid for fermentative dyspepsia. It helps remove the gastric pains and allay the offensive breath due to this condition. It is also good for offensive gas. [NL 6-12]

Papaya: Papain can digest about 35 times its weight of lean meat and 300 times its weight in egg albumin. This is considered important because these heavy proteins as well as those in beans, peas, nuts, and lentils are often difficult to digest and putrefy more quickly in the digestive tract causing gas, foul mouth taste, foul breath, constipation, sour stomach, and heartburn. [UW-Papaya]

### Testimonials

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1. Kelp: Dr. Powell also had a woman come to him with a severe case of dyspepsia which would not respond to the usual treatment. Kelp proved to be an efficacious remedy in this case.

[UW-Kelp]

2. Kelp for Digestion: Another lady had suffered from digestive trouble for many years, suffering pain from even the smallest meal, vomiting frequently. She had spasm of the pylorus as soon as food entered her stomach. After prolonged treatment and constant failure with various remedies, the doctor tried Kelp. She experienced gradual relief and is now in a fair state of health.

[UW-Kelp]

3. Lobelia, Cayenne and Ginger: "One widow woman who had the dyspepsia was so bad that she was given up to die by the doctor who had attended her for near a year, and said she could not be cured. She sent for me to come to see her, which I did. She told me to try and cure her if possible. To do my best anyway and if I killed her it would only be death anyhow, for she knew she could not live long if she did not get help. So I went home to prepare for doctoring her, and Doctor Vendeenter, who had given her out, hearing I was going to undertake her case, come to see me. 'Mr. Meeks', says he, 'you had better not undertake that woman's case. That complaint cannot be cured, and you will fail and you will lose practice by it. The remedy for that complaint is not known. Search has been made for it as far as ships have sailed on the ocean, and human feet have trod the soil, and the remedy is not found yet'. I paid the woman five visits and made a sound woman of her. And what did I do? Nothing more or less than gave her a thorough course of Thomsonian Medicines each time. I know no other way to doctor at that time but to follow the letter of directions. I had nothing but kayenne pepper and ginger for my composition powder and Lobelia, and as I went along, gathered green Sumac leaves off the bush, which answered well for kanker medicine and to make a tea to put the medicine in for her to drink...This circumstance being noised abroad brought me as much business with the sick as I could attend to.

[UW-Lobelia]

4. Papaya: One herbalist, whenever he "pigs out on eggs or meat", brews a cup of Papaya leaf tea mixed with spearmint and camomile or if he's in a hurry (which, he mentions, is the worst cause of indigestion), he takes a Papaya-papain enzyme tablet. This removes the indigestion well.

[UW-Papaya]

#### See Also

[Kelp-T-Comb](#): Dr. Christopher's Kelp Combination

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## Dyspnea

### Definition

Shortness of breath or a difficulty in breathing.

### Symptoms

Difficult breathing. [SNH p.22]

### Cause

This usually arises from mucus in the air passages in the trachea, the nostrils, lungs, etc. [SNH p.22]

### Herbal Aids

General Instructions: Take a cup of cayenne tea and antispasmodic tincture internally and massaged on the chest area. With a breast-fed baby, the mother should take a tea of balm, hyssop, or pennyroyal. For the baby, where the problem is largely in the nose (sometimes referred to as snuffles), a mixture of milk and olive oil in the nose is good. The bowels may need to be relieved with a small injection of lobelia. [SNH p.22]

See formula for garlic syrup using garlic, apple cider vinegar and sugar. [SNH p.101] See dosages. [SNH p.100] See more dosages for dyspnea using garlic syrup. [SNH p.100]

Hawthorn Berry: for dyspnea. [NL 1-5]

[Hawthorn Berry Syrup](#): Dr. Christopher's Hawthorn Berry Syrup: is for dyspnea. [HHH p.184]

### See Also

[Antisp](#): Dr. Christopher's Anti-Spasmodic Tincture

[Cayenne](#): Dr. Christophers many Cayenne Combinations

[Hawthorn Berry Syrup](#): Dr. Christopher's Hawthorn Berry Syrup

[Asthma](#)

Dyspnea

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## Earaches

### Definition

Pain or aching in the ear. [HHH p.64]

### Symptoms

This can be a painful condition for all ages. Little babies rubbing and pulling on their ears are not able to tell you, orally, what is wrong. Children and adults also suffer from the same condition. [HHH p.64]

### Cause

Sometimes earaches are caused by infection, cold in the head, a blow to the side of the head, and many other causes. [HHH p.64]

### Herbal Aids

**Garlic:** Earache, inflammation of the middle ear, ear disease: Pack a small clove of garlic in gauze and place into the external ear passage; or drop 4-5 drops of [Oil of Garlic](#) into the ear channel, cover with flannel, and keep warm. [SNH p.100]

**Rue:** Warm and place several drops of compound oil into the ear. [SNH p.296]

**Mullein:** Use warm mullein oil, 2-3 drops in the ear 2-3 times daily. Apple cider vinegar is also a healing agent. [SNH p.317]

**Hops:** Apply a flannel bag of hops, and moist heat over the affected area. [SNH p.396]

**Treat Both Ears:** The simple, old-fashioned aids are sometimes very fast in giving relief. Always treat both ears, even if only one aches. [HHH p.64]

**Onion:** Lightly bake a large onion, cut it in half and while warm (not hot enough to irritate the area), bind one half of the onion over each ear. Bandage in place and hold bandage on with a nightcap, white skullcap, etc., and leave on all night. [HHH p.64]

**Camomile:** Use a fomentation over both ears of three parts of camomile and one part of lobelia. Take two ounces orally (a wineglass full) each two waking hours. Leave the fomentation on the ears all night. (Cover fomentation with plastic or oiled silk, etc.). [HHH p.64]

**Mullein:** Use three to six drops of mullein oil in both ears several times each day. Insert it upon retiring for the night, and, as before, plug the ears with cotton. Place a fomentation over the ears all night of three parts mullein and one part lobelia. [HHH p.64]

**B & B Tincture:** Dr. Christopher's Nervous System Formula with Black Cohosh: When this procedure is used as explained here, it can be helpful in promoting an improvement of poor equilibrium, failure of hearing, aiding the motor nerve, etc. With an eye dropper insert into each ear at night four to six drops of oil of garlic and four to six drops of the following herb tincture: blue cohosh, black cohosh, blue vervain, skullcap, and lobelia (B&B), plugging ears overnight with cotton, six days a week, four to six months, or as needed. On the seventh day, flush ears with a small ear syringe using warm apple cider vinegar and distilled water half and half. [EWH p.200]

**Flaxseed Meal and Blue Vervain:** Made into a poultice with flaxseed meal, using a strong

infusion of Blue Vervain instead of plain hot water, it relieves ... earache and ear abscess as well. [NL 5-10]

### Testimonials

1. **Garlic:** When my little girl had an earache I put a piece of fresh garlic in her ear and it was better by morning. The previous alternative was to go to the doctor and pay a lot of money for penicillin. [NL 4-4]

2. **Ant-Plg:** Dr. Christopher's Immune System Support Formula: The anti-plague formula contains Black Walnut. When Dr. Christopher was lecturing in Snowflake Arizona, he was describing the need for people to be prepared for the coming plagues in the last days.

Someone raised his hand and asked what should be used for the plague. Dr. Christopher, though he was a most noted herbalist, didn't have a ready answer! After a short prayer, he gave the anti-plague formula to the audience and then just forgot about it. Not long after, people began asking him for the formula again, as those at the Snowflake lecture had made it up and had, had marvelous results; they had cleared up flu, earache, eruptive diseases, car-sickness, and had even saved the life of a poisoned puppy! This anti-plague remedy is a most valuable combination. [NL 5-7]

### See Also

[Ant-Plg:](#) Dr. Christopher's Immune System Support Formula

[B & B Tincture:](#) Dr. Christopher's Nervous System Formula with Black Cohosh

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[Diarrhea](#)

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## Fever

### Definition

The elevation of the body temperature above normal (98.6 F., 37 C).

### Symptoms

It is characterized by increased heat, accelerated pulse, general functional derangement, and usually is accompanied with thirst and loss of appetite. [SNH p.23]

### Cause

Fever is not a disease but a condition in the body wherein the balance of circulation has become disturbed. This is nature's way of trying to burn out the toxic poisons. When the body becomes exposed to excessive chilling or dampness, the capillaries near the surface contract and the pores close by becoming obstructed with body waste matter. This results in a containment of body heat and a sudden rise of body temperature. In fever the natural body function is to increase the heat to a point wherein the thick glutinous and fibrinous matters loading and congesting the system are made liquid enough to pass through the fine and delicate excretory membranes and tubules. [SNH p.23]

### Herbal Aids

General Instructions: If the fever is from cold or flu, eliminate the mucoid condition and eliminate the problem. Raspberry, and other sweetening herbs, are very beneficial. Raise the body heat with moisture, a stimulant and diaphoretic herbs so the restricted blood vessels relax, the obstructed pores open, and the morbid material washes out in the subsequent profuse perspiration. [SNH p.23]

Echinacea: Fever, typhoid fever. Drink sufficient of the hot tea to induce diaphoresis, and administer hourly thereafter until the system is relieved of stagnated wastage. [SNH p.89]

See formula for the Four Greater Cold Seeds remedy for catarrhal affections, bowel and urinary disorders, fever, etc. using pumpkin seeds, ground seeds, watermelon seeds and cucumber seeds. [SNH p.126]

Camomile: Colds, bilious fever. Give a warm infusion with a little ginger added. [SNH p.219]

See formula using pleurisy root and ginger. [SNH p.221]

Boneset: Influenza, colds, fevers, etc. Give the patient 1/2-1 teacupful hot, every hour until freely perspiring and the fever begins to subside- then give in smaller dose as a tonic (cold) every 2-3 hours and keep closely-covered in bed 24-48 hours until all signs of the fever are gone. [SNH p.225]

See formula for fever, (opens pores, equalizes circulation), inflammation of throat using hyssop, vervain, raspberry, centaury, and cayenne. [SNH p.232]

Fever Compound: See formula using catnip, pleurisy root, lobelia and composition powder. [SNH p.237]

Fever Tonic #1 (tincture): See formula using Peruvian bark, wild cherry, cinnamon and

[Hernia](#)[Hiccoughs](#)[Hypoglycemia](#)[Hysteria](#)[Impotency](#)[Incontinence](#)[Indigestion](#)[Infertility](#)[Inflammation](#)[Influenza \(Flu\)](#)[Insect Sting](#)[Insomnia](#)[Itch](#)

cayenne. [SNH p.444]

Fever Tonic #2 (tincture): See formula using Peruvian bark, wild cherry, cinnamon, cloves, nutmeg and brandy. [SNH p.444]

[Cold Sheet Treatment](#): A fever is given to a person to assist in healing the body which has an over-case of toxicity which is causing a disease (lack of ease). Fever is like a fire, which can warm your body and save your life, or burn your house down and kill you. If the fever is properly controlled and skillfully handled it will clean the poisons, toxins and surplus mucus from the body and bring on a healing crisis. If not controlled properly the fever can kill the patient. See the instructions for the nine step [Cold Sheet Treatment](#). [HHH p.70]

See entire Appendix on Fevers: Their causes and their Aids in Herbal Home Health Care. [HHH p.170]

When a Fever Just Gets Started: it can be cleared up very easily, if these following procedures are started early. One of the most simple remedies is to stop the use of all foods and beverages, take a high herbal enema (catnip is good) and drink only red raspberry tea. Between cups of this tea, distilled water may be used, and if desired, give some good organic (natural) Vitamin C. Drink several quarts of red raspberry tea during the day, but no solid foods. The running nose, fever, headache and weariness will soon leave and one will feel like a new person. Even after feeling greatly improved, continue on with the red raspberry leaf tea all that day and well into the next day. If an adult will stay on the tea for three days, it would do a wonderful cleansing job for the body. To make red raspberry leaf tea put one heaping teaspoonful of cut or granulated (powdered) raspberry leaves into a teacup. Fill the cup with boiling distilled water, cover and let stand in a warm place for five or ten minutes. Strain, and drink it while it is very warm (You may use an ounce of red raspberry leaves to a pint of distilled water, if desiring to make up more at a time). [NL 3-1]

Elder Flowers and Peppermint: When taken alone, elder flowers are inclined to be an emetic, and somewhat nauseous to some people. The effect can be prevented by combining them with peppermint (*Mentha piperita*). Peppermint is a stimulant, nervine, calmative, and antiemetic, which offsets the undesirable effects of elder flowers. This combination is world famous as a great fever and cold remedy. [NL 3-1]

Blue Vervain: Blue Vervain is a powerful sudorific; taken in warm infusion it will produce profuse perspiration and efficiently break a fever. (Capsules taken with water can have the same effect) (Hut:59). It is especially effective in intermittent fevers and is said to cure colds overnight (Klo:59), possibly due to its tonic and hepatic properties. Give hot as a febrifuge while the patient is closely covered in bed, every hour or so until perspiration flows and the fever breaks. This is much better than artificially breaking the fever with aspirin or other such drugs, for a fever broken through perspiration will cleanse the body, but a fever treated with medicines will weaken the body and render it susceptible to further illness. Be sure, however, that high fevers are kept moist, that is, that the patient drinks copiously and is kept covered, for a high, dry fever can kill. Needless to say, a powerful sudorific such as Blue Vervain is excellent used in Dr. Christopher's [Cold Sheet Treatment](#). [NL 5-10]

### Testimonials

1. Yarrow: If the array of so-called remedies of orthodox medicine were any good, there would be no sick left. How different is this to the simple methods of the old-time herbalist. He saw a patient who was fevered. He did not even take the temperature. Often he did not know what a clinical thermometer was. But he knew there was fever. He placed a handful of yarrows in a jug, poured a pint of boiling water over it, and after allowing it to stand a few minutes, gave the tea to the patient as warm as it could be drunk. The result was a free perspiration. Congestions were removed; the circulation was equalized. The patient-treatment was easy, the results were sure and the remedy was safe, simple and natural. We know as we write this that yarrows is just the same today as it was a thousand years ago. [SNH p.216]

2. Yarrow for Dr. Christopher's Daughter: Two years ago while away at a summer camp my daughter caught a severe cold. When I went to the island for the weekend I found her in bed with

a high temperature, headache, and the general symptoms of influenza or la grippe, the body aching and in a most restless condition. I had noted some yarrows growing a little distance from our cottage and went and gathered a handful. I did not weigh it. I had no scales. It was not necessary. It was not a harmful drug. I placed a bunch of the whole plant in a jug and poured over it about one and a half pints of boiling water, covered it for about five minutes, then poured off a cupful of the warm tea. I gave this to my patient who, by the way, insisted that she would vomit if I made her drink the whole of it. I merely told her that if the stomach rejected it, the result would be a cleaner stomach for the next dose. She drank the cupful, I went into the kitchen and poured off a second cupful of the warm tea and gave this to the patient. She got it all down, and in a few minutes was perspiring freely. In half an hour she informed me she felt better and in the morning she was completely recovered. You ask me what would I have done if there had been no yarrows there. I would have looked for sage, peppermint, hyssop or any other of the half a dozen other herbs which will do the work. [SNH p.216]

3. Discovery of the Powers of Peruvian Bark for Fevers: The story is told that an Indian was cast out from his tribe when he had a high fever; a jungle fever that was thought by tribal associates to be highly contagious and fatal. And, as was their custom, he was cast out from among his people, and it was believed that he would soon die. But, as he crawled on his hands and knees through the dense jungle, in a state of delirium and trying to find water (as his fever had him to the point where he was literally dying from thirst), he found a pool of water. A tree had fallen into the pool and the water was very bitter, yet he was thirsty enough that he didn't care--it was water! After a short time, the fever left. So he went back to his tribal friends and loved ones, to their great astonishment, and he told them about the miraculous powers in the "healing waters" that had saved his life. So these Indians discovered the source of these bitter waters and to use the bark thereafter for fevers and other afflictions, and they found it to be marvelously healing. And from here, the fame of this great bitter, yet curative herb spread abroad, with many other effective cures resulting. [SNH p.445]

4. Water Cure: An old story of the first written instances of the water cure is as follows: Many years ago a peasant was heading home on foot, with miles to go. He was racked with fever, colds, and lumbago. While crossing a stream, over a log for a bridge, he slipped and fell into the icy cold water and was drenched to the skin. It was a bitterly cold day and the man had to walk home in the cold in sloppy wet clothes. By the time he had arrived home, his clothes were nearly dried out. The fevers and heat in his body had been raised, while hurrying miles home, to a point of healing climax and was down to nearly normal at the end of his journey. The lumbago and fever were gone and he rejoiced! The next time he got lumbago and fevers he knew the cure--he would return to the stream, fall in and walk home again. [HHH p.70]

5. Lobelia: "Another incident I will relate while I was cutting up the lap of a large oak tree, together with a man named Jackson, as it was our day to work tithing. We were strangers to each other. It was hot weather and very sickly. Some would take the fever and die before the news would get circulated. Early in the day he suddenly took a very high fever; it was a very serious case and he was very much alarmed about it. I told him that there was a little weed growing around I thought might do him good. He eagerly wished for it. It was lobelia of the first year's growth. Some not much larger than a dollar and lay flat on the ground. I got some of it and told him to eat it, just like a cow would eat grass and he did so, and in a few minutes it vomited him powerfully and broke the fever and he finished his day's work. I mention this to show you what virtue there is in lobelia." [NL 2-11]

6. [Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture: My main reason for my letter is: My neighbor's little son of 3 ½ had a fever of 104 F. for three days. I brought him one cup of honey-cider vinegar and water and the antispasmodic tincture. He drank ½ cup of the mixture (1 tsp. of each) took ½ dropper of the tincture and in three hours the fever was broken--his mother thought it was a miracle. So do I. [NL 3-7]

7. Intermittent Fever: Dr. Millspaugh wrote of an experience a physician friend of his had with this valuable Indian remedy: When he was a young man, he was attacked with intermittent fever,

which lasted off and on for three years. Being of a bilious temperament, he grew at length sallow, emaciated, and hardly able to get about. As he sat one day, resting by the side of the road, an old lady of his acquaintance told him to go home and have some boneset "fixed," and it would certainly cure him. (He had been given, during the years he suffered, quinine, cinchonine bark and all its known derivatives, as well as cholagogue, and every other substance then known to the regular practitioner, without effect; the attacks coming on latterly twice a day.) On reaching home, with the aid of the fences and buildings along the way, he received a tablespoonful of a decoction of boneset evaporated until it was about the consistency of syrup, and immediately went to bed. He had hardly lain down when insensibility and stupor came on, passing into deep sleep. On awakening in the morning, he felt decidedly better, and from that moment improved rapidly without further medication, gaining flesh and strength daily. No attack returned for twenty years, when a short one was brought on by lying down in a marsh while hunting. [NL 4-11]

#### See Also

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture

[Flu](#)

[Cold Sheet Treatment](#) [HHH p.70]

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## Flatulence

### Definition

Gassy condition in the alimentary canal, especially the gastrointestinal tract. [SNH p.24]

### Cause

Flatus (which is gas or air in the gastrointestinal canal) is the result of poor digestion. The food becomes fermented and sour in the stomach due to an acid condition. This is caused by wrong food combinations, drinking with meals, hasty eating, or poor mastication. [SNH p.24]

### Herbal Aids

**General Instructions:** There are a number of herbs that will help relieve gas. Some of the best are wild yam, celery seed tea, and peppermint or spearmint teas. Carminative teas are specifics for the stomach area to soothe the flatulent condition and to correct the digestive functions. Golden seal with myrrh is an excellent stomach tonic. [SNH p.24]

**Sassafras:** Pains and spasms in the region of the hearty flatulence. Give the warm infusion. [SNH p.79]

**Garlic:** Hysteria, flatulence, sciatica. Give an infusion of garlic in hot milk and water. [SNH p.99]

**Dr. Coffin's Stomach Bitters** is an excellent compound to help correct the bile, create appetite and correct flatulence. See formula using bayberry, balmony, white poplar, ginger and cayenne. [SNH p.136]

**Thyme:** Stomach weakness, dyspepsia, flatulence, spasms, diarrhea. Give a cold infusion of thyme. [SNH p.229]

See formula using spearmint and ginger. Give an infusion, and add ginger to intensify and accelerate the action [SNH p.240]

See formula for Babies soothing syrup (stomach and bowel pains, aches, cramps, colic, spasms, convulsions, flatulence, common ailments) using parsley seed, caraway seed, rhubarb, cinnamon, sugar, essence of peppermint and water. [SNH p.248]

See formula for flatulence ginger and baking soda. [SNH p.415]

**Ginger:** Place poultice of Cloves over stomach. [SNH p.420]

**Intestinal Flatulence:** See formula using calumba root, ginger and senna. [SNH p.434]

**Indigestion, Heartburn, Flatulence, Stomach Pains** See formula using centaury, agrimony, barberry, calumba and raspberry. [SNH p.450]

**Colic, Flatulence** See formula using myrrh, nutmeg, cayenne and brandy. [SNH p.456]

**Catnip & Fennel:** Dr. Christopher's Catnip and Fennel Tincture: A blessing for infants. A fine combination helpful for colic, biliousness, flatulence, spasms, etc. Use a few drops, or as much as needed, when desired. [HHH p.196]

**AT-GS:** Dr. Christopher's Anti-Gas Formula: Contains fennel, wild yam, catnip, ginger, peppermint, spearmint, papaya, lobelia. This formula was designed to help relieve flatulence.

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[HHH p.197]

[Peppermint](#): Many people, because they lack sufficient enzymes, or do not chew their food properly, or eat improper combinations of foods or improper foods, suffer from flatulence. Some foods, such as the legumes, contain chemicals which cause gas formation in the system, although certain methods of cooking them can reduce the gas considerably. However, many people take a cup of Peppermint tea after meals as insurance against flatulence. Taken with meals, it will help assist digestion generally (Bethel:134) and is much a preferable beverage for everyday use instead of coffee or tea, which hinder proper digestion and cause health problems generally.

[UW-Peppermint]

[Sage](#): Fresh leaves were crushed, strained and mixed with lukewarm water for stomach distress or were chewed for flatulence. [UW-Sage]

[Juices for Flatulence](#): Celery, carrot. [NL 3-5]

[Vegetables for flatulence](#): Carrot, beet greens, Jerusalem artichoke. [NL 4-12]

[Cayenne Tea](#): Drink the tea if you have problems with flatulence. [NL 6-3]

### Testimonials

1. [Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula: I must tell you why I am subscribing to your newsletter. My confidence in you arose from the most remarkable help I received in the use of your Fen LB (incidentally, I am 73 years old).

For years I have suffered from gas and flatulence to an extreme degree--with no answer or relief from my own physician nor a specialist to whom he referred me. After the first day of use of your herbal formula, I had relief which has continued consistently for the month I have been taking it. [NL 2-2]

2. Not a Heart Attack - Only Gas: One particular woman was worried that she was dying of a heart attack. Dr. Christopher checked her eyes and told her that there wasn't anything wrong with her heart; in fact, it was in excellent condition. He wished his own heart were as good as hers! He assured her that she was not having a heart attack.

She was somewhat belligerent: "Well, don't tell me, I should know, it's me that's having them. I can be washing dishes and all of a sudden, my heart will stop beating and I fall on the floor and pass out. Or I'll be walking down the street, shopping, and pass out. They rush me to the hospital, and I always come to before anything is done, like operations."

Dr. Christopher told her she hadn't any heart problems at all, but that she did have a condition on her descending colon, where she had a bowel pocket, a gas pocket, and whenever she got gas in that, it pushed up against her heart valves and cut the heart off. That is why the heart would stop, because of the gas pressure. She said that she was having a heart pain right then and that the heart was constantly troubling her. She was afraid she would pass out.

He told her to hang on, and he called on the intercom to the laboratory, where they always had hot water ready. He had them mix up a teaspoon of wild yam and a cup of hot water. Within a very short time he strained out a cup of wild yam tea for the woman. She was just about ready to pass out. She took a couple of drinks of the tea and started to burp. Finally the gas was completely relieved.

After taking Dr. Christopher's advice and not gulping her food, but chewing more thoroughly, using wild yam as she needed, she got over this problem and never had another attack. [EWH p.126]

### See Also

[AT-GS](#): Dr. Christopher's Anti-Gas Formula

[Catnip & Fennel](#): Dr. Christopher's Catnip and Fennel Tincture

[Cayenne](#): Dr. Christophers many Cayenne Combinations

[Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula

## Flu

### Definition

Any viral infection of the intestinal or breathing system.

### Symptoms

An epidemic affliction, characterized by catarrhal inflammation of the mucous membranes of the throat and bronchi, accompanied by mucopurulent discharge, fever, vascular prostration, and severe neuralgia pains. Complications of pleurisy and neuritis may appear. This condition is characterized by chilling, stuffy head, dizziness, sneezing, loss of appetite, fever, coughing sore throat, etc. [SNH p.24]

### Cause

Flu is an advanced cold condition. A body catches flu when it is full of waste matter and toxins through lowered vitality and by body exposure to cold and dampness. This is due to mucus in a weak spot in the body--in this case, the respiratory tract. The contributing factors to this weakness are shallow breathing and a lack of oxygen to that particular area. [SNH p.24]

### Herbal Aids

**General Instructions:** The fastest way in eliminating this body condition is by proper diet and rest, and by flushing the body system with diaphoretics. Take a ginger bath (using up to a pound of ginger to a tub of water), or a mustard-cayenne bath with [cold sheeting](#). The antispasmodic agents help relax the constricted cell structure, loosen and discharge the mucoid matter. Fruit juices (especially hot lemon juice) should be taken alternately with the herbal teas. After the cleansing crisis, the body system should be built up with tonic herbs and with nutritious, non-mucus forming foods. [SNH p.24]

**Colds, Pneumonia, Flu:** See formula using pennyroyal and elder flowers. [SNH p.285]

**Peppermint and Elder Flowers:** For one of the greatest flu remedies there is, see formula using peppermint and elder flowers. [SNH p.419]

**When You Feel the Flu Coming On:** Another simple procedure for if you feel a cold or flu coming on in the evening, use boneset tea. This herb is a nervine stimulant, tonic, diaphoretic, diuretic, and in large doses, emetic, aperient. Here is another wonderful formula to help the body break a chill in intermittent fever (so-called break-bone fever), muscular rheumatism, bronchitis, influenza, dyspepsia, sore throat, etc. [HHH p.53]

**Herbal Composition:** Dr. Christopher's Herbal Composition Power: As Dr. Nowell, our instructor at the Dominion Herbal College, Let. of Vancouver, British Columbia gave in our textbook, quote: "We have made and used composition powder for over forty years. When we state we regularly mixed it in batches of sixty pounds the student will readily see that we have had at least some experience with it. As a helpful formula for colds, beginning of fevers, flu, hoarseness, sluggish circulation, colic, cramps, etc. We believe it has done more good than any other single preparation ever known to man." [HHH p.189]

**INF Combo:** Dr. Christopher's Anti-Infection formula: Composed of plantain, black walnut, golden seal root, bugle weed, marshmallow root, and lobelia is great for the cleansing of the lymph system as well as purifying the blood and fighting infection. [NL 4-1]

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Lemon Juice: The symptoms of flu may be relieved by drinking lemon juice in warm water several times daily. [NL 5-1]

Ginger: Ginger tea is often given in cases of colds and flu. It will help produce perspiration and increase circulation, thus helping to speed the removal of toxins from the body. A favorite treatment in colds, flu and bronchitis is the Ginger bath. Simply add three tablespoonfuls of the grated root powder to a tubful of hot water. Let the person soak in the tub, adding hot water occasionally to keep the tubful good and hot. Give sips of diaphoretic teas during this soak (camomile is pleasant and well-accepted by most sick people). Be sure to coat the genitals which will be immersed with Vaseline or any other non-penetrating coating so that the herbs will not irritate them. You can add cayenne, mustard or other rubefacient herbs to this soak. It helps relax the body as well as opening the pores and stimulating elimination. By all means keep the patient warm after this soak. Put him into warm, clean cotton under clothes and bedclothes and put him to bed. Ginger baths are well-accepted even by children. [NL 7-3]

### Testimonials

1. Overnight Recovery for Flu: If the array of so-called remedies of orthodox medicine were any good, there would be no sick left. How different is this to the simple methods of the old-time herbalist. He saw a patient who was fevered. He did not even take the temperature. Often he did not know what a clinical thermometer was. But he knew there was fever. He placed a handful of yarrows in a jug, poured a pint of boiling water over it, and after allowing it to stand a few minutes, gave the tea to the patient as warm as it could be drunk. The result was a free perspiration. Congestions were removed; the circulation was equalized. The patient-treatment was easy, the results were sure and the remedy was safe, simple and natural. We know as we write this that yarrows is just the same today as it was a thousand years ago. [SNH p.216]

2. Red Raspberry Leaf Tea Helps the Entire Family: A lady called Dr. Christopher when he was in Great Falls, Montana. A patient of his, she was really worried because a couple of their children had come home from school with the stomach flu. This particular flu was spreading very rapidly; when people get it, the whole family gets it. She had eight children--and only one bathroom!

He answered, "The last time I was over at your house, I noticed you had a large patch of red raspberries."

"Yes, but what has that got to do with the stomach flu?"

"Go out and gather several bushels of leaves of the red raspberry bushes; don't rob any of them, but just take a little off each bush. Make it up into a tea. Take a big handful and pour a pint of boiling water over that portion and let it steep for twenty minutes. Make up gallons of it. For the children that have already come home with the flu, give them some as well, and you and your husband, too. If they're hungry, give them this tea. Give them lots and lots of it."

The lady was willing to try anything. And the next time he saw her, she was very happy. She said the two children that had come home sick, just like the rest of the children, might have been out of school for days, maybe weeks. Yet they went to school the next day, along with the rest of the children. She and her husband didn't catch flu, either. Red raspberry tea cleared the sick ones and kept the others from getting sick.

This lady was so enthused about herbs that she decided to study more about herbs. She continued to study, but continued to have her family as well, so that by the time the last one was weaned, she had sixteen children. She then went back to school, to Brigham Young University in Utah, where she got her degree as a registered nurse. She served as a nurse, helping other people.

Once, one of Dr. Christopher's students had broken his leg and was lying in the hospital, in a great deal of pain. The curtain opened, and a little lady put her head through; she had a white nurse's cap on. She said, "You broke your leg? If you want to get healed fast, use lots of comfrey tea." [EWH p.122]

3. Dr. Christopher's Son: David used the raspberry leaf tea and cleared an impending case of flu in just one day. He was so delighted that he took his wife out to dinner--and they ate the wrong

things. His flu came back strong as ever the next morning. He tried the raspberry tea again, but it didn't work. So he had to use the anti-plague formula which, he said, tastes so nasty that any self-respecting germ will leave just because of the unpleasantness. [EWH p.122]

4. [Ant-Plg](#): Dr. Christopher's Immune System Support Formula: While lecturing in Snowflake, Arizona one night, one of the group asked if we had an anti-plague formula, and I was prompted to give them a "certain combination" of herbs to use.

The people there were very impressed to go right to work and prepare this liquid, having it read for use. We had told them that plagues come at unexpected times and it could be tomorrow or maybe even years away, but expect the unexpected and be ready now. If the formula was still unused, from "no need" years later, we could all be happy but "TIS BETTER SAFE THAN SORRY".

These good people made it up in gallon lots and had it on hand. Months later while speaking in Tucson, Arizona, someone asked for the "anti-plague remedy." I was surprised and asked where they had heard of it, as we had only given it out once. We were informed that a plague-like condition or flu had hit the Snowflake area and when other aids failed, this combination of herbs in liquid form performed its job with amazing speed. [NL 2-9]

#### See Also

[Ant-Plg](#): Dr. Christopher's Immune System Support Formula

[Herbal Composition](#): Dr. Christopher's Herbal Composition Power

[INF Combo](#): Dr. Christopher's Anti-Infection formula

[Fever](#)

[Cold Sheet Treatment](#) [HHH p.70]

Entire newsletter COLDS, FLU, and RELATED NUISANCES [NL 4-1]

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## Gallstones

### Definition

A stone formed in the biliary tract consisting of bile pigments and calcium salts.

### Herbal Aids

Parsley: Parsley taken with boiled onions is said to be good to remove gallstones although some writers prescribe juniper berries instead of the onions which would also be a great specific for the urinary tract. [UW-Parsley]

Juices for Gallstones: Celery & parsley, tomato, grapefruit. [NL 3-5]

[Barberry LG](#): Dr. Christopher's Liver-Gallbladder Formula: If gallstones are present and the ducts are blocked, bile may be forced back into the liver and enter into the bloodstream. The skin may take on a jaundiced color. Ultimately, the bile is excreted through the urinary tract. The urine is often dark red or amber color and is very concentrated. Clay color stools are another symptom. During a time of a gall bladder inflammation, heavy eating should not be done. Fruit and vegetable juices are recommended along with the liver-gallbladder herbal formula. The bowels should be kept open and unconstipated through the use of the lower bowel formula [[Fen LB](#)]...Olive oil (2 tablespoons, 3 times a day) should be taken to lubricate the bile ducts. Our hydrangea root formula, made with 1 quart of apple juice and one ounce of hydrangea root soaked together for three days in a cool place and taken in two ounce doses during the three day cleanse, is capable of dissolving stones anywhere in the body. Light, more frequent meals are preferred over large heavy ones. [NL 4-2]

Parsley: Parsley will work on the gall bladder and will help remove gallstones if used properly by taking a pint of the tea daily. [NL 4-12]

### Testimonials

1. Woman Avoids Gallbladder Surgery: During a lecture in Ogden, one of his students, a lady, came to him, saying she was in terrible trouble. She had gallstones so bad and painful that her doctor would give her pain shots. The doctor now refused to give any more shots, but if she had another attack, the stones would be removed.

Another attack was starting, and the doctor told her that an operation to remove the stones would cost \$1200. "I haven't got the money," she told the doctor. He said to put it on the medical credit card, which she didn't have either. He said that he couldn't help her until she had the money for the operation.

Then she remembered about the three-day cleanse that goes with the mucusless diet. You use apple juice for three days, as well as olive oil, a couple of spoonfuls three times a day. She decided to try it.

After about a week, Dr. Christopher returned to Ogden. This lady came bouncing through the door, with no pain at all. "Hello, doctor," she said, "I am so glad to see you. We had a rock slide last night."

"A what?"

Her husband, following her in the door, explained that he was in the other room and heard the gallstones hitting the bottom of the toilet bowl as they dropped out. He collected maybe a cup of

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gallstones that had come out after three days of juice. Instead of \$1200 for the operation, it cost them about \$12 for the juice and oil. She had no more gallstones, and felt wonderful.

Other herbs used for gallstones are dandelion, golden seal, mistletoe, yellow dock, oak, parsley, and wild yam.

Prevention, however, is the key, and adherence to Dr. Christopher's mucusless diet will prevent the formation of these stones. [EWH p.124]

2. Passing Gallstones: Dr. Christopher related an interesting story about a patient who suffered a sever gallstone attack. His naturopath would not handle the case, considering it too sever, and an orthodox medical doctor told him to report immediately to the hospital. But the man refused to be operated on, and went back to his naturopath, who referred him to Dr. Christopher.

He was advised to go on the three-day cleanse, using apple juice, the Lower Bowel Formula [Fen LB], olive oil, and the Liver-Gallbladder Formula [Barberry LG] three or more times a day. He used no other food, but did apply a castor-oil fomentation on the liver.

He immediately improved, the pain left, and he went back to work in a few days! He passed a large amount of bile marbles and gallstones, and he was a very grateful man [NL 5-4]

**See Also**

[Barberry LG](#): Dr. Christopher's Liver-Gallbladder Formula

[Liver](#)

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## Gangrene

### Definition

Mortification or death to a part of the body due to interference with and failure of the local blood supply.

### Symptoms

The moist type gangrene begins with inflammation, with the dying or dead tissues becoming bluish or black. The dry gangrene results from contracted arterioles where circulation is poor, and it begins with yellow or black spotting in the tissue. [SNH p.25]

### Cause

Gangrene is the advanced condition of blood poisoning. [SNH p.25]

### Herbal Aids

General Instructions: This condition will never happen to a person who has good blood circulation and whose blood has been cleansed. Soak the afflicted area with marshmallow root tea, covering the area with tea as hot as the patient can take and leave it there for long periods of time. Soaking works faster than the poultice or the tea, but drinking the tea along with the soaking will speed the action. Plantain used as a poultice is also excellent. Pain in the infected part can be relieved by adding a small amount of lobelia. Be sure that the bowels move properly by cleansing them with the lower bowel tonic [[Fen LB](#)]. [SNH p.25]

Red Oak: Apply the powdered bark as a poultice. [SNH p.139]

Marshmallow: Obstinate inflammation and threatened mortification (gangrene). Apply a poultice of the powdered or fresh crushed roots on the affected area as hot as possible and renew it before it dries. The poultice will be more effective with the addition of slippery elm (*Ulmus fulva*). [SNH p.327]

Gangrenous Wounds (will arrest gangrene): See formula for slippery elm, brewer's yeast and raw milk. [SNH p.338]

Offensive Gangrenous Wounds or Sores (antiseptic poultice): See formula using slippery elm and vegetable charcoal. [SNH p.338]

Again Marshmallow and Slippery Elm: Most herbalists have not used Marshmallow for gangrene as thoroughly as Dr. Christopher, so his discovery is an important addition to herbal practice. He mentioned that the addition of slippery elm powder to a hot root-poultice on gangrene will greatly enhance the action of the herb. Do not allow the poultice to become cold, but reapply a new one (or supply new fresh, hot tea, after the cold soak). This can safely be used on open sores without danger of contamination. [UW-Marshmallow]

Dr. Shook's Excellent Liniment of Peppermint: See formula using olive oil, oil of peppermint, menthol crystals and flowers of camphor. [UW-Peppermint]

Marshmallow Root Powder: This is an invaluable herb which can be used as an herbal food as well as a soothing bath for helping to heal the worst of open sores, especially gangrene. Marshmallow root powder can be reconstituted and used as a drink (a tea or thicker if desired) that can keep one from starvation. [NL 3-1]

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Cabbage Leaf Dressing: In 1875 a 75 year old man suffered arteriosclerotic gangrene of the lower right leg and foot. The skin was black and the front of the lower leg was decayed. Following the local application of cabbage leaf dressings, the skin changed from black to brown to red, and then returned to its normal healthy color. Three weeks later, writes doctor Blanc, there was a considerable improvement. [NL 4-12]

Echinacea: Echinacea is especially useful in gangrene and sloughing of the soft tissues, as well as in glandular ulcerations and ulcers of the skin. Foul-smelling discharges are deodorized by it and the odor removed from cancers and ulcers; it has been proven to have helped in mammary cancer (Eil:359). A concentrated preparation of the root, excluding its sugar, called "echafolta," was used in these cancer [NL 6-12]

### Testimonials

1. The Carrot Poultice is Good for Man or Beast: Traveling from our office in Evanston, Wyoming, a number of years ago, I had to go over to Woodruff on a house call, to a family that was very, very sick. They improved so rapidly and were so pleased with our program that it was with some reluctance and embarrassment that the man said to me "Would it insult you if we asked you something about an animal?" I said, "No, we're good for man or beast." He said that he had a favorite horse outside that got tangled up in the barbed wire. "The vet was here yesterday and used the last ointments, salves and things that he knew about, and then he said there was only one thing more left to do, as the gangrene is setting in, so just shoot the horse." Well, this lovely animal was part of the family. They had quite a few children, and they still loved the horse, so he said "What can we do?" So we went out and looked at the horse's leg. I said "All right, you have been taking carrot juice and you have some pulp there and a ton or so of carrots that you have brought in from your field, just grind up carrots and make a great big poultice and cover that horse's leg. That will do him good, and then give the horse all the carrots it can eat." Within seven days time that horse's leg was completely healed. The flesh was fully restored. [SNH p.266]

2. Gangrenous Limb: We had a case where a man had injured his leg and gangrene had set in. He went to a medical doctor, who insisted that it should be amputated. That he refused to do, and he came to us. We dug up a large quantity of marshmallow root in the yard, sufficient to make enough decoction to completely submerge the leg in the liquid and after just a number of hours, the tissue returned to normal. This is the plant that people keep trying to weed out of their yards. It has big, deep roots which gather generous amounts of minerals and nutrients. [SNH p.332]

3. Scorched Foot Turns Gangrenous: A young woman in Yakima, Washington, had lost feeling in her feet. One day she was standing on a floor register and didn't realize how hot it was. She scorched one foot so badly that it had become raw and infected. Gangrene set in and the infection had gone up past her foot and into her ankle, and partway up her knee. She was under the care of the county financially, and when the county agent saw her foot in this gangrenous state he insisted that she go to the hospital and have her leg amputated. At the hospital, all agreed that only amputation could solve the problem; there was not cure for it. She refused, saying she had a friend who could get the gangrene out of the foot. They argued back and forth, and they finally gave her 48 hours to heal the problem.

One of Dr. Christopher's students lived in Yakima and knew the cure for gangrene, but she called him for additional help. He gave her step-by-step instructions on what to do. She was find marshmallow plants, pull them up, and use the entire plant, root to flowers, as a tea with from a tablespoon to an ounce of cayenne added. In this tea she was to soak her leg for thirty minutes, as hot as the girl could stand it, in a large container so that when the foot was submerged, it could cover the entire place of infection, right up to the knee. After the thirty-minute soak, she was to put the foot into a container of cold water, as cold as could be taken from the tap, and leave it there for five minutes, which would give her friend time to have ready a new pot of marshmallow tea to put the foot back into. This cycle of 30 minutes tea, five minutes water, should be repeated throughout the day, a rather strenuous procedure, but necessary in such an extremity. At night, they could put a wet compress on the infection while the girl slept.

The next morning, the whole procedure would be repeated until the infection was clear. In the morning, the pain was already gone. Within forty-eight hours, the gangrene had left the ankle and

foot, and there was just a small amount showing in one of the toes. The county agent said to continue with the program and he would keep in touch to see how she was progressing. The girl was completely cleared. [EWH p.132]

4. Blood Clot and Gangrene Gone: One time, a doctor called Dr. Christopher from one of the largest hospitals in Seattle, Washington. He had traced him down by calling Mrs. Christopher, as the Doctor was lecturing throughout the country, often only one night in one place. The Doctor was then on the West Coast. The medical man asked the Doctor how he might save the leg of a patient with a case of blood clotting associated with gangrene. This was located in the leg and because of the gangrene, the hospital staff wanted to cut off the leg; the medical doctor wished to save it. Dr. Christopher told him to put an oak bark fomentation on the blood clot and a Marshmallow fomentation on the gangrene. He promised the doctor that the blood clot would be cleared within twenty four hours (that's quite a promise!). The clot had been bad enough that the hospital staff decided to do bypass surgery, but then they noticed that the gangrene had set in on the bottom of the leg, on the foot and the ankle. When they decided to cut off the leg, the woman's daughter refused; thus the doctor had called Dr. Christopher.

The medical doctor called Dr. Christopher back a week later and told him that the blood clot had truly cleared itself within twenty-four hours. When you've got a bad blood clot that is stopping circulation which can be cured in twenty-four hours, it is quite an accomplishment. Also the Marshmallow fomentation on the leg had pulled the gangrene out so that the green and black in the ankle and the foot were all gone, except for a little around the toes. Later the woman's daughter called Dr. Christopher and told him that the clot and gangrene had completely cleared when the woman got the one problem that frequently occurs in the hospital--pneumonia. The staff was concentrating on fighting the pneumonia and forgot all about the gangrene and so it came back, even though it had previously cleared. They used the same treatment to clear it again. [UW-Marshmallow]

5. Miracle Marshmallow: Dr. Christopher was giving a one week series of lectures in Seattle a few years back, and after the Friday night talk, most of the people were standing around talking to each other, some leaving, when a young man came in the door pushing a wheel chair. In this chair was a man about seventy years old with a lap robe thrown over his legs. He was wheeled down to the podium, and the man in the chair motioned for Dr. Christopher to come down. He introduced himself as the president of the Northwestern Spiritualist Church organization. He was scheduled to go to the hospital the following Wednesday to have his legs amputated just below the hips. The gangrene was up partway to his knees by this time and by the time they could get him into the hospital, they estimated that the infection would be so high that it would necessitate taking the legs off just below the hips.

"I do not want to lose my legs," he said. Having heard of others being helped by Dr. Christopher, he asked, "Would you please help me save my legs?" Dr. Christopher asked the young man pushing the chair to come outside with him to the parking lot. There was Marshmallow growing, just handy to show to him. I asked the young man if he knew what it was, and he said, "Yes, it is cheesies; I have been digging it out of the garden and field all day." When asked if there was more that had not been dug yet, he laughingly said, "Acres of it." Dr. Christopher took him back inside to give instructions on the procedure to save the legs. They should gather bushels of Marshmallow herb and root, shake or quickly rinse the roots off, and simmer in large buckets or pots made of stainless steel, unchipped enamel, or other inert substances--never aluminum or copper. They should make gallons of tea from these herbs. Then they should place it in a large container where the tea would come up almost to the knee, such as a five-gallon can with the top out, tall waste baskets, etc. Put the tea in as hot as can be borne without damaging skin tissue, and use one container for each leg, filled as high as possible. Into the tea, they should put an ounce or more of cayenne pepper. After soaking the legs for thirty minutes in the hot tea, they should take them out and place them into buckets of ice water--or water as cold as it can be obtained. Leave the legs in the cold water five minutes, ten back into the fresh Marshmallow root tea, with cayenne, as above. This should be continued, thirty minutes hot and five minutes cold all day long; by nightfall, the extreme pain should be alleviated enough to apply fomentations over the legs, covered with oiled silk, plastic, or waxed paper. These fomentations are made best by soaking a Turkish towel or gauze in the very hot tea, lightly wringing it out just so that the tea will not run out of it, and placing as hot as possible without blistering over the area. People

sometimes apply a hot water bottle or other source of moist heat (never dry heat) to continue the warming, healing influence of the fomentation. This fomentation should be kept on the legs all night long.

The next morning, the soaking program should begin again, and should be continued until complete healing occurs, so that even the scars are gone. During this time, the patient was to drink at least three cups of Marshmallow root tea per day and to stay on juices and distilled water. Food taken should be of the mucusless diet, that is, fruits, vegetables, grains, nuts, and seeds, raw or low heated. Zone therapy could also be applied to speed the action, but never on the afflicted area. If the gangrene occurs on the leg, for example, do reflexology on the arm on the same side, and in the area of the malfunction on the other extremity if it too is not affected.

The men promised to apply this therapy. When Dr. Christopher returned to the area for another week's lecture the following month, a man came down to the front of the hall and asked permission to speak. He said that the Doctor probably would not remember him, but that the last time, he had been brought to the lecture in a wheelchair prior to having his legs amputated for gangrene. He followed the instructions, and using the herbs the good Lord had placed on earth to heal mankind, his legs had been completely healed. He stood there and stomped both feet on the floor so people could see that they were his own, not artificial. This man was quite emotional during his short talk, but he convinced a roomful of people how Marshmallow is truly a great herb. [UW-Marshmallow]

**See Also**

[Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula

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## Gas

See [Flatulence](#)

[Gas](#)

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## Glands

### Definition

Some of the important and mysterious parts of the body are the various glands. These select their required substances from which they synthesize new compounds. Upon the work of these secretions which the glands send forth into the body depend digestion, absorption and utilization of all food elements, and the very existence of cells. No physiological or mental activity is possible without them. In their absence the body and its activities would cease to be. Manifestly, the glands cannot pick their required elements from the blood unless their progenitors were previously taken in the foods eaten.

The lymph vessels are fine tubes which accompany the blood vessels. They contain the lymph, a colorless, alkaline fluid, partly derived from the blood, partly from the juices of the partaken foods. To the lymph tubes belong the lymph glands, which are distributed over the whole system, having been given the task of extracting poisonous substances from the lymph. The lymph travels through the whole body like the blood, gathers in larger and larger vessels, and finally flows into the large veins near the heart; here it mixes with the blood, passes through the kidneys and lungs, and finally enters the heart as fresh new blood. [HHH p.80]

### Cause

The more toxic the poisons and mucus materials taken into the system, the more often the glands accumulate this bad waste from the lymph system and we have glandular swellings over various parts of the body. An impure blood stream, constipation and a generally toxic body condition cause the glands to swell up and become painful. These may be on the neck, under the armpits, groin, etc. [HHH p.80]

### Herbal Aids

Enlarged Lymphatic Glands (especially of the neck). Poke Root. Use 1/2 - 1 teaspoonful of the fluid extract in 1 glassful of water, give 1 teaspoonful of the mixture every 2-3 hours; or 10 drops of the tincture every 4 hours. [SNH p.60]

Inflamed Tonsils, Salivary Glands, Neighboring Lymph Glands. Garlic. Keep garlic in the mouth constantly during wakeful hours, renewing morning and evening after the cloves have absorbed the poisons; or, use another appropriate garlic preparation. [SNH p.100]

See formula for swollen glands using garlic, glycerine and burdock seeds. [SNH p.103]

Parsley: It is a remarkable aid for helping expell watery poisons, excess mucoid matter, flatulence, reducing swollen and enlarged glands, etc. [SNH p.245]

Swollen Breasts, Enlarged Glands: Apply a poultice of bruised parsley leaves. [SNH p.246]

Mumps: Apply a fomentation as hot as possible on the swollen glands, wrung out of a tea made from mullein leaves; also the fresh mullein leaves soaked in apple cider vinegar may be applied. [SNH p.317]

[Adrenetone](#): Dr. Christopher's Adrenals Formula: See formula using black cohosh, licorice root, bladderwrack, golden seal, ginseng, lobelia, ginger and cayenne. [SNH p.400]

[Panc Tea](#): Dr. Christopher's Herbal Aid for Pancreas and Companion Glands Formula: An aid for the pancreas and other affiliated glands that through malfunction cause high or low blood

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sugar (namely diabetes or hypoglycemia). This combination has assisted many that have had hypoglycemia after six months or more of using two to three capsules three times a day six days a week (all herbal aids give faster results in six days a week instead of seven) using the same day of each week for rest. They have had a glucose tolerance test with a clean bill of health on the pancreas area. Many reports came in of heavy insulin users who continue using the insulin but by watching litmus paper or other types of diabetic checking, have gradually tapered down on the insulin and many, within a year of using two to three or more three times a day, six days a week of this combination, have reported to have found complete relief. Of course, the closer a person stays on the mucusless diet and eliminates the sugars (unnatural), soft drinks, candies, pastries, bread, etc., the quicker the results. [HHH p.95]

[CSK](#): Dr. Christopher's Anti-Obese Herbal Food Combination: Combine this anti-obese aid with the mucusless diet and you have a winner. This is not a crash program of fast loss of weight, but graduated and accurate loss without robbing the body of the needed nutrients like so many fad diets do. This acts as a blood purifier, aids kidneys in relieving excess fluids, feeds the body for relief from nervous tension generally caused by diets, appeases the appetite, feeds the thyroid and other malfunctioning glands and thus gains a healthier state for holding weight control. Take two or three capsules or tablets morning and night with a cup of chickweed tea. The formula is chickweed, burdock, licorice, saffron, mandrake, fennel, parsley root, kelp, echinacea, black walnut, hawthorn berries, papaya. [HHH p.187]

[Mullein & Lobelia](#): Dr. Christopher's Glandular Formula: Through the accumulation of toxic waste in the body from improper diet, poor blood stream and sluggish circulation of the blood system the glands become congested and infected, and swell up to cause much pain and misery. (There are glands that swell on the neck, breast, groin, under arm pits, etc.) Make a tea of three parts mullein and one part lobelia herb and use as a fomentation over swollen or malfunctioning glands. Leave on all night (covering fomentation with plastic), six days a week until relief is obtained. Use a fresh fomentation as warm as possible each night.

This can be used as an aid to relieve mastitis, thyroid malfunction, etc., etc. In addition to the external fomentation, also drink a cup of this tea two or three times in a day or take two of the capsules or tablets with a cup of steam-distilled water. [HHH p.187]

[Kelp-T-Comb](#): Dr. Christopher's Kelp Combination: This is a thyroid and assisting glandular aid. This herbal group helps assist in controlling metabolism and gives herbal feeding to the thyroid glands to do their job more efficiently. This is a very fine glandular aid. [HHH p.195]

Addison's Disease: For a discussion of Addison's Disease see Newsletter 2-3. [NL 2-3]

Rebuilding Glands: Formula for rebuilding glands using sarsaparilla, licorice, ginseng and astragalus as found in the Adrenal Newsletter. [NL 2-3]

What Can be Done for a Malfunctioning Thyroid? From a question to Dr. Christopher in his Newsletter. His Answer: "The thyroid, through the hormone thyroxine determines growth, controls body temperature, regulates the metabolism or the burning of food in the body and influences, to a great extent, mental and emotional balance. Also, it is of special importance for the proper functioning of the reproductive system. The inter-relationship between reproductive functions and thyroid functions is very complex and not entirely understood, but it is known that various changes, especially in girls and women, are apt to cause changes in thyroid functions. For instance, a slight enlargement of the thyroid gland is common at puberty, during pregnancy and menopause.

"When the thyroid gland is functioning properly, we are hardly aware of its existence. It stores practically all of the body's supply of iodine, releases thyroxine into the blood stream at intervals and regulates all the bodily functions we have mentioned above. Disorders of the thyroid gland are apparently caused by two conditions:

(1) lack of sufficient iodine in the diet, so that the thyroid cannot obtain enough to manufacture thyroxine, or (2) some disorder of the body which creates a demand for more thyroxine than the gland can manufacture."

Taken from THE ENCYCLOPEDIA OF COMMON DISEASES by the staff of Prevention Magazine, copyright 1976.

Our recommendations to aid the thyroid are in two parts. First we need to strengthen the deficiency of the gland by using Dr. Christopher's glandular formula [[Mullein & Lobelia](#)] as a

fomentation around the throat at the thyroid area. This formula is made up of mullein and lobelia in a combination that is beneficial in aiding and strengthening the glands of the body, in this case, the thyroid gland. It would also help to use two capsules of our gland formula [Mullein & Lobelia] three or more times a day.

Second, take Dr. Christopher's thyroid combination [Kelp-T-Comb] as an herbal food aid to this gland. It consists of the following herbs - parsley, watercress, kelp, Irish moss, romaine lettuce, turnip tops and Iceland moss. This herbal group assists in controlling metabolism and gives herbal feeding to the thyroid glands to do their job more efficiently. These two aids will assist the thyroid to function properly whether it be underactive or overactive. [NL 3-4]

Jojoba for Sebaceous Glands: Skin specialists are finding that Jojoba oil has a remarkable ability to dissolve those waxy deposits of sebum, the natural secretions of the scalp's sebaceous glands, which sometimes resist even the most determined shampooing. Sebum, if unchecked, tends to build up and harden around the hair follicles, effectively clogging pores and preventing the normal regrowth of hair. Other signs of sebum build-up are dryness, scaliness, and dandruff. Jojoba oil also helps regulate the scalp's natural acidity, lessening the flow of fresh sebum between shampoos. A number of persons have reported successful regrowth of hair after using jojoba based shampoos. [NL 4-11]

Parsley for the Parathyroid Gland: Many have used parsley root tea to make stiff and unmanageable fingers work again. The root contains calcium, B-complex vitamins, and iron all of which nourish the parathyroid glands which are concerned with the regulation of calcium in the body. Pour a quart of boiling water over a cup of firmly packed fresh parsley and allow to steep for 15 minutes. Strain and then refrigerate. [NL 4-12]

### Testimonials

1. **Lobelia for Glands:** Dr. Christopher made up a simple but extremely effective formula for glands, of three parts mullein and one part Lobelia, to be taken as tea, in capsules, or to be used as a fomentation. This is used anywhere in the body where the glands are swollen and malfunctioning. Dr. Christopher liked to relate the cases of two small boys suffering from an enlarged gland on the side of the neck behind the ear. A nurse had called him in desperation to ask his advice on the first case. Usually the medical practice for this malady, besides antibiotics, which are usually ineffective, is just to wait for the child to grow out of it. The nurse accepted Dr. Christopher's advice to use the Mullein and Lobelia [Mullein & Lobelia] fomentation. She asked, "Which way is the toxic accumulation going to come out of the body? Will it come out directly through the skin like a bursting boil or will it be routed through the bloodstream and be taken out through the bowel?" Dr. Christopher replied that he did not know; that it would be "decided" by the Lobelia.

If the bloodstream cannot handle the poison, it will be taken out through the skin; otherwise, the bloodstream will carry it out to be eliminated.

The second little boy had a similar swelling behind his ear. His mother called Dr. Christopher and asked him what to do; he gave exactly the same advice, the mullein and lobelia [Mullein & Lobelia] fomentation. She applied the fomentation as described. In the first case, the poison gathered up and burst, and it drained out straight through the neck. The boy cleared up and suffered no more from the problem. In the second case, the poison was absorbed by the body and the toxic material eliminated through the bowel. [UW-Lobelia]

2. **Mullein & Lobelia:** Dr. Christopher's Glandular Formula: We have applied this fomentation to a young boy whose glands became so swollen that he had huge lumps at the back of his neck as well as almond-shaped lumps behind his ears. This had become such a chronic condition that we had little hope of improvement.

We applied it to him last thing at night, and in the morning when he awoke, the swelling was absolutely and completely gone. We were so amazed that we decided that we must have this combination in the house at all times! [UW-Lobelia]

3. **Mullein Oil:** We have had earaches in our family which resulted from congested lymph glands and colds. Although we treated the problem with garlic oil and B&B tincture, the problem did not

clear up. By inserting oil of Mullein into the ear, however, we were able to stop the irritation in the ear as well as in the accompanying glands. [UW-Mullein]

4. Swollen Glands in Throat Cured with Dr. Christopher's Glandular Formula: (Mullein & Lobelia) One time, after coming home from a lecture series, it was good to see the grandchildren from the family of one of our daughters, who were visiting with us. That evening one of the little granddaughters, then about seven years old, came to me crying because the glands in her throat area and behind the ears had swollen up and it was very difficult for her to swallow. I mixed up three parts of mullein and one part of lobelia, made a fomentation, and pinned it around her throat. The next morning she came downstairs, all smiles and no pain, and paid me well for my services with a big kiss. [NL 1-9]

5. Alfalfa Helps Family Survive Concentration Camp: Alfalfa can be used as a food or a food supplement. it contains essential hormones and enzymes necessary to keep the pituitary and adrenal glands functioning. There is a story we have told at many lectures and classes about the family that was incarcerated in a concentration camp during the Nazi occupation of Europe. This particular family found the strength to carry them through to the end of the war when they were released. The key was an alfalfa plant growing in the corner of the compound inside the fence. Each member of the family secretly permitted themselves a few leaves of the plant every day...allowing the alfalfa plant to replenish its leaves throughout the long months. The family obtained the necessary nutriments from the plant. These nutriments were not provided by the inferior and scarce prison food. The family maintained their health while others around them dropped dead from malnutrition. [NL 3-1]

#### See Also

[CSK](#): Dr. Christopher's Anti-Obese Herbal Food Combination

[Kelp-T-Comb](#): Dr. Christopher's Kelp Combination

[Mullein & Lobelia](#): Dr. Christopher's Glandular Formula

[Panc Tea](#): Dr. Christopher's Herbal Aid for Pancreas and Companion Glands Formula

[Adrenals](#)

Entire newsletter "Adrenals" [NL 2-3]

Entire newsletter "Pancreas Panacea" [NL [1-6](#)]

## Ailments

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## Goiter

### Definition

An overgrown thyroid gland, usually seen as a swelling in the neck.

### Herbal Aids

Poke Root Extract: [SNH p.60] Use 1/2 - 1 teaspoonful of the fluid extract in 1 glassful of water, give 1 teaspoonful of the mixture every 2-3 hours; or 10 drops of the tincture every 4 hours. See formula using poke root, alcohol and water. [SNH p.61]

Poke Root Liniment: [SNH p.61] Use the fluid extract externally as a liniment, and drink internally in very small doses (as indicated in "Dosage.") See formula using poke root, alcohol and water. [SNH p.61]

Bayberry: Use in doses of 10 grains 3 times daily; take orally and use as a fomentation on the throat. [SNH p.132]

Red Oak: Apply a hot fomentation wrung out of a strong decoction of the inner bark of oak; bind over the swollen gland with woolen or flannel cloth and repeat as required. [SNH p.139]

Juices for Goiter: Spinach, radish, lettuce, watercress, tomato, pineapple. [NL 3-5]

Vegetables for the Prevention of Goiter: Cabbage, carrots, celery, lettuce. [NL 4-12]

Echinacea: Cases of goiter, impetigo contagiosa, local infection, urethral infection, diabetic ulcers, alopecia (baldness), and so on, are reported to have been effectively treated with Echinacea. [NL 6-12]

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## Gonorrhea

### Definition

A common sexually transmitted disease.

### Symptoms

In gonorrhea, the genital area becomes extremely inflamed and a burning sensation occurs when the man urinates. There is also a discharge of green or yellow pus which continues for 6 to 8 weeks. It is through this pus that others can become infected. Gonorrhea eventually attacks the nervous system. If a person contracts the disease, treatment should begin immediately. [NL 3-10]

### Herbal Aids

General Instructions: A fresh fruit juice fast is recommended. The bowels should be kept clear by using the lower bowel formula [Fen LB]. Follow the cleansing program recommended in the little booklet, Dr. Christopher's Three Day Cleansing Program and Mucusless Diet. Add to this the herbal formula for the nerves, or some good nervine teas such as valerian root and chamomile. The prostate formula [Prospallate] should also be used. [NL 3-10]

Anal: Use the injection of Red Oak in small and frequent doses. [SNH p.139]

Red Raspberry: Use the strong infusion as a douche. [SNH p.143]

Dr. Shook's Healing Douche: See formula using raspberry leaves, sandalwood oil, Irish moss and glycerine. [SNH p.146]

See formula using cranesbill, golden seal, echinacea and glycerine. [SNH p.155]

See formula using sumac berries, sumac bark, white pine bark and slippery elm bark. [SNH p.158]

Witch Hazel: Apply as a poultice, fomentation, or wash. [SNH p.171]

Thyme: May be taken internally or used externally with amazing and beneficial results. Internally: 1 teaspoonful in 1 cupful of water, sweetened with 1 tablespoonful of honey 3-4 times daily; good for gonorrhea. [SNH p.230]

Cleavers: Acute gonorrhea. Bruise the fresh herb thoroughly in a mortar, then express the juice with strong pressure and take orally. [SNH p.268]

Hops: Simmer 1 tablespoonful of hops for 10 minutes in 1 pint of water and drink 1/2 pint morning and evening. [SNH p.396]

Injection: See formula using golden seal and wild geranium. [SNH p.440]

White Poplar: Drink white poplar bark in tea form. [SNH p.446] , or use as a wash. [SNH p.446]

Golden Seal: It has been used in the treatment of gonorrhea, a lotion applied externally and a syringe injected up the urethra frequently at first, tapering off after a few days. The patient should be warned that the yellow solution permanently stains the linen (Felk:19). [UW-Golden Seal]

Red Raspberry: Dr. Shook recommended this combination: put two ounces of Raspberry

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leaves into 1-1/2 pints distilled water. Simmer for fifteen minutes while closely covered. Strain and add one ounce glycerine, 15 drops of sandalwood oil, and 8 ounces mucilage of Irish moss. Shake all together thoroughly and use as a douche, up to three times daily, considering the severity of the case. Make fresh each time. He said that this it is a most remarkable and speedy remedy for leucorrhea, gonorrhea. [UW-Red Raspberry]

See formula using yellow dock, red clover, burdock root, slippery elm and myrrh gum. [SNH p.96]

### Testimonials

Prickly Ash: Carver reported that the Indians valued it highly to "radically remove impurities of the blood" (Vog:338). He claimed that a trader who traveled with him was cured of gonorrhea by a decoction of Prickly Ash bark given him by a Winnebago chief. [UW-Prickly Ash]

### See Also

[Prospallate](#): Dr. Christopher's Prostate Formula

[Dr. John R. Christophers "Three Day Cleansing Program"](#)

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## Gums

### Description

Spongy gums, bleeding gums, sore mouth, thrush, tender gums, teething babies and pyorrhea.

### Herbal Aids

Ulcers, Spongy and Bleeding Gums: Use the decoction as a wash. See formula using bayberry root and distilled water. [SNH p.133]

Sore Mouth and Sore or Spongy Gums. Red oak, use the decoction as a wash. [SNH p.139]

Sore Mouth and Throat, Thrush, Spongy Gums. Red raspberry, use the strong infusion as a wash and gargle. [SNH p.143]

Spongy Gums, etc. See formula using raspberry leaves and bayberry bark. [SNH p.149]

Sore Mouth, Bleeding Gums: Cranesbill, use the decoction or strong infusion as a mouth rinse. [SNH p.153]

Spongy Gums: Sumach, use the infusion of berries as a mouth rinse. [SNH p.158]

Sore and Ulcerated Mouth or Gums, Running Sores, Nasal Problems: Bistort, use the decoction or infusion, etc., as a rinse or wash. [SNH p.162]

Gums (tender, bleeding, spongy). Myrrh, apply diluted tincture or use as tooth powder. [SNH p.455]

[Herbal Tooth Powder](#): Dr. Christopher's Herbal Tooth Powder: This herbal food combination consists of oak bark, oat straw, comfrey root, horsetail grass, lobelia, cloves, peppermint. This formula is used to help strengthen the gums (bleeding and pyorrhea-type infections of the gums), and assist in tightening loose teeth. This type tooth powder will help brighten the teeth's luster and make for a healthier mouth. For severe cases place this powder combination between the lips and gums (up and lower) around entire tooth area and leave on all night, six nights a week (as well as brushing regularly) until improvement is evident. Then continue on with regular tooth brushing with this herbal food combination. [HHH p.189]

Teething Babies: Catnip and fennel extract massaged into the gums help take off the edge. Some teething preparations are made from oil of cloves, which is a natural remedy for toothache and should help localized pain. Sips of camomile or catnip tea can give generalized relief of pain. [EWH p.104]

General Herbs: Other herbs used for troubles with teeth and gums include barberry, bistort, cranesbill, oak, Oregon grape, potentilla, self heal, strawberry, and prickly ash. An excellent formula to help pyorrhea is [X-Ceptic](#). For a toothache, you can use cow parsnip, cranesbill, oak, tobacco and, of course, cloves. Camomile, cayenne, hops, plantain, prickly ash, and sassafras can relieve pain, while elecampane is said to help with tooth decay. [EWH p.140]

Apples: Some have called the apple "Nature's Toothbrush" as it helps clean the teeth and massage the gums. Research has proven that eating one apple removes over 30% more bacteria from the mouth than two-three minute brushing plus a gargle. [NL 5-1]

[X-Ceptic](#): Dr. Christopher's Antiseptic Tincture: An excellent formula for pyorrhea is X-Ceptic. [EWH p.140]

[Hernia](#)[Hiccoughs](#)[Hypoglycemia](#)[Hysteria](#)[Impotency](#)[Incontinence](#)[Indigestion](#)[Infertility](#)[Inflammation](#)[Influenza \(Flu\)](#)[Insect Sting](#)[Insomnia](#)[Itch](#)

## Testimonials

Pyorrhea: One night Dr. Christopher decided that he would not give his lecture on his usual series because there was a blizzard on. He figured that nobody would come out on such a night. He was going to put a sign on the door that they would meet the following week. But something said to him, "If you can help just one person, it would be worth staying." So instead of going home, he opened up and put the chairs out. Soon people started coming, and the house was nearly full. He had finished his subject, and said, "We are now going to talk on a subject that has bothered many people, pyorrhea." And just as he began to say this, a woman stepped in the door. The street light showed that the storm was still going, and the woman brushed snow off her coat and stomped it off her overshoes. He said there was another seat available in front, but, crying, she shook her head and stood there by the door.

He continued to tell the audience what to do for pyorrhea, which was to use powdered oak bark, putting it up between the lips and gums at night before going to bed, leaving it in all night. This should be done faithfully six nights a week, week after week. It would tighten the gums and heal, and if the teeth were loose, they would tighten up again. An American Indian remedy, it had cleared many cases of pyorrhea.

As he finished this subject, the door opened and the lady stepped out again. He thought little of it and finished the lecture. But two weeks later during the same lecture series, there was a lady down in front that he didn't recognize. This lady raised her hand and asked if she could say just a few words before starting.

He thought she might be telling about someone who had left their lights on or something, but she stood up and said that she had been at the lecture two weeks before, although no one would recognize her. She was from out-of-town and came in by bus to Salt Lake City. Some time before she had gone to a dentist because her teeth were getting loose. When the dentist looked into her mouth, he said it was the worst case of pyorrhea that he had ever seen in his life. He said that there was nothing that he could do other than to pull all her teeth, trim her gums, and put in a new set of teeth. He didn't feel qualified to do this because he hadn't the equipment or knowledge, but that a specialist in Salt Lake City could do it.

This specialist said he had never seen a case that bad. She had 32 teeth of her own, without a filling, and yet they were all loose; they all had to be pulled. The dentist took an impression of her mouth, and asked her to come back in two weeks, when he would have her false teeth ready and he would pull the teeth and trim the gums.

This nearly broke her heart, because her teeth had been perfect up until then. She went back to her hotel because she couldn't get a bus back home until morning. During the blizzard, she just lay there worrying about losing her teeth and, not being able to rest, got up, dressed, and went out for a walk. She didn't know the town at all, but just walked up one street and down another. She didn't know where she was, and all of a sudden she wound up on State Street right in front of Christopher's store.

The curtain was closed, and a light was shining through it and, feeling chilled, she entered the room just to get warm. Later she felt that the good Lord had her wander around the streets until he knew it was time for Dr. Christopher to talk about pyorrhea. When he finished the subject, she felt that all the weight of the world was suddenly lifted off her shoulders. She knew the right way to be healed. She went right back to her hotel room and slept like a baby. The next day, she found a health store close to the hotel and bought some powdered oak bark. She put it right in her mouth and got on the bus.

Within a matter of days, she went back to her dentist to tell him that her gums were healing and her teeth getting solid again. He had never seen anything like this. He wanted her to go to the specialist in Salt Lake City to show him her mouth. She went to Salt Lake City the day she spoke in the lecture, and that specialist said that in his years of dentistry, he had never seen a miracle like this. He didn't know pyorrhea could ever be healed. He thought it was an act of God.

She just told the class to listen to what Dr. Christopher told them, because here she stood, with all of her natural teeth intact because of oak bark. [EWH p.138]

## See Also

- [Catnip & Fennel](#): Dr. Christopher's Catnip and Fennel Tincture
- [Herbal Tooth Powder](#): Dr. Christopher's Herbal Tooth Powder
- [X-Ceptic](#): Dr. Christopher's Antiseptic Tincture

## Halitosis

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See [Bad Breath](#)

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## Hay Fever

### Definition

A severe seasonal allergic irritation of the sinuses and nose caused by tree, grass and weed pollens.

### Cause

Many folks suffer great discomfort during the pollination season of plants. They attribute their symptoms to the pollen, saying that they are "allergic" to it. What is happening is that the pollen is bringing out of their bodies years of accumulated toxins. These come out in the form of mucus running from the nose, eyes, and lungs. [NL 3-9]

### Herbal Aids

[Dr. John R. Christophers "Mucusless Diet"](#): Symptomatic relief can be obtained by using the Hayfever Formula, but again, permanent change can only be had through faithful adherence to the mucusless diet. After one year on the mucusless diet, all allergies should disappear. [NL 3-9]

[Honey for Immunity](#): For an immunity to the local pollen, a tablespoon of local raw honey may be taken daily. It won't do you any good to take honey from Hawaii or Minneapolis if you are sneezing from pollen in Copperstown, North Dakota. [NL 3-9]

[Cough, Phthisis, Pulmonary Diseases, Hemorrhage, Asthma, Bronchitis, Croup, Hay Fever, etc.](#) Drink the strong decoction of leaves and flowers of mullein, or combine with comfrey root and garlic juice. [SNH p.316]

[Steam Baths](#): One of the most important procedures of water therapy are the steam or sweat baths, and these will bring the poisons out of the body wonderfully. There are various types of steam baths, and these are all very valuable, very invigorating and health giving. This therapeutic procedure is recommended for arthritis, asthma, bursitis, colds, flu, hay fever, neuritis, pneumonia, rheumatism, sinusitis, stiff joints, etc. Someday, I hope to see a steam cabinet in every home (not a chicken on every plate and a car in every garage). In sweat therapy, we also have the [Cold Sheet Treatment](#)--a positive remedy for colds, flu, and pneumonia--which can be effectively used even in advanced and chronic cases. [SNH p.502]

[Sha Tea](#): Dr. Christopher's Formula for Allergies, Sinus, Hay Fever: This is an aid for clearing up these malfunctions, a "natural and herbal help" working as a decongestant and natural antihistamine to dry up the sinuses and expel from the head and broncho-pulmonary tubes and passages the offending stoppage and mucus. This formula consists of the following herbs: Brigham tea, marshmallow root, juniper berries, golden seal root, chaparral, burdock root, parsley root and lobelia.

To speed up this cleansing procedure, use the following combination in addition to the above: blend fresh, chopped-up horseradish roots mixed with apple cider vinegar into a thick pulp and chew thoroughly before swallowing. Take 1/3 teaspoon three times in a day. Each three days increase this amount from 1/3 teaspoon up to one teaspoon, increasing the amount 1/3 teaspoon each three days. [HHH p.185]

[Herbal Eyebright](#): Dr. Christopher's Herbal Eye-Health Formula: Hay Fever and acute attacks of cold in the head may be checked by an immediate dose of the infusion of Dr. Christopher's eyebright repeated every two hours. [NL 3-9]

## Ailments

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[Resp-Free](#): Dr. Christopher's Herbal Formula for Lungs and Respiratory Tract: This combination of herbs in tea form or the powder in capsules or tablets is an aid to relieve irritation in the respiratory tract, lungs and bronchials. This is an aid in emphysema as well as other bronchial and lung congestions such as bronchitis, asthma, tuberculosis, etc. This formula is extremely valuable in helping to strengthen and heal the entire respiratory tract. It promotes the discharge of mucus secretions from the broncho pulmonary passages. Suggested amount for an adult is a cup two or three times a day, or two or three capsules or tablets two or three times a day with a cup of comfrey tea. For additional help in the program, it is good to add three to six drops of tincture of lobelia to each cup of tea. [HHH p.188]

**See Also**

[Herbal Eyebright](#): Dr. Christopher's Herbal Eye-Health Formula

[Resp-Free](#): Dr. Christopher's Herbal Formula for Lungs and Respiratory Tract

[Sha Tea](#): Dr. Christopher's Formula for Allergies, Sinus, Hay Fever

[Dr. John R. Christophers "Mucusless Diet"](#)

[Asthma](#)

## Ailments

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[Fever](#)[Flatulence](#)[Flu](#)[Frog](#)[Gallstones](#)[Gangrene](#)[Gas](#)[Glands](#)[Goiter](#)[Gonorrhea](#)[Gums](#)[Halitosis](#)[Hay Fever](#) **Headache**[Hearing](#)[Heart](#)[Heartburn](#)[Hemorrhage](#)[Hemorrhoids](#)

## Headache

### Definition

Pain in or around the head. [SNH p.27]

### Cause

This is often the result of a disturbance in some other part of the body, such as digestive disorders in the stomach, liver or bowel; problems in the abdominal area; menstrual irregularities, impingements in the cervical; concussion, eye strain, nervous excitement, fatigue, etc. The headache is a mechanism which signals some serious problem elsewhere. The common headache is due to faulty elimination, and the waste matter causes problems until the toxic wastes reach the stomach nerves and affects them. Sometimes headaches are caused from panic, fear, or worrying about the unknown. Headaches of this type are the hardest to relieve, generally requiring something strong like a heavy nervine tea with lobelia in it to diminish the nervous excitement. A nerve tea such as valerian or skullcap with a few drops of tincture of lobelia to a cup will give relief. [SNH p.27]

Food allergies are another very common cause of headache. The worst culprit is sugar; I have experienced sugar headaches, which are sort of a withdrawal; you eat the sugar, and then as the body is trying to eliminate the toxic substance, your head pounds. Cheese commonly causes headaches, probably the worst of the dairy products for this, although allergies to any of them may cause the pain. Meats and eggs are also common allergens. [EWH p.146]

### Herbal Aids

General Instructions: Improve elimination with the lower bowel tonic [[Fen LB](#)] (use the cathartics and enemas only in case of emergency). If the problem is in the stomach area, use any of the following stomach herbs: angelica, balmony, black alder, elecampane, gentian root, raspberry leaves, rhubarb, strawberry leaves, wild cherry, wormwood. Use ginger for a menstrual problem. To help relieve the local headache pain, two or three drops of tincture of lobelia in a little water three times a day or up to every hour if required will often give temporary relief. If the contents of the stomach causes the problem, empty that area with an emetic. Where the nerves are raw, the following herbs are excellent: catnip, peppermint (hot), rosemary herb, skullcap, spearmint, wood betony, and since plenty of rest is needed, any of the foregoing herbs along with hops tea is very soothing and will produce sleep. [SNH p.27]

Migraine Headache: See formula using wormwood, Culver's root and cayenne. [SNH p.109]

Relaxing Nervine (headache, neck, shoulder and muscular tension, irritability, nervousness or raw nerves, sleeplessness, female organs): See formula using camomile, white poplar, false unicorn, lady's slipper, lobelia and ginger. [SNH p.220]

Nervous Headache: Chew 1-2 freshly-picked leaves of rue. [SNH p.295]

Headache: Apply the freshly-bruised leaves of rue to the temples. [SNH p.295]

Nervous Headache: See formula using lady's slipper, catnip and scullcap. [SNH p.385]

Nervous Headache: See formula using wood betony, rosemary and peppermint. [SNH p.390]

Insomnia, Headache, Indigestion, Bronchitis, etc. Give black cohosh infusion in small doses. [SNH p.399]

[Hernia](#) Peppermint Tea: Drink a cupful of hot peppermint tea; then lie down and relax. [SNH p.419][Hiccoughs](#) Oil of Peppermint: Apply externally on the affected area for rheumatism, neuralgia, and headache. [SNH p.419][Hypoglycemia](#) Stress Headache: My favorite headache/stress herbal aid is blending a banana into a cup of pineapple juice, adding a bit of nutmilk, and mixing in one to two tablespoons of brewer's yeast, blending briefly. In fifteen minutes I am calm and ready to deal with the problems that cause the stress. [EWH p.146][Hysteria](#)[Impotency](#) Constipation Headache: Headaches can stem from several sources. Very common is the constipation headache, where compressed fecal matter presses on the nerves that affect the head. We have seen severe migraine headaches cured by taking a catnip enema. For longer-term relief, the lower bowel formula [Fen LB] can heal the bowel so that there is no constipation. [EWH p.146][Incontinence](#)[Indigestion](#) Severe Migraine: For a really severe migraine headache, apply cold packs to the neck and head while the patient soaks in a very hot tub or whirlpool. Be sure to drink lots of feverfew tea and water, take copious amounts of Dr. Christopher's Calc Tea and try to enjoy the bath. [EWH p.146][Infertility](#)[Inflammation](#) Dehydration Headache: Sometimes people get headaches because they are dehydrated. You would be surprised that most people walk around in a state of dehydration. You need about a gallon of steam-distilled water each day in order to stay completely hydrated. [EWH p.146][Influenza \(Flu\)](#)[Insect Sting](#) Rosemary: Another method to relieve headache is, as soon as the headache begins, a small bottle of spirits of Rosemary is held to the nose and the fumes are inhaled. In addition, a few drops of the preparation are rubbed gently but thoroughly on the temples, on the forehead, on the veins of the neck and behind the ears. This reputedly gives prompt relief. [UW-Rosemary][Insomnia](#)[Itch](#) Juices for a Sick Headache: Celery, celery & apple. [NL 3-5] Cabbage Leaves: Apply cabbage leaves to the forehead and nape of the neck and leave on overnight. Applications of the leaves over the liver may also be necessary. [NL 4-12]

### Testimonials

1. [Cayenne Ointment](#): ([Deep Heating Balm](#)) My husband gets severe migraines occasionally, presumably because he does high-stress academic work. These headaches can keep him sitting up all night because they hurt too much for him to lie down. Once when he was suffering from one of these I thoroughly rubbed his back with Professor Cayenne's [Deep Heating Balm](#), rubbing out the tense places as much as I could. Soon he was asleep and slept all night. [EWH p.146]

2. Kelp: A man reported to Dr. Powell with much indigestion with bilious turns. Almost every morning for some months he had risen from bed in the morning with a sick headache. For a time he had taken purgatives, salts and aspirins, which, although giving relief, failed to heal the man; indeed, these things had made him worse. The doctor asked the man to fast and then put him on a cleansing diet. He got somewhat better, though not completely. Eventually he began to take Kelp and cell salts at every meal, and after some weeks his troubles left him. In this case, the doctor noted, Kelp not only acted on the liver, but also on the toxic colon, the gall bladder, kidneys, and meninges. The latter are usually involved when the headaches are severe. [UW-Kelp]

### See Also

 [Calc Tea](#): Dr. Christopher's Calcium Formula [Cayenne](#): Dr. Christophers many Cayenne Combinations [Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula [Kelp-T-Comb](#): Dr. Christopher's Kelp Combination

## Ailments

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## Hearing

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See [Deafness](#)

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[Flu](#)

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[Gallstones](#)

[Gangrene](#)

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## Ailments

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## Heart

### Description

Heart circulation, cholesterol, heart disease, palpitation, heart weakness, heart attack, how to strengthen the heart, stress on the heart, etc.

### Herbal Aids

[Cayenne](#) for Heart Circulation: Take cayenne, working up to a teaspoon three times a day. This increases the power of the heart and corrects the circulation problems. [SNH p.31]

Wheat Germ for Cholesterol and Heart: Wheat germ oil is excellent for feeding the heart and helps cut the cholesterol and smoothens its removal from the area. [SNH p.31]

Dropsy, Heart Disease: See formula using parsley, lily-of-the-valley, garlic, sugar and glycerine. [SNH p.102]

Heart Trouble, Palpitation. Make a decoction of tansy by simmering the herb 10 minutes, take 2 fluid ounces 4-5 times daily. [SNH p.123]

Motherwort Vies for the Honor of Being the Best Heart Tonic Known. It calms and supports the heart and nerves, and may be used in large doses. Motherwort is beneficial as a healing tonic in recovery from debilitating fever where other tonics are inadmissible; it is a good diaphoretic. [SNH p.298] SYRUP OF MOTHERWORT acute and chronic heart troubles. See formula using motherwort, water and sugar. [SNH p.299]

Compound Infusion (heart tonic, etc.) : See formula using motherwort, hawthorn berries, cactus grandiflorus, asparagus root or seed, bugleweed and lily-of-the-valley. [SNH p.300]

Heart Weakness: Scullcap combined with cayenne and golden seal cannot be surpassed. [SNH p.371]

Heart Palpitation: Administer hot valerian with cayenne pepper. [SNH p.377]

Heart Attack: Prop up the patient and pour hot cayenne tea down, ( use a teaspoonful of cayenne in a cup of hot water), and have the patient drink the full cup. and the attack will stop immediately. We have been called in the middle of the night so many times. A teaspoon of cayenne should bring the patient out of the heart attack. In case cayenne is not around and you have a heart attack, the dosage on black pepper can be tripled and used. [SNH p.409]

[Hawthorn Berry Syrup](#): Dr. Christopher's Hawthorn Berry Syrup to help Build and Strengthen the Heart: The heart is our life pump, and when it is not properly fed (with wholesome foods) it suffers malfunction (weakness and heart attacks) causing the heart failure condition that is one of the world's greatest killers. The mucusless diet used over a period of time can rebuild a heart to a good strong condition, but if the heart, its valves, and other working parts are in a weakened condition and need quick help we use a great "heart food or tonic" to assist it back to health. This food is the hawthorn berry ... This herbal formula is thought of by many to be a wonderful aid for organic and functional heart disorders such as dyspnea, rapid and feeble heart action, hypertrophy, valvular insufficiency sufficiency, and heart oppression. Hawthorn berry syrup is made with hawthorn berry juice concentrate using grape brandy and glycerine as aids and preservatives. Recommended dosage is one half teaspoon three times in a day.[HHH p.184]

[BPE](#): Dr. Christopher's Blood Circulation Combination: This formula is given to assist blood

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purifying teas to work more efficiently and to also help aid the clearing up of allergies, etc. This group of herbs feeds cayenne (a stimulant) and ginger (stimulant) into the circulatory system where the cayenne works from the bloodstream to the heart and arteries, out into the veins. The other herbs in the formula assist these two herbs and work together to equalize the blood pressure (whether high or low) and to bring it to a good systolic over the diastolic reading. Blood flow is life itself. The blood circulatory combination consists of ginger, cayenne, golden seal, ginseng, parsley and garlic. [HHH p.185]

[Adrenetone](#): Dr. Christopher's Adrenals Formula: to Compensate for Stress Placed on Heart From Adrenals: Contains mullein, lobelia, Siberian ginseng, gotu kola, hawthorne berries, cayenne, and ginger. As this formula helps correct any imbalance in the adrenal gland it also compensates for any stress placed on the heart. [EWH p.208]

Calcium Chloride is a Great Heart Tonic. In fact, it is so potent and effective in its action upon a weak heart that the great English scientist, Sir Lauder Brunton, said: "Heart failure, which so often follows influenza and pneumonia, may be averted by the extended use of calcium chloride." [NL 1-11]

Juices for Functional Heart Troubles: Carrot, cucumber & cabbage, endive, carrot & spinach, apple. [NL 3-5]

### Testimonials

1. **A New Life Through Proper Diet and Herbs.** Not long ago, we had an experience that we will not forget for a long time. A gentleman came to visit us on his way through the area with his wife, and when we saw him the previous year on a business deal, he was so bad that rigor mortis had almost set in. In fact, the medical doctors had refused to give him any more medication. He had a heart condition that had gone into dropsy, and his blood pressure was so high that he was just tottering around. There was so much mucus in his body that the tissue was completely loaded to suffocation. At the time, knowing of my profession, he asked what could be done. We started him off with a very simple procedure: We put him on nutritional herbs (fruits and vegetables--our Regenerative Diet) and on Medicinal herbs. Now, a year later, the man had just finished 8,000 miles of touring! He had the finest skin-color you ever saw, and it was a thrill to see a man so full of pep and energy. Tears dropped from his eyes in our meeting, because he was so happy to be alive. These are times that make it worth all of the trouble we have suffered to assure others (seeking vibrant life today or in the future) and to have the legal right to use and obtain healing with medicinal herbs. And here is a living example of our chief message that health begins in the bowel, for when the colon is clean, when we are free from the morbid matter that is toxifying and defiling the system there, then the system can be fed properly, and we begin to live! [SNH p.176]

2. **Hawthorn Berry Syrup Stops Heart Attack:** One doctor who had learned the formula for Hawthorn berry syrup from Dr. Christopher raised his hand after a lecture to tell the following story. He had gone on a house call in response to a call about a heart attack, one so serious that the family was afraid that death was imminent. The doctor had no cayenne in his bag and the family had no cayenne; the doctor began to panic. He remembered that he had a bottle of Hawthorn berry syrup with him. The usual dose is a half-teaspoonful, but the doctor thought a little more might help, so he gave the patient a full tablespoonful. The patient drank it down, sat right up, and said, "Well, I feel okay". The doctor checked him with the stethoscope and the heart sounded alright. As the doctor said, "Talk about quick relief!" [UW-Hawthorn]

3. **Hawthorn Cures Lifelong Heart Problems:** During the second World War a man had been accepted to work in a large chemical depot. The firm had hired him because he was physically unfit for military service--he had a heart leakage--and they were short of manpower. They placed him in their construction division without a physical examination when he was sixty-two years of age, and he worked for them until he was sixty-five years old. He had begun using this heart tonic when he was sixty years old, using it faithfully because, according to him, it tasted good. Now he was sixty-five years old and the war came to an end. He was called into the company's main office, where they complimented his work record and asked him if he would remain as an employee. He wanted to, but feared the necessary physical examination. He finally agreed to take

the examination.

You may imagine his surprise when he found that he had been given a clean bill of health. He asked the doctor, "What about my heart leakage?" The doctor replied, "I wish I had a heart as good as yours. You should never worry about dying from a heart attack; in fact, if you don't get hit by a truck or lightning you will probably die quietly in your sleep from old age and won't even muss up the covers." This man worked several more years at the plant, retired, and then lived on until he was in his eighties. On a July evening in 1970, he went to the rodeo with his family and enjoyed the evening like a kid as he watched his son ride and perform. The next morning one of his sons came over to his home and found his father lying peacefully in his bed. He had passed away with his hands folded over his chest and, just as the doctor had predicted, the covers were not even mussed up. No heart attack, just the final sleep of old age. [UW-Hawthorn]

4. Hawthorn to Feel Better: A lady once came to Dr. Christopher to have her irises read and was told that, among other things, she had a heart weakness. She was advised to use a half teaspoon of Hawthorn berry syrup three times a day. She began using the tonic on a Tuesday; before the week was even over she had experienced a dramatic improvement in her condition. [UW-Hawthorn]

5. Wheat Germ Oil Saves Man: I remember an incident well over twenty years ago when I was called upon to visit a home in Idaho to see a patient who was lying helplessly in a bed with a severe heart condition. He was not even allowed to get out of bed to use the bathroom and how he hated that bedpan! His family had been informed that he would live a few days because of his heart and they were also told that another attack might suddenly take him at any time. This gentleman was from the old school of eating--a meat, potato and gravy man. He ridiculed the idea of a mucusless diet, a cleanse program and the use of cayenne, saying, "I love eating the way I have always eaten and would rather die early with a belly full of steak than live your way." Knowing that he was a cattle man I asked him what he did for his sick cattle. He explained that experience had taught him that the best medicine for sick cattle was wheat germ oil and he purchased it in large drums to supply his herds. I asked him if there was any reason, seeing that the wheat germ oil was good enough for his prize stock, why he himself could not use the same procedure. He was then instructed to use three to six tablespoons of the wheat germ oil each day.

One day two years later as I was waiting in the lobby of a Salt Lake City hotel I saw a man run up the front steps in great haste and into the lobby where I was sitting. When he saw me he came to a screeching halt, yelled my name, and vigorously extended his hand to me.

"Bet you don't remember me," he said. "I am that 'dying' heart patient in Idaho you saw a couple of years ago. I took that 'cow oil' (wheat germ oil) and in a few days was up and around; in a few weeks I was out on a little business and in six months was out with the cattle, doing a hard day's work. Boy, am I a ball of fire today. Thanks Doc."

His thanks meant much more to me than any money I had been paid to make that house call. [NL 1-5]

6. Man Recovers Totally from Heart Attack: I have some friends where the wife was using some herbs, with good results, but her husband did not believe in them at all. One day he had a heart attack and was in the hospital for two weeks and was then sent home to rest. He was given an appointment to come back for tests such as the tread mill and that he may have to have a very dangerous surgery. His wife finally talked him into taking Cayenne and Hawthorn syrup. In slightly less than one week he went to the doctor. He went the full length of the tread mill without it even slightly affecting the heart. They then told him they had never seen such clean arteries.

One month later he went back for another check up and he was told that in the fifteen years they had been treating him, never had his heart beat been so strong. [NL 1-11]

7. Woman Able to Stop Taking Heart Medicine: After purchasing your book 'School of Natural Healing' and learning the value of cayenne pepper, I have been taking it regularly since last December. I have had a heart problem 18 years and have had a pace maker for the last six years. I had been on digorin and inderol for seven years. With the use of the cayenne along with your health food program, my health has improved greatly. I no longer have to take any heart medication and my health in general is much improved. I am even rid of most of my varicose

veins. [NL 1-12]

8. Various uses for Dr. Christopher's Hawthorn Berry Syrup: Monday afternoon we took a bottle over to my 85 year old sister-in-law who has been in and out of hospitals for years with a bad heart and a bundle of other ailments. She kept a large oxygen tank in her living room, as she had trouble with breathing spells. Believe it or not, after the first ½ teaspoon of hawthorn berry syrup she never used oxygen again, in fact, they had Medicare pick up the tank last month. Then they charged her \$240 rental.

I have another business friend that weighs 440 pounds--63 years old. His heart stopped as he came home in an 11 in. snow storm April 5th. He was in the hospital 14 days. But the doctors never figured out why his heart stopped. When he came home from the hospital I gave him a pint of syrup and he is doing fine now....

My wife and I take the syrup morning and night. My wife noticed pains in her chest when working in the garden and shoveling snow last winter. Now she does not feel it any more, since she is taking the syrup. [NL 3-9]

### See Also

[Adrenetone](#): Dr. Christopher's Adrenals Formula

[BPE](#): Dr. Christopher's Blood Circulation Combination

[Cayenne](#): Dr. Christophers many Cayenne Combinations

[Hawthorn Berry Syrup](#): Dr. Christopher's Hawthorn Berry Syrup

[Blood Pressure](#)

Entire Article on Hawthorn [UW-Hawthorn]

Entire Newsletter "Let not your heart be troubled" [NL 1-5]

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**Heartburn**

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## Heartburn

### Definition

A burning sensation or gnawing pain in the area of the chest over the heart (precordium) or beneath the sternum and near the heart.

### Symptoms

Usually a symptom of indigestion or esophageal spasm. Generally this comes from gastric pyrosis, a stomach problem characterized by belching (eructations) an acid, irritating fluid. [SNH p.28]

### Cause

As heartburn is an acid condition of the system, it is necessary to go on a complete cleansing program to clean out the system. Proper foods, proper eating habits, and effective elimination are very important. A cure is effected only with a complete change of living habits. [SNH p.28]

### Herbal Aids

General Instructions: Prompt and temporary relief may be given for heartburn with cramp bark, ginger, wild yam, etc. Massaging tincture of lobelia externally into the area and taking two or three drops regularly internally is often sufficient. [SNH p.28]

Slippery Elm: Chew the bark of slippery elm. [SNH p.335]

See formula using wood betony, rosemary, scullcap and yarrow. [SNH p.390]

Indigestion, Heartburn, Flatulence, Stomach Pains: See formula using centaury, agrimony, barberry, calumba and raspberry. [SNH p.450]

Heartburn During Pregnancy: Many women experience indigestion and heartburn, and sometimes gas, during pregnancy. This may be caused by the stomach having less room to do its work, nervous tension which inhibits good digestion, too many stomach acids, or a relaxed stomach, which allows foods to back up. Be sure that you do not take antacids during pregnancy. They further inhibit digestion, and they may cross over the placenta into the baby. To deal with these symptoms, Dr. Christopher first emphasized that we must chew our food. Many of us just gulp it down, and the large particles cause gas, fermentation, and pain. Chew well; even juices should be swished in the mouth to mix them with saliva and begin digestion. Don't drink with your meals; water or other liquids dilute the digestive fluids; you may, however, want to take broth or juices with the meal, but you should "chew" these, too. Increase your B-vitamin foods, including whole grains, brewer's yeast, wheat germ, yogurt, perhaps acidophilus. Don't smoke or drink tea or coffee; these irritate the stomach and increase heartburn. Eat small meals frequently; if you must be away from home, take juice, fruit and nuts with you to prevent your blood sugar going down and stomach acids overproducing. Papaya can aid digestion--fresh, dried or in tablets. Some women take tablets of activated charcoal to absorb gases in the system. Slippery elm gruel will alleviate heartburn and absorb gases and toxins. [EWH p.41]

Papaya: As mentioned above the Papaya is considered wonderful for digestive disturbances. The unripe fruit abounds in the enzyme papain which diminishes as the fruit ripens until there is a relatively small amount in the completely ripened fruit...Papain can digest about 35 times its weight of lean meat and 300 times its weight in egg albumin. This is considered important

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because these heavy proteins as well as those in beans, peas, nuts, and lentils are often difficult to digest and putrefy more quickly in the digestive tract causing gas, foul mouth taste, foul breath, constipation, sour stomach, and heartburn. [UW-Papaya]

Wormwood: Its use as a digestive tonic is indeed one of the foremost applications of Wormwood. "Wormwood is above all a stomach medicine, being useful for indigestion, gastric pain and lack of appetite, as well as the related problems of heartburn and flatulence" (Lust:409). [UW-Wormwood]

### Testimonials

One herbalist, whenever he "pigs out on eggs or meat", brews a cup of Papaya leaf tea mixed with spearmint and camomile or if he's in a hurry (which, he mentions, is the worst cause of indigestion), he takes a Papaya-papain enzyme tablet. This removes the indigestion well. [UW-Papaya]

### See Also

[Dr. John R. Christophers "Mucusless Diet"](#)

[Dr. John R. Christophers "Three Day Cleansing Program"](#)

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**Hemorrhage**

[Hemorrhoids](#)

## Hemorrhage

### Definition

A discharge or escape of blood from the blood vessels, either by passage of blood cells through the intact and unruptured walls (diapedesis) or by flow through the ruptured walls. [SNH p.29]

### Cause

This problem is caused by severing or rupturing a blood vessel. If the rupture is from an artery, the blood (usually bright red) spurts and flows fast. If it is a vein, the blood is dark and flows more slowly and constantly. [SNH p.29]

### Herbal Aids

General Instructions: Hemorrhage throws many people into shock and can bring on death very rapidly. If the wound is small, the blood usually coagulates and the area seals itself, but if the rupture is large, some herbal aid is needed. The first thing one should think about is cayenne as quickly as possible. Using one teaspoon to the cup, as hot as can be taken without scalding. This will stop any hemorrhage, internal or external, by the time a person can count to ten. If the rupture is external and cayenne is not available, comfrey placed over the wound will stop bleeding quickly. [SNH p.30]

Hemorrhage (uterus, bowels, lungs): Use the infusion or decoction of bayberry alone, or in combination with suitable stimulants (cayenne, ginger, etc.). [SNH p.132]

After-Pains (childbirth): Uterine hemorrhage, miscarriage, preventive: Drink the raspberry leaf tea with a little Composition Powder [Herbal Composition] in it. [SNH p.143]

Special Strong Decoction (Hemorrhage of the lungs, internal wounds): See formula using cranesbill, comfrey and glycerine. [SNH p.153]

Bistort: Use a strong decoction. [SNH p.162]

Chronic Hemorrhage: See formula using tormentil and hops. [SNH p.169]

Witch Hazel: Witch hazel is a valuable and soothing astringent, and it is especially useful in hemorrhage of the lungs, stomach, nose, rectum, uterus, and kidneys. It is useful in threatened abortion, and it influences the venous structures and restores perfect circulation. It can be used locally or internally for hemorrhoids. [SNH p.169]

Witch Hazel: Hemorrhage, threatened abortion, etc., drink the infusion freely. [SNH p.171]

Yarrow: Hemorrhage of the bowels. Use a clean enema, then inject the cool tea into the bowels (where there is pain, the tea should be about 112 degrees F.); then inject 2 tablespoonfuls several times a day, and after each stool. [SNH p.214]

Yarrow: Hemorrhage, spitting of blood. Drink the warm infusion; it will equalize the circulation and relieve the pressure from the ruptured vessel, allowing it to heal. [SNH p.215]

Comfrey for Hemorrhage of the Lungs: Give the mucilage of comfrey often and in large doses or give 1 teacupful of the decoction or mucilage (1 mouthful at a time and mix well with saliva). Rest 1 hour, then repeat until all soreness is gone and blood is not in the sputum. If the patient sleeps, awaken and continue with the same dosage for two hours and administer every three hours thereafter. Do not give food for at least twelve hours. [SNH p.310]

[Hernia](#)

Marshmallow for Hemorrhage of the Urinary Organs: Boil the powdered root in milk and drink freely. [SNH p.326]

[Hiccoughs](#)

Tuberculosis, with Severe Hemorrhage: See formula using elecampane, comfrey, horehound, licorice, Iceland moss, Peruvian bark, composition powder, cayenne, acacia, sugar, queen's delight and antispasmodic tincture. [SNH p.345]

[Hypoglycemia](#)

Lung Hemorrhage: See formula using black cohosh and blood root tincture. [SNH p.401]

[Hysteria](#)

Hemorrhage of Lungs and Salivary Glands: Chew rhizome or root of Jamaica Ginger. [SNH p.414]

[Impotency](#)

Danger of Miscarriage, Uterine Hemorrhage: Give false unicorn copiously, by the quart. [SNH p.466]

[Incontinence](#)

Hemorrhage after Childbirth: (For the Midwife) If you experience hemorrhage, which is defined as more than two cups of blood, either seeping slowly or gushing out, the first thing you should do is work the uterus externally, kneading the belly until the uterus maintains its shape. This may take some time, but continue until it works. Mistletoe leaf tea of blue cohosh tincture are oxytocic and may help clamp down the uterus. Motherwort tea is claimed to help. Most midwives I have met swear by shepherd's purse, best used as a tincture. This humble garden weed is a powerful styptic, although it should not be used routinely as it can cause large, painful blood clots. In hemorrhage it is said to work every time. I consider the shock tea an excellent anti-hemorrhage remedy, although controversial, local midwives trust cayenne and use it extensively. Cayenne does not contract the uterus; it merely controls bleeding. You might combine it with blue cohosh for both activities. [EWH p.82]

[Indigestion](#)[Infertility](#)[Inflammation](#)[Influenza \(Flu\)](#)[Insect Sting](#)[Insomnia](#)

Garlic for Bowel Hemorrhage: Garlic is used internally for the treatment of gastro enteric problems. It is simmered in milk and taken for bowel hemorrhage [UW-Mullein]

[Itch](#)

### Testimonials

1. [Cayenne](#): Dr. Christophers many Cayenne Combinations for Nosebleeds: As I have taught for over thirty years, if you will drink a cup of cayenne tea it will stop any unnatural hemorrhage due to injury, etc., by the time you can count to ten. One patient contradicted me on this, laughing as he said it, "You said a cup of cayenne tea will stop a hemorrhage by the time you count to ten--you were wrong. I tried this when I had a "nose bleed" and I started to count, but I only got up to six instead of ten." [NL 1-9]

2. [Herbal Eyebright](#): Dr. Christopher's Herbal Eye-Health Formula Restores Vision from Subretinal Hemorrhage: My right eye went bad last January, diagnosed as "subretinal hemorrhage" which left me with probably 20-30% vision.

Since using Eyebright Comb., I now have 70% or 80% vision. Miracle Medicines-God's wonderful herbs. [NL 1-12]

### See Also

[Antisp](#): Dr. Christopher's Anti-Spasmodic Tincture

[Cayenne](#): Dr. Christophers many Cayenne Combinations

[Herbal Eyebright](#): Dr. Christopher's Herbal Eye-Health Formula

[Nosebleeds](#)

[2-9](#): Garlic: Man's Best Friend in a Toxic World

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## Hemorrhoids

### Definition

An enlarged vein in the lower rectum or anus caused by blockage in the veins of the area.

### Cause

Varicose veins and hemorrhoids are both evidence of the same problem: lack of nutrients causing weakness in the circulatory system. Improving the diet and supplementing Calc Tea makes a big difference in the problem right away. [EWH p.43]

The basic cause of this condition is sugar in the form of candy, beverages (pop, coffee, etc), pastries and bread. These leach out the calcium from the body. Other culprits are white flour, tobacco, and liquor. One of the first places the leaching starts is in the venous structure of the body, drawing off the supporting calcium. This in turn weakens the veins, causing varicose veins, which will, if allowed to continue, become phlebitis. Another serious area for leaching is the bowel area, where old fecal matter has accumulated. The body tried to remove the impaction by draining as much fluid from the body as it can. There is generally enough fluid to cause a bowel movement, but the liquid which is left absorbs the sugar. It then feeds into the veins and leaches out the tensile strength of the veins in the lower bowel area. When straining for a bowel movement, the veins have more pressure exerted, and in turn, the weak walls break and result in a varicose condition called piles or hemorrhoids. [NL 2-10]

### Herbal Aids

Plantain: Use a strong tea (steep one ounce of the granulated herb for twenty to thirty minutes in one pint water), inject one tablespoonful three of four times daily (or more frequently in bad cases), and especially after each bowel movement. [SNH p.53]

Poke Root: Use the fluid extract as a wash and injection. [SNH p.60]

Chaparral: Use externally as a sitz bath. [SNH p.71]

Hemorrhoids (cathartic injection): See formula using bayberry, African ginger and Pinus. [SNH p.135]

Hemorrhoids (suppository): See formula using bayberry, pinus, golden seal and wheat flour. [SNH p.136]

Red Raspberry: Inject 1 teacupful and retain as long as possible. [SNH p.143]

Tormentil: Bleeding and internal hemorrhoids. Inject 3-4 ounces of the undiluted decoction and retain as long as possible. [SNH p.168]

Balm of Gilead: Apply the ointment to the affected parts. [SNH p.202]

Yarrow: Use a clean enema, then inject the cool tea into the bowels (where there is pain, the tea should be about 112 degrees F.); then inject 2 tablespoonfuls several times a day, and after each stool. [SNH p.214]

Hemorrhoids (piles): See formula using yarrow and mullein. [SNH p.216]

Uva Ursi: Use the tea or diluted tincture as a wash. [SNH p.259]

Mullein: Apply mullein ointment and take the tea internally. [SNH p.316]

[Hernia](#)

Chickweed: Hemorrhoids and rectal disorders. Bathe the area 2-3 times daily with the decoction, infusion, or diluted tincture (as warm as possible), then apply chickweed ointment [Chickweed Ointment] or Dr. Christopher's healing ointment. [SNH p.322]

[Hiccoughs](#)

[Cayenne](#) Ointment: [Red Sun Balm] Cayenne may be applied on hemorrhoids for it does bring relief and healing, but the patient should be warned of its potency. [SNH p.408]

[Hypoglycemia](#)

See formula using myrrh and golden seal. [SNH p.456]

[Hysteria](#)

Sitz Bath: There are a number of differing opinions on sitz baths. The common sitz bath is merely sitting in a tub, wherein just the buttocks, the lower back into the sacroiliac and the upper thighs are immersed, though the feet should be in another tub; or where the buttocks would be in cold water, the feet should be in hot water; or vice versa. The most important part of the sitz bath, of course, is soaking the anal area in herbal aids to give relief. This is used for itching, piles, hemorrhoids, acid burning from urine and rectal discharges, or toxic conditions wherein the flesh is raw. [SNH p.494] If you are suffering from hemorrhoids, a sitz bath of strong oak bark tea will help, as well a Sitz of witch hazel tea. [EWH p.43]

[Impotency](#)

[Black Ointment](#): Dr. Christopher's Black Ointment is an excellent drawing ointment. For use externally on old ulcers, tumors, boils, warts, skin cancers, hemorrhoids, excellent for burns and as a healing agent. This is made with chaparral, comfrey, red clover blossoms, pine tar, mullein, beeswax, plantain, olive oil, mutton tallow, chickweed, poke root. [HHH p.196]

[Incontinence](#)

[CMM](#): Dr. Christopher's Healing Ointment: Made of comfrey, marshmallow, marigold, bee's wax, and oils, this is an antiseptic to be used on lesions, eczema (dry), poison ivy, soothes inflamed surfaces, abrasions, burns, hemorrhoids, for bruises and swellings. Good to have on hand at all times. [HHH p.196]

[Indigestion](#)

Red Potato: Dr. Christopher suggested inserting a piece of red potato, about the size of the little finger, into the rectum, for nearly instant relief. [EWH p.43]

[Infertility](#)

Golden Seal: Likewise, internal hemorrhoids which are also accompanied by various dyspeptic symptoms, can be helped by a weak infusion given as an enema, with the tincture, tea or capsules taken internally during treatment. The disinfectant and astringent properties of the herb effect this cure. [UW-Golden Seal]

[Inflammation](#)

Onions: For hemorrhoids, two cups of finely chopped or grated green onions are mixed with wheat flour and fried in animal fat until the mixture resembles a salve. A thick layer is spread on a cloth and bound to the affected area just before bedtime. Repeat for two days; this usually clears it up in two days. [UW-Onions]

[Influenza \(Flu\)](#)

Plantain: It is well known for the treatment of piles (hemorrhoids). Make a strong tea with an ounce of granulated Plantain to a pint of boiling water. Let steep for twenty to thirty minutes. For hemorrhoids, use a syringe and inject one tablespoonful of this tea three or four times a day at least, and especially after each stool, using more frequently in bad cases. For external hemorrhoids, apply externally with soft gauze or cotton. A saturated piece of gauze may be kept on the piles by using a belt or band around the body to which has been attached a narrow strip of cloth for holding the saturated gauze. Plantain ointment may also be applied, and even a poultice of the fresh, pulped herb may be held to the area with a cloth band (Kloss:296). [UW-Plantain]

[Insect Sting](#)

[Cayenne](#): Dr. Christopher's many Cayenne Combinations: To correct this condition, follow the mucusless diet and use cayenne regularly. Cayenne aids in strengthening the veins and arteries because it increases circulation and is rich in calcium. Work up to taking a teaspoon of cayenne three times a day by starting with one-third of a teaspoon three times a day in water, cold or warm, as you prefer. Do this three days, and add one-third teaspoon each day until up to the one teaspoon three times a day, six days a week, as with all aids. Rest one day; then continue. [NL 2-10]

[Insomnia](#)

Juices: Carrot & watercress, carrot & turnip leaf, prune. [NL 3-5]

[Itch](#)

[Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula: In the case of hemorrhoids we suggest the following: Number ONE: eliminate constipation. Use the lower bowel formula along with the mucusless diet and drink plenty of water. [NL 4-2]

## Testimonials

1. Hemorrhoids and Cayenne: Dr. Christopher tells this story. I traveled with a man younger than myself several years ago all over the western part of the United States on business. He marveled at the stamina that an older man could have on long drives without displaying the usual fatigue. Each morning I would get up and have my cayenne and my wheat germ oil (I don't pay attention to anyone else, I just take them, regardless). Finally he got curious and said, "What's that stuff?" So I gave him an illustrative lecture, and he responded, "Well, I have hemorrhoids; my mother died of high blood pressure, and I have high blood pressure; and with the hemorrhoids I have to wear a belt, as you probably noticed, to keep my hemorrhoids up in place. Do you think that (meaning cayenne) will help?" "Not unless you take it," I replied. "Well, I will start taking it." Then I added, "I don't think you're man enough; I don't think you are brave enough," and I turned and walked away. Now, he was well-proportioned and a weight lifter, so after I left, he went over and got into my car and started using the cayenne along with the wheat germ oil, and by spring he did not have to wear a belt any longer as his hemorrhoids were cleared. Then he had an amazing surprise when he went to his doctor for a regular check-up; the doctor took his blood pressure three or four times and said, "This is supposed to be progressively worse. I don't know what has happened; your systolic and diastolic are near perfect. You don't need to come back any longer --I don't know what happened!" Well, he did not have to go back, and today this gentleman who lives in the Salt Lake City area has no high blood pressure, for he kept on taking his cayenne. [SNH p.412]

2. Margarine and Hemorrhoids: For a couple of weeks, we tried using the cheaper margarine instead of our usual butter. After that time, we experienced large, protruding and very painful hemorrhoids, as well as congestion generally. When we began using butter and oil again, the symptoms just disappeared. This confirmed the belief that margarine is a dangerous junk food! The body cannot handle the hydrogenated oils. Although our experience flies in the face of standard dietary recommendations, which say that butter is dangerous, not margarine, we think that a moderate amount of butter is fine. [EWH p.43]

3. Papaya Saves from Surgery: Papaya has also remarkably healed painful hemorrhoids. A woman 52 years old, suffered painful external piles. Standard therapy produced no results. Her doctor told her to take one papain tablet every four hours. In two days swelling and pain both subsided. After three more days she was completely healed and did not have to consider painful surgery (Luc:Secrets:194). [UW-Papaya]

## See Also

- [Black Ointment](#): Dr. Christopher's Black Ointment
- [Cayenne](#): Dr. Christophers many Cayenne Combinations
- [Chickweed Ointment](#): Dr. Christopher's Chickweed Ointment
- [CMM](#): Dr. Christopher's Healing Ointment
- [Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula
- [Dr. John R. Christophers "Mucusless Diet"](#)

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## Hernia

### Definition

A hernia commonly refers to the escape of some part of the intestine from the abdominal cavity, through an opening in the abdominal wall. The intestine is pushed out from the inner body, often to a point just below the surface of the skin. When it reaches this point, we have a visible hernia. At first it is about the size and shape of a marble, and grows larger as more and more of the intestine escapes. [NL 1-8]

### Symptoms

Extreme pain in the abdominal area whenever there is an exertion, such as bending over, leaning back or any other small movement involving the abdomen.

### Cause

Early in life the male infant can encounter complications. Two months before birth, the testicles descend from the abdominal cavity into the scrotum. They descend through the inguinal canal which soon closes behind them. If the canal doesn't close, however, this could be a later trouble spot for a hernia precipitated by muscle weakness and sudden heavy lifting. [NL 3-6]

Other causes are from overexertion in lifting which can cause the tear in the abdominal wall.

### Herbal Aids

**BF & C:** Dr. Christopher's Bone, Flesh and Cartilage Formula: A number of patients with hernias and ruptures have used the "bone, flesh and cartilage" formula with great success. This formula, which will be given, is applied over the afflicted area as a fomentation a day and night, using a truss or pad to hold in place. Then soak some flannel in this tea and apply. It can also be obtained in a concentrated liquid form or as an ointment. Use whichever type is best in your case. It is also helpful to take the formula internally as a tea, or in capsule or tablet form--two or three of these three or more times per day: This can be purchased under the Christopher name of Bone, Flesh and Cartilage. [BF&C]

Bone, flesh and cartilage (comfrey combination fomentation). This is an aid for malfunction in bone, flesh, sinews, etc. Make a tea of the following herbs: six parts oak bark, three parts marshmallow root, three parts mullein herb, two parts wormwood, one part lobelia, one part scullcap, six parts comfrey root, three parts walnut bark (or leaves), three parts gravel root. Soak the combined teas in distilled water, then soaking four to six hours, simmer thirty minutes, strain and then simmer the liquid down to 1/2 its volume and add 1/4 vegetable glycerine (if desired). Example: One gallon of tea simmered (not boiled) down to two quarts and add one pint of glycerine.

Soak flannel, cotton, or any white material other than synthetics (never use synthetics). Wrap the fomentation (soaked cloth) around the malfunctioning area and cover with plastic to keep it from drying out. Leave on all night six nights a week, week after week, until relief appears.

Drink 1/4 cup of finished concentrated tea with 3/4 cup of distilled water three times in a day. [NL 1-8]

**Cleaning Bowels:** For hernias we recommend keeping the bowels clear and open through the use of the lower bowel formula, [**Fen LB**] plenty of fresh juices, a light, mucusless diet to eliminate the strain of bowel movements, and the application of the Bone, Flesh, and Cartilage

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Formula [[BF & C](#)] to the hernia area as a fomentation. All stress and strain on the area must be removed while the area is healing. The fomentation should be applied in the evening so that it can remain on the area all night. During the daytime, the BF&C ointment can be used if the fomentation is inconvenient. BF&C capsules or tea may also be taken daily: either two or three capsules three times daily or three cups of the tea. Continue treatment six days a week fasting with distilled water on the seventh until the hernia is healed. [NL 3-6]

**Testimonials**

A friend of mine, who was scheduled for a hernia operation earlier this year, suggested I write to you. After he read your book "The School of Natural Healing" and followed your suggested guidelines for a week to ten days, his hernia problem was solved. Needless to say, he can't say enough good things about your use of herbs and the book. [NL 1-8]

**See Also**

[BF & C](#): Dr. Christopher's Bone, Flesh and Cartilage Formula

[Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula

[Dr. John R. Christophers "Extended Herbal Cleanse" Routine](#)

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## Hiccoughs

### Definition

An irritation of the phrenic nerve causes the contractions of the diaphragm. Hiccoughs can at times become so serious they cause death, after a period of continued hiccoughing. [HHH p.82]

### Symptoms

This is a sudden inspiration of air caused by spasmodic contractions of the diaphragm. An irritation of the phrenic nerve causes the contraction of the diaphragm. [SNH p.30]

### Cause

This is generally caused by overloading food or drink into the stomach. Relaxation is the most important thing. [SNH p.40]

### Herbal Aids

**General Instructions:** Often hiccoughs can be stopped merely by bending over with the head downward and tipping a glass of liquid to drink it while upside-down. A few drops of antispasmodic tincture taken internally and rubbed on the chest area will often bring relief, as will a teaspoon of onion juice, a cayenne poultice on the chest area, black cohosh tea, blue cohosh, or wild carrot flowers or seeds. [SNH p.40]

**Orange Juice:** Take a good swallow of freshly-squeezed orange juice. Repeat after a few minutes if needed. Dill tea should help. Do a good acupuncture treatment on the hands or feet. [EWH p.167]

**B & B Tincture:** Dr. Christopher's Nervous System Formula with Black Cohosh: Black cohosh, blue cohosh, blue vervain, skullcap, and lobelia. This is used to aid in nervous conditions, sore throat, hiccups, and aid to restoring malfunctioning motor nerves and assisting in adjusting poor equilibrium and hearing, and a great blessing to epileptics. Massage into the medulla (base of skull), and upper cervicals, and do following: With an eye dropper insert into each ear at night four to six drops of oil of garlic and four to six drops of the following herb tincture: blue cohosh, black cohosh, blue vervain, skullcap, and lobelia, [B&B Tincture] plugging ears overnight with cotton, six days a week, four to six months, or as needed. On the seventh day, flush ears with a small ear syringe using warm apple cider vinegar and distilled water half and half. Take six to ten drops in a little water or juice two or three times a day. [EWH p.207]

**Spearmint:** A distilled water of spearmint will relieve hiccough. [UW-Spearmint]

### Testimonials

**B & B Tincture:** Dr. Christopher's Nervous System Formula with Black Cohosh A woman one day came to Dr. Christopher with severe hiccups, and he put a few drops on her tongue--she felt a jolt from the top of her head to the bottom of her feet, and the hiccups stopped. [NL 5-10]

### See Also

**Antsp:** Dr. Christopher's Anti-Spasmodic Tincture

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[Hypoglycemia](#)

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## Hypoglycemia

### Definition

Pancreatic malfunction can manifest in one of two ways: diabetes, which is high blood sugar, or hypoglycemia, which is low blood sugar. Though they are completely different, they both stem from the same cause, a malfunction of the pancreas, which is what we have to treat.

### Herbal Aids

**Panc Tea:** Dr. Christopher's Herbal Aid for Pancreas and Companion Glands Formula: An aid for the pancreas and other affiliated glands that through malfunction cause high or low blood sugar (namely diabetes or hypoglycemia). This combination has assisted many that have had hypoglycemia after 6 months or more of using 2-3 caps or tablets 3 times in a day 6 days a week (all herbal aids give faster results in 6 days a week instead of 7) using the same day of the week of each week. They have had a glucose tolerance test with a clean bill of health on the pancreas area. Many reports came in of heavy insulin users who continue using the insulin but by watching litmus paper or other types of diabetic checking have gradually tapered down on the insulin and many, within a year of using 2-3 or more three times a day, 6 days a week of the tablets or capsules, have found complete relief. Of course the closer a person stays on the mucusless diet and eliminates the sugars (unnatural), soft drinks, candies, pastries, bread, etc. the quicker the results. The herbal formula is golden seal, uva ursi, cayenne, cedar berries, licorice root and mullein.

**Diet and Hypoglycemia:** Most hypoglycemics have problems feeding themselves, for they crave protein and sugar, yet these substances are wearing on the adrenals, which are often exhausted in hypoglycemics. You need to feed the adrenals with licorice root and hawthorne berries, the latter being said to produce natural adrenalin. You need to take high-quality protein, as in the nuts and seeds and legumes. Sprouted sunflower seeds, sprouted almonds, and chia seeds are all high-quality sources of protein. The other seeds and nuts are good as well. You can soak and low-heat legumes, particularly pinto beans, which are high in potassium and easily digested, for satisfying and long-lasting protein. Be sure that you eat plenty of vegetables, both raw and cooked, in preference to too many fruits, which can overload the system with sugar.

When suffering with hypoglycemia, I devised a power-packed drink which helped every time. In a blender place a handful of soaked or sprouted almonds, a cup or two of water, a banana, some pineapple juice, a tablespoon of brewer's yeast, and a handful of chia seeds. Blend until the seeds thicken the drink. This is mild but very helpful in feeding high-vibration protein to the system.

**Juniper:** Stan Malstrom reminds us that diabetes and hypoglycemia patients always have undergone or are undergoing considerable stress, so that if we wish to treat them, we must build the adrenals as well as the pancreas, Juniper berry being an ideal herb for the purpose. He mentioned that Hawthorne berries should be used in conjunction with the Juniper to permanently effect healing.

**Licorice:** LaDean Griffin, in a very interesting article on Licorice, explained the use of Licorice to build the adrenal glands. She noted that we call adrenal exhaustion hypoglycemia in today's modern world. Since we are so stressed at our modern pace of life, the adrenal glands become exhausted easily and frequently. "In hypoglycemia, where sugar is taken to give a stimulating lift in the hope of overcoming (stress), the problem is compounded as sugar leaches the Vitamin B and calcium, causing more stress, losing more potassium and body tone. The insulin is raised to an unnatural high to take care of the sugar, somehow extending past its needs

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and afterwards dropping to a new low, causing a low blood sugar called insulin shock (overdose of insulin). Immediately we take sugar to lift us up again and a vicious cycle has begun. Having found the herbs that act like cortisone (cortin hormone), I feel it is important for me to make this known". She then described how primitive people used various herbs, including Licorice, to build the endurance, and how the medical world extracted from the herbs the compound we call cortisone. When a person's adrenal glands become so exhausted that they simply do not function anymore, the condition is called Addison's disease, which is a terminal disease. It is characterized by blotchy pigment appearing suddenly on large parts of the body, intolerance to heat or cold, reduction in capacity for muscular work, weakness, inability to stand any stress or emotional excitement, whether positive or negative, sometimes nervous breakdown or even insanity, complete exhaustion, feeling that one is going to die, inability to digest food, and other similar symptoms. The synthetic cortisone is given to supply the need of the natural substance, but it produces complications, side effects and eventual disillusionment as it will not in any way heal the adrenals (Herbalist:1975:16).

Licorice is an excellent herbal aid to use in this condition, as it contains a cortisone-type substance which will help the body restore itself to the point where it will produce its own cortisone. Its sugar-like substance does not increase the demand for insulin in the body, thus giving strength without bringing on insulin shock. LaDean Griffin explains that she is certain that this works, because at a time when she thought she was making a great deal of personal progress, a sudden shock debilitated her so much that she developed Addison's Disease. She found that two capsules of Licorice each day would give her enough strength to begin healing, and to do the day's work. She needed to continue taking the herb, which is not addictive, she explained, no more than food is. You can stop taking the Licorice root without going into shock as you would if you suddenly stopped taking cortisone, she explained.

"When people who have been under severe stress, overworking the adrenals and becoming extremely nervous and irritable, begin to take Licorice, they think they have suddenly spiritually arrived. It is my opinion that many who suffer in mental institutions could be helped with this wonderful herb" (Ibid.).

Sarsaparilla: Sarsaparilla also contains cortin one of the hormones secreted by the adrenal glands. The body will die almost immediately if this hormone is stopped but if there is only a small or insufficient amount the body becomes easily ill and develops nervous depression and general weakness. So many maladies are related to adrenal weakness and exhaustion, including hypoglycemia, so people should take note if they are striving to rebuild their adrenals. Sarsaparilla may be able to help.

Blueberry Tea: Some who have hypoglycemia have reported blueberry leaf tea as very helpful.

Dandelion: Dandelion has been often thought to have good effect upon the functions of the pancreas. Tierra considers the root a specific for hypoglycemia, a cup of tea taken two or three times a day in connection with proper diet.

Chia: We especially like this preparation of chia seed: in a blender put about a cup of milk (goat's, nut, soy, etc. are all good). Add an equal amount of any kind of juice. Add two bananas and 1/4 to 1/2 cup of chia seed. Blend until smooth. Allow to sit a couple of minutes, to develop the mucilage and blend again. Serve. Everyone likes this and it is very nutritious...Chia is excellent for hypoglycemics. If made into a "shake" as described above it can keep the hypoglycemic person in energy and strength for several hours. [UW-Sage]

Apples: The apple is an excellent fruit for the hypoglycemic because it contains a higher percentage of fructose than other fruits which does not call upon insulin from the pancreas. Fructose is fairly quickly absorbed into the system, goes through the liver and is then available as glucose and may be burned or utilized by the body for energy. A pleasant tea may be made by boiling two or three apples cut in thin slices with their peels in a quart of water for about 15 minutes. A little licorice root may be added for flavor.

### Testimonials

One day a man and his sister, both middle-aged adults, came into Dr. Christopher's office. She had severe diabetes, and his hypoglycemia was so bad that doctors' tests indicated that he could

not get any worse, without offering any hope to help him. They both were told to use the [mucusless diet](#) and to take the pancreas formula [[Panc Tea](#)], although they took the lower bowel formula [[Fen LB](#)] and blood cleansing formula [[Red Clover Combination](#)] before they began on the pancreas formula.

The woman was using around 80 to 85 units of insulin a day, being a severe case. Despite her initial condition, within a year her pancreas was furnishing its own insulin, and she tapered off gradually until she didn't need it at all. Her brother took a glucose tolerance test in six months and received a clean bill of health; his hypoglycemia was completely cleared.

Despite the fact that they had opposite diseases, diabetes and hypoglycemia, both were cleared because each had a family weakness in the pancreas. When their pancreas was cleared, the diseases were removed. [EWH p.134]

#### See Also

[Adrenetone](#): Dr. Christopher's Adrenals Formula

[Panc Tea](#): Dr. Christopher's Herbal Aid for Pancreas and Companion Glands Formula

[Dr. John R. Christophers "Mucusless Diet"](#)

[Adrenals](#)

[Diabetes](#)

Entire newsletter "Cedar - Juniperus monosperma Cupressaceae" [NL 6-4]

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## Hysteria

### Definition

Tension or excitement in a person that is marked by unmanageable fear and short term loss of control over emotions.

### Symptoms

A psychoneurotic disorder characterized by emotional excitability, extreme emotionalism involving motor and vasomotor, sensory and visceral functions. This is a condition that varies from mild excitement to laughing and crying with extreme nervous tension, accompanied by fits, convulsions, loss of sensibility and mania. [SNH p.32]

### Cause

Hysteria is considered to be due to mental causes, such as autosuggestion, dissociation or repressed emotion. This condition only occurs while a person is awake and is therefore a willed emotional release to obtain sympathy, to frighten, etc., if another person is involved. This type of person suffers much anxiety and fear. [SNH p.32]

### Herbal Aids

General Information: For immediate relief, give a nervine tea such as an infusion of lady's slipper, skullcap, ginger, raspberry leaves, poplar bark, balmony, colombo root, cayenne, or antispasmodic herbs to help relax the nerve tension. Add a little tincture of lobelia to the nervine as an antispasmodic. If it is impossible to administer these aids orally, the same tea in the form of an enema will help ease the condition very quickly. Rest and cheerful surroundings are needed. The digestive system needs to be toned up properly. [SNH p.32]

Garlic: Give an oral infusion of garlic in hot milk and water. [SNH p.100]

Tansy: Take 2 fluid ounces of the infusion repeated frequently (5-6 times daily). [SNH p.123]

Hysteria (general building tonic): See formula using raspberry leaves, white poplar, balmony, calumba root and cayenne. [SNH p.146]

Catnip: A warm high enema of catnip infusion will bring relief. [SNH p.237]

Catnip: Use the warm infusion orally. [SNH p.237]

See formula using spearmint and ginger. [SNH p.240]

European Pennyroyal: Give the infusion in teacupful doses, repeated frequently (every 1-2 hours), and when the herb is unavailable, 1-3 drops of the oil in warm water is excellent. [SNH p.283]

Blue Cohosh: For hysteria and nervous exhaustion due to shock or accident. Use the warm decoction orally. [SNH p.292]

Antispasmodic Tincture: See formula using lobelia, skullcap, skunk cabbage, gum myrrh, black cohosh and cayenne. [SNH p.363]

Skullcap: When skullcap tea cannot be taken orally, a small quantity may be given rectally every 30 minutes to 1 hour. [SNH p.371]

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Dr. Nowell's General Nervine Tonic: See formula using scullcap, hops, valerian, gum asofoetida and gentian root. [SNH p.373]

See formula using valerian, wild yam, blue cohosh, anise seed and ginger syrup. [SNH p.378]

Hysteria (relax nerve tension, soothe and tone nerves): See formula using lady's slipper, scullcap, ginger and raspberry leaves. [SNH p.385]

Hysteria with Convulsions: See formula using lady's slipper root, asafetida gum, ginger and lobelia. [SNH p.385]

See formula using white poplar bark, raspberry leaves, balmony, calumba and cayenne. [SNH p.447]

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture: Consists of skullcap herb, lobelia, cayenne, valerian root, skunk cabbage, gum myrrh, and black cohosh. To be used in cases of convulsions, fainting, cramps, delirium tremors, hysteria, etc., also good for pyorrhea, mouth sores, coughs, throat infections, tonsillitis, etc. Dose 1/2 to one teaspoon to glass of steam distilled water as a gargle and use until throat clears, also take one teaspoon in steam distilled water morning and evening. [HHH p.195]

#### See Also

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture

[Relax-Eze](#): Dr. Christopher Nerve Herbal Food Combination

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## Impotency

### Definition

The inability of the adult male to achieve erection or less commonly to ejaculate having achieved an erection.

### Herbal Aids

General Instructions: From a question to Dr. Christopher in his newsletter. Is there a natural treatment for impotency? His answer: There are certain types that are beyond help, such as of course, castration, and others could only be helped by a miracle such as a severe case of mumps that have "gone down," or injuries, etc. But there are many who have been helped who are impotent because of malnutrition of the reproductive area. In this case we have had both husband and wife follow a special routine in diet as follows:

- (a) Stop eating processed foods and start on the [mucusless diet](#) with plenty of raw live food and fruit and vegetable juices.
- (b) Use a gallon of steam distilled water each day, or if one is under 130 pounds, use one ounce of this water to each pound of body weight.
- (c) Keep the bowels free, using the bowel tonic formula if required so as to get three or more bowel movements per day.
- (d) The equivalent of one teaspoon of "false unicorn root" herb a.m. and p.m. (This can be in capsules, tablets, tea, etc.)
- (e) One tablespoon of wheat germ oil three times each day. Both husbands and wife must follow this program. This routine can also be helpful to those who have wanted children, but could not conceive.

While in my early practice nearly forty years ago, I would promise a couple that if they would follow this routine they would either conceive or have a baby within a year. Many have accomplished this. One special (to me) couple had been married fourteen years with no success in reproduction. They followed the suggestion faithfully and had the baby in just a little over the year. We had a number of patients that have had this wonderful result.

The body has to be cleansed of these toxic additive materials we find in our foods today, and this is one of the reasons for the steam distilled water to help flush out the waste to aid the reproductive organs and gain better health. [NL 1-7]

True Unicorn Root: True unicorn root is a very valuable tonic, especially beneficial and healing to the female regenerative organs. It is a good general tonic, and it has proved especially effective for female cases of habitual miscarriage due to chronic weakness. It may be safely used during the entire period of pregnancy. Due to its powerful uterine stimulative properties, it has proved valuable in cases of sterility and impotence (sometimes achieving healing results within a few weeks; but the more difficult cases must be given for a few months); but as it increases the possibility of conception, it should be avoided where frequent pregnancy is undesirable. [SNH p.288]

Sterility, Impotence: Give the decoction over an extended period of time (a few weeks to several months). [SNH p.288]

Aphrodisiacs: Herbs used to help correct conditions of impotence and strengthen sexual power. Arracacha, Betel, Black cohosh, Burr gokhru, Camphor, Carline thistle, Damiana, Echinacea, Coca, False unicorn, Garden sage, Ginseng, Guarana, Jamaica ginger, Matico,

Murira-puama, Night blooming cereus, Nux vomica, Quaker button, Saw palmetto berries, Summer savory, Sundew, True unicorn (impotence), Vanilla pods, Virginia snake root, Yohimbe. [SNH p.581]

Gravel Root: Gravel Root is said to help with problems in the genital tracts. When there is impotence, Gravel Root can help tone and heal the system. [UW-Gravel Root]

Oats: Oats are also used to regenerate and strengthen the male reproductive system, an effective agent in conditions of spermatorrhea, nervous debility of convalescence, nervous exhaustion, and general neurasthenia. They are considered an effective agent in conditions of impotence or sexual debility due to over indulgence as they are said to produce a tonic effect on the nerve structure of the sexual organs. They are employed for prostatic irritation (Luc:Secrets:149). For this purpose they are combined with black willow bark and celery seeds and made into a decoction. One teacupful is taken three or four times a day. For other male troubles, fifteen drops of the extract of oats are taken three times a day in hot water (for quicker effect) or cold water (for more prolonged effect) (Ibid.). [UW-Oats]

Sarsaparilla: A search for hormones from plant substances has been going on for several years. Hundreds of plants have been tested for hormones or pro-hormones. In 1939, two scientists discovered that Sarsaparilla root certainly contained hormones, while other plants often proved disappointing.

The first hormone found was the male hormone testosterone. Progesterone and cortin have also been extracted from the root. In Mexico, another scientist, noticing that Sarsaparilla was used frequently by the Indians for physical debility, weakness, and impotence, found the same results. In Mexico and South America testosterone tablets are made for impotence from Sarsaparilla roots. [UW-Sarsaparilla]

Wild Lettuce: In homeopathy, a tincture extracted from the whole fresh plant is used in the treatment of impotence. This is an interesting contradiction in uses! It is sometimes dissolved in wine to be taken for pain. [UW-Wild Lettuce]

Juices: Watercress, spinach. [NL 3-5]

Pinon Nut: The nut is considered to be effective where there are problems with the lungs such as tuberculosis, impotence, paralysis, low blood pressure, and emaciation. The Pinon nut is one of the best sources of protein in the nut family. [NL 5-1]

Watercress: The seeds in white wine would stop gonorrhoea and impotency. In fact, he said, "the seeds provoke venery and lust" [UW-Watercress]

Chickweed: Chickweed can benefit the whole system, as it soothes and cleanses and paves the way for healing of toxicity-related problems, such as impotency. [NL 6-5]

#### See Also

[Fen LB: Dr. Christopher's Lower Bowel \(Colon\) Formula](#)

[Dr. John R. Christophers "Mucusless Diet"](#)

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## Incontinence

### Definition

Inability to control urination or defecation, common in the aged.

### Herbal Aids

[Cranesbill](#): Drink the decoction in combination with golden seal (*Hydrastis canadensis*). [SNH p.152]

[Incontinence \(enuresis\)](#): See formula using sumac berries, beth root, yarrow, agrimony and white pond lily. [SNH p.158]

[Bistort](#): Combine bistort with other diuretic agents. [SNH p.162]

[DRI](#): Dr. Christopher's Formula for Bedwetting: For more severe cases of incontinence, enuresis (bedwetting, etc.), a formula we have used a long time is as follows: parsley root, juniper berries, marshmallow root, white pond lily, gravel root, uva ursi, lobelia, ginger root and black cohosh root. This formula is a specific for helping the body to control or overcome bedwetting and to strengthen the entire urethral canal, kidneys, bladder, etc. Recommended dosage two #0 capsules three times a day with a cup of parsley tea. [EWH p.196]

[Mullein](#): One-half teaspoon in one-fourth cup water drunk before retiring will help increase the tone of the triangular base of the bladder (the trigone) and aid in preventing bedwetting, or incontinence. [UW-Mullein]

[Oak Bark](#): take two to three cupfuls a day -  
5 fresh or dried oak leaves  
a small mixed handful of balm, nettle and eucalyptus  
1 and 3/4 pint of water. [NL 2-10]

### See Also

[DRI](#): Dr. Christopher's Formula for Bedwetting

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## Infertility

### Definition

Not being able to produce offspring.

### Herbal Aids

The Following Comes from Herbal Home Health Care pages 1-8.

#### CHAPTER ONE-HEALTH FOR PROSPECTIVE PARENTS

If one has been living on the mucusless diet and is now expecting a new healthy child, remember, "faith without works" is not the proper way to go. To carry on the good works of proper diet and preparation for the new mother-to-be, one should include additional aids to purify her body, in order to pass on good health to the expected child.

Besides keeping away from mucus-forming and toxic "food stuffs," she should also be using "special" foods and wholistic procedures to assist the new one coming, and to also give her an easier time of pregnancy and delivery.

One of the herbal foods is red raspberry leaf tea. This is made by using a heaping teaspoons of red raspberry leaves to each cup of hot steam-distilled water, or one ounce of the herbs (two heaping tablespoons, approximately) to each pint of distilled water. Never let the tea boil, but pour the boiling water over the herbs and then steep fifteen or twenty minutes in a warm place, strain and drink. It is best to drink three or more cups a day of this tea during the entire pregnancy. It is a pleasant-tasting tea and is also an anti-nausea....

Red raspberry is a great agent for cleansing a canker condition of the mucous membranes in the alimentary tract, leaving the tissue toned. In pregnancy the infusion, when taken regularly, will quiet premature pains, and will produce a safe, speedy and easy delivery. Raspberry leaves stimulate, tone and regulate (both the leaves and fruit are high in citrate of iron which is the active alterative, blood-making, astringent and contractive agent for the reproductive area) before and during childbearing, assisting contractions and checking hemorrhage during labor, relieving after-pains, then strengthening, cleansing, and enriching the milk of the mother in the post-delivery period. The tea is a valuable and effective agent for female menstrual problems, decreasing the menstrual flow without stopping it abruptly. Raspberry leaves are soothing and toning to the stomach and bowels, with healing action to sore mouths, sore throats, nausea, aphtha, stomatitis, diabetes, diarrhea and dysentery. They are especially valuable in stomach and bowel complaints of children.

Medicinal uses: Constipation, nausea, diarrhea, dysentery, diabetes, pregnancy, uterine hemorrhage, parturition, uterine cramps, labor pains, cholera infantum, leucorrhea, prolapsus uteri, prolapsus ani, hemorrhoids, dyspepsia, vomiting, colds, fevers, intestinal flu, bowel complaint, thrush, relaxed sore throat, ophthalmia, sore mouth, sore throat, spongy gums, ulcers, wounds, gonorrhea.

Preparation: Decoction, fluid extract, infusion, powder, tincture.

There are pages more in this volume on formulas and many other data, but what we have shown here is enough to show you a great pre-remedy as well as a body builder for the "one to be." Other herbal books such as Kloss' Back to Eden and Meyer's The Herbalist etc. sing red raspberry leaf teas' praises to the sky!

Before and during the pregnancy it is extremely important to see that the reproductive organs are functioning properly, and as well as being healthy and producing the correct amounts of hormones and estrogens.

[Hiccoughs](#)[Hypoglycemia](#)[Hysteria](#)[Impotency](#)[Incontinence](#)[Indigestion](#)[Infertility](#)[Inflammation](#)[Influenza \(Flu\)](#)[Insect Sting](#)[Insomnia](#)[Itch](#)

If the female organs are in a questionable condition, it is well before and during pregnancy (also in the post-delivery period) to use our female corrective formula [\[Nu Fem\]](#) (an herbal food to help strengthen and rebuild the entire reproductive area) and the estrogen hormone combination [\[Changease\]](#) (herbal aid) to assist in supplying needed hormones and estrogens in the correct amount. The human body is computerized to a point that it will take from an herbal formula such as this one the different types of estrogens and hormones it needs, and easily discard the ones not used. These herbs can be not only accepted into the body, but assimilated when needed and eliminated when not required. Many of the inorganic drugs can be accepted into the body and only a small amount assimilated. The rest of the prescription, being inorganic and of a low vibration, cannot be eliminated with ease and lies in weakened areas, accumulative, to cause side-effects and after-effects as time progresses.

Herbal Aid for Female Reproductive Organs. [\[Nu Fem\]](#) This is an amazing combination of herbs to aid in rebuilding a malfunctioning reproductive system (uterus, ovaries, fallopian tubes, etc.). Over the years herbalists and patients have seen painful menstruations, heavy flowing, cramps, irregularity, etc., that have been helped and the patient now has a painless menstrual period, good menstrual timing, and a new outlook on life by using these aids to readjust the malfunctioning areas. The female corrective formula [\[Nu Fem\]](#) consists of three parts of golden seal root and one part of each of the following: blessed thistle, cayenne, cramp bark, false unicorn root, ginger, red raspberry leaves, squaw vine, and uva ursi.

Recommended dosage is one cup or 2 capsules or tablets morning and evening or three times a day if desired, six days a week for as long as required to get results desired. We have seen many severe cases who have had many years of suffering cleared up in 90 to 120 days. Some get relief sooner, some take longer--no two cases are alike. This is a food to rebuild the malfunctioning organs.

Herbal Aids to Equalize Hormones and Estrogen: [\[Changease\]](#) Here are herbs that are an aid to assist the function of developing the hormone and estrogen balance in both female and male. This combination consists of the following herbs: black cohosh, sarsaparilla, ginseng, blessed thistle herb, licorice root, false unicorn root and squaw vine. Adult suggested amount is one to three number 0 capsules morning and evening, as desired. As an aid to youth going into puberty, for expecting mothers, as well as at menopause times.

These two combinations, the female corrective [\[Nu Fem\]](#) and the hormone-estrogen combinations [\[Changease\]](#) can be used during the entire time of pregnancy (and also before and following), as it is an herbal food like any other food and "is there to be used, if needed," but can do no harm in any way.

If there is yeast infection and or Herpes Simplex before or during pregnancy, add also, the vaginal-rectal bolus combination [\[V.B.\]](#) and the slant board routine [\[Yellow Dock Combination\]](#) included herein. These are very beneficial and yet are harmless to the mother and child-to-be.

Slant Board Combination. [\[Yellow Dock Combination\]](#) As an aid in prolapsed uterus, bowel, or other organs, to assist in giving relief, make concentrated tea (simmer down to half its amount) of six parts oak bark, three parts mullein herb, four parts yellow dock root, three parts walnut bark or leaves, six parts comfrey root, one part lobelia, three parts marshmallow root. Inject with a syringe (while head down on slant board) into vagina, 1/4 to 1/2 cup or more; or rectum, one cup or more; for prolapsus or hemorrhoid problems and leave in as long as is possible before voiding. Dose suggested is one-fourth to one cup, one or more times in a day. When the tea is injected into the abdominal area and while on the slant board, knead and massage the pelvic and abdominal area to exercise the muscles, so the herbal tea (food) will be assimilated into the organs.

#### THE FATHER-TO-BE

We are also giving here an herbal formula for the father-to-be. If his reproductive organs are in a good clean healthy condition the seed for conception will be an improvement over seed of questionable quality. The slant board routine [\[Yellow Dock Combination\]](#) following the rectal bolus [\[V.B.\]](#) at night will also, along with the prostate combination [\[Prospallate\]](#), proper mucusless diet and reproductive organ rebuilding will be an asset to the future family and another aid in preventing childhood diseases.

An Aid for the Prostate Area. [\[Prospallate\]](#) In case of malfunction we suggest this combination to assist the male; one part of each of cayenne, ginger, golden seal root, gravel root or queen of the meadow root, juniper berries, marshmallow root, parsley root or herb, uva ursi leaves. This will

dissolve the stones that are in the kidneys, as well as clean out other sedimentation and infection in the prostate. Mix the powders and place in No. 0 capsules and take two or more morning and night, with parsley tea when possible. [HHH p.1-8]

The Following Comes from Every Woman's Herbal, chapter entitled "Before Childbearing" pages 13-25. Although the physical condition of both prospective parents affects the condition of a new child, the mother's health is most critical. Before conception, she and her husband should work together to purify and build their bodies in anticipation of pregnancy and childbirth.

So many factors influence the formation of a new child! It may take some time to build up the health of parents-to-be if they have been living on mucus-forming foods long before they marry.

If a young woman has menstrual problems, she can suspect that her female organs might not be in good condition. Although it should be needless to say, we should avoid drugs in managing our menstrual cramps. In order to treat the symptoms, some people favor red raspberry tea, peppermint tea, camomile tea, or catnip tea. You can take a capsule of cayenne with any of these to help warm the internal organs. If the cramps are really severe, you can use cayenne ointment externally on the abdomen to act as a counter-irritant, but be sure to cover the application with gauze, as it can stain your underthings. Some young women have experimented with relaxation breathing, such as is taught in Lamaze childbirth classes. This allows the body to relax and deal with the pain, rather than fighting against the pain. Often tension really increases menstrual discomfort. Some women attribute cold in the abdominal region to the onset of cramps. Applying moist heat, such as a hot, moist towel covered with a piece of plastic, has helped some. If you wish to make an herbal fomentation of some of the pain-relieving teas mentioned above, it might even work faster and better.

One young woman wrote, "My sister and I suffered from menstrual cramps from the age of 13 on. We both started college at age 18. The first months after we started school, we noticed that neither of us experienced cramps anymore. The only thing we could attribute it to was the fact that we walked approximately 12 blocks to and from college classes five days a week. We are confident that the exercise did the trick. Up to that time, we just suffered it out." (The People's Doctor, Vol. 6, No. 7, page 3.)

As for the drugs you should avoid, knowing their effects may likely deter you from considering them as menstrual cramps panaceas. Aspirin, which can cause digestive-tract problems and deposit coal-tar traces throughout the system, actually doesn't work very well in relieving cramps. Tylenol, which has been the target for poisonings through tampering with the caps of bottles, offers its own dangers. It is evidently easy to overdose, which causes liver damage, sometimes resulting in death. Other effects are related to the liver, including jaundice and bleeding. Because the liver is the body's most important detoxifier, even small amounts of Tylenol may adversely affect the body's ability to handle toxins; these building up in the system may actually increase the pain in menstrual cramping! Talwin, a prescribed drug for the condition, causes nausea, dizziness and weakness and incapacitation. Birth control pills, which are sometimes prescribed for irregular and difficult menstruation, can cause abnormal bleeding and headaches, as well as sometimes endangering future fertility. Anaprox, which is a specifically-prescribed drug for menstrual pain, can cause headache, drowsiness, dizziness, lightheadedness, inability to concentrate, and depression. It can also cause skin reactions such as rash, sweating, easy bruising, and bleeding (Dr. Robert Mendelsohn, The People's Doctor, Vol. 6, No. 8).

In addition to avoiding drugs completely, one should be careful to avoid surgery for any kind of menstrual problems. Even if one's periods are irregular or if they stop completely, sometimes time and circumstances can alleviate the problem. If we are to follow the teachings of natural healers, surgery should be avoided except in the case of extreme, life-threatening emergencies for, as [Dr. John R. Christophers "Incurables Program"](#) has shown time and time again, even serious disorders can be healed naturally. Dr. Mendelsohn, cited above, suggested that sometimes sexual activity in marriage can produce the necessary hormones to activate a regular menstrual cycle. He also suggests that the clinical definition of menstrual normality should not frighten us, as some cycles are longer and some shorter than 28 days. In particular, we should avoid steroid drugs such as Prednisone, which really can cause problems with menstruation.

If a woman suspects that she has less than ideal function in her reproductive system, she can take red raspberry tea daily. She can also take Dr. Christopher's female corrective formula [[Nu Fem](#)] which rebuilds the entire reproductive area, and the estrogen-hormone combination [[Changease](#)] which will supply these factors in the correct amounts. They are present in a natural form, which

allows the body to assimilate them as well as merely accept them. The female corrective consists of three parts golden seal root and one part each of the following herbs: blessed thistle, cayenne, cramp bark, false unicorn root, ginger, red raspberry leaves, squaw vine, and uva ursi.

Over the years, herbalists have helped women overcome painful menstruation, heavy flow, irregularity, etc. One woman in American Fork, Utah, was having difficult periods. These had started in puberty, and she had spent the whole of her adult life traveling from coast to coast, averaging a cost of over \$1,000 a year for ten years, paying medical doctors to tell her what was wrong. She suffered vicious menstrual cramps and extremely long periods. No one was able to help; she was very discouraged; but one of her neighbors said, "Why don't you go to the next town, to Orem, where a man called Dr. Christopher lives? He could give you some help."

When she arrived, Dr. Christopher read her eyes, noting that she did have problems with the reproductive organs. He told her to start on the female corrective formula [[Nu Fem](#)] and the hormone and estrogen formula [[Changease](#)] (which consists of black cohosh, sarsaparilla, ginseng, blessed thistle, licorice root, false unicorn root, and squaw vine). He promised her that if she would follow through, within 90 to 120 days she would get results. Within 120 days, she came back, saying that she was on a 28 day cycle, with no menstrual pains. She was delighted! Where she had spent over \$10,000 traveling from doctor to doctor, it cost her approximately \$10 for the herbs to cure her.

If you suffer from tumors or cysts in the reproductive organs, the vaginal bolus [[V.B.](#)] formula has been reported to work wonders. Mix equal parts of squaw vine, slippery elm, yellow dock root, comfrey root, marshmallow root, chickweed herb, golden seal root, and mullein leaves. These should be powdered. Melt some coconut butter (solid at room temperature) and mix a small quantity of this powder in until it is of pie-dough consistency. Roll this between your hands until it is about the size of the middle finger and about an inch long. Insert several of these into the vagina, as you would use a suppository. You will need to wear a sanitary napkin. Leave in for two days; the coconut butter melts at body temperature, leaving only the herbs. On the night of the second day, douche with yellow dock combination herb tea cooled to tepid, and insert another bolus; after two more days douche again.

On the seventh day, you will rest. Repeat this pattern for six weeks to six months. This will bring out cysts, tumors, polyps, and acids through the vagina, through the rectum and the urethral tract.

A young Englishwoman named Claire suffered from multiple sclerosis so severely that she was confined to a wheelchair. She began to use the mucusless diet, and was miraculously healed and able to walk and work vigorously. Five women, each suffering from cervical cancer, diagnosed by doctors, came to Claire asking for help. Using nutrition and the V.B. therapy, four of the cases were completely cleared and one was in remission.

Sometimes it takes time and patience for these herbal aids to truly work. For example, a lady who had come to Dr. Christopher began the full routine as described above. A number of months later she began to think, "Look, I have been on that program for months now; I have taken the herbs orally; I've used the vaginal bolus [V.B.], including the yellow dock combination, and I am getting sick of this!" She felt somewhat better but didn't notice much change, so she was going to quit that day. That very morning she made the decision, as she was at home, sitting on the toilet. When she got up, she happened to turn around and glance into the bowl, and there was something about the size of a half dollar, with legs on it, swimming around in the water. This something had dropped out of her! She screamed, and her husband came in. They put it in a bottle and took it right over to the family doctor. He examined it under the microscope, and said he had never seen one of these whole like this, because they have to cut them out of a person. This was a spider cancer. They never give up and leave by themselves; usually they must be cut out. The doctor was amazed that it had come out of her. It had done so because her body was now so healthy that the spider cancer didn't have any waste materials to work on. When she saw that cancer, she vowed to continue the program, even if it took six months or years. Dr. Christopher reminded us that some people heal quickly, but sometimes it takes a long time. If we know we are on the right track, we should just continue.

If a couple wishes to delay conception for a time, perhaps in order to improve their health, they should be extremely cautious about what method of birth control they choose. Despite medical assurances that every method is safe, current research proves otherwise. Especially after taking birth control pills, some women suffer bad side effects, including infertility. According to Dr. Mendelsohn, this should not surprise anyone, because most of these pills suppress pituitary hormones because of the estrogenic and progestational hormonal activity of the ingredients in the

Pill. The artificial hormones suppress the natural hormones in the body, leading to inhibition of ovulation as well as other effects. In addition to infertility, side effects may include abnormal bleeding and clotting, including cerebral hemorrhage and cerebral thrombosis. (The People's Doctor, Vol. 4, No. 1, page 5.)

According to information supplied by Planned Parenthood, each year 9,400 women are hospitalized because of complications from taking the Pill. Heart attack and stroke are the major culprits, causing about 500 deaths annually. About 11,000 women annually suffer from thrombosis (blood clots in the superficial veins). Liver tumors account for 300 annual hospitalizations, with a ten percent fatality rate. And 860 women are hospitalized annually for gall bladder problems caused by using the pill. Other complications which do not require hospitalization include nausea, breast enlargement, weight gain, dizziness, and liver spots on the skin. This same publication said that women who suffer from the following ailments must not take the Pill--although the purpose of the booklet is to promote birth control use: phlebitis, stroke, coronary artery disease, benign liver tumor, and cancer of the breast or reproductive area. Women are also advised against taking the pill if they have high blood pressure, acute or chronic liver disease (and if the pill is so hard on the liver, it likely badly affects liver function to begin with), gall bladder disease, and those who are wearing long-leg casts or who have had a major injury to their feet or legs. Women who have diabetes or pre-diabetes (hypoglycemia?) and women expecting to have surgery should not take the Pill. ("Making Choices," Alan Guttmacher Institute, Planned Parenthood, 1983.) Considering all these problems and incipient health dangers, we would certainly advise no one to take the pill.

In addition, the insertion of an IUD may cause problems with conception. Dangers of using an IUD include abnormal bleeding, disturbances in menstrual cycles, fatal and non-fatal infected, spontaneous abortions if a woman becomes pregnant while wearing one, and perforation through the uterus and migration of the device into the abdominal cavity, which will require surgery. (The People's Doctor, Vol. 3, No. 12, page 3.) If a woman does become pregnant while wearing an IUD, she might bear children with birth defects. The British Medical Journal reported two women using copper-containing IUDs who gave birth to children with malformation of the extremities, including missing fingers and toes, fused fingers, and reduced arm length. The article concluded that, while a relationship between birth defects and IUDs has not been conclusively proven, "the possibility of a relationship exists because of the proved association of IUDs with ectopic pregnancy, pelvic and fetal infection, miscarriage, premature labor, and fetal death" (quoted in The People's Doctor, op. cit.).

Although from Dr. Christopher's point of view, abortion certainly represents the most cruel kind of action, still many people are convinced by the medical world's claim that abortion is a good form of birth control. Doctors say that while in former times abortions were performed in unhygienic conditions, that today hospital abortions are perfectly safe. However, quite apart from the moral issue, which is really the paramount consideration anyway, consider this data from the Journal of the American Medical Association: "We compared prior pregnancy histories of two groups of multigravidas (women with more than one pregnancy)--240 women having a pregnancy loss up to 28 weeks' gestation and 1,072 women having a term delivery. Women who had two or more prior induced abortions had a two-fold to threefold increase in risk of first-trimester spontaneous abortion...The increased risk was present for women who had legal induced abortions since 1973. It was not explained by smoking status, history of prior spontaneous loss, prior abortion method, or degree of cervical dilation. No increase in risk of pregnancy loss was detected among women with a single prior induced abortion. We conclude that multiple induced abortions do increase the risk of subsequent pregnancy losses up to 28 weeks' gestation" (JAMA, June 27, 1980). In addition, research indicates that a previous abortion markedly increases the chance of temporary and sometimes permanent sterility (The People's Doctor, op.cit.). If you wish to bear children, do not submit to surgical murder via abortion. Indeed, it is better to avoid surgical intervention at all costs!

Suppose that a couple wishes to delay pregnancy, for health or other reasons. Delaying the birth of babies has become somewhat of a fad recently, and we do applaud any woman who conceives later in life and anticipates her baby with delight. Dr. Mendelsohn says that being fitted with a diaphragm is a safe method of contraception. Although it can be inconvenient, some couples use condoms. But by far the most accurate and holistic approach to birth control was developed by John and Evelyn Billings during the late 1950's. This Australian couple--both doctors--were searching for a more effective alternative to the rhythm method, which doesn't always work. Reading anthropological literature of African and Indian tribes, they found a passing reference to

the idea, "wet for baby, dry for no baby."

The Billings's asked the women in their charge to observe their vaginal discharges daily and to write down their observations. Virtually all the women noticed patterns in the changes of mucus production, and hormone tests confirmed that these changes were related to hormone changes.

Calling their discovery the Ovulation Method, the Billings's saw it taught to women in many Third World countries, in this way, "When the earth is dry and you plant a seed, it won't grow. When the rains come, the earth is wet and a planted seed will grow. For a few days after the rains, the ground is still wet, and a seed can still grow. When the ground is dry again, the seed will not grow when planted." Proven 98.5% effective, this method of birth control can also be an accurate way to achieve conception, so it is a very positive thing.

Basically, it works thus: The body's hormones develop several eggs, fully maturing only one. When this is released into the uterus, it lives for 12 to 24 hours, and if fertility were contingent only upon the presence of the egg, a woman could only conceive during that period of time. However, accompanying the production of the egg is the presence of fertile mucus. You might experience the cycle something like this. After your period, you might have days where your vagina seems quite dry. Then as your estrogen rises, you'll get wetter as you approach ovulation. When you ovulate, the wet or sticky secretion changes to a slippery one--that is fertile mucus. In the presence of this mucus sperm can survive; in infertile mucus, it dies, as the infertile mucus is extremely hostile to sperm. If a couple abstains from intercourse when the wetness first begins to appear, continuing to wait until three days after the slippery mucus appears, they are sure to avoid unwanted conception; or if they have intercourse during this fertile time, conception is more likely to occur. Why should the waiting period precede the actual ovulation? Because women have cervical crypts inside the vaginal passage, which can store sperm in a healthy condition until the body ovulates--as long as there is moisture. You may have heard of women who couldn't imagine that they conceived, because intercourse occurred several days before they reached the middle of their cycle--using the calculations of the Rhythm Method. However, the sperm was stored in the cervical crypts and traveled up the fertile mucus at the proper time.

This very brief description of the Ovulation Method will not suffice if you wish to use it yourself. *Mothering Magazine*, No. 37 (Fall 1985), supplies a good article on the subject; other good books include Terrie Guay's *Avoid or Achieve Pregnancy Naturally* (Emergence Publications, 1978), and *The Ovulation Charting Method* (Small World Publications, POB 305, Corvallis, OR 97339).

Dr. Christopher emphasized that many reproduction problems stem from the unkind and uncooperative behavior of husbands. He spoke openly to husbands who misused the privileges of marriage. For example, a certain woman came to Dr. Christopher in tears. Although the family had a number of children, she said life wasn't worth living any more because her husband forced her to have intercourse with him every night, whether she was sick, in pain, or pregnant. He said that if she wouldn't have intercourse with him, he would go out and get it someplace else, because it would damage his manhood if he didn't have it every night. She asked Dr. Christopher if this were true, that it would force a man into having other women. Of course, the woman was happy to learn that she did not have to suffer this kind of treatment; she said that she had gone through years of misery. After being forced for so long, she wanted some rest.

Dr. Christopher felt very strongly about this because he observed similar things in his own family. His own sister, now deceased, confided that her husband in Colorado demanded relationships every night; if she didn't give it to him, he would go up into town to a professional prostitute for relief. She said that she had suffered many nights of real sickness, yet allowed him to do this rather than have him leave home and go out with other women. The lady who adopted Dr. Christopher, who was the only mother he knew, also went through a similar trauma. As a teenager, he came downstairs to find his mother in tears. His adopted father had left, and the young Raymond asked what was wrong. In all the years they were married, she said, she had to satisfy her husband every night, "regardless of how sick I am." She suffered from arthritis and diabetes, sick through much of her life. Although some people might consider this an oddity, Dr. Christopher saw enough of it during his practice that he felt he must speak out on it. When such a situation occurs, he said, it is nothing but rape. Of course, sexual intercourse should be an exchange, a cooperation, an agreement, tender concern for the other person. Anything else Dr. Christopher considered rape, a disgrace.

In an age where millions of abortions are performed annually in the United States alone, it is an ironic tragedy that many childless couples long to conceive but cannot. Gynecologists sometimes go to great lengths to secure pregnancies for these couples, although the methods are not

completely safe. As an example, Clomid, which is a fertility drug, causes flushes in ten percent of the women who use it, and ovarian enlargement in fourteen percent. Massive cystic enlargement of the ovaries may develop, a painful condition. The ovary continues to enlarge after the drug is discontinued, reaching its maximum size seven days after therapy stops! Other side effects include blurred vision, double vision, spots before the eyes, after-images, sensitivity to light, floaters, waves, cataracts, detachment of the posterior vitreous, spasm of the blood vessels, and thrombosis of the retinal arteries. A woman may also experience abdominal distention, bloating, abdominal or pelvic pain and soreness, nausea and vomiting, increased appetite, constipation, diarrhea, breast discomfort, abnormal menstrual bleeding, dryness of the vagina, headache, dizziness, lightheadedness, vertigo, nervous tension, insomnia, fatigue, depression, increased urinary frequency and/or volume, skin rashes, hair loss, hair dryness, weight gain or loss, jaundice, and fluid in the abdomen.

All of these possibilities would be bad enough, but the possible effects on an infant are worse. If a woman does not know that she is already pregnant and begins taking this drug, Clomid has been linked to congenital heart disease, Down's syndrome, clubfoot, congenital intestinal conditions, abnormal position of the urethral opening, small head, harelip, cleft palate, congenital hip displacement, birthmarks, undescended testes, extra fingers, conjoined twins, inguinal hernia, umbilical hernia, fused fingers, funnel chest, muscle disorders, dermoid cysts, spina bifida, and other defects. Most mothers who take the drug will have multiple births, usually but not always, twins (The People's Doctor, Vol. 6, No. 11, p.6).

The other fertility drugs, such as Provera, Delalutin, or any other chemical substance designed to affect ovulation or fertility, present serious risks commensurate with these. A woman wishing to achieve a natural pregnancy cannot safely consider them.

One young mother, having difficulty with conceiving although she had previously borne two healthy children, went to a fertility specialist for help. The battery of tests--on both father and mother--revealed nothing really wrong, so the doctor gave her some medication without letting the woman know what she was taking. The fertility drugs produced a multiple pregnancy in the woman, and she bore triplets. Although the family was delighted to receive new little ones into the family, the multiple birth has been a tremendous strain on the family. Perhaps with more natural methods the family could have received their babies one at a time and with less stress and strain.

Dr. Mendelsohn suggests some basic approaches to conception, emphasizing the need to stay away from fertility drugs. He advises a nutritious diet, free of junk foods and additives, a sensible regular exercise program, an adequate amount of sleep and adherence to the marital requirements in the Old Testament. This law prohibits sexual intercourse during the menstrual period and for about a week afterwards. Not only does this time intercourse at appropriate fertility, but it also builds up the man's sperm so that there is better chance of fertilization. I feel that it also increases the health of the prospective mother, giving her female organs a chance to regulate themselves during her cycle.

Dr. Christopher had many successes helping couples conceive. One young married man came to see him about his wife, because he felt she was going to lose her mind. She wanted to have a baby so badly that she would hug her pillow at night. They had been married for some years without any success at conception. Dr. Christopher advised them to do the following: they should both begin to use the mucusless diet. In addition, they were to take two tablespoons of wheat-germ oil three times a day (this contains natural vitamin E, among other constituents, which helps the reproductive system). They were to take two capsules three times daily of false unicorn and lobelia combination. If they were faithful with this program, the Doctor promised that they would conceive.

And they did! They brought the little baby in to see Dr. Christopher, and the new mother was absolutely glowing with health and joy at the baby in her arms. This couple had other children as well after following the simple herbal program.

Some couples have conceived when they have included more zinc in their diets, especially that of the father. When the problem is too-thick sperm (common in people on a mucus-causing diet), researchers have found that mega-doses of Vitamin C (1000 mg. or more at each meal) has assisted in conception.

When couples marry and delay their children, they sometimes are tempted to continue on without having them. I can assure you that life without babies and children is much easier than with children! Nevertheless, I couldn't do without any of my six children, and I don't begrudge them

the time changing diapers, reading books, and tending them in the middle of the night.

Dr. Christopher taught much the same. He said that there are just so many babies that are supposed to be here on earth, and if we do our part, we will be able to take care of them. People who rear large families, and devote themselves to the families during their growing years, can do wonderful things. Dr. Christopher knew a family in Salt Lake City who had sixteen children, adopting the seventeenth. The man was only a clerk in an office, and you can imagine that they had a hard time making ends meet. Yet four of the sons became attorneys, a daughter became a professional dancer who demonstrates throughout the United States, and a son became a well-respected organist who performs throughout the country, and others of the children have accomplished great things. I know of a family with seventeen children, natural children in an intact family. Although the mother and father have to pour themselves out to nurture and teach that many, the older children participate in tending the younger ones, the home is well-cared-for and clean, and the children are well-disciplined. Of any babysitters I have ever had in my home, the oldest girls in that family have to be the best! They are intelligent and thorough and wonderful to be around.

In this day and age, most people are tuned into their own personal needs and consider child rearing a secondary sort of pursuit. What could be more far-reaching, however, than raising a whole, happy child? This extends to the third and fourth generation, to many other people than the child. And as for personal achievement, raising children has matured me, given me insights and capabilities that I never possessed before--and wouldn't have achieved without my little ones. I expect that when they are raised, I will be a much richer teacher and writer than I could have otherwise been, and having them has not stopped me from pursuing my career, albeit in a more limited way.

Dr. Christopher said that the children will be born, sometimes against our will! He remembered visiting with a family on business matters. The youngest child was one of the most positive and aggressive children he had ever seen. The mother would tell her to do something and the child said, no--she wanted to do it her way, even though she was still young. She had her own mind, and did what she wanted to do when she wanted to do it; nobody would push her around! Her father just laughed and said that the rest of the children were obedient and docile, except for this aggressive little child. He said that they had decided not to have any more children and his wife had had an insert put in. The doctor assured them they wouldn't have any more. But months later, the wife found out she was pregnant. This child had decided that it would be their child regardless of the birth control method; the baby fought its way through and continued to be a fighter! The child was supposed to be there and made it safely. Dr. Christopher said that it sometimes pays just to let nature take its course.

Other herbs which have been used successfully to promote conception are red clover blossoms (these are considered by some to be as valuable as the false unicorn root), peppermint, stinging nettle, dong quai root, and of course red raspberry leaves.

If you are having difficulty ascertaining the timing of ovulation, or if your cycles are irregular, check to see if there is unnatural light interfering with your cycle. Sometimes when a street light shines in the window, or other lights are on all night, a woman's cycle can be really disrupted. Block out all unnatural light. Some practitioners have suggested that if women are quite irregular, they can keep a light on--say in the closet, or a mild night light--midway between periods, and that this will cause ovulation. A more natural, and more beautiful, alternative, is to sleep without the window shades, providing you live away from bright street lights. The light from the moon is thought to be healing and blessing; it can bring peace and regularity to your feminine cycle. Juliette de Bairacli Levy even suggests sleeping with no window screen--using an herbal insect repellent--to obtain maximum health. We have tried her repellent and it works. Here's how I made it: Combine equal parts of rue, wormwood, basil and rosemary. Grind in a mortar and pestle. Cover with about eight to ten times the herbs' volume of pure olive oil. You may add a couple of tablespoons of apple cider vinegar if you wish. Allow to stand in the sun--or over a radiator or other constant source of warmth--for a week. Strain out the herbs well, and repeat. Repeat a third time, this time letting the herbs stay in the oil as long as possible, perhaps up to three weeks. Although the time involved here is long, the actual work is minimal. Strain well and bottle. Although we have not tested this in terribly infested areas, such as jungle or summertime Alaska, it works for us during our summer camps. Levy said that she and her children slept outside in the Mexican tropical jungles, using this preparation, and were never bitten! [EWH p.13-25]

**See Also**

[Cayenne](#): Dr. Christophers many Cayenne Combinations

[Changease](#): Dr. Christopher's Herbal Hormone Formula

[Nu Fem](#): Dr. Christopher's Herbal Aid for Female Reproductive Organs

[Prospallate](#): Dr. Christopher's Prostate Formula

[V.B.](#): Dr. Christopher's Vaginal and Rectal Herbal Bolus

[Yellow Dock Combination](#): Dr. Christopher's Yellow Dock Combination

[Dr. John R. Christophers "Mucusless Diet"](#)

## Ailments

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[Fever](#)

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## Inflammation

### Definition

A local response of the tissues to irritation or injury.

### Symptoms

A local response to cellular injury or an affliction characterized by capillary constriction, then dilation, white corpuscle or leukocytic infiltration, redness, local heat and swelling from congestion, the exudation of noxious wastes in fluids, and the deposition of fibrin to replace the damaged tissue. Serum or white corpuscles are pushed and cause expansion or an elevation of the temperature which carries through the walls of the capillaries into the surrounding tissues or interstices. [SNH p.33]

### Cause

Inflammation is often caused by an abrasion of the clothing, bites of poisonous insects, bumping, shingles, welts, by an acid condition of the body affecting the nervous system, or from an internal acid condition of the urine or the orifice of the genital area.

### Herbal Aids

General Instructions: This condition must be aided instead of inhibited. If the process is stopped it can be compared to putting the cork on the poison bottle. When inflammation is accompanied by blood poisoning use plantain to purge the poisons from the body. If inflammation is caused by a rheumatoid or arthritic condition, either burdock leaves or mullein in combination with lobelia will facilitate cleansing. [SNH p.33]

Lumbago - Inflammation of the Lumbar Muscles: Lumbago is one of the most painful conditions. The use of vapor baths and the [Cold Sheet Treatment](#) will bring relief. A massage with a tincture of cayenne and prickly ash liniment with antispasmodic tincture [[Antsp](#) tincture] will work very well. The eliminative functions should be corrected, especially the bowels which need to be cleaned during attacks. Garlic and lobelia enemas work well. [SNH p.35]

Burdock: Large sores, skin diseases, inflammation, swelling. Apply a hot fomentation of the tea to the affected part, cover with plastic or oil silk to prevent evaporation and bandage; leave on until almost dry, then cleanse the area and make another application; repeat until healed. [SNH p.65]

Chaparral: Old sores, inflammation. Apply a hot fomentation of the infusion. [SNH p.71]

Sciatica and Inward Inflammation: See formula using oil of sassafras, oil of rosemary, oil of oregano, cayenne, camphor and rubbing alcohol. [SNH p.81]

Yellow Dock: Apply a fomentation over the affected part that is wrung out from the strong decoction of hot tea. [SNH p.94]

Red Oak: Use the decoction as a wash, and bathe 3-4 times daily (dilute for open sores); also a fomentation may be wrapped around the affected part and covered well with flannel. [SNH p.139]

Witch Hazel: Apply as a poultice, fomentation, or wash. [SNH p.179]

[Hiccoughs](#)[Hypoglycemia](#)[Hysteria](#)[Impotency](#)[Incontinence](#)[Indigestion](#)[Infertility](#) **Inflammation**[Influenza \(Flu\)](#)[Insect Sting](#)[Insomnia](#)[Itch](#)

**Comfrey**: Inflammation, bruises, sprains, swellings, suppuration of boils. Apply a fomentation made from the comfrey root or leaves. [SNH p.310]

**Lobelia**: When there is acute swelling, such as with boils or inflammation, an external rub of the tincture or a poultice of the bruised herb mixed with flaxseed or bran, suitably moistened, will relieve the pain. [UW-Lobelia]

**Myrrh**: Applied to fresh wounds, the tincture of Myrrh excites healing action and lessens the liability to inflammation or suppuration. [UW-Myrrh]

**Marshmallow**: The herb has been in use long among the Arabs, the ancient Arab physicians using the leaves as a poultice to suppress inflammation, the modern using them the same, chewing the stems well and applying the pulp, well-mixed with saliva and still warm from the mouth, to inflamed parts of the skin and to sores and swellings (Lev:Common:94). [UW-Marshmallow]

**Burdock**: Burdock is well-known world wide as a blood purifying agent and if the leaves are pounded and put on the bruise, abrasion, sprain, etc., it will allay inflammation and ease the pain. [NL 3-1]

### Testimonials

1. **Mullein**: We can report near miraculous results with Mullein ointment in the wilderness. We camped in one of the most mosquito-infested areas in the world, Alaska. The children (and adults) were bitten a great deal. Although we have not yet found a really effective natural mosquito repellent (we didn't rub ourselves with a garlic clove as someone suggested, however; that might work), we found that a simple dab of Mullein ointment was enough to stop the itching and inflammation immediately. We felt very lucky to have the ointment along with us. [UW-Mullein]

2. **Plantain**: Dr. Shook also described a great healing experience with Plantain. A woman with only one arm came to him in great distress. She had been stung by a bee on the only hand she had left. Several years previously, she had been similarly stung by a bee. That time she had gone to a doctor, because the whole arm was swollen and she was in great pain and even danger of her life with the infection.

The doctor lanced and drained the pus from the infected hand, but still the arm continued to swell. Finally, the doctor amputated the arm. This lady was full of despair, thinking that now she would have to lose the other arm.

Dr. Shook went outside his door to where some Plantain was growing. He picked some of the leaves, telling the woman to wash them and crush them, making a poultice to apply to the arm where she had been stung. The next day the lady returned to thank Dr. Shook for his advice and to pay him. The hand was entirely well. No sign of poison or inflammation could be seen, where only a day before there was swelling, inflammation, and the risk of amputation. [UW-Plantain]

### See Also

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture

[BF & C](#): Dr. Christopher's Bone, Flesh and Cartilage Formula

[Cayenne](#): Dr. Christophers many Cayenne Combinations

## Ailments

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## Influenza (Flu)

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See [Flu](#)

[Hiccoughs](#)

[Hypoglycemia](#)

[Hysteria](#)

[Impotency](#)

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## Insect Sting

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See [Bites](#), [Insect Stings](#)

[Hiccoughs](#)

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## Ailments

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## Insomnia

### Definition

Chronic inability to sleep or to stay asleep throughout the night. When you are wakeful and sleepless.

### Herbal Aids

Scullcap: 1 teacupful of warm scullcap infusion nightly upon retiring. [SNH p.371]

Insomnia (sleeplessness, especially morphine addict): See formula using scullcap, lady's slipper, hops, catnip and black cohosh. [SNH p.374]

Insomnia (sleeplessness, caused by nervousness): See formula using valerian, vervain, scullcap and wood betony. [SNH p.379]

Restlessness, Insomnia, Hysteria, Neuralgia, etc.: See formula using valerian, scullcap and mistletoe. [SNH p.380]

Insomnia (nervous sleeplessness): See formula using Lady's slipper, pleurisy root, skunk cabbage and scullcap. [SNH p.385]

Hops: Insomnia, nervous irritation. Take 2 to 3 cupfuls of hot hops infusion or stuff a pillow with hops (sprinkled with alcohol if desired) to sleep on. [SNH p.396]

**Relax-Eze:** Dr. Christopher Nerve Herbal Food Combination Here is a formula we have used with great success for well over thirty years. It is used for helping to relieve nervous tension and insomnia; it is mildly stimulating and yet lessens the irritability and excitement of the nervous system and also lessens or reduces pain. This formula contains herbs that feed and help revitalize the motor nerve at the base of the skull (medulla area and upper cervicals), and also herbs that help rebuild or feed the spinal cord. This group of herbs will also help rebuild the frayed nerve sheath, the nerve itself, and its capillaries. The following herbs in this combination are food for your valuable--and in many cases, shattered-- nerves: black cohosh, capsicum, hops flowers, lady's slipper, lobelia, skullcap, valerian, wood betony and mistletoe. The suggested amount for an adult's use would be one to three cups of the tea, or two or three capsules or tablets three times in a day, taken with a cup of celery juice or steam-distilled water. [HHH p.187]

General Instructions: Some other techniques can help you get to sleep. Very effective is the combination of bath and massage, particularly with a soothing oil, such as chamomile. Herbal oils are easily made; check "Preparations," [EWH p.188]. Chamomile and linden tea both can help a person relax and sleep. For a really stubborn case, take a cup of valerian tea or a couple of capsules with warm water. A pleasant walk out of doors can help a person relax enough to sleep. Sometimes the person's blood sugar is a little low, and simply eating a piece of fresh fruit can put a person out. Warm tea with honey will do the same. [EWH p.151]

Not Hot Cocoa: Many of the people of Dutch extraction, that is, everyone from the Old Dutch Cleanser Girl to the Boy Who Put His Finger in the Dike, were prone to prepare themselves a nighttime cup of hot cocoa for the insomnia which prevailed in the land. Now...how can cocoa possibly cure insomnia when it contains 13.5 mg. of caffeine per cup? This practice was so extensive that it not only included family, but servants and visitors as well. This toxic dose of chocolate was topped with another toxin: cream or marshmallow. Anybody for a little chamomile? [NL 2-4]

[Fever](#)[Flatulence](#)[Flu](#)[Frog](#)[Gallstones](#)[Gangrene](#)[Gas](#)[Glands](#)[Goiter](#)[Gonorrhea](#)[Gums](#)[Halitosis](#)[Hay Fever](#)[Headache](#)[Hearing](#)[Heart](#)[Heartburn](#)[Hemorrhage](#)[Hemorrhoids](#)[Hernia](#)

[Hiccoughs](#)[Hypoglycemia](#)[Hysteria](#)[Impotency](#)[Incontinence](#)[Indigestion](#)[Infertility](#)[Inflammation](#)[Influenza \(Flu\)](#)[Insect Sting](#) [Insomnia](#)[Itch](#) Juices: Lettuce, celery, apple, onion. [NL 3-5] Squash Seeds: Boiling squash seeds for a half an hour and then drinking the water has the effect of calming the nerves and helping in cases of insomnia and is good also for any urinary inflammation. [NL 4-12] Vegetables for Insomnia: Cabbage, carrots, celery, collard greens, kale, lettuce, parsnips, potatoes, spinach, turnip greens, squash. [NL 4-12]

### Testimonials

1. Insomniac Cured after Years of Sleeplessness: Dr. Christopher told the story of a high school teacher who had a terrible case of insomnia. She could only sleep in twenty-minute stretches; thereafter, she would pace the floor throughout the night, keeping her family awake and becoming more and more tired herself. During the day she epitomized the "witch" school teacher. Eventually her screaming and irritability, her meanness and nagging, became so intolerable that her family wanted to have her committed to a mental institution. And she was so weary of it all that she would have liked to go herself.

The family called Dr. Christopher, however, who came over and prepared a cup of his nervine tea [[Relax-Eze](#)]. As it steeped, he chatted with the family, and then she drank the cup. Soon she yawned and said she might like to go lie down. Her husband commented that Dr. Christopher might just as well stay, because she would be up again in twenty-minutes, but Dr. Christopher took his leave.

The next morning, Dr. Christopher answered the telephone; a man's voice began berating him and calling him all sorts of vulgar names. "You ought to be jailed," the man shouted, "for giving my wife heavy drugs when you said they were herbs!"

Dr. Christopher explained he had only given the woman herbs, so mild that a newborn baby could safely use them. When the man calmed down, he explained that his wife had slept all night, and awakened calm and refreshed.

She continued taking this formula, and cleaned up her diet as well. Before long, she was as sweet and cooperative as she could be with her family and her classes, and everyone was grateful that she didn't have to be committed to a mental institution! [EWH p.151]

2. Nervous Debility and Insomnia: Lucas reports the case of a gentleman who was otherwise in good health but was continually suffering nervous debility and insomnia. Treatment by other doctors had not helped him at all. He was encouraged to try natural medicine and was given a combination of an ounce of Skullcap, an ounce of hops, and a half ounce of gentian root. He took this as an infusion and within a week he was sleeping well. At the end of two months he was fully recovered. Lucas mentions that Skullcap, catnip and peppermint work the same way for many people (Luc:Herbal:25). It is said to give natural sleep to morphine addicts, especially when combined with catnip, lime blossom and hops (Lev:Common:134). [UW-Scullcap]

3. Static Causes Insomnia: Dr. Christopher also said that our bodies collect excessive static vibration. Our bodies receive electricity through the top of the head where we used to have soft spots when we were babies. This electricity is essential to our bodies but it must be fresh and free flowing, coming through the top of the head, down the spine, through the body and is grounded out into the earth. When we do not let the electricity out and be grounded into the earth, it becomes static and toxic and builds up so much that new electricity can't come in. We can't sleep and we become hard to live with. Each day, therefore, we need to send some time out on the lawn or the ground to get rid of this static electricity in the body. There was an elderly man who was having a lot of trouble sleeping. His insomnia got so bad that he became very difficult to be around. His son knew this principle of walking on the earth to discharge unwanted energy and tried to convince his father to do so, but his father said that no one was going to get him to take off his shoes in public and walk on the lawn barefooted! However, one day, the son said, "Dad, I have something I must talk to you about". He sat the old man down, quickly took off his shoes and whisked him outside. They walked around the lawn a few times, talking and then the old man said that he was feeling tired. He went in the house and went to bed--and slept all night! We have

noticed that native peoples who walk without shoes or who wear leather soles that let the energy through are much less nervous than those of us who wear synthetic or rubber soles. We spend a good deal of the summer without shoes and although it may not look as proper or civilized as wearing the plastic sandals that are the style now, we feel much less nervous and very harmonious during this time. [UW-Valerian]

**See Also**

[Relax-Eze](#): Dr. Christopher Nerve Herbal Food Combination

## Ailments

[A - B](#)   [C - E](#)   [F - I](#)[J - P](#)   [Q - Z](#)[Abrasions](#)[Abscess](#)[Acidosis](#)[Acne](#)[Addison's Disease](#)[Adenoids - Polyps](#)[Adrenals](#)[Ague](#)[Alcoholism](#)[Allergies](#)[Alopecia](#)[Amenorrhea](#)[Anemia](#)[Anthrax](#)[Apoplexy](#)[Appendicitis](#)[Arthritis](#)[Asthma](#)[Athlete's Foot](#)[Bad Breath](#)

## Broken Bones

### Definition

Fracture, break or crack in the bone.

### Herbal Aids

Comfrey Tea and Organic Calcium: After the doctor has set the bone, drink three or more cups of comfrey tea each day--the more the better. With each cup of tea take the calcium combination. This is the formula: [This is [Calc Tea](#): Dr. Christopher's Calcium Formula]

6 parts horsetail grass

4 parts comfrey root

3 parts oat straw

1 part lobelia

For children old enough to take capsules, use two capsules or more, three times in a day. As suggested, take these capsules with the comfrey tea. Mix the powder with blackstrap molasses, if it is hard to swallow the capsules. [HHH p.47]

Steroids Can Exacerbate Broken Bones: More dangerous still are the steroid drugs, such as Vanceril and Prednisone. If taken by children, these drugs can adversely affect growth and sexual maturation. It encourages yeast infections both locally and systemically. Adrenal insufficiency has been traced to this drug, so severe that death could result. Broken bones become more common among recipients of this kind of drug. And when you are ready to get yourself off the drug, you can suffer all kinds of side effects (withdrawal symptoms), such as inability to maintain body warmth, extreme tiredness, faintness, exhaustion, heart palpitations, and so on. [EWH p.127]

Broken Bones After Being Set: After a doctor has set the bone, drink three or more cups of [BF & C](#) and/or comfrey tea or green drink per day. With each cup take two or more capsules of the Calc formula. [EWH p.165]

[BF & C](#): Dr. Christopher's Bone, Flesh and Cartilage Formula: Over the years of practice I have had a number of patients who have had broken bones from osteoporosis. One case was a woman in her middle eighties with a fractured hip. After three months in a cast it showed no sign of healing, any more than two pieces of stick growing together. This woman was frightened because she was told that if the hip bones did not knit after putting on another cast for three months, they would cut her leg open and use stainless steel rods, bolts and nuts to make it possible for her to at least get around on crutches.

This was in the early sixties and not much comfrey was available then. The lady's daughter was in one of my classes, and we asked the students to help out by donating as much comfrey as they could. We had enough donated from the class members that the patient had from a pint to a quart of comfrey green drink or comfrey tea each day, six days a week, week after week. At the end of this "three months," the cast was removed and the doctors were amazed, because during the first three months there was "no knitting" of the bone even evident, but with the comfrey being taken orally during the next three-month period the leg was healed. The daughter told us her mother was out square dancing within a couple of weeks after the cast was removed!

[Bed Wetting](#)[Bee Sting](#)[Bites, Insect Stings](#)[Black Eye](#)[Bladder Ailments](#)[Bleeding](#)[Blood Poisoning](#)[Blood Pressure](#)[Boils](#)[Breast](#)[Bright's Disease](#)[Broken Bones](#)[Bronchitis](#)[Bruises](#)[Burns & Sunburns](#)[Bursitis](#)

Since this case was so outstanding we have had a formula developed called "bone, flesh and cartilage." [\[BF & C\]](#) This formula has done miraculous things with broken backs, legs, hips, etc. This formula has been used to help with curvature of the spine, polio, multiple sclerosis, and muscular dystrophy, stroke and arthritis of the bone. This formula is used externally as well as orally and has brought tremendously fast results. [NL 1-11]

[Dr. Christopher's Comfrey Combination Fomentation: \[\\(BF & C\\)\]\(#\)](#) This is an aid for malfunction in bone, flesh, sinews, etc. Make a tea of the following herbs: oak bark, marshmallow root, mullein herb, wormwood, lobelia, skullcap, comfrey root, walnut bark (or leaves), gravel root. Soak the combined teas in distilled water (at the rate of one ounce of combined herbs to a pint of distilled water), then soaking four to six hours, simmer thirty minutes, strain and then simmer the liquid down to 1/2 its volume and add 1/4 vegetable glycerine (if desired). Example: One gallon of tea simmered (not boiled) down to two quarts and add one pint of glycerine.

Soak flannel, cotton, or any white material other than synthetics--never use synthetics. Wrap the fomentation (soaked cloth) around the malfunctioning area and cover with plastic to keep it from drying out. Leave on all night six nights a week, week after week, until relief appears.

Severe cases: Drink 1/4 Cup of finished concentrated tea with 3/4 cup of distilled water three times in a day. [HHH p.193]

[Calc Tea: Dr. Christopher's Calcium Formula:](#) A wonderful natural calcium capsule or tea made up of horsetail grass, oat straw, comfrey root and lobelia. As explained in the book "Biological Transmutations," the silica in horsetail grass converts to calcium, and the other herbs work in close conjunction with this master calcium herb. We need calcium for nerve sheath, vein and artery walls, bone, teeth, etc. This combination is all pure herbs. It is also used for cramps, "Charlie horses," and for all calcium needs in the body.

Children with crowded, crooked teeth who later must have the wisdom teeth pulled because of a too narrow jaw are lacking calcium in the body. The pregnant woman should increase her natural calcium intake now for two people, so as to build for the child a good wide jaw and tooth material. Sugars, pastries, soft and alcoholic beverages, breads, candies, etc., leach the calcium out of the body, causing varicose veins, cramps, Charlie horses, loss of teeth, nervous upsets, etc. [HHH p.185]

### Testimonials

**Heavy Milk Drinker Constantly Breaks Bones:** A young man came as a patient to us when our office in Salt Lake was on 1st South, from the American Telephone and Telegraph office down the street. He was not feeling well and had not been helped from other medical sources he had visited, so he finally came to us to find out if we could help him get back his health. He was only 18 years of age and had suffered 17 broken bones, one at a time in his lifetime, and at this early age had false teeth. This young man had grown up on a dairy farm in Smithfield, Utah (a dairy center), and as he said, he "practically swam in milk", for it was his main food during most of his life. And if the dairy association's advice that lots of milk will make good teeth and strong bones were literally true, with the amount of milk he had consumed, he should have been "king for the year," but here he was, a really sick young man. [SNH p.538]

### See Also

[BF & C:](#) Dr. Christopher's Bone, Flesh and Cartilage Formula

[Calc Tea:](#) Dr. Christopher's Calcium Formula

## Ailments

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[Amenorrhea](#)

[Anemia](#)

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[Appendicitis](#)

[Arthritis](#)

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[Athlete's Foot](#)

[Bad Breath](#)

## Bronchitis

### Definition

Bronchitis is the inflammation of the bronchial tubes. [HHH p.42]

### Symptoms

An acute or chronic inflammation of the mucous membrane of the bronchial tubes. [SNH p.6]

### Cause

This is a condition from improper diet and results in bowel problems. Relieving the effects of the condition will not heal it. Bronchitis usually develops from a cold which settles in the lungs and develops into a chronic condition if not healed, eventually going into consumption or tuberculosis. [SNH p.6]

### Herbal Aids

Comfrey and Aalmond are Specifics for Bronchitis. Since constipation is one of the chief causes of the problem, the bowels must be cleared and kept open with the lower bowel tonic [[Fen LB](#)] or herbal laxatives. If one has shortness of breath and needs the throat cleared of mucus, he can use an emetic. [Cayenne](#) is very effective for cutting the phlegm, as are fruit juices such as grapefruit, lemon, orange, or pineapple. Chickweed, comfrey, marshmallow or mullein are the greatest cleansers to get the mucus out of the body. One can relax the throat, stomach, and bronchi rapidly with a very small amount of lobelia. Other useful aids for relief are a hot vapor or steam bath followed by a cold shower or sponging; also hot fomentation of pleurisy root or mullein (with lobelia in it) on the chest and spine. If you want to speed up any fomentation, add cayenne as a counterirritant. [SNH p.6]

Bronchitis, Bronchial and Spasmodic Coughs, Whooping Cough: Drink the infusion of red clover freely. [SNH p.56]

[Garlic](#): For chronic diseases of the upper respiratory tract (inflamed tonsils, salivary glands, neighboring lymph glands), pharyngitis, laryngitis, bronchitis, etc. Keep garlic in the mouth constantly during wakeful hours, renewing morning and evening after the cloves have absorbed the poisons; or, use another appropriate garlic preparation. [SNH p.100]

Garlic Syrup: for asthma, whooping cough, cough, pneumonia, smallpox, bronchitis, dyspnea, etc.: Where there is spasm, give 1 teaspoonful of the syrup with or without water every 15 minutes until the spasm is controlled, then give 1 teaspoonful every 2-3 hours for the rest of the day; thereafter give 1 teaspoonful of the syrup 3-4 times daily. Use the foot poultice; also, mix the freshly expressed juice with leaf lard and rub on the chest, throat, and between the shoulder blades. [SNH p.100] See Garlic Syrup formula. [SNH p.101]

Yarrow: Enuresis, bronchitis (and other respiratory affections): Drink the yarrow decoction cool. [SNH p.215]

Pleurisy Root: for pleurisy, bronchitis, pneumonia, inflammatory rheumatism: Give hot infusion while the patient is closely-covered in bed; repeat the dosage every 30 minutes until free perspiration is produced; apply hot cloths externally, wrung out in the infusion. [SNH p.222]

Thyme: May be taken internally or used externally with amazing and beneficial results.

Internally: 1 teaspoonful in 1 cupful of water, sweetened with 1 tablespoonful of honey 3-4 times daily; good for infectious bronchitis. [SNH p.230]

Hyssop: for fevers, bronchitis, etc. Give 1 wine glassful warm every hour, (acts as a mild diaphoretic, relieves the kidney and bladder, gently influences the bowels, pleasantly soothes the lining of the stomach; sponge daily with vinegar and warm water.) [SNH p.232]

Rue or Garden Rue: Chronic bronchitis, glandular enlargements, scaly eruptions. Apply fomentation or compresses of a strong decoction to the chest or affected area. [SNH p.296]

See formula for Bronchitis containing comfrey, horehound, boneset, coltsfoot, elecampane, ginger and lobelia. [SNH p.312]

Mullein: Drink the strong decoction of leaves and flowers, or combine with comfrey root and garlic juice. [SNH p.316]

See formula using mullein, lobelia and cayenne. [SNH p.318]

Chickweed: Boil the fresh herb, eat the vegetable and drink the water freely. Drink the decoction, and apply hot fomentation of the decoction over the chest area. [SNH p.322]

See formula for bronchitis using marshmallow, coltsfoot, ground ivy, licorice and elder flowers. [SNH p.328]

See formula for bronchitis using slippery elm, boneset, licorice, flaxseed and blackstrap molasses. [SNH p.337]

See formula for bronchitis using slippery elm, boneset, flaxseed and licorice. [SNH p.337]

See formula for bronchitis using slippery elm bark, horehound, garden thyme, red clover, yerba santa, lobelia, resin weed, cayenne, blackstrap molasses and glycerine. [SNH p.339]

See formula for bronchitis using elecampane, comfrey, horehound, wild cherry and spikenard. [SNH p.344]

See formula for bronchitis using elecampane, skunk cabbage, aniseed, pleurisy root, licorice, lobelia, ginger and cayenne. [SNH p.344]

See formula for bronchitis using wild cherry, wahoo, blood root, elecampane, comfrey and golden seal. [SNH p.351]

See formula for bronchitis using wild yam, distilled water and glycerine. [SNH p.403]

**Resp-Free:** Dr. Christopher's Herbal Formula for Lungs and Respiratory Tract: This combination of herbs in capsule form is an aid to help relieve irritation in the respiratory tract--lungs and bronchial. This is an aid in Emphysema as well as other bronchial and lung congestion such as bronchitis, asthma, tuberculosis, etc. Suggested amount of these capsules would be two or more three times in a day or more. Additional aid is sometimes received by taking capsules with a cup of comfrey tea. Comfrey Root, Mullein, Chickweed, Marshmallow Root, Lobelia. [SNH p.528]

**Other Useful Aids:** For relief are a hot vapor or steam bath followed by a cold shower or sponging; also hot fomentations of pleurisy root and/or mullein (with lobelia in it) on the chest and spine. If you want to speed up any fomentation, add cayenne as a counterirritant. [HHH p.43]

**Garlic:** Another instance of the remarkable penetrating power of garlic is the fact that the expressed juice of fresh garlic mixed with olive oil and rubbed on the chest, throat, and between the shoulder blades gives great relief in whooping cough, asthma, bronchitis and dyspnea, according to an English physician who has used it with success for many years. It also has a reputation for safely reducing high blood pressure, and in this relation we have an exceedingly valuable formula. [NL 2-9]

**Garlic Syrup:** See recipe for garlic syrup for use on bronchitis. [NL 2-9]

**Juices for Bronchitis:** Carrot & garlic, carrot & dandelion, carrot. [NL 3-5]

**Vegetables for Bronchitis:** Asparagus, cabbage, carrot, lettuce, black and pink radish, beet greens, broccoli, sweet potatoes, spinach, turnip greens. [NL 4-12]

## Bronchitis

[Ginger Bath for Bronchitis](#): Simply add three tablespoonfuls of the grated root powder to a tubful of hot water. Let the person soak in the tub, adding hot water occasionally to keep the tubful good and hot. Give sips of diaphoretic teas during this soak (camomile is pleasant and well-accepted by most sick people). [NL 7-3]

**See Also**

[Dr. John R. Christophers "Three Day Cleansing Program"](#) for Cleansing the Bowel

[Resp-Free](#): Dr. Christopher's Herbal Formula for Lungs and Respiratory Tract

[Bugleweed Combination](#): Dr. Christopher's Heavy Metal Formula

[2-9](#): Garlic: Man's Best Friend in a Toxic World

[Mullein & Lobelia](#): Dr. Christopher's Glandular Formula

## Ailments

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## Bruises

### Definition

These are wounds to the skin common in childhood...a bruise results from forceful pressure against some object, where the skin is not broken so the blood rushes to the damaged tissue beneath the surface. [HHH p.61]

### Herbal Aids

Plantain: Bleeding of minor wounds; cuts, scratches, bruises, etc. Apply a poultice of the fresh, bruised or mashed leaves; drink the tea internally. [SNH p.53]

Chaparral: Bruises, cuts, minor wounds. Use the infusion as a wash. [SNH p.71]

Tansy: Sprains, bruises, inflammations, rheumatism, sciatica, etc. Bruise and apply the green leaves, or use the herb preparation as a fomentation, wash, etc. [SNH p.124]

See formula using camomile and poppy flowers. [SNH p.219]

Hyssop: Rheumatism, bruises, contusions. Apply a fomentation of the infusion from the leaves externally, and keep warm with moist heat. [SNH p.232]

Bruises, Foul Ulcers, Black Eye, Facial Burns, Skin Problems, Leprosy, etc.: Make an apple cider vinegar tincture with the freshly bruised herbs apply as a fomentation outwardly and drink internally. [SNH p.284]

Comfrey: Inflammation, bruises, sprains, swellings, suppuration of boils. Apply a fomentation made from the comfrey root or leaves. [SNH p.310]

Mullein: Neuralgia, sore throat, pleurisy, pneumonia, bruises, sores, wounds, lacerations, swollen joints, torn ligaments, purulent ophthalmic, appendicitis inflammation, skin diseases. Rub mullein oil in well, or apply on saturated cotton and cover. [SNH p.317]

See formula using marshmallow and camomile for sprains, and bruises (fomentation). [SNH p.331]

See formula for poultice using slippery elm, wild indigo and myrrh. [SNH p.337]

See formula for a liniment for wounds using cayenne, golden seal and myrrh. [SNH p.411]

See formula for liniment for sprains, bruises, rheumatism and neuralgia using cayenne, lobelia, oil of wormwood, oil of rosemary and oil of spearmint. [SNH p.411]

Gentian: liniment for parasitic affections, infected wounds, vermin, sprains, bruises, burns, inflamed joints, etc. Dip linen or other appropriate material into a strong decoction or diluted tincture; squeeze until the material does not drip; apply to affected area (hot or cold); cover with plastic (or wax paper, etc.), and bandage on. [SNH p.463]

Wheat Grass Chlorophyll: Skin--Burns, skin abrasions, bruises, wounds. The wheat grass chlorophyll has both healing and antiseptic characteristics. The chlorophyll is applied either directly onto the afflicted surface, or, it is soaked in a cloth and bandaged to the area. At the same time, the chlorophyll should be taken internally. [SNH p.545]

Comfrey: Fresh or dried comfrey can be applied directly over the damaged area--just keep adding additional amounts as needed. Cover with gauze, bandage lightly to hold comfrey in place

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[Acidosis](#)

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[Adenoids - Polyps](#)

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[Anthrax](#)

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and so the area can breathe. Comfrey paste can also be applied directly over the damaged area as with burns.

A wound, external or internal, will stop bleeding if the individual will drink a cup of water (preferably hot) with a teaspoon of cayenne pepper (red pepper) stirred into it. The bleeding will stop generally by the time a person can count up to ten after drinking the cayenne tea. The cayenne equalizes the blood pressure from the top of the head to the feet. This keeps the pressure from the hemorrhage area so it will clot naturally, which it cannot do with heavy blood pressure pumping the blood rapidly at the hemorrhage area. The leaves, moistened chewing tobacco, shave grass, shepherds's purse, wild alum root, yellow loosestrife will all aid in stopping bleeding and assist in healing, but comfrey is one of our favorites and should be in everybody's yard or in a flower pot in the apartment or house, or keep a good supply of the powdered leaf and root on hand. Bruises respond equally well to a pack of fresh, crushed comfrey, or the powdered leaves or roots made into a paste with water. [HHH p.62]

[CMM](#): Dr. Christopher's Healing Ointment: Made of comfrey, marshmallow, marigold, bee's wax, and oils, this is an antiseptic used historically on lesions, eczema (dry), poison ivy, inflamed surfaces, abrasions, burns, hemorrhoids, for bruises and swellings. Good to have on hand at all times. [HHH p.196]

Dr. Christopher's Comfrey Paste: One of the best aids for sprains and muscle soreness, cuts and bruises is comfrey paste. Apply this one half inch thick or more over the malfunctioning area and keep in a loose bandage, adding paste as is needed until relief occurs. Since this paste will keep for months at room temperature, it can also be used while traveling (keep a metal or glass container for emergencies). [NL 3-1]

[Cayenne Paste](#): This ointment can help bring temporary relief to internal pains of arthritis, stiff neck, muscle soreness, sprains, bruises and other aches. It can be applied to the chest during respiratory ailments to ease pain and help breathing. The heat generated by the capsicum increases circulation to the area and facilitates healing. [NL 4-5]

Cervil: good for a poultice for bruises. [NL 4-12]

#### See Also

[Cayenne](#): Cayenne Paste (Red Sun Balm)

[BF & C](#): Dr. Christopher's Bone, Flesh and Cartilage Formula

[CMM](#): Dr. Christopher's Healing Ointment

[Abrasions](#)

[Skin Problems](#)

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## Burns & Sunburns

### Definition

Burns are the result of damage to the skin by some source of heat, such as the sun, fires, stoves, or also from chemicals. [HHH p.43]

### Symptoms

A mild burn, often termed "first-degree," results in a reddening of the skin. More severe burns, "second-degree," may show blisters in addition to the redness, while severe or "third-degree burns" always show blisters and usually consist of damage to deeper tissue, and present the possibility of scarring. [HHH p.43]

### Herbal Aids

Plantain: Burns, scalds, erysipelas. Use the strong tea as a frequent wash, and drink the infusion internally. [SNH p.53]

Bayberry: Slow-healing burns or wounds, indolent ulcers. Dust on powder and bandage; change according to discharge. [SNH p.133]

European Pennyroyal: Bruises, foul ulcers, black eye, facial burns, skin problems, leprosy, etc. Make an apple cider vinegar tincture with the freshly bruised herbs apply as a fomentation outwardly and drink internally. [SNH p.284]

Comfrey: Wounds, bruises, burns, varicose veins, ulcers, boils, etc. Paint the part with pure olive oil to prevent sticking, then saturate a thick layer of cotton with comfrey mucilage and apply to the affected parts. Cover with plastic or waxed paper, bandage, and leave on until nearly dry. Make a fresh application by following the same process. If pus is present, paint the part with oil of garlic instead of olive oil and take 1 teaspoonful of the oil, internally. This will help prevent or stop putrefaction and pus formation, which will hasten the healing process. Give fomentation wrung out of a strong decoction. [SNH p.310]

Mullein: Burns. Apply juice of mullein leaves mixed with apple cider vinegar. [SNH p.317]

Chickweed: Boils, scalds, burns, inflamed or sore eyes, ulcerations, mouth or throat, deafness, wounds, etc. Use the decoction warm as a wash and apply the ointment (the ointment may be used externally and internally). [SNH p.323]

Slippery Elm: Drawing and healing poultice (inflamed surfaces, ulcers, wounds, burns, boils, skin diseases, purulent ophthalmic, chilblains, etc.) Add water to the powder to make an application of due consistence (use alone or in combination with other healing agents discussed) and place on the affected part. Stripping the bark straight from the tree and binding the inner side to a bad wound will work. [SNH p.335]

See formula for burns and scalds (after skin is broken) containing slippery elm, white pond lily and olive oil. [SNH p.338]

See formula for burns using slippery elm, horehound, thyme, red clover, yerba santa, lobelia, resin weed, cayenne, blackstrap molasses and glycerine. [SNH p.339]

See formula for bruises using cayenne, golden seal and myrrh. [SNH p.411]

Gentian: Liniment for parasitic affections, infected wounds, vermin, sprains, bruises, burns,

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inflamed joints, etc. Dip linen or other appropriate material into a strong decoction or diluted tincture; squeeze until the material does not drip; apply to affected area (hot or cold); cover with plastic (or wax paper, etc.), and bandage on. [SNH p.462]

**Wheat Grass Chlorophyll:** Skin--Burns, skin abrasions, bruises, wounds: The wheat grass chlorophyll has both healing and antiseptic characteristics. The chlorophyll is applied either directly onto the afflicted surface, or, it is soaked in a cloth and bandaged to the area. At the same time, the chlorophyll should be taken internally. [SNH p.544]

**Comfrey Paste:** The following paste formula can be used for the mildest to the most severe third-degree burns with assurance of success, if used as instructed. This paste has been used by hundreds of people with great success. It is made as follows: to equal parts of liquid honey and wheat germ oil, blend in finely chopped or powdered fresh or dried comfrey leaf or root. When the mixture is the consistency of a heavy spreadable paste it is ready to use. Apply it a half-inch thick or more over the entire area that has been burned, scalded, etc. Cover with gauze and bandage lightly. Observe area from day to day and if paste has been absorbed add more on top of the original application. Do not remove original, just add to it when needed. This paste will keep well for many months at room temperature if kept in a tightly closed jar. Always have it on hand for emergencies. You might want to carry a small jar on trips in case of emergency. If the paste is not available, submerge the burned area in cold water and leave it there as long as possible to take the heat out, or keep cold wet compresses over the burned area. If honey, wheat germ oil, or olive oil are available, use them to saturate the area completely, keeping it well soaked in the honey or oil until healed. The gel from the aloe vera plant promotes the healing of burns. These are all good, but nothing can compare to the comfrey paste. [HHH p.45]

**Black Ointment:** Dr. Christopher's Black Ointment: An excellent drawing ointment. For use externally on old ulcers, tumors, boils, warts, skin cancers, hemorrhoids, excellent for burns and as a healing agent. This is made with chaparral, comfrey, red clover blossoms, pine tar, mullein, beeswax, plantain, olive oil, mutton tallow, chickweed, poke root. [HHH p.196]

**CMM:** Dr. Christopher's Healing Ointment: Made of comfrey, marshmallow, marigold, bee's wax, and oils, this is an antiseptic historically used on lesions, eczema (dry), poison ivy, inflamed surfaces, abrasions, burns, hemorrhoids, for bruises and swellings. Good to have on hand at all times. [HHH p.196]

**Cabbage Leaves for Burns:** Apply mashed cabbage leaves to the burn area to relieve pain and speed healing. [NL 4-12]

**Pumpkin and Squash:** These can be applied as a poultice for burns. [NL 4-12]

### Testimonials

**BF & C:** Dr. Christopher's Bone, Flesh and Cartilage Formula Paste: We see maimed, crippled, burn-scarred people--who could surely have found a "better way to go" than that which was used on them, in many cases.

As a good example I would like to cite the case of two boys, about ten years of age, who were playing with gasoline and matches. Both of the boys' hands, up to the wrists, received third degree burns. The boys were taken immediately to the hospital where the surgeon pronounced, for both boys, "incurable third degree burns"! He told both sets of parents there was a choice in each case--either removing the hands at the wrist and attaching iron claws both right and left, or, with numerous operations and skin grafts, over a period of about one year in the hospital, the boys could keep their hands, but they would be just like mummified claws and could not be used as hands, but, in a claw-like manner, they would be able to pick up materials but the fingers would not move as would the ones on the metal hand. One set of the parents told the doctor to keep their boy there and, even though it would be a year and the cost very high, to go ahead and work on him as soon as possible. The other couple told the doctor they wanted to see another person first about their boy's condition and then they might come back.

As they had heard of our work, they brought their boy to the building when I was lecturing, to show me the boy's burned hands. The nails, much of the flesh, tendons, etc., had been so badly burned it made one shudder to look at it. The temporary preliminary bandages were put back on while answering their request as to what could be done instead of cutting off the hands or surgery

and skin grafting. I gave them a formula to use that is based on comfrey. This is a paste made up of comfrey, wheat germ oil and honey. The paste was to be spread, 1/2 to 3/4 inch thick, over the entire burn area. They were instructed to watch the paste and if it had, in any areas, been absorbed into the flesh to add additional paste in these areas, not disturbing the condition below.

Within the week they returned to the hospital and the same doctor they had seen before examined the boy. He was amazed and told them that where the burns had been third degree burns in these past few days, they were now first degree burns. He asked them what in the world they had used, and they told him it was an old-fashioned remedy. The doctor then told them to continue using it and, further, there now would be no need for any surgery or skin grafting, because it looked as though the hands would heal perfectly with this procedure without any scar tissue. In a few weeks time the boy's hands were completely healed. Later the nails had grown back on, the tendons, nerves, muscles, flesh and skin were all renewed, and the hands were as perfect as they were before the burns.

The other boy was still at the hospital nearly a year later, with continual surgery and skin grafting. The cost was, we understand, well over one hundred and fifty thousand dollars. When he was sent home his hands were two ugly "mummified-type" unbending claws, so sad-looking he wore gloves to hide them from view.

The parents that used the herbs spent approximately ten or twelve dollars for the first materials to apply (honey, wheat germ oil and comfrey) and only small amounts at times to replace the paste that was used.

The paste can be used for cuts, abrasions, burns, bruises, sprains, and an external aid to spread the healing up of broken bones.

If kept in a wide-mouth closed jar the paste will keep in a ready-to-use condition for many months. This is one of the fine emergency first aid helps you can have on hand. It is good to have some in your cars and in various places in the home or where you work, in case of an accident.

[NL 1-8]

2. Third Degree Burns: Most recently, one of our school of Natural Healing staff members (we call him "Professor Cayenne") accidentally scalded his hand with burning olive oil during a kitchen fire. He acquired Third Degree burns from this misfortune. There was no one around to properly dress the wound, so he went to the local emergency room to have the toasted, dead flesh cut away. They cleaned the burn and informed him that he would need skin grafting if he wished to regain the use of his hand. He said, "No, thank you. Not unless there is a donor for the skin. I don't want flesh cut from anywhere on my body!" The hospital assured him that the skin grafting was the only route to go. He still refused. But when he got home, he asked a friend to 1) take pictures of the hand for documentation, and 2) make up the comfrey burn paste and apply it to the hand. After a few weeks of using the comfrey paste, he was able to move his hand. The hand is still scarred somewhat, but new flesh has grown in and he has total use of the hand. With dry skin brushing and use of the [Cayenne](#) and [BF & C Ointment](#), he began improving the circulation as soon as the skin grew back. The comfrey paste had turned an almost mummified-looking hand to one that is now living again. [NL 4-3]

### See Also

[BF & C](#): Dr. Christopher's Bone, Flesh and Cartilage Formula

[BF & C Ointment](#): Dr. Christopher's Bone, Flesh and Cartilage Ointment

[Black Ointment](#): Dr. Christopher's Black Ointment

[CMM](#): Dr. Christopher's Healing Ointment

[Skin Problems](#)

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## Bursitis

### Definition

A swelling of the bursa, the connective tissue structure surrounding a joint.

### Symptoms

This causes a rheumatic or arthritic tendency that affects different parts of the body, often the shoulders. [SNH p.7]

### Cause

The cause of bursitis is the same as arthritis and rheumatism: malnutrition and poor circulation. Generally, the problem of most bursitis in the shoulder and neck areas comes from a congested condition in the transverse colon. A toxic acid condition irritates a specific area causing the specific inflammation. [SNH p.7]

### Herbal Aids

Fomentations and Liniments: These will help give very quick relief (but this is just giving relief and not healing). A fomentation, poultice or tea of burdock leaves (three parts) and lobelia (one part) is good. Wormwood oil in combination with other oils is one of the fastest and most effective pain relievers. Cleanse the inflamed tissue of the toxic accumulations with the cleansing program, and change to a mucusless diet. [SNH p.7]

Meat: If all the blood were out of the meat, it would be gray, and not red at all--as tissue, muscle, the flesh without blood is colorless, with a grayish tinge. It was said by one analyst (and is accepted by many) that the higher the uremia acid in beef, the richer the flavor, and these toxins and poisons in meat are a main contributor to gout, rheumatism, bursitis, and many other mucoid ailments. The fat of the animal is the hardest part for the body to eliminate, and Moses in particular condemns the use of fat. Notice that very few animals will eat fat at all. Again, the only value in meat is what the particular animal has received from eating green herbs (and this is why the range animal is so much better than the stockyard-fattened beef). [SNH p.536]

Apple Cider Vinegar and Honey: It was noted that Vermont folk medicine, although they did not distinguish between arthritis, bursitis, rheumatism, gout, osteoarthritis, etc., they were successful in treating all these diseases with two teaspoonfuls of apple cider vinegar and two of honey in a glass of water three times a day. They felt that arthritis treatment began in the stomach where the acid balance prevented putrefaction of food. (Bacteria will not grow in an acid medium.) These bacteria guard the door to proper assimilation of nutriment in the stomach and intestine. One of the body's chief necessities is calcium. If the calcium balance is off, the results will be seen in many ways. There will be frayed nerves, inferior fingernails and hair, and other disorders including susceptibility to infectious diseases and arthritis resulting from altered body chemistry. [NL 3-11]

### See Also

[Arthritis](#)

[Dr. John R. Christophers "Three Day Cleansing Program"](#) for Cleansing the Bowel

Bursitis

[Bed Wetting](#)

[Bee Sting](#)

[Bites, Insect Stings](#)

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## Eczema

### Definition

Eczema is an inflammatory skin disease--sometimes a rash with watery discharge or development of scales and crusts. [HHH p.68]

### Symptoms

The skin breaks out and itches with burning and stinging. Sometimes little pimples form which turn into water blisters. Usually the skin dries up into little scales and itches.

### Cause

1. **Cleansing the Skin:** The skin is a very important part of the body; it is an "extra kidney," an extra set of lungs for breathing, and has many other functions. We should keep it in a good condition, important as it is, but we usually treat it shamefully. Cleanliness is next to Godliness, and the skin should be bathed daily. This does not mean to use soap with each bathing, unless it is a natural type biodegradable liquid soap. Nearly all bar soaps do more damage to the skin than they aid it, by leaving residue of the soap to clog the pores. The pores are the doors and windows of the temple and must be kept open to let in oxygen (the breath of life) and to excrete toxins and waste. [HHH p.68]

2. **Diet and Use of Natural Fibers:** A person who uses lots of mucus foods has a gluey, sticky type perspiration. When this individual sweats and the body is not cleaned regularly, the dried sweat clogs the pores. This is a beginning cause of dermatitis, or skin malfunction. In addition, as a nation we have fallen in love with easy to wash and iron synthetic clothes. These rob the body of the breath of life because manmade synthetic fibers do not "breathe." Only natural fibers such as cotton, wool, linen, silk, etc., can allow the skin to breathe properly. [HHH p.68]

3. **Diet:** These are two of our big problems; the third one is a diet devoid of wholesome foods. We use man's prepared materials, called food, that have been contaminated and processed, and in so many cases, should be classified as "junk food." All aids to fighting dermatitis work better and faster if we consider the first three things mentioned--bathe regularly, return to natural fibers to wear, and eat wholesome foods [HHH p.68]

### Herbal Aids

**Poke Root:** Use the liniment or the infusion as a wash, and drink internally. [SNH p.60]  
Formula for liniment and infusion. [SNH p.61]

See formula for skin afflictions using burdock root, yellow dock, yarrow and marshmallow. [SNH p.67]

See formula for skin afflictions for a decoction using burdock root, centaury, fumitory, yellow dock and cayenne. [SNH p.67]

See formula using garlic, glycerine and burdock seeds. [SNH p.102]

**Sun:** Helios-therapy on the skin is very important, as the sun is the Great Doctor of all times. But this therapy must always be done with caution because the sun (though being a healer) is like fire, which can either provide gentle warmth or it can burn a city down. The sun will help assist the body where medicinal aids, herbs and other procedures are slower. In many cases, it will help bring skin cancer to the surface; and various other skin problems (such as acne, eczema, etc.) are

beneficially aided by bathing in the sun. The internal use of tea or other herbal aids are often an herbal wash before the sunbathing are congenial and excellent. [SNH p.502]

Chickweed or Plantain: For eczema and other skin problems, use a fomentation over the irritated area made with chickweed tea and/or plantain, burdock root, Oregon grape root, and echinacea--covered with plastic. Or bathe the area with the tea a number of times during the day. Chickweed or plantain ointment is a helpful aid for small outbreaks. Drink a cup of the tea two or three times or more a day. To each cup of the tea you drink add three to six drops of tincture of lobelia. [HHH p.68]

Walnut: A wonderful aid to help relieve cases of dermatitis is found in the walnut family, using black walnut hulls or leaves or bark (*Juglans nigra*), English walnut (*Juglans regia*), or butternut (*Juglans cinerea*). Treat the skin malfunctions the same as with number six. [HHH p.68]

Golden Seal: Take one ounce of powdered golden seal root and mix thoroughly with nine ounces of linseed oil. Use the medicinal linseed oil from the health food store or drug store; do not use linseed oil from the paint store or hardware store--apply freely, externally. Use as an oral aid white poplar bark (*Populus tremuloides*--also known as quaking aspen), one cup three times in a day. [HHH p.68]

**BF & C**: Dr. Christopher's Bone, Flesh and Cartilage Formula: For the most severe cases of skin diseases in the advanced stage, use a combination we have called Bone, Flesh and Cartilage combination, internally and externally. Repeat procedure. Make the tea, soak flannel, cotton, or any white material other than synthetic--never use synthetic--wrap fomentation (soaked cloth) around the malfunctioning area and cover with plastic or wax paper, leave on all night six days a week and for as many weeks as needed until relief appears. Then continue a week or two for severe cases. Drink one fourth cup of finished concentrated tea with three fourths cup of distilled water three times or more each day. [HHH p.68]

**Chickweed Ointment**: Dr. Christopher's Chickweed Ointment: This is made of chickweed herb and bees wax and oils. Excellent for eczema and/or other skin infections, sores, burning, itchy skin or genitals, swollen testes, acne, hives, also for ulceration of mouth and throat. This is a wonderful ointment. [HHH p.196]

See formula to make a liniment using peppermint, olive oil, menthol and camphor. [UW-Peppermint]

Plantain: For skin diseases that result in scrofula or eczema, use the tea internally as a blood cleanser and use the strong tea externally as a wash. If the skin is not oily, you can use the ointment topically to affected areas. [UW-Plantain]

Juices for Eczema: Carrot, carrot & cucumber. [NL 3-5]

Cabbage Leaves: Cabbage leaves applied to an infected wound, ulcer, or oozing eczema should be layered like roof shingles, allowing secretions to drain between the layers. [NL 4-12]

Tarragon: Soothing for eczema and scurvy. [NL 4-12]

**CMM**: Dr. Christopher's Healing Ointment: Made of comfrey, marshmallow, marigold, bee's wax, and oils, this is an antiseptic to be used on lesions, eczema (dry), poison ivy, soothes inflamed surfaces, abrasions, burns, hemorrhoids, for bruises and swellings. Good to have on hand at all times. [HHH p.196]

### Testimonials

1. **BF & C** cures skin problem worse than eczema: One day a lady came into my office in a frantic state of near hysteria. She told me that her fourteen-year-old daughter was at home and some neighbor ladies were with her, to keep her from doing harm to herself. That morning the mother had stopped her daughter from committing suicide. The girl, for several years, had a severe dermatitis that had baffled the family physician, dermatologists and allergy specialists. The skin problem was from the knees down to her feet, the arms from elbows down over the hands, and her neck and face were also covered with this dermatitis condition. The dermatologists said it was different from pityriasis, psoriasis, eczema, etc., and had no name for this thick, heavy scaling

from which the girl was suffering. This young girl had become a recluse, refusing to go to school, church, parties, etc., and because of this terrible condition which was called "incurable" she was eating herself into an extremely oversized individual. The despair she was suffering was pushing her into a suicidal frame of mind.

I had never had such a case presented to me before and my "back was up against the wall." This was an emergency and I did not have the time to sit in a laboratory and figure out a combination to try on her. I offered a quick silent prayer for help and a formula came immediately to my mind. As it came I had the lady and her companion write it down. I told them to go to an herb shop or health food store and get the various herbs, mix them, and make a fomentation. She was to foment the legs, arms, neck and face areas, and also to have the daughter drink some of the tea. I felt confident enough to promise good results!

It was on a Tuesday morning that the mother had come to see me. On Friday the report came back that the scabs and scales had left the afflicted areas and the girl's skin had a good "healing glow" to it. The next message I received was six months later. The girl was now a choir leader at the school she had returned to, and she was again busy in church and social activities.

This particular group of herbs is one we called "bone, flesh and cartilage" formula. We found it would do many things besides skin problems. [NL 1-8]

2. Cabbage Leaves: A watchmaker suffered for a year with a painful eczema of both hands, preventing him from working. The lesions were acutely inflamed, and the fingernails were separating, about to fall off. Applications of cabbage leaves twice daily for a few days brought relief from pain, as clear fluid drained onto the dressing. With continued treatment healing took place within two months. [NL 4-12]

3. Newborn Cured of Eczema: At one of Dr. Christopher's lectures, a woman brought a bundle to the front, a little baby all wrapped up. She unwrapped the bundle, and as she did, eczema scalings flew up all around dusted Dr. Christopher's dark suit. The baby was simply covered with eczema; he described it as horrible to see. The family had adopted the baby six months previous, and it was entirely covered with the scaling, evidently from birth. The family had employed their usual doctor, a pediatrician, and a skin specialist, but no one could do a thing for the little sufferer.

Dr. Christopher told the mother to fill a bassinet with warm Chickweed tea and to bathe the baby, pouring the tea over the head that could not be submerged. The mother was also to give Chickweed tea internally, in small amounts.

Within just a matter of days, the baby began to improve, and after a week or two, the eczema disappeared completely, though the child had suffered with it so many months. [NL 6-5]

#### See Also

[BF & C](#): Dr. Christopher's Bone, Flesh and Cartilage Formula

[BF & C Ointment](#): Dr. Christopher's Bone, Flesh and Cartilage Ointment

[Chickweed Ointment](#): Dr. Christopher's Chickweed Ointment

[CMM](#): Dr. Christopher's Healing Ointment

[Skin Problems](#)

## Edema

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See [Dropsy](#)

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## Enuresis

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**Enuresis**

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## Epilepsy

### Definition

A group of nervous system disorders which are marked by repeated episodes of convulsive seizures, blackouts and sensory disorders.

### Herbal Aids

- See Epilepsy formula # 1 using boneset and blue vervain. [SNH p.226]
- See Epilepsy formula # 2 using boneset, blue vervain, water pepper and camomile. [SNH p.226]
- See formula for antispasmodic tincture using lobelia, skullcap, skunk cabbage, gum myrrh, black cohosh and cayenne. [SNH p.363]
- See formula for epilepsy using scullcap, wood betony, valerian root, pennyroyal, centaury, cayenne and bayberry. [SNH p.372]
- See formula for epilepsy using scullcap, lobelia and cayenne. [SNH p.373]
- See formula for epilepsy using valerian, catnip, horehound, pellitory-of-the-wall, peony, wood betony and scullcap. [SNH p.378]
- See how to make patient perspire then give the formula using valerian, mistletoe, shavegrass, yellow or ladies' bedstraw and wormwood. [SNH p.378]
- See formula using black cohosh, blue cohosh and vervain. [SNH p.401]
- Juices for Epilepsy: Turnip leaf, watercress, spinach. [NL 3-5]

### Testimonials

1. [Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture: I just received your newsletter, and in reading the information on epilepsy I found that you didn't mention your antispasmodic tincture. I have epilepsy and have followed your program with the B & B tincture and oil of garlic and I'm sure this is effective over a period of time; but the antispasmodic tincture will stop the seizure in the process. I have used it successfully--even during home childbirth. This is a very good test, as epileptics could tell you, as childbirth always causes seizures.

I have also given the tincture to a friend for her baby. They had just spent almost \$1,000 on tests and medication the "AMA Way" and were having no success in stopping the seizures. They say this tincture has changed their lives. Having experienced epileptic seizures, I know that is no exaggeration.

I have never read or heard of this tincture being used for epilepsy, but was led by the Spirit to use it. I hope this might be of help to others who are suffering. God bless you. [NL 1-4]

2. [B & B Tincture](#): Dr. Christopher's Nervous System Formula with Black Cohosh: A boy 12 years old, was brought to me as a patient several years ago, who was having severe epileptic seizures and these had started after the child had received head injuries in an automobile accident. I have had success treating epileptic patients up to this time, by using our basics; bowel cleaning and blood purification, as well as using antispasmodic herbs. However, none of the procedures I

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had used over the years so successfully, worked at all with this new 12 year old patient.

One night I sat alone in my office, after all my patients had left for the day, wondering why I was not getting the results with this boy as I had with others with the same condition. I realized that I needed "help" and so I prayed earnestly that something could be done for this child and after some time of praying and meditating an "idea" for a "formula" of herbs for nerves came to my mind. I quickly wrote down: blue cohosh, black cohosh, blue vervain, scullcap, and lobelia in a 90 proof tincture. I immediately went to the lab we had out in back of the office, and made up the tincture. When this formula was given to the epileptic boy patient, there was an immediate reaction, and before long, he showed great improvement.

We found this same amazing formula would stop hiccups and was great to use by drops in the ear with oil of garlic to clear up earaches, and has even restored hearing in some cases. We called it B & B Tincture. [NL 2-11]

3. Dr. Shook Cured Epilepsy: Dr. Shook related a case wherein a young girl was brought to him with a longstanding case of epilepsy. She had suffered various injuries during her attacks. Shook made a strong decoction of Black Cohosh, blue gentian and valerian root, expecting immediate results, but the seizures continued. Shook then consulted an old herbalist, who informed him that only alcohol could extract the antispasmodic values from Black Cohosh. The parents tried the tincture, given here, and the seizures gradually decreased from up to thirty in one day to nearly none after six months. [NL 5-6] Dr. Shook's Formula consists of black cohosh, blue cohosh and blue vervain. [NL 5-6]

**See Also**

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture

[B & B Tincture](#): Dr. Christopher's Nervous System Formula with Black Cohosh

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## Eye Ailments

### Definition

Any problem affecting the eyes such as glaucoma, cataracts, poor vision, conjunctivitis, etc.

### Symptoms

Sty: Inflammation of one or more of the sebaceous glands of the eyelids. Painful and swollen eyelids. [HHH p.114]

### Cause

Sty: Toxic poison accumulation. [HHH p.114] , conjunctivitis, foreign particle, poor vision, cataracts, glaucoma.

### Herbal Aids

Sty: Apply a hot fomentation of strong sarsaparilla tea over the eye. [SNH p.84]

Ophthalmic (sore eye, inflammation of the eye). See formula using raspberry, agrimony, eyebright and buckbean. [SNH p.148]

Ophthalmia, Eye Inflammation: Apply the compound oil to the eye on cotton using formula of oil of rue and olive oil. [SNH p.298]

Herbal Eyewash: ([Herbal Eyebright](#)) This formula is excellent for helping to brighten and heal the eyes, and it is known to help remove the cataracts and heavy film from the eyes. See formula using bayberry, cayenne, eyebright, golden seal and red raspberry leaves. [SNH p.525]

Sty: Place a fomentation of mullein leaves, red raspberry leaves, golden seal, slippery elm, lobelia and marshmallow root over the eye. Apply for one hour each, a fresh application three or more times a day, or leave on all night, until healed. [HHH p.114]

[Herbal Eyebright](#): Dr. Christopher's Herbal Eye-Health Formula: This formula is excellent for helping to brighten and heal the eyes, and it is known to remove the cataracts and heavy film from the eyes: Make tea and put into a glass eye cup. There will be a slight burning sensation when using the cayenne in the eye at first, but there is nothing to be concerned about. Tip head back and apply the eye cup to eye. Exercise eye while doing this as though you were swimming under water. Do this three to six times a day. Drink 1/2 cup a.m. and p.m. This formula has aided many sty cases. [HHH p.114]

Baby Clogged Eye Duct: If your baby has an eye infection which is not gonorrheal you can suspect a plugged tear duct. Many mothers gently massage the area and/or wash it with eyebright and golden seal tea, which sometimes helps open the duct. If it doesn't open after a couple of months, you may wish to go to a good eye doctor for surgical opening of the duct. [EWH p.88]

Conjunctivitis: Some babies--and children--get pinkeye or conjunctivitis. To treat this eye infection a warm pack of chickweed or teas of red raspberry leaf or eyebright and golden seal, meticulously strained through sterile muslin, can be used to wash the eye. Some midwives suggest flooding the eyes with mother's milk, which contains antibodies. I have tried this with my seven-year-old, who had caught a neighborhood infection of pinkeye. I flooded his eyes with my milk several times a day, and his infection cleared up fast. He thought it was pretty funny, too. [EWH p.88]

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Foreign Particles: If you get a foreign particle in your eye, or if your eyes become red and irritated, you can wash them either with Dr. Christopher's Eyewash, being sure to strain the tea carefully through a fine, clean cotton cloth, or a simple tea of red raspberry leaves. These teas help astringe and heal the irritated surface. [EWH p.168]

Is There a Natural Way to Remove Scar Tissue From the Cornea of the Eye Caused by Viral Infection (Herpes Simplex)? Answer: To work on the scar tissue in the eye which results from such an infection one needs to use Dr. Christopher's eyewash combination [[Herbal Eyebright](#)].

This formula should be made into a tea. Using a glass eye cup wash the eye thoroughly. You will notice a slight burning sensation when you first apply the tea. This results from the cayenne in the combination. Do not be alarmed for this is a perfectly normal reaction and is harmless.

With the head thrown back and the cup in place over the eye, exercise the eye muscles as you might if you were swimming under water. Do this in the morning and at night or more frequently if you desire.

The Herpes simplex of course must be cleaned from the system by proper diet and the use of a good purifying tea. Three times each day drink a cup of burdock root tea (*Arctium lappa*). Continue taking this tea for six days a week for a period of six weeks. After six weeks change this infusion to an Ephedra herb tea (also known as Brigham tea, desert herb or Mormon tea). Take the Ephedra tea again for six days of each week for another six week period. You will continue rotating the different teas at six week intervals. To every cup of tea that you take add six to ten drops of tincture of lobelia. Also take three fifteen grain chaparral tablets along with each cup of tea. [NL 1-3]

Is There Any Help for Eye Muscle Degeneration? Answer: The herbs in the eye wash combination which I recommend as one of cell-proliferation. They have a special affinity for feeding the cell structures around the eyes themselves. One of the herbs was named "eyebright" many years ago, because people discovered the fact that this herb was helpful for ailing eyes. Each of the other herbs in this combination has its own way of helping improve the eye. These herbs are chosen as a good food for strengthening and rebuilding of the muscles in the eyes. [NL 1-7]

"I Have Been Using the Herbal Eyebright for Several Months Now. I have followed the instructions exactly. Is there anything else I can do to help speed this along?" Answer: In order for any herbal combination to be effective, the body must be in good working condition. This would include using the lower bowel combination [[Fen LB](#)] and strictly following the mucusless diet. In addition it is also important to improve the circulation to the head area. This can be accomplished by laying your head down on a slant board each day. Gradually work up to 20 minutes twice a day. There is also a tendency for the eyesight to seem to worsen for a while. This is due to the toxins being released from the system and coming to the surface of the eye to be washed away. This also indicates that the lower bowel formula [[Fen LB](#)] should be used as a means for keeping the eliminative channels open. [NL 3-10]

[Cayenne](#) and the Eyes: Dr. Christopher related the humorous story of a very fine student of his who had begun teaching herb classes on his own. This young man happened to precede Dr. Christopher's lecture one evening in Arizona. The young man said, "You know, ladies and gentlemen, that Dr. Christopher has always made me gasp. I've seen him drink two or three tablespoons of Cayenne in water--and I'd just shudder. But tonight I'm going to do something that he may have never done himself." With that, he reached down into a container of Cayenne and threw a pinch right into his eye. Dr. Christopher thought that the man must have gone crazy and he was concerned that one of his students would do such a thing in public, although he knew that Cayenne can never hurt the cell structure, no matter how delicate it is. The tears ran down the man's cheek as he continued talking, and when he was finished, he opened his eye and invited everyone to look. The eye just sparkled; it was by far the brighter of the two, although Dr. Christopher said that he never had seen this antic performed again--and that he never dared to try it himself! [NL 6-3]

Near-Sightedness and Far-Sightedness with Herbal Eyebright: Dr. Christopher said that, oddly enough, it took longer to correct near-sightedness and far-sightedness than blindness or cataracts or glaucoma. [NL 6-8]

## Testimonials

1. Carrot Juice: A young man came to us wanting help. He wanted to become an Air Force Pilot with the government but was turned down because of bad eyesight. He had passed everything else with high grades, but the answer was still "no," because of poor eyesight. When he asked the medical doctor if he could try again later, he was laughed at and told this condition could not be changed. He persisted and so was given a three-months return date. We had him "clean his bowels," go on the mucusless diet after the three-day cleanse, and then drink one quart or more of freshly-made carrot juice each day, six days each week. He was to use nothing but distilled water on the seventh day. In three months he returned for another eye examination at the Air Force Agency, and this time was given the approval with a "clean bill of health" and "good eyesight." [HHH p.66]

2. Vision Restored: Dr. Christopher was sitting in his office in Evanston, Wyoming one day, and in walked an elderly, white-haired woman with a little child leading her. The woman was completely blind, and the little child brought her right up to the desk. The woman said she had been blind for over ten years, not able to see anything, using a child or a seeing-eye dog to find her way around. Lately she had heard about Dr. Christopher's eyebright formula and wanted to know if it could help her. Dr. Christopher could not promise her anything, but he said it had done much good and never any harm. He told her about the mucusless diet, because everything works better when you have a cleaner body, and she began the eyewash formula [[Herbal Eyebright](#)]. She kept visiting Dr. Christopher regularly, and he gave her adjustments and other therapies.

One day, she came into the waiting room and into the office, without a seeing eye dog or child. She smiled and said, "Hello Doctor." This was the first time, she said, that she knew what he looked like--just like she had pictured him, she said. She had her eyesight back, truly thrilled, because for ten years she had been walking in a blind world.

"I want to show you how my eyes have healed," she said. She walked over and picked up a book off his desk and read the title on the outside. She opened the book and read several verses.

Dr. Christopher commented that most blind people feel hopeless, but there is hope. Thousands have had their eyesight improved with the eyewash routine, which is one part each bayberry bark, eyebright hub, golden seal root, red raspberry leaves, and 1/8 part cayenne. Make a tea and use as under "Formulas."

When people become blind from cataracts, glaucoma, near- or far-sightedness, there are no two cases alike. Not everyone can be cured, Dr. Christopher stressed. A brother-in-law of his had a torn retina, and the program could not help him at all. Even medical science could do nothing. He had laser beam treatments and other things, but without success. But others who had had the same condition have been healed. Some people who have been born blind have been able to see. Two adults and one infant the Dr. Christopher recalls were born blind, and were later able to see, thanks to this program. [EWH p.131]

3. Cataracts Disappear: A lady with cataracts had been blind for a number of years, and yet in nine days she had her full sight back. This astounded Dr. Christopher, for it to have happened so fast. Other people go on the program for as long as three years, and though they then can see better than before, they have not been completely healed. Others clear in a matter of months--it varies with the individual. [EWH p.132]

4. Dry Eyes and Cataracts: I have had bad eye trouble for two or three years. The beginning of cataracts on both eyes, I had the jel break in both eyes--at that time my eyes were so terribly dry that I would have to lift the eyelids off my eyes in the morning with my fingers. My vision was getting real bad. I have been taking exercises for my eyes, using the eye wash and taking the Eye Wash Formula [[Herbal Eyebright](#)]. My eyes are much, much improved. I am positive that the cataracts will be completely dissolved. Thank God for you and the wonderful work you are doing. [NL 1-7]

5. Cataracts, Glaucoma and Bad Vision: I was diagnosed as having a fast growing cataract in my right eye and a build-up of pressure in both eyes causing glaucoma. I then found in Newsletter

#19 all about Herbal Eyewash [[Herbal Eyebright](#)] and capsules, which I ordered and received on November 4. I immediately started using both three times a day--with marvelous results. Within three days I could see through my new glasses, bi-focals. I hadn't been able to since I got the new glasses which had stronger vision for distance and weaker bi-focals. So I had to change to my old glasses for my bookkeeping work and the new ones for driving. Suddenly I realized I forgot to change them when I sat down at my desk at my office (because I was seeing figures perfectly, I had forgotten I had them on). Then within two weeks I suddenly realized I could see much farther with the bad eye with the cataract, when I could not see with it at all before. All along small pieces of mucus is coming out of my eyes many times daily. Before using eyewash, I couldn't stand driving after dark as the car headlights, tail lights, signal lights and street lights all had huge halos around them of flashing red, yellow and green, very scary. So I had to be very careful not to leave my office so I would get home after dark. Now the halos have disappeared and I see only a tail on each light which I think looks like only a small part of a halo and I take that to mean my eyes are improving. I am very happy with continuing improvement and have full confidence that my cataract and glaucoma will be cured. I have started two friends using it too, and they both tell me they are having good improvements too. Neither have cataracts or glaucoma, but they do have weak eyes and wear glasses. [NL 1-7]

6. Vision Improves: I started the Eyebright formula treatment [[Herbal Eyebright](#)]... TWO WEEKS AGO. My vision has improved immensely, needless to say my first few days of treatment were rather hectic, but as I read the doctor's answers to questions in the Healthview letters, I was encouraged to go on. I bought the herbal eye-wash powder so it was necessary for me to strain it as I made it each morning. In preparation I had bought a box of filter drip coffee filters rather than using the gauze. When I poured the tea through the filter, it plugged up almost immediately. So the next morning, I put a teaspoon of the powdered tea in the filter, tied it shut with a twistum, thus making a tea bag. Bring the cup of distilled water to a boil with the tea bag in it. Let it stand until it cools. Works beautiful. No fuss no muss. Someone else has probably already thought of this method. I'll write you more as it progresses. [NL 1-12]

7. Subretinal Hemorrhage: My right eye went bad last January, diagnosed as "subretinal hemorrhage" which left me with probably 20-30% vision. Since using Eyebright Comb. [[Herbal Eyebright](#)], I now have 70 or 80% vision. Miracle Medicines-God's wonderful herbs. [NL 1-12]

8. Glaucoma Disappears: I have a friend who had had eight major surgeries. She lived in constant pain, very seldom was she able to go places and her physician had told her there was nothing more they could do.

She went on [Dr. John R. Christophers "Three Day Cleansing Program"](#) and [Dr. John R. Christophers "Mucusless Diet"](#). She started on herbs to cleanse the colon, [[Fen LB](#)] the blood [[Red Clover Combination](#)] Cayenne, Calc tea, Yucca AR, Herbal Eyebright, etc. In a matter of about three weeks, her pain was gone. She was able to start living again. In about 3 or 4 months her arthritis left her.

She had had glaucoma for 13 years. Her glaucoma medicine was making her ill, so she went to her eye specialist. He tested her and said there is not even a trace of glaucoma left. There is virtually no cure for glaucoma, how did you do it. Her reply was thru herbs and diet. She was told whatever it is, don't stop it. He took her off her glaucoma medication, and a special pair of glasses. She now tells me her eyes have improved so much that she can now watch TV without glasses, which she never before had done. She started on this program less than a year ago. Her dark brown eyes are now turning green. She has a ways yet to go, but she is really living again. She is a composer and this past holiday season, had a Christmas Album published. [NL 2-2]

9. Eye Pain: The eyebright combination [[Herbal Eyebright](#)] has brought good results for a very severe pain behind one eye. (I have had this for over two years and the doctors have been unable to find the cause). [NL 2-2]

10. Pressure in Eyes: I just want to make a statement about the eye wash [[Herbal Eyebright](#)] I ordered in Oct. I have Glaucoma have had since 1972 - they claimed I came to the Dr. in time, as

I hadn't had it very long. I had my usual 4 month ck. up Sept. 25 - 1979 Just a while after the ck. up I rec'd the eye wash. and immediately begin using it as directions stated, and was soon getting wonderful results, was called to my daughter's bedside in Houston Nov. 1st, 1979 carried my eye wash with me. and I used it regularly, came home Dec. 26 -1979 still using my eyewash, by this time I had eliminated all my eye drops-(I was using 3 kinds) except twice a day on the latest drops. On Jan. 25 1980 my 4 months was up - time to go to the eye Dr. again for my ck. up - something happened my appointment had to be changed to Feb. 5th 1980 So on the 5th of Feb. when the eye Doctor tested me for reading the chart on the wall - he only took a minute he said that's o.k. and moved on to the field test I was able to do that so well, he quit that quickly also. Then he dilated my eyes & said you sit there 10 mins. I'll be back by then & I can't do anything till then anyway. So exactly in 10 minutes he was back and he took the pressure in my eyes & said NOTHING And there he took my blood pressure & still said nothing, so I asked if my blood pressure was o.k., he said yes, good very good 140/80 couldn't be better.

Then I said there wasn't any pressure in my eyes either was there? he flashed his eyes on me quickly & said No, none whatever, How did you know? I laughed & said Dr. I can tell when there is pressure in my eyes or when there isn't any. He said you are a very prudent women, and your doing so well I don't think its necessary for you to come back for 6 months, If at any time in between the 6 months & now anything out of the ordinary should happen give me a call, I'll give you an appointment so that's how much your wonderful eye wash has helped me. its the 1st time since 1972 I have been clear of pressure in my eyes. Thanks to you. [NL 2-2]

11. Vision Restored in Only Remaining Eye: I am a firm believer in Herbs for better health. I first heard about Dr. Christopher's Natural Herbal Formulas thru the Healthview Newsletter several years ago, and, I might add have had wonderful results from Dr. Christopher's Herbal Eye wash [[Herbal Eyebright](#)] - even tho my ophthalmologist laughed when I mentioned it to him and stated it as quackery.

I have only one eye, and, the remaining had cataract removal with an inter-ocular lens inserted - still my vision was poor - reading about your Herbal Eyewash gave me hope - my ophthalmologist's's statement did not deter my desire to try it even tho I was cautioned about possible injury to my only left eye.

I only use the eye wash once each day - when retiring for the night. The burning is rough, but, the results are gratifying. I go see my ophthalmologist's once every 6 months. My last visit was May 14,1980 - after my eye examination my ophthalmologist said, "Holy Hell, Bill, your eye examination is going backwards" - I knew what he meant, but I thought I would ask -'What do you mean, backwards?' - "Why you need less stronger glasses. You only missed 3 letters on the bottom line - and the bottom line is 20-20 eye vision." So you see I am sold on Dr. Christopher's Herbal Eyewash [[Herbal Eyebright](#)] [NL 2-3]

12. Baby Born Blind Sees: A young couple came up to the podium after one of my lectures to find if it had been a "slip of the tongue" or did I actually mean a statement I had made, namely, "There are no incurable diseases, only incurable patients." My answer was "Yes, this is correct." A diseased or malfunctioning condition of the body can usually be made whole again, if the program is followed faithfully.

The question was then asked me, "We know of cases wherein eyesight has been restored (one individual we know had their sight restored) but how about our little child?" This small toddler was born blind. Medical science tells us that the child was born without any optic nerves. The baby, according to them, will remain blind all of its life, as there is no way man knows of giving sight to one who was born without the optic nerve. It would be like telling a person to listen to beautiful music, yet born without hearing organs, or for one to run when born without legs.

With pleading in their voices, they asked if I believed the child could see. I told the parents that up until this time, I had never seen an infant born blind receive vision, but have had reports on several others who had been born blind, and receive their sight later on in life, such as in their twenties.

The advice given to this couple was as follows: I can guarantee nothing, as it is a new problem to me, but if you will apply our "eyebright formula" [[Herbal Eyebright](#)] as external application, give the child some of this formula to drink, as well, and then several times a day, give orally (by mouth) and also put into the ears the formula we call our [B & B Tincture](#). This procedure they

were told, can do no harm in any way, but are made from good herbal foods for the areas mentioned and therefore, can do nothing but good. (Remember, the baby they told me about was an infant at the crawling stage, and had been pronounced by eye doctors "legally blind").

Just about six months later, in another state, just before going out to the podium, as assistant who was traveling with me came back stage where I was sitting and told me a lady asked to say a few words to me before the lecture started. They had explained to her that I had a question and answer period toward the end of the evening and she could ask any question of me at that time. But she insisted she must talk to me first, and she knew I would appreciate hearing what she had to say. And was I ever pleased to find out who she was. She had tears of joy in her eyes when she told me about the little "now toddling" child she and her husband had brought to me earlier. He was now able to follow a rolling ball across the floor and pick it up. He could now even see and pick up small colored bits of paper that had been scattered around the room!

We have here the case of a child born blind who would be able to see the wonders of sight that most of us just take for granted. [NL 2-8]

13. Eighty-Two Year Old Get Drivers License: "I began using Dr. Christopher's herbal eyewash [[Herbal Eyebright](#)] after getting the Healthview Newsletter. In a few weeks I could read fine print without glasses, even though two years ago I had been told I had cataracts on both eyes.

I had them tested again in January, and the cataract on my right eye was gone. The doctor OK'd the paper for my driver's license. I am eighty-two." [NL 2-8]

14. Takes Off Glasses Worn 40 Years Never To Put Them On Again: "Healthview interviews have cleared up the fine line between true or false, good and evil for me. I love being brainwashed as long as it's good or true. In less than 3 months, thanks to Dr. Christopher, I received my best Christmas present ever. On December 23rd 1978, after using eyewash since 10-10-78, 5 to 8 times daily and enjoying it burning and running down my face, I took off my glasses after 40 plus years, never to put them on again. When I looked in the telephone book and realized I could see names and numbers, I started calling some friends. They had said that when I started using Dr. Christopher's eye mix with cayenne [[Herbal Eyebright](#)], that within 4 months, if I was not blind using a white stick and a lead dog, they would consider using it also. Already, five have started. This time I cannot say thank you, but I sure can say thank you to Healthview for allowing as my Savior said many times, those with ears let them hear. Praise God and I believe that Jesus has already proved what Dr. Christopher said: "there are no incurable diseases, but many incurable people." I am 68 years old and on 10-21-78, when I had my glaucoma test ... the Dr. said ... no glaucoma but have your eyes treated soon. 1/10/79 the pus and mucus continues coming out in hunks and the more that comes out the better my eyes are." [NL 2-8]

15. Woman's Vision Improves: "Yes, that's what happened when I suggested to ten of my patients with chronic eye problems to try it, and see what happens.

By the way, one of them happens to be my own mother of 79, she was on the eyewash [[Herbal Eyebright](#)] and the capsule for three days and then left for Florida to visit her sister. Oh yes, she also has cataracts. Three others do also, but I must tell you about my mother. I called her in Florida about a week after she had left and asked her how her eyes were coming along, and she said to me I think I am going blind. Blind I said, what do you mean? Isn't your eyesight a little brighter at least? Oh yes, she replied, but sometimes I cannot read the paper at all and everything gets blurry and my eyes are always watering.

I asked her if she had taken her old glasses along with her, as I told her to do and she said yes. I said to her, lay the phone down and get them and a newspaper and come back to the phone which she did, but before she came back, I could hear her scream "I can see myself in the mirror". When she came back to the phone, she didn't bother to bring a newspaper with her, all I heard was that she could see herself clear in the mirror.

I told her before she left if there is a change in her eyesight to try one of her old glasses, which she forgot to do. Meantime, her eyes had gotten stronger and her present glasses were the wrong prescription.

Well, she sure knows now that she isn't going blind. [NL 2-8]

16. Cold Washrag Helps After Eyewash: I have been using Dr. John R. Christopher's eyewash [[Herbal Eyebright](#)] for seven going on eight weeks now. My eyes at first were so bad I couldn't even see my own face in the mirror clearly, without standing three inches from it. Now I can sit and watch TV and its clear across the room, and I can see clearly enough now, I can tell who the actors are! I also found at the beginning a cold washrag put to the eye, after it is washed, helps relieve the stinging. And it took me up to now to have any of my mucus or pus come out, and it pours out. I surely say it is worth every effort, because I know it works." [NL 2-8]

17. Floater Disappears: I have been using your Eyebright [[Herbal Eyebright](#)] 3-5 times daily. Before using eyebright, my lids hurt when I tried to open them in the morning. Now it does not take as long for the pain to vanish. This is a great help and comfort and I thank you. The "floater" in my left eye has vanished. [NL 2-8]

18. Sore and Tired Eyes No More: I received my first Eyebright [[Herbal Eyebright](#)] from your company on a Friday in October of 1979. My eyes were sore and really hurt. As I said the drops did not help me...OR THE NEW GLASSES. I washed my eyes out before retiring that Friday night. The next morning my eyes were glued shut with so much "crud" and dead cells. But as soon as I washed them again with Eyebright, they were not sore and I have not used an eye drop since. Saturday I washed them again. Sunday morning I sat at the kitchen table and I always call the weather. So I thought I would see if I could dial without my glasses. I have been wearing glasses since 1933. But I don't think I have been able to dial a phone without glasses for at least 25 to 30 years. Believe it or not, I dialed the phone without glasses. I work long hours in my lab. Sometimes from 5 a.m. to 11 p.m., all under lights. My eyes are never sore anymore - or tired. After eight months I could not feel the Eyebright anymore, so I put two capsules in and I can hardly feel that. But I do not miss a day in washing my eyes. I used to have sore eyes after every family gathering due to the heavy smokers. (I do not smoke. I quit at sixteen.) I cured my own cataract and glaucoma, using B-15 as a helper. [NL 3-1]

19. Coloboma: Our daughter was born in 1973, with coloboma. We had three eye specialists look at her, but all said there was no operation or anything they could do for her. One doctor said she might see movements, but he did not think she would know what they were. She also has one eye that is smaller. Then I read the article in the Healthview Newsletter about the Herbal Eyewash [[Herbal Eyebright](#)]. So we ordered some and began. We had to use an eyedropper because of being for an infant. After three months she reached for a magazine while sitting on her daddy's lap. What a joy. Her progress continued, next she would move her head to follow close objects. She is now three years old. Loves to look at her books, go up and down stairs, feeds herself, runs, etc. Thank you. [NL 4-10]

#### See Also

[Herbal Eyebright](#): Dr. Christopher's Herbal Eye-Health Formula

[Black Eye](#)

Entire Newsletter 2-8 How Efficient is our Eye-Sight? [NL 2-8]

## Ailments

[A - B](#)   [C - E](#)   [F - I](#)[J - P](#)   [Q - Z](#)[Fever](#)[Flatulence](#)[Flu](#)[Frog](#)[Gallstones](#)[Gangrene](#)[Gas](#)[Glands](#)[Goiter](#)[Gonorrhea](#)[Gums](#)[Halitosis](#)[Hay Fever](#)[Headache](#)[Hearing](#)[Heart](#)[Heartburn](#)[Hemorrhage](#)[Hemorrhoids](#)[Hernia](#)

## Itch

### Definition

To feel a sensation that is usually on the skin that makes you want to scratch.

### Cause

Itch is caused by various germs or bacteria trying to clean the body through the pores of the skin (instead of through the kidneys and the bowels) resulting in formation of pustules or rashes accompanied by intense itching. [HHH p.99]

### Herbal Aids

General Instructions: For itch and other skin problems, use a fomentation over the irritated area made with chickweed tea and/or plantain, burdock root, Oregon grape root, and echinacea--covered with plastic. Or, bathe the area with the tea a number of times during the day. Chickweed or plantain ointment is an aid for small outbreaks. Drink a cup of the tea two or three times or more a day. To each cup of the tea you drink add three to six drops of tincture of lobelia.

A wonderful aid to help relieve cases of dermatitis is found in the walnut family, using black walnut hulls or leaves or bark (*Juglans nigra*), English walnut (*Juglans regia*), or butternut (*Juglans cinerea*). Treat the skin malfunctions the same as above.

Take one ounce of powdered golden seal root and mix thoroughly with nine ounces of linseed oil. Use the medicinal linseed oil from the health food store or drug store; DO NOT use linseed oil from the paint store or hardware store--apply freely, externally. Use as an oral aid white poplar bark (*Populus tremuloides*--also known as quaking aspen), one cup three times a day.

For the most severe cases of skin diseases in the advanced stage, use a combination we have called Bone, Flesh and Cartilage [BF & C] combination, internally and externally. Repeat procedure. Make a tea of the following herbs: six parts oak bark, three parts marshmallow root, three parts mullein herb, two parts wormwood, one part lobelia, one part skullcap, six parts comfrey root, three parts walnut bark (or leaves) and three parts gravel root. Soak the combined herbs in distilled water (at the rate of one ounce of the combined herbs to the pint of distilled water) for four to six hours, simmer thirty minutes (do not boil), strain and then simmer the liquid down to one-half its volume. Example: One gallon of tea simmered down to two quarts of tea, which is called "concentrated" tea. Soak flannel, cotton, or any white material other than synthetic--never use synthetic--wrap fomentation (soaked cloth) around the malfunction area and cover with plastic or wax paper, leave on all night six days a week and for as many weeks as needed until relief appears. Then continue a week or two for severe cases. Drink one fourth cup of finished concentrated tea with three-fourths cup of distilled water three times or more each day. [HHH p.99]

Plantain and Yellow Dock: Make a strong tea of equal parts of plantain and yellow dock (*Rumex crispus*), and bathe the affected area frequently as a wash. [SNH p.54]

Itch Ointment: See formula using burdock root, olive oil and bee's wax. [SNH p.68]

Black Walnut: Black walnut tincture can be applied on itching skin. This works especially well if the irritation is due to a fungus or similar invasion. One ounce of powdered golden seal root mixed with nine ounces of pure, food-grade linseed oil (not paint store linseed oil) can be applied externally with good results. White poplar bark tea should be taken internally. [EWH p.163]

[Hiccoughs](#)[Hypoglycemia](#)[Hysteria](#)[Impotency](#)[Incontinence](#)[Indigestion](#)[Infertility](#)[Inflammation](#)[Influenza \(Flu\)](#)[Insect Sting](#)[Insomnia](#) **Itch**

**Poke:** The skin is an indicator of toxicity in the body. Poke is a good aid for skin problems. It is also good for "the itch" in cases of scabies. Anytime you have skin which doesn't eliminate properly along with vitiated blood, you can well use Poke. It is said to be a great eliminator of toxins out of the system (Hut:36). Usually the glands are not performing properly in these conditions so the herb works on both areas. It is often used in chronic eczema, syphilitic eruptions, psoriasis, varicose veins and leg ulcers (Felk:1473). [UW-Poke]

**Plantain:** Plantain bruised, or juiced in a juicer, and placed over the sting or bite will generally bring relief within a short time. The pain and itch will cease and the swelling will leave. [NL 3-1]

**See Also**

[BF & C:](#) Dr. Christopher's Bone, Flesh and Cartilage Formula

[Black Walnut Tincture:](#) Dr. Christopher's Black Walnut Tincture

[Chickweed Ointment:](#) Dr. Christopher's Chickweed Ointment

[Bites, Insect Stings](#)

[Chicken Pox](#)

[Measles](#)

[Parasites and Worms](#)

[Poison Ivy and Poison Oak](#)

## Ailments

[A - B](#)   [C - E](#)   [F - I](#)

[J - P](#)   [Q - Z](#)

### [Jaundice](#)

[Kidney](#)

[Laryngitis](#)

[Leukemia](#)

[Lice](#)

[Liver](#)

[Lockjaw](#)

[Measles](#)

[Meningitis](#)

[Menopause](#)

[Menstruation](#)

[Migraine](#)

[Miscarriage](#)

[Moles](#)

[Motion Sickness](#)

[Mumps](#)

[Nausea](#)

[Nerves](#)

[Neuralgia](#)

## Jaundice

### Definition

Jaundice is due to absorption of bile into the blood vessels, a disposition of bile pigment in the skin and mucous membrane. [HHH p.100]

### Symptoms

A morbid affliction characterized by yellowness of the skin, eyes, mucous membranes, and urine, due to bile pigments in the blood and tissues, [SNH p.34] bitter taste in mouth and constipation. Urine is dark, there is a slight fever, headache, and dizziness. [HHH p.100]

### Cause

The liver is the main seat of the problem. The bile does not excrete properly and is passed off into the blood stream and the body tissues, causing a toxic condition (called cholemia) causing indigestion, sluggishness, fatigue, constipation, upset stomach, chills, vomiting, and fever. The stools become a light clay or chalky color, the skin takes on a gold cast, yellow shows in the whites of the eyes, and bile deposits in the skin causing itching. [SNH p.34]

As we said, jaundice, hepatitis, and contagious hepatitis stem from a liver/gall bladder malfunction. This is the cause, but the cause behind this cause is diet.

Jethro Kloss (Back to Eden, Beneficial Book, Box 404, New York 10016) gives the following on jaundice:

Causes: Obstruction of the bile. When the bile gets into the blood or circulation it causes the skin all over the body to become yellow, as well as the whites of the eyes. The bile does several important things: It neutralizes the gastric juice which would otherwise interfere with intestinal digestion; it alkalinizes the food and enables the system to take care of it; it has a special effect on the fatty foods. Deficient bile is the cause of constipation. Derangement of the stomach, liver and bowels is the cause of this ailment, and of course, these troubles arise from errors in diet. [HHH p.100]

### Herbal aids

Carrot Juice: This will bring the skin from clear to yellow (as the liver clears) and then back to normal, which is a sign that the bile is now cleared and flowing properly into the intestinal tract. Tonics for the liver are helpful, such as barberry, carrot juice, blueberry bark, cranesbill (crow foot) root, red raspberry root, and white oak bark. Proceed with caution since rapid unloading of toxic bile may upset the body and induce vomiting as well as turn the skin extremely yellow. Take golden seal and drink fruit juice to help cleanse. Other excellent herbs for this liver problem are agrimony, dandelion, mandrake root, self-heal and yarrow. Unsweetened fresh lemonade is good. [SNH p.6]

[Dr. John R. Christophers "Three Day Cleansing Program"](#): One of the safest and fastest methods of reversing these conditions is to follow the three-day cleanse routine as follows: drink apple juice each waking hour, swishing (chewing) each mouthful of the juice in the mouth, so the saliva mixes with it thoroughly. A child eight years old or older can generally use an eight-ounce glass each hour, younger children in proportion. No other food is used. If desired, on the half-hour distilled water can be used. During each day of the three days, take one tablespoon or more of sweet-tasting (not rancid) olive oil, three times during the day. To take away the oily taste, eat an

[Neuritis](#)[Nightmares](#)[Nipples](#)[Nosebleeds](#)[Obesity](#)[Osteoporosis](#)[Palpitations](#)[Paralysis](#)[Parasites and Worms](#)[Pleurisy](#)[Pneumonia](#)[Poison Ivy and Poison Oak](#)[Polyps](#)[Pregnancy](#)[Prostate](#)[Pyorrhea](#)

apple or "chew" juice well right after the oil. [HHH p.100]

Give the child the lower bowel formula [[Fen LB](#)] several times a day to keep the bowels clear.

This is a very important part of the program--keeping the bowels free. One way to help is to start the day off with eight ounces or more of prune juice. Any good brand from the grocer's shelf is good, as long as nothing has been added such as preservatives, etc.

During each day have the child take one half cup (more or less according to age) of a liver-gallbladder tea formula three times a day. One of the best formulas we have recommended for many years is; three parts barberry root (*Berberis vulgaris*) or substitute Oregon grape root or rocky mountain grape root, and one part of wild yam. If wild yam is not available, substitute two parts of sweet fennel seed. [HHH p.101]

Castor Oil Fomentation: During acute stages of jaundice (hepatitis), use a castor oil fomentation over the liver and gall bladder area (right side, lower rib cage and across abdomen). Massage castor oil (circular clockwise motion) over the area, using it liberally. Or soak a flannel cloth in castor oil, squeeze out excess and cover area. After castor oil is applied either by massage or fomentation (the latter is better), cover the area, flannel and all, with a hot wet towel. Keep a hot water bottle or a moist-type heating pad over the area for a half hour to an hour several times daily. Repeat the entire program from time to time until condition is cleared. Then stay on the mucusless diet, use plenty of carrot and other type juices and no less than one ounce of steam distilled water per each pound of body weight each day. [HHH p.101]

Alfalfa: This has been used in the treatment of jaundice. Harris reports that some doctors supply their patients with fresh Alfalfa. [UW-Alfalfa]

Butcher's Broom: This is not as commonly used in modern times as it once was. It is also called Knee-Holly because it grows to about the height of a man's knee and has prickly leaves and red berries; it also grows in the vicinity of holly bushes, mostly in England and Europe. It is an excellent herb for the urinary system, opening obstructions and increasing the flow, expelling gravel, and also working on an adjacent system, the female tract, helping to bring on suppressed menstruation. Because of its action on the urinary system, it is excellent for cases of jaundice. The herb also acts as a diaphoretic. [UW-Butcher's Broom]

Wormwood: Take 2 fluid ounces of the infusion 3-4 times daily. [SNH p.108]

See formula using raspberry leaves, barberry bark, agrimony, cleavers, mountain flax and cayenne. [SNH p.147]

Dr. Shook's Jaundice Formula: See formula using turkey rhubarb, aloe leaf, fringetree, Culver's root, wahoo bark, poke root and nux vomica seeds. [SNH p.186]

Compound Syrup of Mandrake: Uses mandrake root, licorice root, ginger root and sugar. [SNH p.196] Regulate the dose to suit the bowels, trying to effect a soft, molded stool and avoiding any tendency to diarrhea. The formula is slow working, but if persisted in for a time, it will act with certainty in clearing jaundice conditions and restoring the liver to normal function. [SNH p.197]

Culver's Root: Culver's root may profitably be used alone 3-5 drops of fluid extract (add cayenne where the pulse is weak); or, it is beneficially combined with positive hepatic stimulants (such as mandrake or bitter root) [SNH p.206]

Bitter Root: Give 3-5 drops of fluid extract every 2-3 hours combined with tincture of cayenne or some syrup of ginger, in water, etc. [SNH p.209]

See formula using boneset, butternut and ginger. [SNH p.227]

Compound Lobelia Capsules: See formula using lobelia and lobelia seed, cayenne, acacia vera and anise seed. [SNH p.364]

See formula using balmony, golden seal, dwarf elder, gentian, prickly ash and wahoo. [SNH p.460]

Infant Jaundice: Many parents worry about infant jaundice, which occurs in an increasingly high percentage of newborns, which some attribute to the use of drugs in the birth process. Although the symptoms are pretty much the same--yellowness in the skin and eyes--there are actually three kinds of jaundice. Physiological jaundice occurs in blonde babies, Native American

babies, those born with the aid of drugs, those not allowed to nurse immediately after birth and on-demand, and preemies. This "normal" jaundice occurs in an actively-nursing and otherwise active, normal baby. It disappears within one month. In order to help the baby overcome this jaundice be sure that the baby passes its meconium within the first day, because meconium contains bilirubin which causes this jaundice. Nurse the baby lots in order to help the meconium pass; if it doesn't come within a day or two, you might need to see a doctor to find if there is something wrong with the baby's eliminatory system. Take the baby out into the sunlight, naked, for a few minutes each day, or let him lie undressed in front of a sunlit window if the weather is cold. Sunlight breaks down bilirubin. Do this every day until the baby's color is normal. Catnip, comfrey and dandelion tea are said to be good for relieving the problem; drink them yourself, and offer a few drops, from an eyedropper, to the baby; however, do not give any honey to a small baby!...As a side note, I believe the best form for giving herbs to a small baby is in tincture or extract form. We gave Sarah dandelion extract, along with yellow dock, catnip, marshmallow, and others, and I believe they were extremely helpful in healing her. Three drops of tincture or extract can equal a full cup of tea for a little one; it is much easier to administer.

Doctors admit that another form of jaundice, breastmilk jaundice, is extremely rare. Doctors say that this jaundice is also not life-threatening. You can stop breastfeeding for a day, or at the most two, if you wish, but I would just keep taking dandelion for the liver and supplying milk for the baby. Some mothers take fresh wheat grass juice, giving a few drops to the baby.

Both physiological and breastmilk jaundice occur in a healthy, active baby. Neither requires special treatment, and the bilirubin usually goes down after the third day. Many doctors wish to treat these babies with bilirubin lights for these types of jaundice. The dangers of this treatment to babies have been identified as irritability and sluggishness, diarrhea, lactase deficiency, intestinal irritation, dehydration, feeding problems, riboflavin deficiency, disturbance of bilirubin-albumin relationship, poor visual orientation with possible diminished responsiveness to parents, and DNA-modified effects (The People's Doctor, Vol. 4, No. 7, p. 2). In addition Dr. James Sidbury of the National Institute of Child Health and Human Development suspects phototherapy might be responsible for increased mortality, particularly in small infants, because of lung problems and hemorrhage.

The only dangerous kind of jaundice is pathological, resulting from an Rh or ABO blood incompatibility, or a damaged or malformed liver, or as a side effect of something wrong with the mother, including drug use. The bilirubin continues to rise after the third day, and the baby becomes dehydrated and lethargic. This unnatural condition must be treated medically, as it can lead to brain damage. As usual, the best way to decide what to do is to watch your baby and follow your maternal intuition. [EWH p.95]

Juices: Dandelion, carrot & spinach, apple, grape, tomato. [NL 3-5]

Barberry: Edward Shook, among many herbalists, identifies Barberry as one of the best herbs for stimulating the liver, especially useful in cases of jaundice, causing the bile to flow more freely (ATH: 208). Jaundice results from bile buildup in the tissues, causing skin, eyes, mucus membranes and urine to turn yellow. Barberry can soften and breakup congealed bile and cause it to flow through the gallbladder into the digestive tract (H:439). [NL 5-4]

### Testimonials

A woman was brought into a hospital with serious jaundice. She had been well up to the onset of the disease, but had become extremely yellow in just a few days. She then began to bleed from her nose, from the bowel, and clots of blood began to form under her skin! Bile in the blood--which is what jaundice is--prevents the clotting of blood, and so doctors hesitate to do surgery for that reason. The laboratory analysis showed that the prothrombin in the woman's blood--the element necessary for clotting--was only five percent of what it should have been. A researcher recommended that the situation be treated with Alfalfa, which it was, and the woman completely recovered. [UW-Alfalfa]

### See Also

[Barberry LG](#): Dr. Christopher's Liver-Gallbladder Formula

[Liver](#)

[Dr. John R. Christophers "Three Day Cleansing Program"](#)

## Ailments

[A - B](#)   [C - E](#)   [F - I](#)[J - P](#)   [Q - Z](#)[Jaundice](#)[Kidney](#)[Laryngitis](#)[Leukemia](#)[Lice](#)[Liver](#)[Lockjaw](#)[Measles](#)[Meningitis](#)[Menopause](#)[Menstruation](#)[Migraine](#)[Miscarriage](#)[Moles](#)[Motion Sickness](#)[Mumps](#)[Nausea](#)[Nerves](#)[Neuralgia](#)

## Kidney

### Definition

Anything related to the kidneys.

### Symptoms

An unhealthy, morbid condition of the kidneys. [SNH p.35]

### Cause

Kidney trouble is caused by a local infection. [SNH p.35]

### Herbal Aids

General Instructions: The greatest aids for this problem are juniper berries, marshmallow root, parsley, and watermelon seeds. [SNH p.35]

Plantain: Drink one teacupful of the tea four to five times daily until relief is obtained. [SNH p.53]

Parsley: Make at least 2 quarts of the parsley root strong decoction and drink copiously. [SNH p.246]

Diaphoretic: See formula using juniper berries, parsley seed and rest harrow. [SNH p.251]

Spearmint: It has a gentle diaphoretic action of mild perspiration, and as a diuretic it is very beneficial to the kidney, bladder (especially for suppression of urine). [SNH p.238]

Strong Decoction of Gravel Root (cystitis and kidney troubles,). See formula using gravel root, water and glycerine. [SNH p.256]

Gravel, Stone or Calculi: See formula using gravel root, wild carrot, meadowsweet, marshmallow, uva ursi and honey. [SNH p.256]

Kidney and Bladder: See formula using uva ursi, mountain mahogany, couchgrass, buchu leaves, juniper berries, prince's pine, shavegrass and celery seeds. [SNH p.260]

Gravel, Kidney and Bladder Problems: See formula using buchu powder, uva ursi, parsley root, gravel root and ginger. [SNH p.272]

Herbal Kidney Aid: See formula using cayenne, ginger, golden seal, gravel root, juniper berries, marshmallow, parsley root and uva ursi. This will dissolve the stones that are in the kidneys, as well as clean out other sedimentation and infection in the prostate. [SNH p.524]

[Juni-Pars](#): Dr. Christopher's Kidney Formula: for kidney malfunction. Approximately 80% of the body is liquid, and much of this fluid must be pumped, filtered, etc., etc., through the urinary system of the individual. We do not take the best of care of this delicate tract, but through it go lots of irritating and clogging-type materials, i.e., tea, coffee, soft drinks, hard water, alcohol, etc.

Over the years we have used a formula of herbs with people who have been afraid to be out in public, because of a lack of control over the urinary tract and unknowingly void urine. After using this formula, many people have found relief from this condition and are living normal lives again.

[Neuritis](#)[Nightmares](#)[Nipples](#)[Nosebleeds](#)[Obesity](#)[Osteoporosis](#)[Palpitations](#)[Paralysis](#)[Parasites and Worms](#)[Pleurisy](#)[Pneumonia](#)[Poison Ivy and Poison Oak](#)[Polyps](#)[Pregnancy](#)[Prostate](#)[Pyorrhea](#)

This formula consists of juniper berries, parsley, uva ursi, marshmallow root, lobelia, ginger, and golden seal. Suggested use is a cup morning and evening, or two tablets or capsules morning and evening taken with a cup of parsley tea. [HHH p.183]

[Prospallate](#): Dr. Christopher's Prostate Formula: In case of malfunction we suggest this combination to assist the male: cayenne, ginger, golden seal root, gravel root or queen of the meadow root, juniper berries, marshmallow root, parsley root or herb, uva ursi leaves. This will dissolve the stones that are in the kidneys, as well as clean out other sedimentation and infection in the prostate. Mix the powders and place in No. 0 capsules and take two or more morning and night, with parsley tea when possible. [HHH p.191]

[Aloe Vera](#): Aloe Vera taken internally is said to help maintain good blood vessel tone and healthy circulation. The potassium in the plant is said to aid the heart's rhythm and stimulate the kidney to dispose of body wastes. The herb is said to help the action of digestive enzymes and deter kidney stones. [UW-Aloe Vera]

[Hydrangea](#): There is much disagreement about Hydrangea's stone-dissolving properties. Most authorities agree that it does remove the stones, but not everyone considers the herb a solvent. Dr. Butler affirmed that the herb relieves the pain of the passing of the calculi. Dr. Shook explained that the sharp pain that is associated with gravel deposits comes from the sharp points of the crystal piercing the kidney or ureter. When the sharp points are even partially dissolved, he said, the pain, hemorrhage and inflammation all subside, and the stone or stones frequently pass with just a stretching of the tubes. How, he asked, is it possible to account for the fact that when these stones pass through easily after the administration of Hydrangea, they are found to be smooth and round, while x-rays revealed their sharp point piercing the tissues? He said that their clinical evidence proved that Hydrangea is truly a stone solvent (ShoA:85). He said it was destined to become a universal remedy for phosphaturia, cystitis, alkaline urine, stony deposits, deposits of calcium oxalate (which forms many calculi), chronic gleet, mucus irritation of the bladder in old people, backaches caused by kidney trouble, rheumatism of long standing, arthritis and gouty affections, arteriosclerosis and many other common conditions--quite a claim for a disputed herb! As Dr. Shook said, "Dear student, you will never find a more remarkable herb " (ShoA:83). [UW-Hydrangea]

[Juniper Berry Wine](#): For a kidney and stomach tonic, Juniper berry wine is easy to make. Place a large handful of the berries in any gallon of any kind of good quality wine. The bottle is capped and allowed to stand for three days. During this period the bottle is shaken thoroughly once a day. At the end of three weeks the berries are strained off and thrown away (Luc:Secrets:120). [UW-Juniper]

[Kelp](#): In recent years, we have found that the kidneys are not only eliminative organs, they also aid in assimilation and are partly responsible for adequate nutrition (Ibid). Kelp cleanses and tones these organs, and can be especially valuable in cases of irritable or painful kidneys. Dr. Powell cleared up kidney cases that were very stubborn and had failed to respond to other treatments, whether natural or medical. [UW-Kelp]

[Juices for Gravel in Kidney's](#): Carrot & cucumber, endive & parsley. [NL 3-5]

[Juices for Kidney and Bladder Troubles](#): Cucumber & parsley, dandelion, spinach. [NL 3-5]

[Juices for Renal Calculus \(Stones in Kidney\)](#): Carrot & cucumber, celery & parsley. [NL 3-5]

[DRI](#): Dr. Christopher's Formula for Bedwetting: For more severe cases of incontinence, enuresis (bedwetting, etc.), a formula we have used a long time is as follows: parsley root, juniper berries, marshmallow root, white pond lily, gravel root, uva ursi, lobelia, ginger root and black cohosh root.

This formula is a specific for helping control or overcome bedwetting and to strengthen the entire urethral canal, kidneys, bladder, etc.

Recommended dosage two No. 0 capsules three times a day with a cup of parsley tea. Upon retiring at night fasten about a six or eight inch ball of yarn or string or cloth onto night clothes in the middle of the back. This is for the purpose of preventing the individual from lying on the back, as this is generally the time the valves release to void urine. [HHH p.184]

[Water](#): The main trait common to men who complain about kidney problems is that they do

not drink enough water. They will admit and even brag about it if you ask them. "Water? That's the stuff you wash with. I never drink it. Don't like the taste." Coupled with a heavy consumption of meat, salt, coffee, alcohol, and soda pop (or any of the above) the "waterless wonder" is bound to suffer distress and discomfort. This includes the kidney damage which he passes on to his children. We must realize that our bodies are made up of 80% water and that this water needs to be filtered and replaced. The delicate tubules which run from the kidneys to the bladder could be pinched through and broken with a fingernail! The amazing apparatus which are our filters and elimination system have the tremendous task of pumping hundreds of thousands of gallons of liquid through them in a lifetime. Why wear them out in a few years through neglect and abuse? It is as though we were throwing a great gift from the Creator into the garbage can with the trash.

Distilled (steam distilled, if available) water is the only water we recommend for herbal teas or drinking. A person should drink about two ounces of distilled water per kilogram of body weight daily. That's about one gallon for the average weight man. If this is done faithfully along with a good diet, there is relatively no chance of contracting any kidney disease. [NL 3-6]

**Kidney Infections:** Kidney infections can be extremely painful. There is the burning sensation when urinating, the dull to excruciating back pain, and the possible retention of urine. There is the low grade fever which accompanies the chronic kidney infection or the high fever accompanying the acute attack. Prevention is the superior cure, but if the infection has already set in, we can use the kidney-bladder formula with parsley tea, or juniper berry tea and, if urination is extremely painful we can drink a demulcent or soothing tea such as marshmallow root or slippery elm. Of course all irritants to the kidneys should be discontinued. [NL 3-6]

**Retention of Urine:** If there is retention of urine, juniper berry tea is the quickest acting diuretic we have known. People who were writhing on the floor in agony from retention of urine have voided in a few minutes after the administration of juniper berry tea. Sometimes, when the urinary tract is loaded with mucus and morbid matter, and has been so for years, there will be a rush for the sludge to get out through the small opening to the outside of the body. If this is the case, elimination should be attempted more slowly and a diluted dose of diuretic tea can be used. Once elimination has started and the tract does become clogged, however, hot fomentations alternating with cold can be used on the kidney and groin area to make elimination possible by breaking up the blockage by increasing circulation to the area. [NL 3-6]

**Kidney Cleanser:** Women who do not have a lot of money to spend on fancy vitamins and food supplements (and even those who do) would do well to take no less than 15 alfalfa tablets daily. Alfalfa is also a well-known kidney cleanser. [NL 3-6]

**Cabbage Leaves for Kidney Disease:** Apply cabbage leaves over the kidney areas and leave on overnight and also for a few hours during the day [NL 4-12]

**Dropsy:** This is a sign that the kidneys are partially paralyzed and are not eliminating the urine sufficiently, so the diuretic agent should be used in combination with a diffusive stimulant (such as Jamaica ginger or Virginia snake root), or even cayenne may be used. [SNH p.242]

See formula using parsley, juniper berries, buchu and flax seed. [SNH p.247]

**Inflammation of the Kidneys:** See formula using wild carrot, pellitory-of-the-wall, uva ursi, dandelion, marshmallow, white poplar and cayenne. [SNH p.265]

**Inflamed Kidneys:** Combine comfrey root with gravel root (*Eupatorium purpureum*) in a decoction. [SNH p.310]

**Nephritis (fomentation):** See formula using marshmallow, wormwood and southernwood. Place a piece of flannel in the liquor, wring it out and apply as hot as conveniently possible over the kidneys. Cover with a thick piece of blanket and change the application when it begins to cool. Repeat for 1 hour and at the same time give an appropriate tea internally. [SNH p.330]

### Testimonials

1. Knowledge by Divine Assistance: I had a personal acquaintance, a Mrs. Hanger, who came here from England in her twenties. She was very sickly; at the time had no children, so her husband (who was a paperhanger and painter) told her to go to the doctor. She did, and when she returned home she was very discouraged and very unhappy, because he told her, "You have a

kidney infection which is a very progressive type and there is nothing we can do to heal it; you will have possibly six months to live."

So she was at home meditating (the house was in Salt Lake City) when she heard a knock at the front door. There stood a bearded man in a gray suit; he said: "Sister Hanger, may I have a glass of water?" To which she replied "Certainly," although she didn't know him. She gave him the glass of water, and he said: "Sit down, I want to talk to you a minute, Sister Hanger," and she wondered then how he knew her name. He continued: "I would like to help you if you would like me to. You have just come from the doctor's and he told you that you have a bad kidney condition. Well, you are from England and you have brought your herbs with you, and you have a little herb garden out in the back in which you have a nice stand of parsley. Now, if you will take a handful of parsley each day and put it into a pint of water, cover and steep it, and drink it in regular doses during the day, it will heal this condition. The doctor told you that you have only six months to live, but I will tell you what you will see; you will see another depression"--and he went on and told her all the things she would see--"and there will be a Third World War, but you won't see this one; it will be after you go." When he had finished the short interview, something momentarily distracted her attention and in that instant he disappeared.

Well, I spoke at her funeral; and it wasn't six months after she was supposed to die, she was eighty-six years old, and she had raised a number of wonderful children. [SNH p.248]

2. Parsley: We have had several students testify in herbology classes as to the value of parsley, among which is the following: "I talked to a man who went into the hospital for infection. He was there six weeks and it was costing \$45.00 a day for the drugs they gave him. Then someone told his wife to take him some parsley. The doctor said, "Well, it won't hurt him, but it won't help him." He was released from the hospital after he had taken it for one day; it had started to drain the infection he had." [SNH p.248]

3. Juniper Berries Saves Pioneer Woman: In N. B. Lundwall's book, Assorted Gems of Priceless Value, there is an attested account by Elizabeth J. Barney, concerning her mother, who was about to die during a pioneer journey (at the beginning of this century) of an apparent kidney ailment. The wagon caravan stopped because of her and made camp for the night, intending to bury the rapidly-declining woman in the morning. A stranger suddenly was seen approaching the camp, and he told the husband (the father of the lady attesting to the account) to go and gather juniper berries and leaves growing in the vicinity and to "mix them together, steep them and give them to your wife and you can be on your way within an hour." Then the stranger said he had to go, and at that moment something drew the people's attention away, and during that instant he disappeared. The prescription was obeyed, the woman revived miraculously, helped prepare the breakfast, and continued on the journey completely healed. So you will find that these herbs will not only repair the body as with a "divine touch," but they restore our faith in the Supreme Maker. [SNH p.253]

4. Marshmallow Relieves Pain from Unvoided Urine: Marshmallow is excellent as a diuretic and kidney healer. One of Dr. Christopher's students, living in the southern part of Salt Lake Valley, had a teenage boy who was continually ridiculing his mother for studying about herbs and becoming a "witch doctor". One day he was brought home from football practice with severe pain in the abdomen, unable to void his urine. He refused to be taken to the hospital from school, asking instead to be brought home. He lay there on the floor screaming in pain and doubled up in a fetus position. He begged his mother, whom he'd ridiculed, to help him. She went out and pulled up some Marshmallow plants, root and all, because fortunately it was just after an irrigation turn and the fields were flooded. When she returned to the house, the boy asked how long it would take for her to make up the tea, as the pain seemed almost more than he could stand. She replied, ten or fifteen minutes. Instinct made him ask her to wash and hand him a Marshmallow root immediately. This she did, and he immediately began to chew on the root. Within seconds, he straightened out, stood up, and headed for the bathroom, voided his urine, and was relieved of the excruciating pain. He never again ridiculed his mother's herbal studies. [UW-Marshmallow]

5. Parsley: Parsley root tea will help remove all stones including gallstones and kidney stones if they are not too large. One doctor who made a trip to Holland was surprised to see medical doctors prescribing Parsley tea for kidney stone and other kidney and related complaints,

including pressure of the prostate. He returned to his practice at home and began prescribing the same remedy with the same good results (Luc:Herbal:89). [UW-Parsley]

6. Kidney Infection Cured by Sage: However, in one case the combination of peppermint and Sage is particularly good. It is used thus for kidney infections, equal parts being made into a tea. The herbs are covered with boiling water, the pan lidded and the tea allowed to stand until cold. One cupful is taken three times daily. One woman reported that she suffered from a kidney infection for more than a year, antibiotics only helping temporarily. She finally had so many treatments of antibiotics that they stopped working entirely. Her son brought home an Oriental friend whose father was an herbalist. He suggested a tea of Sage and peppermint. The next day she began drinking the tea, two cups a day for three months and her kidney infection never returned (Luc:Secrets:127). [UW-Sage]

7. Dr. Christopher's Kidney and Prostate Formulas: (White Mallow and Prospallate) First, I want to thank you for making your herbs and combinations and knowledge available! My husband was suffering from kidney/prostate troubles and had gone to the urologist after the local P.A. was unable to help him. The urologist had him on a sepra which made his health seem to improve for a couple of weeks--then he had the same symptoms all over again and a lot worse. So much so, he stayed home from work for four days, sleeping and very uncomfortable. When he went back to the urologist and had x-rays they weren't able to find anything, told him to go off the medicine and that the urologist felt he would just have to "live with it." He must of thought my husband was off upstairs or something, maybe.

So we went to the health food store for help. Through reading material and the lady there he started on distilled water and KB and PR. He is much better and has been able to do heavy work again. Thank you greatly. [NL 3-4]

#### See Also

[DRI](#): Dr. Christopher's Formula for Bedwetting

[Juni-Pars](#): Dr. Christopher's Kidney Formula

[Prospallate](#): Dr. Christopher's Prostate Formula

[Bed Wetting](#)

[Bladder Ailments](#)

## Laryngitis

### Definition

The inflammation of the mucous membrane lining the voice box with accompanied swelling of the vocal cords with hoarseness or loss of voice.

### Herbal Aids

Garlic: Keep garlic in the mouth constantly during wakeful hours, renewing morning and evening after the cloves have absorbed the poisons; or, use another appropriate garlic preparation. [SNH p.100]

Sage and Vinegar: Use equal parts of the sage infusion and apple cider vinegar as a gargle. [SNH p.234]

Pine: Chicanos and Indians used the charcoal wrapped in a wet cloth as a throat compress for laryngitis. [UW-Pine]

Sage: Sage tea is said to cure laryngitis and to help public speakers who can strengthen their throats and voices by taking a tablespoon of the tea internally just before the meeting starts. [UW-Sage]

Stillingia: Small pieces of the fresh root, chewed occasionally throughout the day, have said to effectively and permanently cure laryngitis and bronchitis. It is good for an ordinary sore throat used the same way. It is "one of the most important of laryngeal remedies, not only relieving irritation of that important organ but proving beneficial in irritative disorders of the fauces, trachea and bronchia. [UW-Stillingia]

Juice: Carrot, pineapple. [NL 3-5]

Cabbage: A Doctor Roques of the eighteen hundreds protected himself and his family for many years against the epidemic winter diseases by eating a daily salad of cooked cabbage. He recommended the following treatment for cold and laryngitis; One pound of strained red cabbage juice, 3 grams of saffron, 1/2 pound of honey and sugar, the whole boiled to a syrup; 1 tablespoonful is taken in a cup of tea 3 or 4 times daily. [NL 4-12]

Garlic: Take the freshly expressed juice mixed with syrup, honey, or other appropriate vehicle. [SNH p.100]

Syrup of Licorice: See formula using licorice, water and yellow D sugar. [SNH p.355]

[Herbal Composition](#): Dr. Christopher's Herbal Composition Power: Herbal composition powder made of bayberry bark, cloves, ginger root, cayenne and white poplar bark. As Dr. Nowell, our instructor at the Dominion Herbal College, Let. of Vancouver, British Columbia gave in our textbook, quote:

"We have made and used composition powder for over forty years. When we state we regularly mixed it in batches of sixty pounds the student will readily see that we have had at least some experience with it. As a remedy in colds, beginning of fevers, flu, hoarseness, sluggish circulation, colic, cramps, etc. We believe it has done more good than any other single preparation ever known to man."

"If this compound were kept in every home, and used as the occasion arose, there would be far less sickness. Give it freely in your practice and your patient will bless you. Look over the ingredients, and consider how it will clear canker, ease cramps and pains in the stomach and

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[Neuritis](#)

[Nightmares](#)

[Nipples](#)

[Nosebleeds](#)

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[Pyorrhea](#)

bowels, raise the heat of the body equalizing the circulation, and remove congestions. It is safe. It is effective. We have on numberless occasions given a cup of composition tea every hour as warm as the patient could drink it, until the patient has perspired freely, and after four or five doses have seen our patient in a free perspiration, thereby removing colds and febrile trouble." [HHH p.189]

**Cabbage Juice:** Cabbage juice mixed with honey makes a syrup that heals hoarseness and coughing. [NL 4-12]

### **Testimonials**

**Opera Throat Formula:** One of Dr. Christopher's students prepared a combination tincture of peppermint and Licorice root for an opera singer who was losing her voice due to laryngitis. She regained her voice in a day's time and was able to practice and perform as required. The student called the formula, "Opera Throat Formula", a simple but very effective combination. [UW-Licorice]

### **See Also**

[Herbal Composition:](#) Dr. Christopher's Herbal Composition Power

## Ailments

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[Miscarriage](#)

[Moles](#)

[Motion Sickness](#)

[Mumps](#)

[Nausea](#)

[Nerves](#)

[Neuralgia](#)

## Leukemia

### Definition

Using Dorland's The American Medical Dictionary (Philadelphia and London: W. B. Saunders Co.):

Leukemia: A fatal disease of the blood-forming organs, characterized by a marked increase in the number of leukocytes and their precursors in the blood, together with enlargement and proliferation of the lymphoid tissue of the spleen, lymphatic glands, and bone marrow. The disease is attended with progressive anemia, internal hemorrhage (as in the retina, etc.) and increasing exhaustion. Leukemia is classified clinically on the basis of (1) the duration and character of the disease--acute or chronic; (2) the type of cell involved--myeloid (myelogenous), lymphoid (lymphogenous) or monocyclic; (3) increase or nonincrease in the number of abnormal cells in the blood--leukemic or aleukemic (sub-leukemic) etc. etc., over three pages of details of the effects. [HHH p.102]

### Cause

We have a different approach--namely going into the cause. Using non-toxic, non-poisonous, non-habit-forming aids to clean up the basic cause of malfunction, we clean the bowel, strengthen and rebuild and purify the blood stream. With the herbal aids (food) we rebuild the nerves, the muscles, bones and tissue by properly feeding these areas with rich herbal nutrients.

The cause of leukemia is based on inherent weaknesses ("sins of the parents to the third and fourth generations"). These weaknesses are sins of commission or omission but these weak conditions can be strengthened and the body rebuilt by using the "Incurable" routine. [HHH p.102]

### Herbal Aids

See the entire section on [Dr. John R. Christophers "Incurables Program"](#). [HHH p.85]

Is There a Natural Treatment for Leukemia? This was a question to Dr. Christopher in his newsletter. His answer: A number of people have been aided in this type problem by following the instructions in the little booklet [The Incurables](#) by Dr. John R. Christopher [HHH p.85]

Dr. Martin Protzel, chief of oral pathology at City Hospital, Newark, has shown evidence that the liver may be degenerated by heavy smoking, heavy drinking and nutritional deficiency. When this organ which the body depends upon to neutralize and eliminate its poisons becomes impaired, cancer may be the result, in his opinion. (Source: The Encyclopedia of Common Diseases, by the staff of Prevention Magazine, Rodale Press, 1976.)

With this statement by Dr. Protzel in mind, it will be easy to see how our booklet [The Incurables](#) works on this problem. We instruct how to clean up and rejuvenate the liver, gall bladder and bowels, using herbs, and how to change the diet to aid the patients to regain their health. [NL 1-7]

Chaparral: Chaparral contains a phenolic compound, nordihydroguaiaretic acid (known as NDGA for short). It is found on the external surfaces of the leaves and stems in all the species of Larrea. NDGA has many uses in industry. It is an antioxidant for foods, especially fats, oils and vitamin A. It stabilizes polymers, lubricants, rubber, perfumery oils and olive husks. It is useful in photography as a developer. NDGA prevents metals from rusting.

NDGA is effective against molds, salmonella and penicillium. There is documentation that NDGA inhibits tumor cell activity in mice and men. This includes leukemia type of tumors. In the

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mice experiments, NDGA combined with Vitamin C was more successful than when used alone. NDGA has been shown to have analgesic (pain relieving) and vasodepressant properties. Experiments on hamsters demonstrated that NDGA somehow inhibited tooth decay and increased the life span of the animals. NDGA is used also in alcoholism treatment, liver disorders and geriatrics. [NL 3-4] Chaparral definitely is indicated in kidney infections, leukemia. [NL 3-4]

Juices: Dr. H. E. Kirschner, M.D. treated people for over 50 years. In his book, Live Food Juices he recounts many fabulous results in his cases of incurable diseases where live juices were used. Some of these diseases were malnutrition, leukemia, failing eyesight, arthritis, bleeding hemorrhoids, obesity, various cancers, kidney disease, bladder tumors ... the list could go on. The doctor states that there could be a table loaded with all types of vegetables and we could still be suffering from malnutrition because our bodies could not possibly eat enough to provide the missing nutriment. With the juices, the pulp is eliminated and we are left with the life-giving vital principles contained within the vegetables. It is, of course, best to use only the organically grown fruits and vegetables (those free of pesticides and preserving chemicals) for our juices. But Dr. Walker states that the detrimental toxins remain in the pulp, and this we can discard. [NL 3-5]

Red Beet: Our common red beet is a highly nutritious plant, The root is an excellent appetite stimulant and is easily digested. The root has been used to treat constipation, liver ailments, dysentery, skin disorders, anemia, menstruation problems, obesity, and nervousness. One therapy for leukemia and tumors is to consume a couple of pounds of raw, mashed beets daily. [NL 4-12]

Periwinkle: Contains two alkaloids, vinblastine and vincristine, which are vital in treating leukemia in children. These two alkaloids also perform a service for the brain, in that they carry more oxygen to the brain than any other herb known thus far, save capsicum. [NL 5-1]

Echinacea; In 1972, Voakin, Denys and-Jacobsen identified an oncolytic hydrocarbon from Echinacea's essential oils, which possess tumor-inhibiting capabilities. These inhibited both Walker carcinosarcoma and lymphocytic leukemia, although it was found to be inactive in lymphoid leukemia. [NL 6-12]

#### See Also

[Dr. John R. Christophers "Incurables Program"](#)

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## Lice

### Definition

Louse - a general name for various degraded parasitic insects; the true lice that infest mammals belong to the suborder Anoplura Capitus, or head louse; P. Corporis, the body or clothes louse; and Phthirus, or crab louse which lives in the hair upon the pubis, and the eye lashes and eye brows. [HHH p.103]

### Cause

The causal organisms of typhus fever, relapsing fever, trench fever, and possibly plague are transmitted by the bites of lice.

Head lice will never stay around the body that is completely healthy, with no toxins or accumulations of mucus. Lice and all body vermin are scavengers and cannot exist long with clean healthy cells. Keep the bowels clean, stay on a mucusless diet, bathe daily, and lice will not appear. [HHH p.103]

### Herbal Aids

General Instructions: When they are present, an infusion of six parts hyssop (*Hyssopus officinalis*), one part walnut leaves or inner bark (*Juglans cinerea*), one half part cinnamon bark powder, one half part cloves powder, one half part lobelia, and one half part ginger (*Zingiber officinale*).

Dosage: 1/2 cup (more or less according to age) three times in a day, taken orally. Make fomentation over the head with the same formula, and in other areas infected; covering the fomentation with a plastic or rubber cap at night. Do this six days a week as many weeks as needed to clear up the condition.

For quick relief (working on the effect) is to bathe the head or body parts covered with lice with straight apple cider vinegar, oil of garlic or walnut (leaf, bark or nut husk) tea.

When lice are detected in the family, see that in addition to working on the cause (cleaning the bowel and blood stream) and staying on a mucusless diet, work on the effect itself as suggested here. See that fresh clothes--inner and outer clothing--are changed daily. All of these clothes should be washed with a good biodegradable soap with a cup or more of apple cider vinegar to each washerful of clothes. Change the bed linen each day. Spray the room with tea made of six parts chaparral, three parts black walnut leaf or bark, one part lobelia and to each pint of the spray add some lavender oil or oil of mint to give fragrance.

We must remember one thing, a clean house and clean body are not to the liking of our scavenger friends, lice, mites, fleas, etc. [HHH p.103]

False Unicorn Root: Use strong decoction as spray or wash. [SNH p.466]

Parsley Seeds: The seeds made into decoction, can be cooled and steeped about seven hours and then rubbed into the hair to clear away head lice and any other such vermin. [UW-Parsley]

### See Also

[Dr. John R. Christophers "Extended Herbal Cleanse" Routine](#)

[Lice](#)

[Neuritis](#)

[Nightmares](#)

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[Dr. John R. Christophers "Mucusless Diet"](#)

## Ailments

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## Liver

### Definition

Enlarged liver, jaundice, liver disorders, inflammation of the liver, torpid liver, cholagogue and cirrhosis of the liver.

### Herbal Aids

Liver Complaints, Enlarged Liver, Dyspepsia etc.: See formula using cascara sagrada and water. [SNH p.176]

Dr. Shook's Liver and Jaundice Compound: Especially good for a torpid liver. See formula using turkey rhubarb, aloe leaf, fringetree, Culver's root, wahoo bark, poke root and nux vomica seeds. [SNH p.186]

Liver Disorders: take about 10 grains of powdered mandrake and 5 grains of powdered cloves (Caryophyllus aromaticus; Eugenia aromatica) in honey. [SNH p.196]

Dr. Nowell's Compound Liver Capsule: See formula using mandrake root, Culver's root, dandelion, gentian, golden seal and cayenne. [SNH p.197]

Inflammation of the Liver: See formula using mandrake root, Culver's root, blood root and dandelion root. [SNH p.197]

Jaundice, Torpid Liver: Culver's root may profitably be used alone 3-5 drops of fluid extract (add cayenne where the pulse is weak); or, it is beneficially combined with positive hepatic stimulants (such as mandrake or bitter root) [SNH p.206]

Liver Secretary and Excretory Problems: See formula using Culver's root, mandrake and ginger. [SNH p.206]

Liver Tonic: See formula using bitter root, Culver's root, white poplar, ginger root, golden seal and cayenne fruit. [SNH p.209]

Liver complaints: See formula using boneset and butternut. [SNH p.227]

Liver problems, jaundiced skin: See formula using lobelia, pleurisy root, catnip and bitter root. [SNH p.363]

Cholagogue (liver): Simmer 1 tablespoonful of hops for 10 minutes in 1 pint of water and drink 1/2 pint morning and evening. [SNH p.396]

Wild Yam: for Liver affections, rheumatic pains, spasms. Take 1 to 3 cupfuls of cold wild yam decoction during the day. Mix this well with saliva, one mouthful at a time. [SNH p.403]

Wild Yam Decoction: Strong decoction of wild yam for hepatic congestion. See formula using wild yam, distilled water and glycerine. [SNH p.403]

Torpid (numb or lacking energy) Stomach and Liver, with Constipation: See formula using horseradish, gentian tincture, dandelion and syrup of orange. [SNH p.423]

Castor Oil Fomentation: to draw out poisons and flush them out of liver etc. In order to get rid of hardened mucus in the body, which may appear as cysts, tumors or polyps, the following fomentation is to be used:

Soak a piece of outing flannel or baby's diaper in castor oil, squeeze slightly so it won't drip

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much, then place over entire frontal torso (neck to groin and side to side). Place a hot water bottle (over the castor oil application) over the liver area (the liver is on the right side just above the waist). It should be noted that a heating pad is not too highly endorsed here, unless a wet towel is placed between it and the skin--but even then, a wet heat (such as the hot water bottle) is best. Leave all this on for 1 1/2 hours; the hot water bottle may have to be refilled with hot water several times, because it cools rapidly. The next three days, over the same area covered by the outing flannel and castor oil, massage in circular motion toward the heart with olive oil for 5 to 10 minutes.

The seventh day is a day of rest, not only from the fomentation, but every part of the program, drinking only water the entire day--and every seventh day thereafter will be done the same way. On the eighth day then, begin again with the castor oil for three days and so forth, along with the mucusless diet, the herbs, etc., until healing is accomplished. In the use of the fomentation, the castor oil goes through the skin into the liver area and lymph glands and starts drawing out the poisons and flushing them out, while the olive oil goes in and helps heal and rebuild new tissue. This procedure may have to be carried on between six weeks to six months to properly clean up the system, depending on the case. [SNH p.525]

[Barberry LG](#): Dr. Christopher's Liver-Gallbladder Formula: To speed up the blood purifying process, it is good to have a good clean liver and gall bladder area. When the liver does not function properly, the bile does not excrete freely into the intestinal tract, and so it passes off into the blood stream and throughout the rest of the system, causing a toxic condition called cholemia, causing indigestion, sluggishness, fatigue, constipation, upset stomach, chills, vomiting and fever. Why wait until it gets to this condition? A combination of barberry (or Oregon grape root), wild yam, cramp bark, fennel seed, ginger, catnip and peppermint--will help promote the relief of this condition.

Suggested dose: 1/3 Cup or one or two capsules or tablets, 15 to 20 minutes before a meal. [HHH p.183]

Castor Oil: This oil can be obtained commercially and is used for the liver fomentation to open the capillaries of the liver. It is an excellent external healing oil for discomforts of windburn and is good for massage. But we never use castor oil internally or for a laxative. [NL 3-2] We often suggest opening up the capillaries of the constipated liver by applying a cotton or flannel cloth which has been soaked in hot castor oil over the area of the liver (on the right side of the body under the rib cage). Place a wet, wrung out hot towel over this cloth and a hot water bottle over that. Keep the fomentation warm for 20 minutes and then alternate with a cold towel fomentation warm for 20 minutes and then alternate with a cold towel fomentation for five minutes. Repeat the hot fomentation and then the cold. This can be continued for about an hour and a half. This has relieved pain of congestion in the liver and other organs such as the gall bladder and the pancreas. [NL 4-5]

Juices for Liver Trouble: Carrot-beet-cucumber, apple, dandelion, grapefruit, lemon. [NL 3-5]

[Cayenne](#): Dr. Christopher's many Cayenne Combinations: There are safer ways to stimulate the gall bladder. One is by taking cayenne pepper orally. This has been reported in medical journals to trip the gall bladder reflex and promote the flow of bile naturally. As we mentioned before, bile is concentrated toxic material recycled by the liver. It acts like a natural laxative. The gall bladder (known in certain surgical circles as "the gold bladder", as we mentioned in an earlier newsletter, because of the tremendous amount of money spent on yearly gall bladder operations), is a reservoir which stores the bile for timed release into the digestive tract where it mixes with other digestive aids. When this organ is removed, the caustic bile drips directly into the duodenum and can cause duodenal ulcers. Dr. Christopher's Liver and Gall Bladder Formula [[Barberry LG](#)], composed of barberry, wild yam, cramp bark, fennel seed, ginger, catnip and peppermint, can help safely promote the rebuilding of the diseased liver and gall bladder and help them to function normally because this formula is a specific food for these organs. The liver is recognized by medical science as a highly regenerative organ. It can rebuild itself even if there is only one-tenth of it functioning. [NL 4-8]

Juice for Cirrhosis of the Liver: Drink cabbage juice and eat raw or steamed cabbage. [NL 4-12]

**Lemon Juice:** Fresh lemon juice is considered by some to be the most potent or effective single liver rebuilder known to man. There seem to be only a very few people who cannot handle lemon juice. [NL 5-1]

**Dandelion Coffee:** Dandelion coffee is a good coffee substitute, although some claim that it is an insult to coffee and to Dandelions too! We like it very much, however. It is quite expensive to buy, but not difficult to make. Dig Dandelion roots and clean them thoroughly. Cut them into pieces and roast them slowly in a moderate oven until they are coffee-colored and crisp. Cool completely and store in a cool dry place, well-stoppered as they prone to infestation by moths and worms, having such a high sugar content. Prepare the coffee by simmering the quantity of roots desired to taste. Strain and add honey and milk or cream if desired. Taken daily, this is an excellent liver tonic as well as pleasant drink. [NL 6-11]

### Testimonials

1. **Carrot Juice:** One of the most common misconceptions regarding carrot juice is that one will start to develop orange or yellow colored skin after steadily drinking the juice because of the carotene content in the juice. This is not true. The development of yellowish skin is due to the fact that carrot juice is a great liver cleanser and the toxicity within the body is coming to the surface. Keep up with the carrot juice and the symptoms will soon disappear. The formerly constipated liver is reconditioned once again to experience a free flow of bile the excess of which is eliminated through our largest eliminative organ, the skin. I have personally experienced this phenomenon during a time when we prepared hundreds of gallons of carrot juice a week for sale. Because the juice was so abundant and available, I drank it for nearly every meal...sometimes instead of meals. My wife soon commented upon the yellow cast which my skin began to take on. I continued drinking the juice, however, and within a week my skin color was back to normal. But my liver had gone through a wonderful cleansing! It is often a surprise to me that the most learned of health authorities will try to sell you the carotene theory without any sort of proof, personal experience or background. [NL 3-5]

2. **Dandelion:** A classic story about the use of Dandelion is often repeated. Around the turn of the century, A Dr. Sparks wrote, "Fifteen years ago I was afflicted with the liver complaint. I used all my skill trying to cure it but failed. I then tried two physicians, Doctors Wilson and Jordan, but without success. An old nurse told me that Dandelion was an effective folk remedy for this disorder, so I decided to try it. Using Dandelion promptly restored me to health. It then became my favorite prescription for liver complaint, either by the simple extract of the herb or by taking a teacupful of a strong decoction of it twice a day. In almost every instance I have succeeded in restoring those who have used this plant." (Lucas:Herbal:35). [NL 6-11]

### See Also

[Barberry LG:](#) Dr. Christopher's Liver-Gallbladder Formula

[Cayenne:](#) Dr. Christophers many Cayenne Combinations

[Gallstones](#)

[Jaundice](#)

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## Lockjaw

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**Lockjaw**

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## Measles

### Definition

A contagious eruptive fever with cold and catarrhal symptoms, due to a filterable virus (germs and bacteria surging out of the body through the skin)-measles is one of nature's methods of housecleaning. (HHH pg.70)

### Symptoms

This is mainly a child's disease, although older people sometimes contract it. It is an infectious febrile affliction, characterized by round red eruptions on the skin, and catarrhal inflammation of the mucous membrane passages. It begins after two weeks incubation with the common cold (coryza), cough, inflammation of the conjunctive (referred to as conjunctivitis), and the appearance of small red spots surrounded by white areas. On the third or fourth day of chills and fever, dark rose-red maculopapular eruptions appear (concentric and confluent groups) on the face or behind the ears. In three or four days the eruption fades, and the skin sheds or peels (including the mucous membranes). Measles begin with sneezing and dry coughing, redness of the eyes and sensitivity to light. The red rash appears on the fourth day. The fever subsides on the sixth day, and peeling continues until the ninth to eleventh days. [SNH p.36]

German measles are not quite so severe as red measles (although, of course, dangerous to a pregnant woman and the unborn child). After an incubation period of one to three weeks, the disease German measles begins with a slight fever and catarrhal symptoms, sore throat, pain in the limbs, and the appearance of an eruption of red papules similar to those of measles but lighter in color, not arranged in crescentic masses, and disappearing--without scaling or flaking--within a week.[HHH p.104]

### Cause

Measles is evidence that the body is loaded with toxic poison and is trying to expel it with the assistance of nature. Microorganisms are brought into activity by nature as the cleansing scavengers. [SNH p.36]

It is alarming to hear a mother say, "When my child was breaking out with chicken pox (measles, or some other childhood disease), he was given some suppressive medication, and only two or three small spots broke out on his body." Here, unknowingly, the parents have gone against nature's procedure for cleaning out the toxins of the body. They have locked in the harmful condition, which may give the body trouble, perhaps many years later. [HHH p.20]

### Herbal Aids

General Instructions: This disease must be brought to the surface through the skin as rapidly as possible. Diaphoretic herbs such as yarrow and raspberry leaf are excellent. Use vapor baths (such as ginger, mustard and cayenne) which bring the toxic wastes to a head quickly. Moisture is required or the organic calcium will turn into inorganic calcium because of the feverish dry body heat, which causes further tissue damage. Rheumatic fever is often the aftermath of diseases such as chicken pox and measles. Take care of the bronchi and the eyes. Avoid bright light, since the eyes are weak at this time. The bowels should be kept open with the lower bowel tonic [Fen LB]. A catnip enema is soothing and beneficial. Ripe fruits will assist in the cleansing process. [SNH p.36]

General Instructions Especially for Children: If the child is slow in breaking out, give a good

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hot bath. It is important to clean out the bowels, so give the patient a warm catnip (tea) enema each day. Put him to bed and give a tea made of equal parts of yarrow, pleurisy root and lady's slipper (use valerian root or catnip if lady's slipper is unavailable). Give this tea freely to produce perspiration which will also lower the fever. (Red sage, red raspberry leaf or camomile teas are also excellent for a patient with measles.) Also, a pleasant herbal tea made of equal parts catnip, raspberry leaf, peppermint leaf, can be given freely throughout the day. It is best to keep the room dark so that the eyes will not become irritated. In the event the child's eyes do become sore, bathe them two or three times a day with a solution (tea) made of equal parts of eyebright, raspberry leaf, and golden seal. If the child complains of itching, bathe or sponge the skin with a tea made of yellow dock and burdock root and/or golden seal. Adding a little apple cider vinegar to a tub of bath water is also helpful. Guard the patient against bronchial troubles and earache and have him drink plenty of liquids (distilled water, herbal teas, as recommended, and fruit juices). The diet should be simple--plenty of fresh ripe fruit, fruit juices and fresh vegetable juice. One very good combination is carrot juice with celery, spinach and parsley juice added to taste. [HHH p.105]

Tansy Infusion: Use the infusion or decoction as a wash, etc. [SNH p.123] See formula for infusion using tansy and distilled water. [SNH p.124]

Bistort: Bistort decoction, powder, etc., is very cleansing, astringing and toning; also combine equal parts with red raspberry leaves (*Rubus idaeus*). [SNH p.162]

European Pennyroyal: Give the infusion in teacupful doses, repeated frequently (every 1-2 hours), and when the herb is unavailable, 1-3 drops of the oil in warm water is excellent. [SNH p.283]

Valerian for Restlessness in Measles: Give small doses of Valerian infusion 2 to 3 times daily. A sound sleep will generally result. [SNH p.377]

Golden Seal Wash: Use as a wash the formula using golden seal and linseed oil. [SNH p.439]

Yarrow: If you give the tea to children during the early stages of eruptive diseases, such as measles, chicken pox, smallpox, etc., the tea will help the disease to break out more quickly and thus shorten the time. Dr. Christopher recommended a mixture of Yarrow, pleurisy root and lady's slipper (or skullcap) for the measles. Anytime there is a fever, no matter what the disease, Yarrow can help break it and bring the disease to a speedier ending. [UW-Yarrow]

#### See Also

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## Meningitis

### Definition

Any infection or swelling of the membranes covering the brain and spinal cord. It is usually pus-forming and involves the fluid of the brain and spine in the space between the membranes that cover the brain.

### Symptoms

There are certain late complications of head injury which may be of serious import. Of these the most frequent are the occurrence of late bleeding, meningitis and brain abscess.

Concussions may give rise to nothing more than the sensation of giddiness and slight headache of short duration. The patient may, when recovering from a stunning blow, feel nauseated and vomit. Persistent vomiting after a head injury is always a serious sign. ... Should meningitis or brain abscess develop the patient shows a temperature rise. In meningitis the headache is intense and the patient is often sensitive to light. [NL 2-1]

### Cause

Spinal meningitis may be caused by extension from the meninges of the brain, as in cerebrospinal fever, or occur independently, when the cause may be a penetrating or other injury, or infection. [NL 2-1]

### Herbal Aids

Anal Use of Lobelia and Catnip: Add lobelia to a catnip enema. [SNH p.362]

Lobelia is helpful in meningitis, hepatitis, peritonitis, nephritis, etc. (Malstrom:94). Used in very small doses, frequently given it can raise a vigorous perspiration, being a diaphoretic, after which a long sleep of ten to twelve hours often follows. When the patient awakes, he is either cured of his illness or feels greatly improved (Thomson: 138). [NL 6-9&10]

Echinacea: It was used in cases of cerebrospinal meningitis because of its pain-relief and because this malady is caused by general sepsis. Prof. Webster, an early practitioner who used it in these cases, asserted that as a stimulant to the capillary circulation, no remedy is comparable with it, and it endows the vessels with a recuperative power or formative force, so as to enable them to successfully resist local inflammatory processes due to debility and blood deprivation. [NL 6-12]

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## Menopause

### Definition

The end of menstruation.

### Herbal Aids

See formula using squaw vine, white poplar, American pennyroyal, Mexican damiana and Beth root. [SNH p.280]

See formula using blue cohosh, lady's slipper, hyssop and chestnut leaves. [SNH p.293]

See formula using true unicorn, lady's slipper and black cohosh. [SNH p.290]

Is there danger of overdosing with estrogen herbs for menopause as is known to happen with manufactured birth control pills which sometimes cause clotting because of the excess estrogen? Question to Dr. Christopher in his Newsletter. His answer: No. Herbs are assimilable and any part unused is dispelled naturally. The inorganic preparations are accumulative, causing the side- and after-effects. [NL 1-5]

[Changease](#): Dr. Christopher's Herbal Hormone Formula: A hormone estrogen herbal combination consisting of: black cohosh, sarsaparilla, ginseng, blessed thistle herb, licorice root, false unicorn root and squaw vine.

These are natural herbal foods that are needed by both men and women of all ages. Since they are natural, the body can accept, assimilate and use those materials that are needed to produce estrogens and other hormones naturally. This formula will help assist in rebuilding the weak malfunctioning areas and help keep the organs healthy so they can supply the proper amounts of hormones and estrogens themselves. Herbs are a natural food, so they do not have "side effects" and "after effects" as are so evident in man-made and synthetic drugs.

The recommended dosage is a cup of the tea (one teaspoon of tea to cup of hot water) or two #0 capsules, both a.m. and p.m. (or more often if needed) six days a week as long as necessary to get the desired results. This herbal combination is a great blessing during puberty; and again a boon to womankind right after a baby is born in order to replace the estrogens and hormones used during pregnancy.

One of the most appreciated times for this formula's use is during menopause. Many older women claim they have found relief from hot flashes--and other menopause problems, after using this formula. The recommended dose would be a cup, two or more times a day, as needed, or two capsules or tablets instead of the cup of tea. [NL 1-7]

### Testimonials

Dr. Christopher Helps Menopausal Woman: Dr. Christopher recalled the case of a lady in Vancouver, B.C. She was climbing the wall with nervous tension due to menopause. Her hot flashes were driving her almost insane. When she would throw off the covers at night, her husband would get cross, and she was keeping him awake at night as she would get up and down with discomfort of hot flashes. She was using estrogen, but she felt it was doing her more harm than good, so she asked Dr. Christopher for help.

He put her on the [three-day cleanse](#) and [mucusless diet](#), and she suffered for a time from extreme withdrawal symptoms from taking the commercial hormones. She took the female corrective formula [[Nu Fem](#)], two or three capsules, three times a day, and the hormone-estrogen formula

[[Changease](#)], using those three capsules, three times a day. After a short time, she came to Dr. Christopher and said that her whole life had changed. She could sleep all night, without throwing the covers off. She didn't have the nervous screaming jags as she had before, and her husband fell in love with her again. She felt that it was worth the dietary change and the effort to take the herbs to make this difference. [EWH p.170]

**See Also**

[Changease](#): Dr. Christopher's Herbal Hormone Formula

[Nu Fem](#): Dr. Christopher's Herbal Aid for Female Reproductive Organs

Entire chapter on Menopause in Every Woman's Herbal p.167. [EWH p.167]

[Dr. John R. Christophers "Three Day Cleansing Program"](#)

[Dr. John R. Christophers "Mucusless Diet"](#)

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## Ailments

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## Menstruation

### Definition

Amenorrhea: menstrual obstruction resulting in the absence, delay, retardation, or suppression of menstruation. [SNH p.275]

Menorrhagia: profuse menstruation or menorrhagia, resulting from too frequent or too excessive menstrual flow, or continuing longer than normal, with accompanying symptoms of lumbar pains, bearing down in the abdomen, possible nervous irritation, constipation frequently, etc. [SNH p.275]

Dysmenorrhea: Painful menstruation or dysmenorrhea, a condition of weakness in the generative organs from colds and general body weakness, with accompanying severe pains at the time of menstruation in the abdomen, loins and back. [SNH p.275]

### Herbal Aids

Painful Menstruation: Use a decoction of Jerusalem Oak. [SNH p.116]

Excessive Menstruation: See formula using raspberry leaves, prickly ash, blue cohosh, wild yam and cinnamon. [SNH p.145]

Menstruation (decreases or regulates flow): Use the diluted decoction of bistort as a douche. [SNH p.162]

Dysmenorrhea (painful menstruation): See formula using squaw vine, red raspberry, uva ursi, golden seal and white poplar. [SNH p.279]

Dysmenorrhea (painful menstruation): See formula using squaw vine, red raspberry, rue, white pond lily, black cohosh, uva ursi, ginger root, camomile and spearmint. [SNH p.280]

Amenorrhea (suppressed menstruation): See formula using pennyroyal, motherwort, blue cohosh, life root and thyme. [SNH p.285]

**Note of caution: Rue is a potent healer, but in large doses it has powerful ecboic and abortifacient action that can be most detrimental to the health and life of the user (producing inflammation and nerve derangement), so care must be taken to use the appropriate and indicated dosage. If there is any doubt as to whether or not the delay in menstruation might be conception, avoid rue and use another safe emmenagogue. Never use rue during pregnancy. [SNH p.295]**

SYRUP OF MOTHERWORT : (delayed menstruation): See formula using motherwort, distilled water and sugar. [SNH p.299]

Amenorrhea (suppressed menstruation), Female Weakness: See formula using motherwort, camomile, blue cohosh, golden seal and ginger root. [SNH p.300]

Dysmenorrhea (difficult or painful menstruation): When taken hot, Valerian will promote menstruation. [SNH p.377]

Dysmenorrhea (difficult or painful menstruation): See formula using cramp bark, squaw vine, white poplar, unicorn, beth root, blue cohosh, pennyroyal, sacred bark and allspice. [SNH p.394]

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**General Instructions for Painful Menstruation:** If you happen to suffer from menstrual cramps, try some of the following. Catnip tea is a great pain reliever and general relaxant. Take it sweetened with honey, nice and hot. It can also bring on delayed menstruation. Another favorite for these uses is camomile tea. Sometimes, if you have enough camomile around for this purpose, you can make a very strong brew and add it to a hot bath for pain relief and relaxation. Basil, marjoram, and thyme--the common kitchen friends--make up into relaxing and pain-relieving teas. Hot ginger tea can bring on a delayed period and relieve cramps. [EWH p.2]

**Foods for Irregular Menstruation:** Beets, corn, lettuce, peas. [NL 4-12]

**Ginger for Suppressed Menstruation:** A hot cup of Ginger tea is said to be an excellent remedy for suppressed menstruation. It has an agreeable, warming feeling which is so grateful in this condition. Dr. Christopher used Ginger alone, with amazing results, in the treatment of menstrual cramps. It can also be used as a catalyst with black cohosh to bring the cramps to a timely end. [NL 7-3]

**Nu Fem:** Dr. Christopher's Herbal Aid for Female Reproductive Organs: This is an amazing combination of herbs to aid in rebuilding a malfunctioning reproductive system (uterus, ovaries, fallopian tubes, etc.). Over the years herbalists and patients have seen painful menstruations, heavy flowing, cramps, irregularity, etc., that have been helped and the patient now has a painless menstrual period, good menstrual timing, and a new outlook on life by using these aids to readjust the malfunctioning areas. The female corrective formula consists of golden seal root, blessed thistle, cayenne, cramp bark, false unicorn root, ginger, red raspberry leaves, squaw vine, and uva ursi. Recommended dosage is one cup or 2 capsules morning and evening or three times a day if desired, six days a week for as long as required to get results desired. We have seen many severe cases who have had many years of suffering cleared up in ninety to 120 days. Some get relief sooner, some take longer--no two cases are alike. This is a food to rebuild the malfunctioning organs. [HHH p.190]

**Teens:** A girl approaching puberty should drink a cup (or more) of red raspberry leaf tea daily and the same of blessed thistle tea. These supply the estrogen materials her body will require. Continue to drink these throughout the teenage years. They taste pleasant, and you can sweeten them and cool them in the refrigerator for a healthy substitute for soft drinks. [EWH p.2]

### Testimonials

1. **Ten Dollars of Herbs Solves Ten Year Old Problem:** One woman in American Fork, Utah, was having difficult periods. These had started in puberty, and she had spent the whole of her adult life traveling from coast to coast, averaging a cost of over \$1,000 a year for ten years, paying medical doctors to tell her what was wrong. She suffered vicious menstrual cramps and extremely long periods. No one was able to help; she was very discouraged; but one of her neighbors said, "Why don't you go to the next town, to Orem, where a man called Dr. Christopher lives? He could give you some help."

When she arrived, Dr. Christopher read her eyes, noting that she did have problems with the reproductive organs. He told her to start on the female corrective formula [[Nu Fem](#)] and the hormone and estrogen formula [[Changease](#)] (which consists of black cohosh, sarsaparilla, ginseng, blessed thistle, licorice root, false unicorn root, and squaw vine). He promised her that if she would follow through, within 90 to 120 days she would get results. Within 120 days, she came back, saying that she was on a 28 day cycle, with no menstrual pains. She was delighted! Where she had spent over \$10,000 traveling from doctor to doctor, it cost her approximately \$10 for the herbs to cure her. [EWH p.15]

2. **Twice Monthly Menstrual Cycle Made Normal:** We had a young lady who had a great fear of marriage. She would have menstrual periods every two weeks or so and be in bed 6-7 days each time. She was weak, anemic, and could hardly sit up in bed. We simply used the Lower Bowel Tonic [[Fen LB](#)] to clean out the defilement in her bowels, then put her on the Cleansing Program, the Regenerative Diet and emmenagogue herbs, and within just six weeks she was feeling wonderful and looking beautiful. She gained weight, took on the glow of health, and was the happiest girl in the world. Not long after this, she got married and later entered motherhood normally with a bouncing baby. These herbs have great power in bringing order and strength to the generative system wherein there may be a fruition of life in both the mother (or father) and the prospective child (embryo). [SNH p.285]

**See Also**

[Changease](#): Dr. Christopher's Herbal Hormone Formula

[Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula

[Nu Fem](#): Dr. Christopher's Herbal Aid for Female Reproductive Organs

## Ailments

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## Migraine

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## Miscarriage

### Definition

An end of pregnancy before the 20th week and occurring by itself.

### Herbal Aids

Preventative: Drink the raspberry leaf tea with a little Composition Powder [[Herbal Composition](#)] in it. [SNH p.143]

True Unicorn Root: is a very valuable tonic, especially beneficial and healing to the female regenerative organs. It is a good general tonic, and it has proved especially effective for female cases of habitual miscarriage due to chronic weakness. It may be safely used during the entire period of pregnancy. Due to its powerful uterine stimulative properties, it has proved valuable in cases of sterility and impotence (sometimes achieving healing results within a few weeks; but the more difficult cases must be given for a few months); but as it increases the possibility of conception, it should be avoided where frequent pregnancy is undesirable. True unicorn root is soothing to the gastric area, and is especially useful where the stomach is upset in pregnancy. It resembles false unicorn. [SNH p.288] See dosages [SNH p.288]

Uterine Tonic, to Prevent Miscarriage, to Ease Cramps and Pains: Wild yam relaxes the muscular fibers, soothes the nerves, and gives positive relief from pains, especially those associated with bilious colic, gall stones, and uterus. It is of great value in nervousness, restlessness, nausea, and pains that are common to pregnancy. Wild yam has a potent tonic effect on the uterus when taken throughout the period of pregnancy. It is excellent for relieving the trying cramps during pregnancy (especially during the latter stages), and will greatly assist in preventing a miscarriage. [SNH p.402] See formula using wild yam, squaw vine, false unicorn and cramp bark. [SNH p.404]

Tendency to Miscarriage: See formula using American colombo, true unicorn root, golden seal, squaw vine and orange peel. [SNH p.436]

When ordering false unicorn root, be sure to distinguish it from true unicorn (*Aletris farinosa*), or else you will not get the therapeutic results you desire. The powder or fluid extract is generally very readily obtained, but few stores ever carry the root itself. [SNH p.466]

Danger of Miscarriage, Uterine Hemorrhage: Give false unicorn copiously, by the quart. [SNH p.466]

Pre-delivery, Preventative in Miscarriage: Drink 1 cupful false unicorn every 1/2 hour. [SNH p.466]

[False Unicorn & Lobelia](#): Dr. Christopher's Anti-Miscarriage Formula: False Unicorn, 3 parts, and Lobelia, one part, constitute this combination. Unless otherwise specified, teas are always made with one teaspoon of herbs to a cup of distilled water (if obtainable). If hemorrhaging starts during pregnancy, stay in bed, use a bed pan when needed, and use 1/2 cup of this tea each 1/2 hour until bleeding stops, then each waking hour for one day, while in bed as much as possible and then three times in a day for three weeks. If bleeding continues instead of decreasing, see a doctor. [SNH p.532] Lobelia is also an important herb in the anti-miscarriage formula. It will do such wonders as seal up a tear in the bag of waters in an instance of a threatened miscarriage. [UW-Lobelia]

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Squaw Tea (for strengthening the uterus and preventing miscarriage): See formula using both root, star root, black haw, squawvine and squawweed. [NL 3-8]

For Threatened Miscarriage: (1) 2 oz. wild yam, 1 oz. coltsfoot. Boil in 1 ½ quarts water for 20 minutes. Take 1 tsp. in a cup of water 3-4 times a day. (2) 1 part black haw, 3 parts false unicorn root, 1 part lobelia. Boil 3 oz. herb in 1 ½ quarts water for 20 minutes. Take 1 tablespoon in water 3-4 times daily. Supplement any treatment with 2000 IU Vitamin E until the danger is passed. [NL 3-8]

### Testimonials

1. **Saved Both Babies:** In our offices in Evanston, Wyoming, a few years ago, we had two cases at the same time from different sides of town. In each of these cases, the women still had a long time before delivery and they were both hemorrhaging. We administered false unicorn, and saved both babies. In one of these cases, the problem was so serious that the doctor said he would scrape the uterus in the morning, for (according to his training) the baby could not live. When he came the next morning, the woman was all right and the baby was delivered a couple of months later. [SNH p.466]

2. **Lobelia the Thinking Herb, Helps Abort Six-Week Dead Fetus Easily:** This combination can also help pass a dead fetus. How does it work in both cases? The lobelia in the formula is a thinking herb. Where the baby is strong, as in the above cases, the lobelia seems to have the knowledge to assist in healing a tearing and bleeding condition and stopping the bleeding. But if the baby is dead and should be aborted, the lobelia has the intelligence of directing the abortion. For example, a lady in American Fork, Utah, became pregnant, but started miscarrying in the fourth or fifth month. Dr. Christopher was out of town, but one of his students came over to give her some help. She brought about five other ladies from the class. They all brought false unicorn with them, but one of them remembered the lobelia. They mixed it together, and gave the woman the tea every half hour. Instead of the bleeding receding and eventually stopping, the bleeding got worse. Five of the ladies got scared and didn't know what to do, because this was new to them, but the sixth lady (the one who brought the lobelia) said, "The doctor said that if the bleeding gets worse, then we have to rush her to the hospital immediately." They called the American Fork Hospital and asked them to prepare a bed for her. They put her in the car and took her to the hospital, which wasn't very far away. When the doctor had her on the table, she started to abort the baby. The doctor gasped, saying, "That baby is dead, and has been dead about six weeks. I have never seen a baby abort itself like this; you must have been using something special." The lady told him she was using an anti-abortion formula. The doctor said, "I'd like to know what it is, but I don't dare, because I would be in trouble if I used it with any of my other patients. But don't forget what this formula is, and remember to use it whenever needed." This formula saved the lady from a stressful D&C, quite a blessing to her. [EWH p.47]

3. **Dr. Christopher Saves Unborn Baby:** Dr. Christopher was lecturing in a large city when a young man came up to the podium to shake his hand; he nearly shook the Doctor's hand off! He said he had been trying to catch up with the Doctor for a long while. His mother had told him that one night, when the weather was fifty below zero, the Doctor had traveled forty miles to their home. The mother was aborting, ready to lose her baby. The Doctor had given her some herbs and saved the baby--and the young man was that baby! He was about twenty-five years old. He said, "I enjoy life. I love you, sir, and I had to thank you". [UW-Lobelia]

4. **Lobelia to the Rescue Again:** Dr. Coffin used Lobelia extensively in his obstetrics practice. He used Lobelia and yarrow combined to stop threatened miscarriage, as well as using the herb itself during childbirth. He described the case of an Irish girl, unmarried, who was unfortunately pregnant. She had been in labor three days under the direction of a physician who considered the case so desperate that he recommended breaking open the infant's skull, extracting the brains, and then pulling out the remainder of the child. He had planned this operation for two o'clock that day. The girl called for Dr. Coffin, who found her lying on a pallet of straw on the floor, totally exhausted. The head of the child had advanced into the pelvis, where it was completely wedged and had been so for two days. Dr. Coffin gave her a strong dose of red-raspberry leaf tea together

with a half-teaspoonful of cayenne; in fifteen minutes he gave her tincture of Lobelia by the teaspoonful. In about one hour the contractions began to increase, the girls strength returned, and in two hours from the time Dr. Coffin had arrived, the child was born, healthy and strong. In this case the Lobelia did not make her vomit at all, although she took enough to have vomited three times over, the doctor commented. He called Lobelia and red-raspberry leaf tea the greatest midwife in the world. Needless to say, the other doctor in attendance was astounded; he said, "Good Good--the child is born?" [UW-Lobelia]

5. Letter to Dr. Christopher: In the past 20 years I have had a history of nine miscarriages. I have three children ages 20, 19, & 14. All the miscarriages took place in the 2nd and 3rd months. Also with the three children I have, I was in bed most of the first 3 months with spotting and threatened miscarriage.

Since I have been taking female corrective herbs [[Nu Fem](#)] and others for general building of health, I have become pregnant again. I am now 5½ months along and have not been down at all. The first 3 months if I felt any cramping I took the False Unicorn, Lobelia combination and the problem went away.

Also, during the first trimester of this pregnancy, we did quite a lot of traveling, attending 2 conventions in the mountains where I did a good amount of hiking which I never could have done. Because of my age of 41, I am at a disadvantage, but thanks to the herbs I feel better than I ever have.

I had a miscarriage last Spring just before I knew about the False Unicorn, Lobelia combination. I started taking the combination during the miscarriage and had the easiest miscarriage that I ever had.

Thank you very much for sharing your knowledge in this field. I know of many others that are being helped by the natural method that God has given to us. P.S. The writer now has a cute little girl. Editor. [NL 2-2]

#### See Also

[False Unicorn & Lobelia](#): Dr. Christopher's Anti-Miscarriage Formula

[Nu Fem](#): Dr. Christopher's Herbal Aid for Female Reproductive Organs

[Pregnancy](#)

## Moles

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See [Warts & Moles](#)

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## Motion Sickness

### Definition

A condition caused by uneven or rhythmic motions in any combination of directions.

### Symptoms

Nausea, vomiting, dizziness and headaches.

### Herbal Aids

Dr. Christopher's Anti-Nausea Formula: Use the anti-nausea formula, which is 1 ounce each of the following herbs: powdered cinnamon, powdered cloves, and powdered nutmeg. Simmer in one pint of water five to ten minutes. Do not boil, pour this decoction over four ounces of spearmint leaves and steep for twenty minutes. Strain, sweeten with honey and use from a teaspoonful to a tablespoonful or more as needed. The [Ant-Plg](#): Dr. Christopher's Immune System Support Formula may also be used. This is good for car, plane, or boat sickness; in fact, for most any motion sickness. It is also good for nausea from pregnancy, etc. You may find the relaxase formula [\[Relax-Eze\]](#) to be helpful also. [NL 3-1]

Another Anti-Nausea Formula: Here is an anti-nausea formula we have used throughout the years for morning sickness: ½ oz. Turkey Rhubarb (powdered), ½ oz. powdered cinnamon, ½ oz. powdered cloves. Simmer on low heat for about 10 minutes. Pour over 1 oz. spearmint leaves. Let it steep. Strain and drink by the teaspoonful or by the cupful. This formula can also be used for nausea other than morning sickness; in motion sickness, for example. A small thermos bottle will hold enough for an automobile trip. [NL 3-7]

Ginger Root: "The R.P. Scherer Survey of Health and Nutrition Literature reports that ginger root, long considered an effective aid for gastrointestinal distress, is equally effective for the relief of motion sickness," as noted in the Natural Foods Merchandiser, July 1982.

"Thirty-six subjects with a high susceptibility to motion sickness participated in a study conducted by researchers Daniel Mowrey and Dennis Clayson. Half the group was given ginger root, the other half Dramamine or a placebo. All the subjects were placed in a tilted rotating chair for up to six minutes in an attempt to induce gastrointestinal discomfort. The subjects given ginger root were able to stay in the chair the full six minutes, while not one person given Dramamine or the placebo was able to stay in the chair for the full time." [NL 3-10] The Ginger seems to work in the gastrointestinal tract to prevent nausea; one or two capsules every few hours should help [NL 7-3]

### See Also

[Ant-Plg](#): Dr. Christopher's Immune System Support Formula

[Nausea](#)

[Relax-Eze](#)

[Neuritis](#)

[Nightmares](#)

[Nipples](#)

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## Mumps

### Definition

A contagious childhood disease with inflammation of the glands around the tonsils and salivary glands. [HHH p.108]

### Symptoms

After an incubation period of about three weeks, the symptoms appear with fever, headache, and pain beneath the ear. Soon there develops a tense, painful swelling in the parotid region, which interferes with chewing and swallowing (both actions become very painful). After a few days to a week the symptoms gradually disappear. Sometimes the submaxillary and other salivary glands are involved, and occasionally the testicles become swollen. [HHH p.108]

### Cause

Mumps are the result of toxic mucus accumulations in the body. [HHH p.108]

### Herbal Aids

General Instructions: As quickly as evidences of mumps present themselves, use a fomentation of three parts mullein herb and one part lobelia around the neck and swollen area. Cover this with plastic and a cloth or towel over the plastic to be more comfortable and also to hold in the heat. Replace fomentation each half hour or each hour for the day and leave it on all night.

In addition to using the fomentation on the neck area, also have the child drink a half cup (more or less according to age) of the mullein and lobelia [[Mullein & Lobelia](#)] tea, three or more times a day. [HHH p.108]

With mumps, as with all fever diseases, use the fever routine as explained [[Fever](#)].

See formula using raspberry leaves, bayberry bark and ginger. [SNH p.147]

Mullein: Apply a fomentation as hot as possible on the swollen glands, wrung out of a tea made from mullein leaves; also the fresh leaves soaked in apple cider vinegar may be applied. [SNH p.317]

See formula using mullein, lobelia and cayenne. [SNH p.318]

Mumps (poultice): See formula using mullein and camomile flowers. Apply as warm as possible without inconvenience, cover well and change the application when cool. Repeat until the swelling is relieved. Give the patient stomach bitters of raspberry leaves (*Rubus idaeus*) or bayberry bark (*Myrica cerifera*) which are excellent for cleansing the stomach and removing canker from the digestive tract. [SNH p.320]

Lobelia: Lobelia is said to be an excellent herbal aid (and preventative) for infectious diseases. Since most fevers result from obstruction in some part of the system--usually the digestive tract, we have found--Lobelia "locates" and removes the obstruction. We have seen this happen many times with children; they begin to sicken, and you can tell there is something congesting their system. By removing that congestion, you remove the cause of the illness. Lobelia can be used as an enema to remove congestion from the body via the colon. When Lobelia causes vomiting, Malstrom claims, it usually signals a cleansing process in the body

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expelling debris that cannot be expelled in any other way (Mal:94). He considers it an effective remedy in scarlet fever, measles, whooping cough, mumps, and other contagious diseases. It gives almost immediate relief from suffocating mucus and phlegm that has accumulated in the respiratory tract and which is often associated with these diseases (Rose:Herbs:77). [UW-Lobelia] Lobelia is used in the case of mumps; when catnip enemas and Lobelia are given, mumps usually have very little effect on males, although there is usually concern when males contract the disease. The illness will disappear, after mild symptoms, within five days (Mal:14).

[UW-Mumps]

[Mullein & Lobelia](#): Dr. Christopher's Glandular Formula: Through the accumulation of toxic waste in the body from improper diet, poor blood stream and sluggish circulation of the blood system the glands become congested and infected, and swell up to cause much pain and misery. (There are glands that swell on the neck, breast, groin, under arm pits, etc.) Make a tea of three parts mullein and one part lobelia herb and use as a fomentation over swollen or malfunctioning glands. Leave on all night (covering fomentation with plastic), six days a week until relief is obtained. Use a fresh fomentation as warm as possible each night.

This can be used as an aid to relieve mastitis, thyroid malfunction, etc., etc. In addition to the external fomentation, also drink a cup of this tea two or three times in a day or take two of the capsules or tablets with a cup of steam-distilled water. [HHH p.187]

#### See Also

[Mullein & Lobelia](#): Dr. Christopher's Glandular Formula

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## Nausea

### Definition

Any feeling of discomfort in the stomach region, with aversion to food and a tendency to vomit. [SNH p.37]

### Cause

The problem has a number of origins, such as bilious attacks, pregnancy, undigested food, etc. [SNH p.37]

### Herbal Aids

General Instructions: With some people, the discomfort can be cleared up quickly by chewing hard, common cloves. With others, it takes something a little more potent such as catnip, peach leaves, peppermint, raspberry leaves, spearmint or sweet balm. A few drops of tincture of lobelia or antispasmodic tincture [[Antsp Tincture](#)] is very good. A combination of cinnamon, cloves, spearmint, and Turkey rhubarb will bring good results when used as prescribed later in the book. [SNH p.37]

Nausea, Vomiting (especially during pregnancy): See formula using Turkey rhubarb, spearmint, cinnamon and cloves. [SNH p.187]

Vomiting and Nausea of Pregnancy: Use spearmint tea alone, or for an excellent combination, see [SNH p.239] formula using spearmint, cloves, cinnamon and turkey rhubarb. [SNH p.240]

European Pennyroyal: Give the infusion in teacupful doses, repeated frequently (every 1-2 hours), and when the herb is unavailable, 1-3 drops of the oil in warm water is excellent. [SNH p.283]

Strong Decoction of Wild Yam: See formula using wild yam, distilled water and glycerine. [SNH p.403]

Nausea in Pregnancy: See formula using cloves powder and white poplar or quaking aspen bark powder. [SNH p.422]

Golden Seal: Golden Seal is said to alleviate nausea during pregnancy, combined half-and-half with ginger and put into capsules, to be taken with spearmint tea every few hours. This is one of the few applications of Golden Seal during pregnancy because of its possible overuse and toxicity. [UW-Golden Seal]

Peach: Peach bark is most well-known for its action against diarrhea. An infusion or a few capsules are said to stop cases of difficult diarrhea almost immediately. However, if the system is constipated Peach tree leaves are an excellent, gentle laxative. Evidently the medicine regulates the eliminatory tract whatever the problem.

This balancing effect may explain a very important use of Peach bark; the relief of the nausea and vomiting of morning sickness in pregnancy. Anyone who has suffered this problem will be glad to know of a possible Peachy solution. Two to four tablespoons of the tea are to be taken first thing each morning and the same dosage continued if necessary every one to two hours. The tea may prepared the night before and refrigerated, reheating in the morning to take first thing. Dr. Eric Powell of England pointed out that if some do not respond to the infusion they usually react

positively and immediately to the fresh plant tincture of the bark, the dose of which is about five drops in a little tepid water (Luc:Herbal:163-4). [UW-Peach]

[Dr. Christopher's Anti-Nausea Formula](#): Use the anti-nausea formula, which is 1 ounce each of the following herbs: powdered cinnamon, powdered cloves, and powdered nutmeg. Simmer in one pint of water five to ten minutes. Do not boil, pour this decoction over four ounces of spearmint leaves and steep for twenty minutes. Strain, sweeten with honey and use from a teaspoonful to a tablespoonful or more as needed. [Ant-Plg](#): Dr. Christopher's Immune System Support Formula may also be used. [NL 1-3]

### Testimonials

**Red Raspberry During Pregnancy:** Dr. Christopher recommended taking at least a daily cup of Red Raspberry tea throughout pregnancy. He said that in addition to its good effects on the uterus it is also anti-nausea. A woman who was expecting her ninth child often experienced nausea during pregnancy. When she suspected that she might be pregnant again she began taking the tea even before she began to feel morning sickness. She never experienced any discomfort so she wondered if it might just be an unusual or unhealthy pregnancy, so she discontinued the tea. Not long after she began to feel nausea! She quickly began to take the tea again and felt no discomfort since then. [NL-Red Raspberry]

### See Also

[Ant-Plg](#): Dr. Christopher's Immune System Support Formula

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture

[Motion Sickness](#)

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## Nerves

### Definition

Anything affecting the nerves such as raw nerves, epilepsy, hysteria, stress, etc.

### Herbal Aids

Raw Nerves: Where the nerves are raw, the following herbs are excellent: catnip, peppermint (hot), rosemary herb, skullcap, spearmint, wood betony, and since plenty of rest is needed, any of the foregoing herbs along with hops tea is very soothing and will produce sleep. [SNH p.27]

Relaxing Nervine (headache, neck, shoulder and muscular tension, irritability, nervousness or raw nerves, sleeplessness, female organs): See formula using camomile, white poplar, false unicorn, lady's slipper, lobelia and ginger. [SNH p.220]

Hysteria (relax nerve tension, soothe and tone nerves): See formula using lady's slipper, skullcap, ginger and raspberry leaves. [SNH p.385]

Spinal Nerves and Epilepsy: See formula using golden seal, hops and skullcap. [SNH p.440]

Relax-Eze: Dr. Christopher Nerve Herbal Food Combination: See formula using black cohosh, cayenne, hops, lady's slipper, lobelia, skullcap, valerian, wood betony and mistletoe. With this tonic you will begin to feel stronger in just a matter of a very few days because it will rebuild frayed nerves and sheath on the nerves. For a person having difficulty in sleeping, take 1/2 to 1 cup of hops, valerian, or skullcap (any of these alone in tea form or the three mixed together), and these will relax the nerves. [SNH p.525]

Relax-Eze: Dr. Christopher Nerve Herbal Food Combination: Here is a formula we have used with great success for well over thirty years. It is used for relieving nervous tension and insomnia; it is mildly stimulating and yet lessens the irritability and excitement of the nervous system and also lessens or reduces pain. This formula contains herbs that feed and revitalize the motor nerve at the base of the skull (medulla area and upper cervicals), and also herbs that help rebuild or feed the spinal cord. This group of herbs will also rebuild the frayed nerve sheath, the nerve itself, and its capillaries. The following herbs in this combination are food for your valuable--and in many cases, shattered-- nerves: black cohosh, capsicum, hops flowers, lady's slipper, lobelia, skullcap, valerian, wood betony and mistletoe. The suggested amount for an adult's use would be one to three cups of the tea, or two or three capsules or tablets three times in a day, taken with a cup of celery juice or steam-distilled water. [HHH p.187]

Mistletoe: Mistletoe's historical use, which as been corroborated by modern herbal findings, has been to help in epilepsy. Dr. Christopher taught that this disorder results from an extreme exhaustion or derangement of the nerves; if the nerves can be rebuilt, the malady can be allayed. He mentioned combinations of herbs featuring Mistletoe that can help with such diseases. For Chorea or St. Vitus' Dance, he mixed 1 ounce Mistletoe with 1/4 ounce cramp bark, 1/4 ounce hops and anise or peppermint flavoring to taste, making an infusion, sweetening and flavoring the mixture, and refrigerating. This can be given to children. He noted, however, that involuntary twitching and contraction of muscles is common before puberty and that parents should avoid drawing attention to the problem. A steam bath, followed by a sponging with equal parts of apple cider vinegar and cold water, helps prior to administering this formula. [UW-Mistletoe] Mistletoe is said to help promote the full relief of stubborn headache, even migraine. The extract is also used in headaches which are accompanied by dizziness, in spells of vertigo when there is a tendency to fall backwards, in people whose gait is wavering, who are afraid of open places, get

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attacks of "pins and needles" in the limbs and suffer from cold feet (Ibid.). Mistletoe is also a specific in the treatment of neuritis, an inflammatory condition of the nerves or nerve sheath resulting in shooting or other pains throughout the body. [UW-Mistletoe]

Valerian: Dr. Christopher classified this herb among the nervines, those herbs that stimulate and heal the nerves. He said that we usually bring on our nervous problems ourselves because the sheaths of the nerves have been worn or eaten away by the calcium having been leached off with the sugars that we take so much in beverages, candies, pastries and from the many breads that turn to sugar in the body. When the sheaths are thus worn off the nerves lose their energy and their power. It can be so bad that we wind up in the asylum. Dr. Christopher said that when we find ourselves becoming nervous wrecks, we wonder why the Lord has done this to us! The nerves become so frayed that they become like uninsulated electric wires, finally shorting out and that is what causes our nervous problems. When there is a stressful argument, our nerves cannot take the load and give out. Dr. Christopher said that we have to feed the nerves. They are usually robbed of the foods that they need. Dr. Christopher's Relax-Eze [[Relax-Eze](#)] formula was a specific herbal food to help the body rebuild the nerves. He said that it doesn't taste too bad, either. Some English people came into his shop and bought so much nerve tea that Dr. Christopher said, "You buy such a lot of nerve tea. You seem such quiet folks!" He replied, "Oh, we like it better than Lipton's". The Doctor said that it was surely better for them, especially since black tea deranges the nerves. [UW-Valerian]

General Instructions: The fact that caffeine depletes the bodies calcium and places additional stress on the arteries, nerves, and endocrine system enables one to see caffeine in chocolate as one of the contributing factors to coronary disorders. Historically herbalists have recommended the herbal calcium formula [[Calc Tea](#)], the hawthorne berry syrup, and cayenne pepper plus the various herbal aids for the heart, nerves, circulation, in addition to a wholesome diet of fruits, vegetables, grains, nuts, and seeds, plus the elimination of chocolate and other stress-producing foods from the menu. [NL 2-4]

Dr. Christopher's [Nervine Formula](#) and [B & B Tincture](#): It can be seen now, how these nerve herbs, when combined as a B & B Tincture, can take care of the central nervous system, the brain and spinal cord.

Then there is the peripheral nervous system, made up of the nerves that extend out from the spinal cord and the base of the brain to the various parts of the body, and the autonomic nervous system, which regulates internal organs. Obviously, these systems must be fed properly throughout one's life in order for them to work properly. If there has been many years of neglect and wrong eating habits that has caused malfunctions and nervous disorders, there is the nine-nerve herb formula (we call Relax-Ease) that can make life worth living again!

These two sets of herbal formulas work well together, the [B & B Tincture](#) aiding the brain, medulla, spinal cord and the nine-nerve herb formula aiding the rest of the nerve systems. [NL 2-11]

Calcium: If the calcium balance is off, the results will be seen in many ways. There will be frayed nerves, inferior fingernails and hair, and other disorders including susceptibility to infectious diseases and arthritis resulting from altered body chemistry. [NL 3-11]

Elder Flowers: A bag of Elder flowers steeped in the bath water makes a refreshing bath for nerves or skin problems as recommended by a French doctor. [NL 4-10]

Epilepsy: In more serious nervous system ailments, Black Cohosh has produced good results. It is often used in cases of chorea (St. Vitus' Dance) to allay the symptoms as well as heal the nerves and remedy the disease. It has been used effectively in epilepsy. Dr. Shook related a case wherein a young girl was brought to him with a longstanding case of epilepsy. She had suffered various injuries during her attacks. Shook made a strong decoction of Black Cohosh, blue gentian and valerian root, expecting immediate results, but the seizures continued. Shook then consulted an old herbalist, who informed him that only alcohol could extract the antispasmodic values from Black Cohosh. The parents tried the tincture, given here, and the seizures gradually decreased from up to thirty in one day to nearly none after six months. Dr. Shook's Formula 150: See formula using black cohosh, blue cohosh and blue vervain. [NL 5-6]

[B & B Tincture](#): Dr. Christopher's Nervous System Formula with Black Cohosh: Black cohosh, blue cohosh, blue vervain, skullcap, and lobelia. This is used to help aid in nervous

conditions, sore throat, hiccups, and aid to restoring malfunctioning motor nerves and assisting in adjusting poor equilibrium and hearing, and a great blessing to epileptics. Massage into the medulla (base of skull), and upper cervicals. With an eye dropper insert into each ear at night four to six drops of oil of garlic and four to six drops of the following herb tincture, blue cohosh, black cohosh, blue vervain, skullcap, and lobelia, plugging ears overnight with cotton, six days a week, four to six months, or as needed. On the seventh day, flush ears with a small ear syringe using warm apple cider vinegar and distilled water half and half., and take six to ten drops in a little water or juice two or three times a day. [HHH p.195]

[Wild Lettuce and Valerian](#): Dr. Christopher's Formula for Minor Pain Relief: This is a tincture or tea consisting of wild lettuce and valerian. It is to be taken orally or massaged externally as relief of minor pain. It is a natural sedative, quiet and soothing to the nerves. [HHH p.195]

Nervine Cough Syrup: See formula using comfrey root, turkey rhubarb, spikenard, skunk cabbage, horehound and yellow D sugar. [SNH p.311]

Dr. Nowell's General Nervine Tonic; Hysteria: See formula using scullcap, hops, valerian, gum asafoetida and gentian root. [SNH p.373]

Dr. Shook's Nervine Tonic: See formula using scullcap, vervain and damiana. [SNH p.374]

Dr. Shook's Compound Nervine: See formula using cramp bark, wild yam, vervain, scullcap, cloves and glycerine. [SNH p.394]

### Testimonials

1. Kelp: Most nervous disorders result from a deficiency of certain cell salts, so we can correctly term nervous disorders "deficiency diseases". Kelp can considerably help balance the system and correct the problems. Dr. Powell helped a lady who could not sleep because of "nerves". She responded to the use of Kelp. [UW-Kelp]

2. Kelp Again: An elderly gentlemen with a nervous heart and very frightened about his condition responded to Kelp after many weeks on the remedy. The older you are, Dr. Powell said, the longer you have to take Kelp for remedial purposes. It has no drug action itself but helps rebuild the weakened organs. One of the functions of iodine is to bring calmness to the mind and body by relieving nervous tension. When nervous tension is marked, there is excitability and irritation, sleeping becomes difficult, and there is a drain on the vitality (Powell:14). Kelp reduces tension, produces relaxation and enables the system to store up vitality and reserve energy; concentration becomes easier owing to the freer flow of blood through the brain and it is easier to think clearly (Ibid.). [UW-Kelp]

3. The Beginnings of B&B Tincture: After nearly forty years of helping people regain their health, I was quite upset a number of years ago (over ten years ago) by a case that did not respond to our program, as others had done in the past. This was a case of epileptic seizures. It was late in the evening and I had sent a young boy (12 to 14 years old) back to their motel after treating him. I was confused, and the first time really baffled on an epileptic case. I sat back of my desk, alone in the office and asked, through prayer, for help for this fine young chap. I explained, in my prayers for help, about my utter confusion. Then the "idea" for this "nerve formula" came to my mind, and I went out into the herb lab and put the tincture together. When the tincture was finished in two weeks, I had the young man back, put it into his ears, preceding it with the oily garlic (to kill infection with garlic's natural sulphur base). Then I massaged his neck area at the base of the skull and gave him six to ten drops of this same nerve tincture in a little distilled water--to drink, three or more times a day.

Results came rapidly and they took the boy back home to Arizona. One of the other children in the family had an earache later so the mother used this same tincture (preceded by the oil of garlic) with success, the ear healing quickly. An elderly gentleman with hearing aids in both ears, progressively getting more and more deaf, saw the earache cleared and decided to try it in his ears. After a number of months he threw away his hearing aids. Since that time many people have had their hearing restored, even though they were told there was no known help. Of course there

are some cases where the "loss" is complete, and it is too late.

One day I sat down, years later, to find out why this amazing tincture could do these things: stop long range hiccupping, remove warts, aid in other nervous disorders, etc. As I analyzed the different herbs and checked out old herbal books, I found that blue cohosh, black cohosh and blue vervain are specific herbs to nourish and rebuild the nerves in the motor-nerve area in the medulla and upper cervical areas. The scullcap is one of the greatest nerve herbs known to strengthen, repair and rebuild the spinal cord. The lobelia is an antispasmodic (the catalyst and thinking herb) as well as being a great nerve herb food! Here I was given a precious group of herbs to be used as food to rebuild a shattered motor nervous system, and to also get the spinal cord into a healthy condition to relay the healing messages to various parts of the body. [NL 1-6]

4. Frayed Nerves: A gentleman called us years ago in reference to his wife, a teacher. Her irritable nature had made her unbearable to live with and many complaints were coming from her associate teachers, as well as from pupils. Her husband said her main problem was insomnia, causing extreme fatigue. She would only sleep a half hour or less, then walk the floor for long periods of time, then sleep again but only for a few minutes, and so on throughout the night. They could find no help for her, and both were ready to sign the papers to have her committed to a mental institution.

After arriving at their home, we had her drink a nerve tea combination. In a few minutes, as we talked, she became drowsy. She interrupted our conversation to say she would like to relax a few minutes and then return. She left the room to lie down for a while, and her husband said she would be back in fifteen to twenty minutes, as this was her pattern. It was late in the evening, so, after assuring him that there was no narcotic ingredients in the tea, I left.

About 8 o'clock the next morning, the phone rang and a man said, "Dr. Christopher, you are a liar!" I asked him why such a blunt accusation. He said, "When my wife went in to lie down last night, instead of sleeping 'a few minutes', she slept all night and is still asleep this morning. After all these years of insomnia, she-has never slept all night. It has to be drugs and you guaranteed it was not."

I assured the gentleman that this very tea could be given to a small child with no side- or after-effects, and explained that the herbal food in the tea gave her nerves the first good nerve food they had received in many years. He apologized, adding he would have to awaken her or she would be late for school. [NL 2-11]

5. Facial Tic and Hearing Loss: At the time of this writing, there is no surgical cure for nerve hearing loss. The causes are fetal damage, trauma at birth, infections, drugs, thyroid disease, diabetes, injuries, noise exposure, or nerve deterioration from age or malnutrition. Just last month, a woman said to us, "I wish they (medical science) would hurry and find a cure for nerve deterioration." We said, "For the nerves in the body?" She said, "No. For the nerves of the ear! I'm having a terrible time with hearing loss and it's getting worse. It's driving me crazy!" We told her that if she didn't have eardrum breakage, there were some herbal nervines that could be used directly in the ear as ear drops. She agreed to try the B and B tincture. As she spoke, her face exhibited a spastic dance of small nervous tics. A month later, on the B and B tincture, her hearing began to gain momentum while the nervous tics faded into the background. Going to the ear, there are three cranial nerves. One is the auditory nerve which controls hearing. The other two are the facial nerve which controls some of the muscles in the face and the vestibular nerve which helps with balance. B and B tincture will aid all three of these nerves. [NL 4-6]

#### See Also

[B & B Tincture](#): Dr. Christopher's Nervous System Formula with Black Cohosh

[Calc Tea](#): Dr. Christopher's Calcium Formula

[Kelp-T-Comb](#): Dr. Christopher's Kelp Combination

[Relax-Eze](#): Dr. Christopher Nerve Herbal Food Combination

[Wild Lettuce and Valerian](#): Dr. Christopher's Formula for Minor Pain Relief

[Epilepsy](#)

Entire newsletter "A Continuation of the Nerves Newsletter - 'NERVOUS IN THE SERVICE'  
[NL 2-11]

Entire newsletter "Afraid of Frayed Nerves" [NL 2-1]

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## Neuralgia

### Definition

A severe, intermittent pain lasting a short time.

### Symptoms

The pain radiates along the course of a nerve and its branches, but is not associated with any manifest changes in the nerve structure. The tender spots are often where the nerves exit and paroxysm can be produced by contact with a certain area (the trigger zones). Often there are sharp, stabbing attacks of pain in the eye, brow, temples, or back of the neck. There are also various forms of neuralgia along the spinal column, and the various internal organs (viscera), along the sciatica nerve, or in a joint. [SNH p.37]

### Cause

Neuralgia is caused by irritation of the nervous system and by heavy mucus throughout the body. An acid condition is also a factor. [SNH p.38]

### Herbal Aids

General Instructions: The sharp, excruciating pains can generally be relieved by placing a poultice or fomentation of mullein and cayenne over the area. Relief may also be obtained by applying a liniment of equal parts cayenne and prickly ash tincture. To remove the cause, rebuild the body with tonics, change the diet and improve the person's general health. [SNH p.38]

Garlic: Sciatica, paralysis, neuralgia pains. Massage [Oil of Garlic](#) over the affected area. [SNH p.101]

Wormwood: Rheumatism, sprains fomentations, neuralgia, etc. Apply fomentation of the herb; or, use the oil as a liniment. [SNH p.108]

Bruises, Swellings, Neuralgia, Toothache: See formula using camomile and poppy flowers. [SNH p.219]

Mullein: Rub mullein oil in well, or apply on saturated cotton and cover. [SNH p.317]

See formula using marshmallow, camomile and poppy heads. [SNH p.328]

Scullcap: Drink 2 fluid ounces of scullcap infusion every 1 to 2 hours and 1 cupful upon retiring. 1 pint during a single evening would not be harmful. [SNH p.371]

Soothing Syrup (children), Neuralgia Mixture: See formula using lady's slipper, scullcap, pleurisy root, prickly ash, lobelia and anise seed. [SNH p.386]

Hops: Use hops poultice and fomentation. Or apply a flannel bag of hops, and moist heat over the affected area. [SNH p.396]

See formula using hops, black cohosh, camomile, yarrow, sage and peppermint. [SNH p.397]

Liniment for Neuralgia: See formula using cayenne, lobelia, oil of wormwood, oil of rosemary and oil of spearmint. [SNH p.411]

See formula using myrrh, cayenne and echinacea. [SNH p.456]

Neuralgia

[Neuritis](#)

Juices: Carrot & celery, celery. [NL 3-5]

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## Neuritis

### Definition

Swelling of the nerves.

### Symptoms

Injury or lesions of one or more nerves accompanied with hypersensitivity, loss of sensation (anesthesia), sensation of tingling, crawling or burning of the skin (paranaesthesia), paralysis, reduction in muscle size (muscular atrophy), and loss of reflexes in a body part. [SNH p.38]

### Cause

Mucus in the system. Mucus causes an upset in the specific area conducting nerves into the spinal column and throws out a vertebrae, causing even more irritation. The nerves must be rebuilt, and the acid condition of the nerves and the worn sheath around the nerves must be replaced by taking nervines. Besides using the cleansing program, rebuild the entire nervous system and use the cleansing program. [SNH p.38]

### Herbal Aids

General Instructions: Neuritis is frightening because of the pain. Use nervines and antispasmodic to correct the cause. Ease the pain with fomentation, poultices and the green drinks. [SNH p.38]

Neuritis (nerve inflammation): See formula using lady's slipper, scullcap, damiana, wild yam and ginger. [SNH p.386]

Juices: Celery & cucumber, endive, carrot & spinach. [NL 3-5]

Elderberry Wine: The berries are used to make Elderberry Wine which was discovered to be very effective in the treatment of sciatica and other forms of neuritis. The recommended dosage being to mix one ounce of the Elderberry Wine with a third of an ounce of port wine. [NL 4-10]

### See Also

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture

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## Nightmares

### Definition

A dream occurring during rapid eye movement sleep that brings out feelings of fear, terror, anxiety or distress and usually awakens the sleeper.

### Herbal Aids

Nervous Nightmares: Take a small quantity of freshly extracted rue juice. [SNH p.295]

General Instructions: Eat light meals only before retiring. Be sure bowels are moving freely. Catnip tea and enema can help a really bad terror. Be selective of daily mental input. [EWH p.167]

Hops: You can moisten the Hops with water mixed with a little glycerine to reduce the rustling--which might cause insomnia in itself, some suggest! Or you can moisten the Hops with a little alcohol in order to release the medicinal values. Interestingly, as we will relate in the section on Recent Research below, researchers have not been able to find any evidence of physiological activity on the nervous system in Hops. Yet, as Michael Moore pointed out, "Anyone who drinks much of the tea will tend to fall asleep or get groggy". He mentioned that Hops is "a wonderful herbal aid for insomnia brought on by trashing out on oyster stew or candied watermelon peels (and similar gastric manias) shortly before retiring. When the usual nightmares concerning Attila the Hun or the Teapot Dome Scandal ensue and the indulger is unable to reconcile several realities (including being awake with a stomachache at three in the morning) the Hops can be brewed up" (Moore:84). [UW-Hops]

Rosemary: Levy quite seriously mentions that the gypsies place sprigs of Rosemary under the pillows of sleepers, especially children, to protect them from evil spirits and from nightmares. She did so with her children and suggests that people do the same. Others say that the herbs in a small pillow near or under the pillow make for a good night's rest. [UW-Rosemary]

Catnip: The young tops...made into a conserve, help relieve nightmares [NL 6-2]

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## Nipples

### Definition

Anything to do with the nipples such as soreness when nursing, tenderness, cracked etc.

### Herbal Aids

Firm Up and Harden Sore and Tender Nipples: Massage the decoction of cranesbill into the nipples only. [SNH p.153] Decoction of cranesbill: See formula using cranesbill and distilled water. [SNH p.153]

Sore Nipples and Green Wounds: Apply the expressed juice of cleavers and take internally 1 tablespoonful of the juice 3 times a day. [SNH p.268]

Sore nipples: See formula using squaw vine, olive oil and beeswax. [SNH p.281]

Golden Seal for Cracked and Abraded Nipples: This herb is considered to be one of the best general medicinal aids in the entire herbal kingdom....(Note: The price of this root has been unusually high--but do not attempt to use other aids here that will not achieve the same results. Always use the herbal agents you need, no matter what the price! Do not purchase or use the commercial colorless fluid extract, however, as it does not contain the needed therapeutic values of the herb.) Generally give small and frequent doses. A Skin lotion formula is 1 teaspoonful of powder in 1 pint of boiling water, dissolve and let stand until cool. See text for more information. [SNH p.437]

Nursing: If your nipples get sore, you can rub on pure lanolin, available at pharmacies. You can sun your breasts briefly, but be careful, because the tissue is tender and sensitive. Honey, comfrey ointment, wheat germ oil, and aloe vera leaf can all be applied, although you should be careful to wash off the honey, as no infant should take raw honey which causes infant botulism, and to remove the aloe vera, because it is very bitter. [EWH p.85]

Commercial Oil of Juniper is made from the ripe fruit; unripe fruit is less effective for making the oil. When the Rob of Juniper is distilled, the resulting oil byproduct is used medicinally. This is sometimes called Oil of Cade. The Eclectic School skillfully blended this oil with lard and Fowler's solution to make a Juniper Pomade, which is said to be excellent for all forms of eczema or tetter. It was...applied to chapped hands and irritated nipples in nursing mothers (Felk:1092). [UW-Juniper]

Myrrh: Applied to fresh wounds, the tincture of Myrrh excites healing action and lessens the liability to inflammation or suppuration. It is good for sore nipples. [UW-Myrrh]

Red Raspberry: Taken during labor the sweetened tea is used as a natural regulator for contractions and after the birth the infant's mouth can be washed with it if the mouth seems sore. The mother can use the tea to wash sore nipples with and to enrich the milk supply (Thom:185). [UW-Red Raspberry]

Squaw Vine: The berries are highly recommended to treat sore nipples. The crushed berries are added to tincture of myrrh for a highly potent cure (Cly:113). Another method is to make a strong decoction of two ounces of the herb, fresh if possible, with a pint of water, then strain and add as much good cream as there is liquid of the decoction. Boil the whole down to the consistence of a soft salve and when cool, anoint the nipple with it every time the child is removed from the breast (Felk:1274). Olive oil is sometimes substituted for the cream. [UW-Squaw Vine]

Yarrow: The tea can be applied to chapped hands or other skin irritations, and it can be rubbed on sore nipples if needed. [UW-Yarrow]

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## Nosebleeds

### Definition

A nosebleed is a hemorrhage from the nose--syn., epistaxis (from one side), epistaxis bilateral (both sides); in other words, the escaping of blood from the nose. [HHH p.110]

### Cause

Unless it is from injury, nosebleed results from a calcium deficiency. It is caused by the rupture of a small vessel in the nose due to pressure in the head. There are many causes for nosebleeds, but the weakness stems from calcium deficiency. Of course, it does not matter how much calcium is in the body if one is hit in the nose with a good blow; bleeding will start. [HHH p.110]

### Herbal Aids

[Cranesbill](#): Use the powder as a snuff. [SNH p.153]

[Nosebleed \(epistaxis\)](#): See formula using cranesbill, bistort and raspberry leaves. [SNH p.154]

[Witch Hazel](#): Snuff the tea up the nose. [SNH p.171]

[Cayenne](#): Dr. Christophers many Cayenne Combinations: A teaspoon of cayenne in a cup of water (hot preferred) taken internally will stop most nosebleeds quickly. In an emergency such as this we use cayenne. As mentioned a teaspoon of cayenne pepper in a glass of water and drunk right down will stop a nosebleed in nearly every instance, by the time you can count to ten. This is not a miracle; it is the principle of the cell stimulant cayenne traveling through the entire blood stream and regulating the pressure so the pressure of the flow is the same in the feet as in the head or any other part of the body. This takes the heavy pressure off the hemorrhaging area and allowing a quick coagulation. [HHH p.110]

[Calc Tea](#): Dr. Christopher's Calcium Formula: One of our very finest herbal foods is our calcium formula of four parts comfrey root, six parts horsetail grass, three parts oat straw and one part lobelia. Make this into a tea, using a cup (one teaspoon of combined herbs to cup of distilled water) morning and one evening or two or three capsules or tablets two or three times in a day. [HHH p.110]

[Bayberry Bark or Oak Bark Tea or Powder](#): If the nose bleeds often, the veins, capillaries and tissue often will be strengthened by inhaling a small amount of bayberry bark (*Myrica cerifera*) or oak bark (white, red Tanner's scrub, etc.) tea up into the nose. If desired, use an atomizer to spray it up. Another method is to take the bayberry bark or oak bark powdered and with a small straw blow a very small amount of the powder up the nose each day, until healed. Do not blow too much of the powder up the nose or it will plug up the area. Drink a small amount, one-fourth cup more or less, of the bayberry or oak bark tea each day until the condition is under control. [HHH p.110]

### Testimonials

[Cayenne](#): Within the last year, I purchased from you your wonderful book - The School of Natural Healing and have been enjoying very much using it as a reference book. It is GREAT. With red pepper having the ability to stop heart attacks and to stop bleeding either internal or

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external - I just can't see why that information is not more widely known and used, especially by paramedics, boy scouts and girl scouts and athletic managers. People are always hearing about someone having a nosebleed that is very difficult to stop and hikers, etc. having an accident out in the wilderness and almost bleeding to death. Our household or car will never be without some red pepper in it. I am now taking it twice a day. [NL 3-3]]

My 89 year-old grandpa was rushed to the hospital with a nosebleed that wouldn't stop. His nose was packed, and he was told to return to the hospital in a few days to have it cauterized. I asked my dad, who took him to the hospital, why he hadn't tried cayenne. He said "you're right. What was I thinking? I will send some cayenne home with him." The day after my grandpa's nose was cauterized, it started bleeding again. This time my dad told my grandpa to take the cayenne. His nose stopped bleeding in minutes. My grandpa now takes cayenne every day, and the nose bleeding has not returned.

**See Also** [Calc Tea](#): Dr. Christopher's Calcium Formula [Cayenne](#): Dr. Christophers many Cayenne Combinations [Hemorrhage](#)

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## Obesity

### Definition

An abnormal increase in the amount of fat, mainly in the stomach area and intestines, and in the tissue beneath the skin.

### Herbal Aids

Poke Root: Obesity (adipose tissue): Use an infusion of the berries. [SNH p.61]

No Milk Products: Dr. William E. Ellis is a retired osteopathic physician and surgeon, located in Arlington, Texas, who has done extensive research on the effects of milk on human beings. His conclusion: "Milk and milk products are harmful to many people, both adults and infants. Milk is a contributing factor in constipation, chronic fatigue, arthritis, headaches, muscle cramps, obesity, allergies, and heart problems." Dr. Ellis does not blame cholesterol, but xanthine oxidase, an enzyme in homogenized milk, excess calories, xyramine, a protein in cheese that causes headaches, and poor absorption. He blames especially the latter, as milk neutralizes the hydrochloric acid necessary to digest food, and creates excess mucus which inhibits absorption. [HHH p.15]

Kelp: Obesity is rare among the Polynesians and other races who incorporate seaweeds as a regular part of their daily diet. This plant influences the mucous membranes and lymphatics. It is a slow, persistent agent, but it will accomplish the desired weight loss results. It is stimulating to the absorbents and especially influences the fatty globules. Its best action is observed in individuals having a cold, torpid, clammy skin and loose flabby rolls of fat. It is an agent that gives better results in sick, overweight people than in cases of healthy, fat people (Luc:50). Instead of being simply a weight loss agent, it is more a normalizer, as thin people can put on weight while taking Kelp. [UW-Kelp]

Onion: To build the blood or to prevent obesity, to provide strength during pregnancy or to prevent toxemia, take Onions three times a week cooked, two times a week raw. [UW-Onion]

Sage: Sage tea is given in digestive weakness or ailments. It is especially good for flatulence and lack of appetite, constipation and obesity (Lev:Common:128). In Greek villages it is brewed as a tea in cafes to be used instead of other harmful beverages and its scent characteristically floats over the streets. Kloss said, "The American people would do well if they would use Sage instead of tea and coffee." [UW-Sage]

Juicing: Dr. H. E. Kirschner, M.D. treated people for over 50 years. In his book, Live Food Juices he recounts many fabulous results in his cases of incurable diseases where live juices were used. Some of these diseases were malnutrition, leukemia, failing eyesight, arthritis, bleeding hemorrhoids, obesity, various cancers, kidney disease, bladder tumors ... the list could go on. The doctor states that there could be a table loaded with all types of vegetables and we could still be suffering from malnutrition because our bodies could not possibly eat enough to provide the missing nutriment. With the juices, the pulp is eliminated and we are left with the life-giving vital principles contained within the vegetables. It is, of course, best to use only the organically grown fruits and vegetables (those free of pesticides and preserving chemicals) for our juices. But Dr. Walker states that the detrimental toxins remain in the pulp, and this we can discard. [NL 3-5]

Juices: Celery, spinach, lettuce, orange, lemon. [NL 3-5]

General Instructions: You could change to the vegetarian mucusless diet and exercise more.

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Between meals snacks of "foods" which are processed, devitalized, and fattening can be avoided. Fats, sugar, refined cereals, ice cream, soft drinks, desserts, potato chips and alcohol can add many empty calories to your diet while your body is crying for nutriments. The saturated fat in meats, milk, hard shortening, margarine and eggs can be detrimental. Tryamine, a substance found in cheese may result in high blood pressure for some. Snacks of fruit and raw vegetables with a high water content will aid you in feeling satisfied without taking in non-nutritional items. The three-day fruit juice cleansing will eliminate toxic build-up from the system and excess weight as well. The herbal obesity formula will also help curb the appetite. One must not forget to drink plenty of steam distilled water to cleanse and lubricate the system. [NL 3-10]

[CSK](#): Dr. Christopher's Anti-Obese Herbal Food Combination: Combine this anti-obese aid with the mucusless diet and you have a winner. This is not a crash program of fast loss of weight, but graduated and accurate loss without robbing the body of the needed nutrients like so many fad diets do. This acts as a blood purifier, helps aid kidneys in relieving excess fluids, helps feed the body for relief from nervous tension generally caused by diets, helps appease the appetite, helps feed the thyroid and other malfunctioning glands and thus gains a healthier state for holding weight control. Take two or three capsules or tablets morning and night with a cup of chickweed tea. The formula is chickweed, burdock, licorice, saffron, mandrake, fennel, parsley root, kelp, echinacea, black walnut, hawthorn berries, papaya. [HHH p.187]

Chickweed: Chickweed can benefit the whole system, as it soothes and cleanses and paves the way for healing of toxicity-related problems....It is particularly noted for being an effective reducing herb; some smilingly say that any good green herb, if used generously in the diet, is good for reducing (Lev: 165), but others say that it really does remove excess fat, because it is mildly diuretic and laxative. We also think that because it supplies necessary nutrients that the obese person might be lacking; the body then releases the fat which the body has tenaciously held, thinking that it is still hungry and in need of the missing nutrients. At any rate, both in legend and in current herbal practice, Chickweed is considered an excellent reducing remedy. [NL 6-5]

#### See Also

[CSK](#): Dr. Christopher's Anti-Obese Herbal Food Combination

[Dr. John R. Christophers "Mucusless Diet"](#)

[Dr. John R. Christophers "Three Day Cleansing Program"](#)

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## Osteoporosis

### Definition

Osteoporosis characteristically occurs in women after menopause and is presumably related to low estrogen output--the female hormone that dwindles when ovulation and the monthly periods cease. In men, fragile porous bones typically develops considerably later in life and disorder is less severe. But though the disease is associated with late middle age and old age, the process probably begins many decades earlier. [NL 1-11]

### Cause

1. One cause for osteoporosis: Dr. Harry W. Daniell reports his findings that heavy cigarette smoking appears to be a prominent factor in inducing osteoporosis. Dr. Daniell, who practices in Reddings, California, was prompted to undertake his study when he realized that most of his under 65 patients suffering from osteoporosis were habitual heavy smokers. (When it occurs before 65, osteoporosis is considered "premature".) The west coast physician and his associates then studied records from the three small hospitals in the area, coming up with the cases of 17 women who have had at least one characteristic osteoporotic bone fracture prior to age 65. [NL 1-11]

2. Another reason: Heavy meat-eaters are at risk of this condition because meat, while very poor in calcium, has a high phosphorus content. It's meateaters unbalanced high phosphorus intake, in Dr. Jowsey's opinion, that accounts for the now established fact that longtime vegetarians are less susceptible to osteoporosis than are omnivorous. [NL 1-11]

3. An increase of nitrogen loss through the urine can occur with cortisol administration. This is associated with gluconeogenesis and the trapping of amino acids at a rapid rate by the liver. In extreme adrenal malfunction, Cushing's Disease, and the use of large doses of cortisone or prednisone, the results are loss of muscle mass, decrease in thickness of the skin, and osteoporosis, which is the loss of the ossein network in the bone. [NL 2-3]

### Herbal Aids

Calcium and Trace Minerals: Currently of intense interest, osteoporosis is supposedly treated by taking extra calcium. When a woman with osteoporosis has a blood test, the calcium level is usually not low. But in order to be assimilated, calcium must be present in the body with the appropriate synergistic minerals, in particular phosphorus, which must be approximately twice the amount of calcium, and also silica. Without these minerals, and probably other trace minerals that haven't been linked to the problem yet, the body cannot absorb calcium; it just flows through the body, sometimes depositing and causing gout, arthritis, etc. The amount of calcium in the body doesn't matter; it's the balance you take in foods that's important.

For example, when people have broken bones, if their blood calcium is high and their silica low, the bones heal slowly, but if it's the opposite--with low calcium and high silica--the bones heal rapidly. [EWH p.144]

Dr. Christopher's [BF & C](#) and [Calc Tea](#) formula: Usually the right foods will provide the correct mineral balance that will naturally avoid osteoporosis. The Calc formula as well as the BF & C formula can help provide concentrated sources of minerals for those who are chronically deficient. [EWH p.144]

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**Calcium from Vegetables:** When my fingernails have become soft in the past, I have taken calcium supplements in order to harden them, without very good results. But when I am eating many raw, leafy greens, the high concentration of proper minerals harden the nails right up. [EWH p.144]

**Changease:** Dr. Christopher's Herbal Hormone Formula: Sometimes the imbalance in the system can be brought on by hormonal imbalances, so the hormone-estrogen formula can help effectively balance the hormone system. [EWH p.144]

**Apple Cider Vinegar and Honey:** If the diet is adequate and the body is still out of balance, it may be that the body is not digesting your food properly; this especially occurs later in life, when the body doesn't produce adequate hydrochloric acid for digestion. The apple cider vinegar and honey mixture--a tablespoon of vinegar and a teaspoon of honey mixed well into a cup of distilled water--taken three times a day, can correct a hydrochloric acid deficiency. [EWH p.144]

**Rejuvelac:** The intestinal flora may need replacing, which can also cause imbalance in the system. However, taking yogurt probably will not do the job, because most yogurt consists of only one strain of bacteria which, while useful, might not be the one that you need. A multi-strain acidophilus is better. Even cheaper than that is Rejuvelac, which is made by soaking one cup of wheat--previously washed--for forty-eight hours in three cups of water. Use the same seed to make a second and third batch, not rinsing the seed in between. These batches need soak only twenty-four hours. This Rejuvelac, as you can see, is really cheap, and yet provides the ferments which can help restore proper intestinal flora. [EWH p.144]

**Panc Tea:** Dr. Christopher's Herbal Aid for Pancreas and Companion Glands Formula: If the pancreas is inhibiting digestion, one can add the herbal pancreas formula to the healing routine. [EWH p.144]

**Calcium Needs:** "I would advise women to start calcium and Vitamin D supplements at age 30, or perhaps 25," says Dr. Jennifer Jowsey of the Mayo Clinic. With the average American diet, there's apparently a long term gradual loss of bone mineral exceeding the rate of mineral uptake and bone formation. In later years, when hormonal changes increase the susceptibility to osteoporosis, the skeleton has already lost a good deal of its substance. By then, because of previous loss, the rate of bone formation must not only equal the rate of bone demineralization (the normal condition) but must exceed it if bone strength is to be restored.

It is far more difficult, Dr. Jowsey warns, to induce new, compensatory bone formation than it is simply to slow down bone demineralization. Adequate calcium and Vitamin D in the diet will go far to accomplish the latter. But preliminary finds, the Mayo scientist says, indicate that lost bone will not be automatically restored by such dietary correction. [NL 1-11]

**Jumping Rope:** Dr. Carlton Fredericks has said that women with bones weakened by osteoporosis should, if they are capable of doing it, skip rope as a means of therapeutic exercise. The impact on the spine, vertically exerted, generates the electrical forces that drive calcium to the bone areas requiring reinforcement (The Carlton Fredericks Newsletter of Nutrition, July 1, 1972). [NL 1-11]

**Foods that Provide Calcium and Vitamin D:** Calcium and Vitamin D are often deficient in their diets. These can be obtained from broccoli, cabbage, kale, watercress, sun exposure, alfalfa, and cod liver oil. [NL 3-10]

### Testimonials

Over the years of practice I have had a number of patients who have had broken bones from osteoporosis. One case was a woman in her middle eighties with a fractured hip. After three months in a cast it showed no sign of healing, any more than two pieces of stick growing together. This woman was frightened because she was told that if the hip bones did not knit after putting on another cast for three months, they would cut her leg open and use stainless steel rods, bolts and nuts to make it possible for her to at least get around on crutches.

This was in the early sixties and not much comfrey was available then. The lady's daughter was in one of my classes, and we asked the students to help out by donating as much comfrey as they could. We had enough donated from the class members that the patient had from a pint to a quart

of comfrey green drink or comfrey tea each day, six days a week, week after week. At the end of this "three months," the cast was removed and the doctors were amazed, because during the first three months there was "no knitting" of the bone even evident, but with the comfrey being taken orally during the next three-month period the leg was healed. The daughter told us her mother was out square dancing within a couple of weeks after the cast was removed!

Since this case was so outstanding we have had a formula developed called "bone, flesh and cartilage."[\[BF & C\]](#) This formula has done miraculous things with broken backs, legs, hips, etc. This formula has been used on curvature of the spine, polio, multiple sclerosis, and muscular dystrophy, stroke and arthritis of the bone. This formula is used externally as well as orally and has brought tremendously fast results.

This formula is a "power house" and has been used on (and restored to health) cancer of the spine, arthritis and polio, and has helped rebuild torn cartilage and sinews, fractures, etc. etc. As you look over the constituents of each it is easy to see the strength and rebuilding power of this group of "God-Given" herbs. [NL 1-11]

#### See Also

[BF & C](#): Dr. Christopher's Bone, Flesh and Cartilage Formula

[Calc Tea](#): Dr. Christopher's Calcium Formula

[Changease](#): Dr. Christopher's Herbal Hormone Formula

[Panc Tea](#): Dr. Christopher's Herbal Aid for Pancreas and Companion Glands Formula

Entire Newsletter "How Important is Calcium?" [NL 1-11]

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## Palpitations

### Definition

An abnormal and rapid fluttering, pulsation, or beating of the heart. [SNH p.38]

### Cause

Weak heart valves having poor tone may be the cause. Fever and excitement from panic can add to the problem. The fluttering of the heart is due to weakness within the entire body system, but more specifically in the heart area. High cholesterol and dense mucoid stoppage can cause sluggishness of the blood flow. [SNH p.38]

### Herbal Aids

General Instructions: Take [Cayenne](#), wheat germ oil, and hawberry tonic. Motherwort is another specific. [SNH p.38]

Tansy: Make a decoction by simmering the herb 10 minutes, take 2 fluid ounces 4-5 times daily. [SNH p.123]

Rue: Chew 1-2 freshly-picked leaves. NEVER TAKE RUE IF YOU ARE PREGNANT. [SNH p.295]

Valerian: Valerian is powerfully antispasmodic in its effect upon the system. It is gently stimulating, very soothing and quieting to the nervous system. Valerian is an effective calmative. It influences circulation by slowing the action of the heart, while increasing its force; therefore it has been very beneficial in cases of cardiac (heart) palpitation. [SNH p.376]

Valerian: Administer hot valerian with cayenne pepper (capsicum minimum; C. fastigiatum). [SNH p.377]

Black Cohosh: Give a full dose of black cohosh infusion. [SNH p.399]

[Cayenne](#): In acute stages, repeated dosages of one to two teaspoonfuls [in hot water] every 1/2 hour (more frequently when required). [SNH p.408]

### See Also

[Cayenne](#): Dr. Christophers many Cayenne Combinations

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## Paralysis

### Definition

A rapid or partial loss of muscle function and motion or of sensation because of nerve injury or neuron destruction. A slight loss of function is called "palsy". [SNH p.39]

### Cause

Most cases of paralysis are caused by calcium deficiency. Paralysis is generally classified as incurable but no disease is incurable. The problem is due to toxic wastes in the body and it becomes essential to cleanse the body and give it tone and a positive regeneration in order to correct the paralysis. [SNH p.39]

### Herbal Aids

[General Instructions](#): Paralysis has been cleared up with cayenne alone. Correct the cause with a cleansing program and the regenerative diet. Use nerve tonics and antispasmodic. [SNH p.39]

[Paralysis of Throat](#): As an aid, chew ginger root often. [SNH p.39]

[Oil of Garlic](#): Massage garlic oil over the affected area. [SNH p.101]

[Dr. Rudgley's Formula for Paralysis](#): See formula using wood betony, rosemary, sage, juniper, senna, ginger, cubeb, sweet flag and yellow D sugar. [SNH p.391]

[Rosemary](#): When the Queen Elizabeth of Hungary was paralyzed a gnarled hermit invented Hungary water, which is a powerful distillate of Rosemary oil in alcohol. This was rubbed on her limbs and eventually cured her of the problem. Another rendition of the story is that the Queen wanted to retain her flawless complexion without going to any trouble to do so, as she spent a good deal of time working for charities. The hermit said that this formula would make "a young face exceedingly beautiful, an old face very tolerable". To make the distilled oil for Hungary water you put the flowers into a strong glass while tying a piece of fine linen cloth over the mouth. Turn it upside down into another strong glass which is set in the sun for a week or two. The oil is said to distill down into the lower glass. The Hermit's recipe is said to contain 24 tablespoons of Rosemary distilled oil, 2 tablespoons mint distilled oil, 2 tablespoons balm distilled oil, 2 tablespoons fresh lemon peel, 2 tablespoons fresh orange peel, 2 cups Rose water and 2 cups spirits of wine. This is mixed, corked and allowed to steep for three weeks before using three times daily on a clean skin, allowing to dry naturally before splashing off with cold water (Keller: 293). Grieve supplied a simpler recipe. She said that Hungary water was prepared by putting 1-1/2 pounds of fresh Rosemary tops in full flower into 1 gallon of spirits of wine. This was allowed to stand for four days and then distilled. This was used for gout as well as paralysis of the limbs. [UW-Rosemary]

### See Also

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture

[Calc Tea](#): Dr. Christopher's Calcium Formula

[Cayenne](#): Dr. Christophers many Cayenne Combinations

Paralysis

[Relax-Eze: Dr. Christopher Nerve Herbal Food Combination](#)

[Dr. John R. Christophers "Three Day Cleansing Program"](#)

[Nightmares](#)

[Nipples](#)

[Nosebleeds](#)

[Obesity](#)

[Osteoporosis](#)

[Palpitations](#)

**Paralysis**

[Parasites and Worms](#)

[Pleurisy](#)

[Pneumonia](#)

[Poison Ivy and Poison Oak](#)

[Polyps](#)

[Pregnancy](#)

[Prostate](#)

[Pyorrhea](#)

## Parasites and Worms

### Definition

Pinworms, tapeworms, and roundworms are parasites existing in the intestinal tract. The three most common types of worms found in the body are: the thread or seat worms (*Oxyuris vermicularis*), the roundworm (*Ascaris lumbricoides--lumbrici*), and the tapeworm (*Taenia solium*, *Bothriocephalus latus*). There are other less-common worm types that enter the body, such as hookworms (*Ancylostoma duodenale*, *Nectar Americanus*) and those of unclean pork (*Trichinella spiralis*), which thrive upon various conditions of filth and degeneration. [HHH p.124]

### Symptoms

Restlessness at night, picking the nose, gritting the teeth, itching at anus, dry cough, etc. Worms sometimes cause spasms, fits or convulsions. [HHH p.124]

### Cause

Poor diet, poor hygiene, and constipation are usually the problem. Worms are found when the stomach is deranged from eating improper foods. Worms are the effect. The cause of the worms is improper diet--the lack of wholesome foods (do not use processed or refined foods) and heavy mucus and starchy food intake. To work on the effect and rid the body of worms is like killing the flies and leaving the garbage--which has attracted them--in the same foul condition. [HHH p.124]

### Herbal Aids

Pumpkin Seeds: A simple herbal aid for a mild case of worms is to use pumpkin seeds (*Cucurbitaceae*). It is best when fresh seeds are used. To make the infusion, steep one ounce of crushed seeds for fifteen to twenty minutes in a pint of boiling hot water. Dosage: One teacupful or more (up to one pint daily), six days a week for one to three weeks. Also eat one to two ounces of the pumpkin seeds each day. [HHH p.124]

Another "Seed" Aid is to Combine the Following:

1 part pumpkin seeds, crushed (*Cucurbitaceae*)

1 part watermelon seeds, crushed (*Citrullus vulgaris*)

1 part cucumber seeds, crushed (*Cucumis sativus*)

Dosage: Take one pint of emulsion (two ounces of seeds triturated in honey and distilled water) in doses at two hour intervals; or take one to two tablespoons of the crushed seeds in honey, syrup, etc., in three doses at two hour intervals.

The patient should fast during this treatment, then take an appropriate cathartic several hours after the last dosage such as senna tea or preferably the lower bowel formula [Fen LB]. Use this procedure at least three days in a row. [HHH p.124]

One of our Favorite Worm Formulas is as follows:

1 part pink root powder (*Spigelia marilandica*)

1 part burdock root powder (*Arctium lappa*)

1 part black walnut leaves powder (*Juglans nigra*)

## Ailments

[A - B](#)   [C - E](#)   [F - I](#)[J - P](#)   [Q - Z](#)[Jaundice](#)[Kidney](#)[Laryngitis](#)[Leukemia](#)[Lice](#)[Liver](#)[Lockjaw](#)[Measles](#)[Meningitis](#)[Menopause](#)[Menstruation](#)[Migraine](#)[Miscarriage](#)[Moles](#)[Motion Sickness](#)[Mumps](#)[Nausea](#)[Nerves](#)[Neuralgia](#)[Neuritis](#)

[Nightmares](#)[Nipples](#)[Nosebleeds](#)[Obesity](#)[Osteoporosis](#)[Palpitations](#)[Paralysis](#) **Parasites and Worms**[Pleurisy](#)[Pneumonia](#)[Poison Ivy and Poison Oak](#)[Polyps](#)[Pregnancy](#)[Prostate](#)[Pyorrhea](#) 1 part male fern powder (*Dryopteris Filix mas*) 1 part pomegranate root bark powder (*Junies granatum*) 1 part wormwood powder (*Artemisia absinthium*) 1 part lobelia (*Lobelia inflata*)

Dose: Mix the above herbal powders together and give the child 1/2 teaspoon of the powder in sorghum molasses or honey. Take each morning and night for three days. On the fourth day, drink one cup of three parts senna tea and one part peppermint tea, wait two days and repeat, two times. [HHH p.124]

 Start feeding the child [Dr. John R. Christophers "Mucusless Diet"](#) with plenty of whole, uncracked, presoaked, low-heated grains.

Also, fruits, vegetables, nuts and seeds. By using this procedure we are getting to the cause, cleaning it up so there will be no recurrence. Be sure the child drinks at least one ounce of steam distilled water daily for each pound of body weight--32 pounds, then 32 ounces of distilled water, 100 pounds of body weight, 100 ounces, etc.

In addition to the above deworming procedures, some herbalists claim it is good to insert a peeled button of garlic into the rectum each night, six days a week, rest one day and repeat six days a week for several months (or, give crushed garlic enemas). This will strengthen the bowel area, cut infections down, aid hemorrhoid area, and assist in discouraging worms. Keep the bowel area clean always if you want a healthy happy child. [HHH p.125]

 **VF Syrup:** Dr. Christopher's Herbal Aid for Eliminating Intestinal Parasites: (worms, etc.)

This combination of wormwood, American wormseed, tame sage, fennel, male fern, and papaya is to help act as a vermifuge (a combination that will cause expulsion of worms from the body) and/or a vermicide (herbal agent that destroys worms in the body). Recommended dosage is to take one teaspoon each morning and night for three days. On the fourth day drink one cup of senna and peppermint tea (1/2 and 1/2). Rest two days and repeat two more times. [HHH p.189]

 **Vegetarian Diet:** Consider now the ways a vegetarian diet is better:

It conserves food for a hungry world

It is free from parasites and most food-poisoning microbes.

It is free from animal diseases, such as tuberculosis and cancer.

It makes for stronger bones.

It supplies plenty of protein without being in wasteful excess.

It is free from hormones, antibiotics, and much of the pesticides that are in meat.

It does not require the slaughter of other creatures.

It is conducive to healthy arteries.

It is more economical.

It is more likely to supply sufficient vitamins and minerals." (Woolsey, 1974, p. 72) [NL 2-6]

 **Chaparral:** According to Edward L. Card, N.D., of Mexico, chaparral has the ability to stimulate the liver and the intestines to clean out the toxic debris from the human system. The hydrochloric acid produced by most people's stomachs is sufficiently strong to wipe out parasites and their larvae. However, many folks have pockets of old garbage in their intestines from years of indiscriminate eating of pastry, sugar, and greasy foods. Here is where chaparral can be a great aid.

The antiseptic resin of chaparral's leaves can help the organs to remove those pockets of toxic material where parasites have enjoyed their residence for perhaps many years. As soon as the garbage and filth is removed from the intestines, the parasites have no choice but to evacuate the clean premises and look elsewhere for their lunch. [NL 3-4]

 **Walnut:** More recently some have found the walnut to be effective against intestinal parasites by taking two to three ounces of walnut oil each evening for three days. [NL 5-1] **Hazelnut:** The ancients considered the hazelnut to be the most wholesome and nourishing of

any other shell fruit. The hazelnut is the best digested of all oil-bearing fruits. It is used to destroy intestinal parasites by taking one tablespoonful of the oil in the morning for two weeks. [NL 5-1]

Garlic: Give 10-30 drops of the fresh juice or 1 teaspoon of garlic syrup. [SNH p.100]

Wormwood: Round worms (vermifuge). Take 2 fluid ounces to 1 teacup of the infusion night and morning, or take the dosage night and morning and an active cathartic every 2nd or 3rd morning; or take 10 - 30 grains of powder night and morning, followed by an appropriate cathartic as indicated; ... This will clean the worms from the stomach and leave it toned up. [SNH p.108]

Dr. Shook's Anthelmintic vermifuge: See formula using tansy, wormwood, santonica and German camomile. [SNH p.108]

Round Worms (vermifuge): See formula using wormwood, rue and peach leaves. [SNH p.109]

Worm Powder (all types of worms): See formula using male fern, senna and jalap. [SNH p.112]

Round Worms: See formula using American worm seed or Jerusalem oak, pink root and manna. [SNH p.116]

Red Oak: Pin worms. Drink 1 cupful of the infusion 3 times daily. [SNH p.139]

Hyssop: Give the tea 3 times daily before meals. [SNH p.232]

Southernwood: Worms (children). Give 1 teaspoonful of the powder (seed or herb) in molasses morning and evening; a strong decoction is excellent worm medicine, but it is nauseous and bitter. [SNH p.204]

Juices: Garlic, onion, pomegranate, apricot. [NL 3-5]

#### See Also

[VF Syrup](#): Dr. Christopher's Herbal Aid for Eliminating Intestinal Parasites

[Itch](#)

Entire newsletter "Meatfreaks (or Hanging on the Meat Hook)" [NL 2-6]

## Ailments

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### Quinsy

[Rheumatic Fever](#)

[Rheumatism](#)

[Shock](#)

[Skin Problems](#)

[Smallpox](#)

[Snakebite](#)

[Sour Stomach](#)

[Spasms](#)

[Sprains](#)

[Stiff Neck](#)

[Stroke](#)

[Sty](#)

[Syphilis](#)

[Teeth](#)

[Throat](#)

[Thrush](#)

[Tonsillitis](#)

[Tuberculosis](#)

## Quinsy

### Definition

Outdated word for peritonsillar abscess. An infection of the tissue between the tonsil and the throat, usually after an attack of tonsillitis.

### Symptoms

A severe acute inflammation of the tonsil and peritonsillar tissue with swelling, fever, and generation of pus (peritonsillar abscess) accompanied by chills, fever, painful swallowing, swollen throat and tongue, and dry mouth. It may induce panic if the tightening in the throat area makes breathing difficult. [SNH p.40]

### Cause

The cause is frequently sinus drainage with mucus coming down the eustachian tubes and causing irritation. The basic cause is a dirty transverse colon, which causes poison in the sinus and head areas, which, in turn, drains down into the throat. [SNH p.40]

### Herbal Aids

**General Instructions:** Use an antispasmodic (such as lobelia) both internally and externally (wrapping the throat with a soaked fomentation). This can also be aided quickly by the use of a bayberry gargle (drinking several tablespoons every hour or so) or using mullein (three parts) and lobelia (one part) which should help draw off the toxic poison into the blood stream and disperse it quickly. Use a hot water bottle and either a poultice or a fomentation. [SNH p.40]

**Purple Loosestrife:** Use the warm decoction as a gargle; drink the decoction internally as an herbal tea. [SNH p.91]

**See formula using raspberry leaves, agrimony, horehound, barberry bark, senna leaves and cayenne.** [SNH p.148]

**See formula using sumac berries, agrimony, raspberry leaves, garden sage, cudweed, slippery elm bark, myrrh and cayenne.** [SNH p.159]

**Sage:** Use equal parts of the sage infusion and apple cider vinegar as a gargle. [SNH p.234] Infusion of garden sage. See formula using sage, distilled water and glycerine. [SNH p.234]

**Cayenne:** Dr. Christophers many Cayenne Combinations: Apply tincture of cayenne around the neck, then cover with a flannel fomentation of cayenne infusion, and drink cayenne internally. [SNH p.409]

**Juices:** Carrot & spinach, carrot. [NL 3-5]

### See Also

[Cayenne:](#) Dr. Christophers many Cayenne Combinations

[Mullein & Lobelia:](#) Dr. Christopher's Glandular Formula

[Throat](#)

[Quinsy](#)

[Tumors](#)

[Typhoid](#)

[Ulcers](#)

[Uterus](#)

[Varicose Veins](#)

[Vertigo](#)

[Vomiting](#)

[Warts & Moles](#)

[Whooping Cough](#)

[Worms](#)

[Yellow Fever](#)

## Ailments

[A - B](#)   [C - E](#)   [F - I](#)[J - P](#)   [Q - Z](#)[Quinsy](#)[Rheumatic Fever](#)[Rheumatism](#)[Shock](#)[Skin Problems](#)[Smallpox](#)[Snakebite](#)[Sour Stomach](#)[Spasms](#)[Sprains](#)[Stiff Neck](#)[Stroke](#)[Sty](#)[Syphilis](#)[Teeth](#)[Throat](#)[Thrush](#)[Tonsillitis](#)[Tuberculosis](#)

## Rheumatic Fever

### Definition

Disease that may develop between one and five weeks after recovery from strep throat or from scarlet fever.

### Cause

When we are faced with a calcium deficiency we can develop rheumatic fever (causing a rheumatic heart and a weakened body) that can even (one day) go into polio, stroke, multiple sclerosis, muscular dystrophy, etc., etc. The rheumatic fever condition leaves a calcium weakness that can lie dormant for years and then with a new loss of calcium at some future date, can develop into one of these maladies. [HHH p.74]

### Herbal Aids

[Antispasmodic Tincture](#): ([Antsp Tincture](#)) Rub the whole body from the neck to the toes with Antispasmodic tincture. In bad cases (where the patient cannot sit up or move the arms or legs), give 1 teaspoonful of Antispasmodic tincture in a little hot water every 1/2 hour until the patient perspires freely. Keep the patient in bed and allow him to cool down; then wash him with apple cider vinegar and hot water. Give the patient 1 teaspoonful of Antispasmodic tincture in hot water every 2 hours during the first day, and every 3 hours for a few days thereafter. When the case demands, rub some Antispasmodic tincture externally, and be sure to sponge the patient with apple cider vinegar and hot water. [SNH p.363] Antispasmodic tincture: See formula using lobelia seed, skullcap, skunk cabbage, gum myrrh, black cohosh and cayenne. [SNH p.363]

[Wheat](#): Wheat has been recommended in cases of arthritis, rheumatic fever, and in some types of cancer, pulmonary disease including tuberculosis, retarded growth, anemia, and physical and emotional weakness. It is felt that the vitamin D in wheat helps in rickets and other Vitamin D diseases. One recipe for a good heart remedy is to soak a half of a cup of coarse ground wheat in a thermos of hot water over night. Eat this each morning for three months. [NL 5-1]

### Testimonials

[Cayenne](#): Our daughter-in-law who had rheumatic fever as a child and is now fighting tension and blood pressure, is also taking cayenne with excellent results. [NL 1-12]

### See Also

[Cayenne](#): Dr. Christophers many Cayenne Combinations

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture

[Tumors](#)

[Typhoid](#)

[Ulcers](#)

[Uterus](#)

[Varicose Veins](#)

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## Ailments

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## Rheumatism

### Definition

Afflictions of muscle tendon, joint, bone or nerve, resulting in discomfort and disability from stiffness of the joints or muscles, pain on motion, etc. In this category are often included rheumatoid arthritis, degenerative joint diseases, spondylitis, bursitis, fibrositis, myositis, neuritis, lumbago, sciatica, and gout. [SNH p.41]

### Cause

Poor elimination causes rheumatism due to toxic matter becoming stagnated in various parts of the body. Thomas Deschauer explains it thus: "Urea should be daily expelled from our body, an ounce every day. Urea, as you might know, is completely changed waste matter, and as such easily expelled. Now if the process of turning the dead tissues into urea is incomplete--it forms uric acid. Certain foods and drinks cause the urea to be left unfinished. Or if the urea is hindered or stopped to be expelled, it also returns into the system and forms uric acid. This can be done by stopping perspiration, by cooling off quickly, by neglect of proper bathing, changing of underclothing, inhaling urea at night while sleeping in ill-ventilated room, etc. Avoid all these things if you want to get well. Some persons have what is known as the uric acid habit, that is, the waste matter does not break down completely. This tendency is due to an extremely abnormal and diseased condition of the blood." [SNH p.41]

### Herbal Aids

General Instructions: Relief of Rheumatism can be helped rapidly by a cleansing program and by the use of burdock root tea, with the burdock root and leaf fomentation (on the painful areas). Use apple cider vinegar and honey to cut the toxic wastes loose and expel them from the body. Use MCP pectin (tsp. three times a day) in water (it tastes like weak lemonade), or chaparral tea (three times a day, a teaspoon to the cup). The bowels and urethral tract should be kept open. A stimulant diuretic for the kidneys will aid in waste elimination and a diaphoretic should be used to assist in eliminating through the skin. [SNH p.41]

Chronic Rheumatism: Use the chronic rheumatism infusion in teaspoonful dose alone or the extract as indicated; or in the infusion in compound with black cohosh (*Cimicifuga racemosa*) and wintergreen (*Gaultheria procumbens*). [SNH p.61 Chronic rheumatism: See formula using poke berries, elder berries, sumac berries and blackberry. [SNH p.63]

See formula using burdock root, yarrow, buckbean, meadowsweet, raspberry leaves, barberry bark, licorice and cayenne. [SNH p.68]

See formula using burdock root, yarrow, cleavers, figwort, angelica and ginger. [SNH p.69]

Chaparral: Drink the tea (infusion for 3 weeks), after which the capsules or tablets may be used. [SNH p.71] Chaparral tea (not bitter). See formula using chaparral, elder flowers and peppermint. [SNH p.71]

Rheumatism: Use the strong decoction. [SNH p.73] Strong glycerodecoction of Oregon grape root: See formula using Oregon grape root, distilled water and glycerine. [SNH p.74]

Sassafras and Sarsaparilla: Drink an infusion of equal parts sassafras and sarsaparillas (*Smilax ornata* and 1/2 part *Guaiacum officinale*). [SNH p.79] Infusion of sassafras bark: See formula using sassafras, glycerine and distilled water. [SNH p.80]

Tumors

Wormwood: Apply fomentation of the herb; or, use the oil as a liniment. [SNH p.108]

Typhoid

See formula using turkey rhubarb, guaiacum gum and cayenne. [SNH p.187]

Ulcers

Boneset: Give in small, tonic doses- this is one of the best known remedies for this problem. [SNH p.225]

Uterus

Blue Cohosh: Use the warm decoction. [SNH p.292] Decoction of blue cohosh: See formula using blue cohosh, distilled water and glycerine. [SNH p.292]

Varicose Veins

Fomentation: See formula using mullein, lobelia and cayenne. [SNH p.318]

Vertigo

Compound Lobelia Capsules: See formula using lobelia powder, lobelia seed, cayenne, acacia vera and anise seed. [SNH p.364]

Vomiting

Strong Decoction of Wild Yam: See formula using wild yam, distilled water and glycerine. [SNH p.403]

Warts & Moles

Cayenne is used in nearly all fomentation, plasters, and poultices where speed is necessary, or where quick relief (as in arthritis, rheumatism, bursitis, sore muscles and those types or cases) is necessary. [SNH p.408]

Whooping Cough

Liniment: See formula using cayenne, lobelia, oil of wormwood, oil of rosemary and oil of spearmint. [SNH p.411]

Worms

Liniment for Rheumatism: See formula using prickly ash and olive oil. [SNH p.427]

Yellow Fever

Externally for Rheumatism: See formula using myrrh, cayenne and echinacea. [SNH p.456]

How to Use and Make a Fomentation: Here soak the cloth or Turkish towel application to be used in the herbal compounds that have been prepared in decoctions or infusions or in castor or olive oils, emulsions, essences, fluid extracts, spirits, tinctures juices, onions, garlic, carrots, etc. Here many types of oils are used hot: oil of wormwood, sassafras and peppermint make a very good combination for rheumatism, arthritis, sore joints, muscular spasms, and muscular soreness from exercise you are not accustomed to, and a fomentation with ointment is used occasionally in specific cases. The effectiveness of the fomentation can be speeded by using a hot water bottle during the warm application and alternating this with a cold application in many cases is very beneficial, following again with a hot one. The method to be used will depend on the type of problem, but specifically in sprains and sore muscles, the alternate hot-and-cold applications are very excellent. Generally, fomentation are covered with oiled silk, plastic, or wax paper, and a hot water bottle placed over this to keep the application warm, changing periodically when the potency and value of the tea itself has been absorbed out of the toweling. For a glandular swelling, the preferred procedure is a hot fomentation--always with moist heat. In case a hot water bottle is unavailable, then wrap a hot, wet Turkish towel around heated bricks or rocks, or use an electric heating pad (be sure here that there is no danger of an electrical short, however)--for as long as there is moisture between the body and the dry heat, then it is safe. Along with the fomentation, an internal tea used in combination with the external aid will greatly facilitate the healing process. [SNH p.500]

How to Take an Herbal Bath: For hydrotherapy, we oft times use decoctions, infusions, tinctures, dry powders, etc. in the water to bathe in using herbs (such as ginger, cayenne, mustard, and others). We also use foot baths and/or hand baths in heated apple cider vinegar for arthritis and rheumatism. [SNH p.500]

Steam Baths: One of the most important procedures of water therapy are the steam or sweat baths, and these will bring the poisons out of the body wonderfully. There are various types of steam baths, and these are all very valuable, very invigorating and health giving. This therapeutic procedure is recommended for help with arthritis, asthma, bursitis, colds, flu, hay fever, neuritis, pneumonia, rheumatism, sinusitis, stiff joints, etc. Someday, I hope to see a steam cabinet in every home (not a chicken on every plate and a car in every garage). In sweat therapy, we also have the [Cold Sheet Treatment](#)--a positive remedy for colds, flu, and pneumonia--which can be effectively used even in advanced and chronic cases. [SNH p.502]

Clean Out the Bowel: A condition of sciatic rheumatism will always develop where the sigmoid portion of the lower bowel becomes congested, and the toxic poisons from the bowel

subsequently flow into the adjacent area, irritating the nerves controlling the sacroiliac and, in turn, throwing it out of place--and so goes the vicious cycle! Hence, a periodic purification and cleansing of the lower intestinal tract is very important. This is your sewage system--and when the eliminative function is efficient and clean, you do not have to worry about sluggishness or toxification in the system. [HHH p.131]

[AR-1](#): Dr. Christopher's Arthritis and Rheumatism Formula: This combination consists of yucca, hydrangea root, Brigham herb, chaparral, lobelia, burdock root, sarsaparilla, wild lettuce, valerian, wormwood, cayenne, black cohosh, and black walnut. Here is a combination of herbs that helps the body to detoxify; act as a solvent for the accepted but not assimilated calcium deposits; herbs that help relieve pain; herbs rich in new acceptable organic calcium that can be assimilated and useful; herbs that help kill fungus and infection and that have the ability to help give wonderful relief. This relief is not immediate because here is a long rebuilding job--gradual relief can come, and full healing, if the program is followed faithfully: a cup two or three times a day (two tablets or capsules in Brigham tea or steam-distilled water).

Use as a hot fomentation over extremely painful or crippled areas (in addition to this formula), [BF & C](#): Dr. Christopher's Bone, Flesh and Cartilage Formula. Even though one uses these aids yet continues on with improper diet, one may get some help, but not so much as going all the way. Remember the teachings for years have been -- "No healing in this condition." We are giving you hope if you will follow through with these formulas and the mucusless diet. [HHH p.194]

Hyssop: Some have used it externally for rheumatism, being an old country cure for that complaint, both internally and externally. Hyssop baths have sometimes been used for this cure, although you would have to have a large growth of the plant in your herb garden. It is commonly used in perfumery and in the brewing of liquors. [UW-Hyssop]

Kelp: Kelp can be of great help in arthritis and rheumatism. These are due to an excess of certain acids in the system, and are usually associated with faulty kidney function plus a deficiency of the sodium salts. Orthodox medicine treats this problem with massive doses of sodium compounds to counteract acidity. Unfortunately this overdosing ruins the digestion and the kidney functions; arterial disease may also result. Sufferers from these conditions should limit their intake of acid forming foods, such as sugar, white flour products, and overcooked foods. They should eat plenty of fresh fruits and vegetables--and Kelp--which will help de-acidify the system and provide the necessary salts as well. [UW-Kelp]

Onion: For rheumatism accompanied by shooting pains, bran is boiled in water and the painful part soaked in the solution for fifteen minutes just before bedtime. As soon as the soaking is ended, several onions are separated into leaves and spread on the affected area and bound with a cloth. In the middle of the night, remove the poultice and wash the affected part, replacing the poultice until morning. This is repeated until results are obtained. [UW-Onion]

Gravel Root to Dissolve Minerals: This herb is a natural solvent for inorganic minerals such as calcium and other unwanted inorganic accepted but not assimilable substances. Dead inorganic calcium is accepted into the body but cannot be assimilated. No mineral can be assimilated into the human body unless it has gone through the process of osmosis through plant life (herbs). When an inorganic mineral is accepted into the body it is accumulative and continues to build up. This build-up can cause arthritis, rheumatism, kidney stones, gall stones, hardening of the arteries, cataracts, etc. This "building up" process must be reversed, so here we have an herb such as gravel root that will act as a solvent that will leach off dead inorganic calcium and other minerals in the same state. However, it will not have any influence on live organic minerals that can be assimilated directly into cell structure through the "delivery-system" of the blood stream. A true solvent, such as solvent herbs or steam distilled water acts as a magnet. The magnet will pick up dead inorganic iron and other metals but will not pick up wood, paper or higher vibrating materials. The solvent herbs or distilled water will pick up and leach off dead inorganic minerals, but will not vibrate to live organic minerals that have gone through plant life and can be assimilated into the body's cell structure. Dead, inorganic calcium is the type of material we want to get rid of, because this type of calcium can do us only harm. Some people panic--"What can I do to replace the calcium being leached out?" If you replace what you have just leached out it would be like cleaning out a garbage pail, and then replacing it with more of the same! Instead of doing this, let's replace the dead calcium by putting in a good organic usable calcium. To do this we have included into this formula oak bark, an astringent which is also high in live, assimilable

calcium. [NL 1-8]

Juices: Celery & cucumber, carrot, apple, lemon. [NL 3-5]

Calcium Buildup: Dr. D. C. Jarvis, M.D. ...noted that Vermont folk medicine, although they did not distinguish between arthritis, bursitis, rheumatism, gout, osteoarthritis, etc., they were successful in treating all these diseases with two teaspoonfuls of apple cider vinegar and two of honey in a glass of water three times a day. They felt that arthritis treatment began in the stomach where the acid balance prevented putrefaction of food. (Bacteria will not grow in an acid medium.) These bacteria guard the door to proper assimilation of nutriment in the stomach and intestine. One of the body's chief necessities is calcium. If the calcium balance is off, the results will be seen in many ways. There will be frayed nerves, inferior fingernails and hair, and other disorders including susceptibility to infectious diseases and arthritis resulting from altered body chemistry. Calcium enters into solution in an acid medium. The apple cider vinegar creates an acidic medium which is capable of dissolving excess inorganic calcium--even if it is in the form of arthritic deposits in the joints. [NL 3-11]

### Testimonials

1. Dr. Christopher's Rheumatism Flareups: During the process of cleansing and rebuilding your body, you can expect what is called a cleansing crisis. Your symptoms may all flare up; you may feel bad all over; you may feel like you have the flu. Just keep going, the cleansing crisis will pass, and you'll feel better than ever. Dr. Christopher used to have recurrent flareups of his rheumatism and arthritis; for a week or two every seven years he would have to go back to his wheelchair. He accepted these crises, as hard as they were to live with, and continued on with the business of cleansing and building. [EWH p.187]

2. Poke: The berries are used as a remedy for relieving the pains of rheumatism and arthritis. The tincture is used for this and it is borne out by Western use. One woman suffered intense pain from arthritis so much that she dreaded the winter months that would bring dampness, cold, and pain. She started taking a teaspoon of Poke berry tincture in a small glass of water twice a day and this completely cured her rheumatism (Luc:Secrets:106). [UW-Poke]

### See Also

[AR-1](#): Dr. Christopher's Arthritis and Rheumatism Formula

[Calc Tea](#): Dr. Christopher's Calcium Formula

[Cayenne](#): Dr. Christopher's many Cayenne Combinations (Red Sun Balm)

[Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula

[Arthritis](#)

## Ailments

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## Shock

### Definition

An abnormal condition that occurs when not enough blood flows through the body.

### Symptoms

A state of profound depression of the vital processes from various causes from emotional trauma to injury which reduces the blood pressure and venous return, thus impairing circulation which may cause irreversible circulatory failure and eventually death. [SNH p.44]

### Cause

Bad news or an automobile accident will bring on shock sufficient to weaken the body and bring on the problem. With perfect body function, a shock would not have this effect. It could cause a disquieting moment, but the body system would not undergo the extreme shock. The shock is greater when the person is not well. [SNH p.44]

### Herbal Aids

General Instructions: When a person goes into shock, the administration of medicinal aids orally will often be difficult or impossible. In this case an anus injection (or enema) which will cause relaxation is applicable. Use one cup (to a pint maximum) of catnip, peppermint, skullcap, spearmint, or valerian. Massage the abdomen and parts of the spine with lobelia externally and make sure that the patient gets undisturbed rest. Cayenne should be taken internally to help equalize the blood pressure and insure that the internal functions will remain stabilized during the intense systemal distress. [SNH p.44]

Caused by Hemorrhaging: Hemorrhage throws many people into shock and can bring on death very rapidly. If the wound is small, the blood usually coagulates and the area seals itself, but if the rupture is large, some herbal aid is needed. The first thing one should think about is cayenne as quickly as possible. Using one teaspoon to the cup, as hot as can be taken without scalding. This will help stop any hemorrhage, internal or external, by the time a person can count to ten. If the rupture is external and cayenne is not available, comfrey placed over the wound will stop bleeding quickly. [SNH p.30]

Blue Cohosh: Nervous exhaustion due to shock or accident. Use the warm decoction. [SNH p.292] Decoction of blue cohosh: See formula using blue cohosh, distilled water and glycerine. [SNH p.292]

Shock, Collapse, Prostration: See formula using myrrh, cayenne and echinacea. [SNH p.456]

Shock Tea for use During Labor: Be sure that you have cayenne, vinegar, and honey for the shock tea. Even if you do not tend to shock, it will warm you up and give you energy. [EWH p.70]

More General Instructions: Follow the standard first-aid techniques for shock, keeping the patient quiet and warm, and giving liquids if possible. The herbal shock formula, containing one cup of warm water, 1/8 cup honey, one tablespoon apple cider vinegar, and one teaspoon cayenne, works reliably to help bring a person out of shock. The Bach Flower Rescue Remedy works quickly, though subtly, for shock. Massage the feet and hands to help bring circulation to needy areas of the body. [EWH p.161]

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[Skullcap](#): In addition to its nerve building properties Skullcap is also an antispasmodic. It stops the shaking of St. Vitus' dance, palsy, convulsions, fits and even epilepsy, which is often a result of nervous exhaustion. It will help a person who has chronic twitching of the muscles or eye blinking. In cases of trembling due to shock it will quiet the nervous system and relieve the symptoms. [UW-Skullcap]

[Valerian](#): In mild cases of mental derangement, especially when caused by nervous shock of strain, in nervous atony, simulating paralysis, it is excellent. [UW-Valerian]

#### See Also

[Cayenne](#): Dr. Christophers many Cayenne Combinations

## Ailments

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## Skin Problems

### Definition

[Acne](#), [boils](#), [bruises](#), [burns](#), [sunburns](#), [eczema](#) etc.

### Herbal Aids

**Poke Root:** Poke root is excellent for all skin problems...Both the root and the tender leaves make an excellent spring tonic, and the tender leaves may be used as greens for the dinner table (boiled in two waters). Poke root has a slow, but persistently powerful action. [SNH p.59] More on Poke Root: The skin is an indicator of toxicity in the body. Poke is a good herbal aid for skin problems. It is also good for "the itch" in cases of scabies. Anytime you have skin which doesn't eliminate properly along with vitiated blood, you can well use Poke. It is said to be a great eliminator of toxins out of the system (Hut:36). Usually the glands are not performing properly in these conditions so the herb works on both areas. It is often used in chronic eczema, syphilitic eruptions, psoriasis, varicose veins and leg ulcers (Felk:1473). Mixed with iris it is used in boils, carbuncles, skin abscesses and all ulcerations of outlets of the body. It helps relieve the pain of burns and promotes rapid healing. For skin problems it should be used internally and externally (Felk:1473). [UW-Poke Root]

**European Pennyroyal:** Make an apple cider vinegar tincture with the freshly bruised herbs apply as a fomentation outwardly and drink internally. [SNH p.284]

**Sun:** Helios-therapy on the skin is very important, as the sun is the Great Doctor of all times. But this therapy must always be done with caution because the sun (though being a healer) is like fire, which can either provide gentle warmth or it can burn a city down. The sun will help heal where medicinal aids, herbs and other procedures are slower. In many instances, it will help bring skin cancer to the surface; and various other skin problems (such as acne, eczema, etc.) are beneficially aided by bathing in the sun. The internal use of tea of other herbal aids are often an herbal wash before the sunbathing are congenial and excellent. When there is moisture in the body, the sunbathing is much more beneficial--for instance, burdock seed and burdock root may be used internally (which work on the lymphatic and oil glands of the body), while at the same time using sun therapy for the outside. Indiscreet exposure can cause third-degree burns, shock, and death. The light-skinned individual must be most careful, but even a person with dark skin can get a very heavy burn. Helios-therapy is used on bright days, but we do advise against sunbathing at midday, between the period 11-1, when sun might be quite toxic to the user. A blonde person who has never done sunbathing before should never be out over one minute on the first day, adding a minute each day. This should be measured by stop watch or clock, and accuracy is important, because the feel of the sun is so luxurious that one will desire to stay in it just a little bit longer, and that can cause serious trouble. This may not sound like very much, but within thirty days a person can be sunning up to an hour total time! Brunettes can often start with two minutes front and two minutes back without any injury at all, and add four minutes a day. A person who has been sunbathing years before and has sunbathed regularly each season may start with a little more, five minutes front and five minutes back for the brunette, and two minutes front and two minutes back for the blonde. If done gradually and judiciously, this can give power to the body. The propaganda in daily newspapers and national publications each year (although promoted often by people with doctoral degrees) stating that "the sun causes cancer" is as ridiculous as saying "the tonsil is poisoning the whole body"--actually it is the putrid condition of the body that is poisoning the tonsil, or the skin! All the sun does is to ripen and bring the cancer that is already there to the surface, wherein the waste matter can slough off, so that the body may

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heal. This is why we must work inside the body with herbs, as well as outside the body with the sun, which will harmoniously speed the curative process and eliminate the problem so there is no recurrence. [SNH p.502]

**General Instructions:** Skin problems, use a fomentation over the irritated area made with chickweed tea and/or plantain, burdock root, Oregon grape root, and echinacea--covered with plastic. Or bathe the area with the tea a number of times during the day. Chickweed or plantain ointment is an aid for small outbreaks. Drink a cup of the tea two or three times or more a day. To each cup of the tea you drink add three to six drops of tincture of lobelia. [HHH p.68]

**Chickweed Ointment:** Dr. Christopher's Chickweed Ointment: This is made of chickweed herb and bees wax and oils. Excellent for eczema and/or other skin infections, sores, burning, itchy skin or genitals, swollen testes, acne, hives, also for ulceration of mouth and throat. This is a wonderful skin ointment. [HHH p.196]

**Gotu Kola:** The extract has been much-used to treat wounds and other skin problems, such as tuberculosis and leprosy. It's said to work marvelously in these complaints. It has been laboratory proven to help prevent infections, and so far has been shown to be absolutely safe. It can treat depression and mental weaknesses; many claim that it is a marvelous memory herb. If one takes too much of the herb, they will experience headache and stupor; thus, one must regulate one's personal dosage. [UW-Gotu Kola]

**Yellow Dock Combination:** Dr. Christopher's Yellow Dock Combination: Yellow dock along with burdock is noted as a blood purifier, especially helpful in cleansing the related lymphatic system. Because it helps clean the blood, it is also excellent for skin disorders. Its reputation as a blood purifier began in the nineteenth century when it was included in various preparations sold for the purpose and especially recommended for eruptive diseases such as scrofula and for skin problems generally. It is said to be effective for the heart and for impurities of the blood. It is recommended for toxic conditions of the blood and glandular system, especially when discharges are experienced, as in running of the ears, ulcerated eyelids, and skin conditions (Hut:315). There are various combinations recommended for blood purifiers. You can make the simple infusion, allowing to steep for thirty minutes, or you can combine with equal parts of red clover tops, Brigham tea, burdock and figwort, making 2 quarts of tea and reducing it down to one quart. Combine yellow dock, burdock, sarsaparilla and echinacea for an excellent blood cleanser, particularly good in treating post-adolescent skin acne or eruptions related to the menstrual cycle. It will help clear up eruptions on oily skin of the neck and back (Tie:166). [UW-Yellow Dock]

**Elder Flowers:** A bag of Elder flowers steeped in the bath water makes a refreshing bath for nerves or skin problems as recommended by a French doctor. [NL 4-10]

**Chickweed:** Chickweed is an excellent herb for skin afflictions. Used historically for abrasions, eruptions, itching, hives, inflamed surfaces generally, and even cancerous sores, you can bathe the surface of the skin with Chickweed tea or foment it with a cloth of natural fibers--never man-made, changing the application if it dries; you can cover it with plastic and leave it on all night as well. For immediate first aid for a wound or other skin problems, the very best application is the fresh herb, washed, crushed, and applied directly to the area, holding it in place with a bandage, or, according to some of the old-time herbalists, better covered with a large washed leaf of cabbage, lettuce, or beet and then covered with a cotton bandage. This application should be changed every three hours, or when it shows signs of drying out, applying a fresh poultice each time. When removed, it will be very hot and filled with the impurities which it has withdrawn. These "used" herbs should not be given to animals to eat, as they will absorb the toxins contained therein; discard them in an active compost pile or in the garbage. [NL 6-5]

### Testimonials

**Feeding His Own Skin Problems:** While serving in the army during World War II, we had a soldier come to us with a bad case of boils under both arms. We lanced and treated them as usual, but in a week or so he was back with another crop. When questioned about it, he said that he had been plagued with the problem all his life. I asked him if he wanted to rid his body of the boils, and he said he did. So I gave him a prescription, to the mess sergeant (not to the druggist): no

fried foods, no milk, no meat, no potatoes, no soft drinks, but all fresh fruits and vegetables. Needless to say, the boils promptly cleared up and he had no recurrence of them. So these types of diseases must be treated by clearing up the blood stream and keeping it clean if healing is to be realized. [SNH p.69]

**See Also**

[BF & C](#): Dr. Christopher's Bone, Flesh and Cartilage Formula

[Chickweed Ointment](#): Dr. Christopher's Chickweed Ointment

[Acne](#)

[Boils](#)

[Bruises](#)

[Burns & Sunburns](#)

[Eczema](#)

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## Smallpox

While researching Smallpox to add to HerbalLegacy, we repeatedly found conflicting information. Some sources said that smallpox is not a contagious disease, and other sources said it was a highly contagious disease. All sources expressed concern about the safety of the smallpox vaccine.

For those who are worried about the possibility of exposure to smallpox due to the recent terrorist acts against the United States, there is some good news. Unlike pulmonary [anthrax](#), which is fatal, the majority of smallpox patients survive. When smallpox cases were rampant, knowledge of disease and medical treatment was dramatically different than today. A number of eruptive diseases such as measles, chicken pox, scarlet fever etc. were regarded as smallpox before Dr. Sydenham differentiated between the various symptom-complexes. We do not have accurate numbers as to how many cases were actually smallpox! In addition, how diseases were treated in those days compared to how disease is treated today is astounding. Under the conventional medical treatment at the time, patients were drugged heroically, bled profusely, were smothered in blankets, wallowed in dirty linen, were allowed no water or fresh air. While we might have to agree that patients continue to be “drugged heroically” today, patients are no longer bled, they have fresh bedding, and we give them fluids and fresh air. In addition to these treatments, the patients were often given milk, brandy or wine. They were given Antimony and Mercury in large doses. We have since learned that Mercury is toxic to the body. Perhaps the cure killed off more patients than the disease did! Fever patients were put into vapor bath chambers in order to sweat the impurities out of the system, but they were given no fluids! Anyone who has studied the Dr. Christopher Method knows that hot baths can do wonders, but you must give the patient fluids! You must replace what is removed! When these poor souls would cry for water, they weren't given any, and when they were gasping for air they were carried to a dry-hot room and after a while were returned to the steam torture. Many must have died of Heat Stroke. Remember, “a wet fever heals, a dry fever kills.”

Smallpox appears to have originated after the collapse of the Greek and Roman Empires. These empires were well known for their high standards of health and cleanliness. A disease resembling smallpox devastated Africa and Asia, but the great “pagan” civilizations were spared. Why? Perhaps it had to do with their public baths, gymnasia, solaria, athletic stadiums, municipal water supply, drainage, toilet facilities, well-aired, sunny, spacious and clean living quarters, garbage disposal, simple, natural and unspoiled foods. The sanitary conditions of the towns and cities of Europe were nowhere near as high as that of the Roman and Greek Empires. According to Montgomery's English History, the streets of London and other cities were rarely more than twelve to fifteen feet wide and were neither paved nor lighted. There were pools of stagnant water accumulating everywhere, heaps of garbage piled everywhere, and only removed when it began to obstruct the traffic. There was no sewage and dead dogs, cats, rubbish, rotten vegetable and fruit refuse, human and animal excreta, and slops from the kitchen were all thrown into the streets. This sounds like prime breeding ground for a variety of diseases. These were the conditions in which the bubonic plague thrived! The cities were surrounded by high walls, and could not expand so people were forced to live in a slum-like manner. There were holes for windows, which provided little or no ventilation. Entire families slept in one room—often in one bed—and hundreds of people would live in one building! The people rarely washed, they had no bathtubs, seldom had underwear and wore the same clothes day and night. They lived in utter poverty,

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working long slave-like hours (even the children), drank heavily of alcohol, ate spoiled, unnatural food and suffered from malnutrition. The wealthier classes fared only slightly better.

With time, these conditions changed. Sewage systems were developed, bathing became more popular, and people stopped dumping their trash in the streets. Dr. John Tilden said "There is no question but that perfect sanitation has almost obliterated this disease, and sooner or later will dispose of it entirely. Of course, when that time comes, in all probability the credit will be given to vaccination." This came to pass in 1977, when the World Health Organization declared that smallpox had been eradicated from the earth. This statement, however, is misleading.

The last naturally occurring case of smallpox occurred October 26, 1977 in Somalia. All cases since then have been caused by laboratory exposure, or vaccination. WHO should have said that there have been no naturally occurring cases of smallpox since 1977. They cannot claim it has been eradicated because it exists in laboratories! Also, the monkeypox virus differs from smallpox by only a slight difference in the protein structure. And, as has been done before, there is a suspicious discrepancy in the number of smallpox cases. Many more deaths have been attributed to the measles and chickenpox in the years of the smallpox decline. There have been several cases of diseases that were most likely smallpox, but were listed as eczema. This could be an attempt to cover up the fact that smallpox was not eradicated, as the World Health Organization claimed. This does not mean that WHO is trying to cover anything up—it just looks a little suspicious.

### **Symptoms:**

Initial symptoms include high fever, fatigue, and head and back aches. A characteristic rash, most prominent on the face, arms, and legs, follows in 2-3 days. The rash starts with flat red lesions that evolve at the same rate. Lesions become pus-filled and begin to crust early in the second week. Scabs develop and then separate and fall off after about 3-4 weeks. The majority of patients with smallpox recover, but death occurs in up to 30% of cases.

### **Cause:**

Smallpox is caused by the variola virus. The incubation period is about 12 days (range: 7 to 17 days) following exposure. Smallpox is spread from one person to another by infected saliva droplets that expose a susceptible person having face-to-face contact with the ill person. Persons with smallpox are most infectious during the first week of illness, because that is when the largest amount of virus is present in saliva. However, some risk of transmission lasts until all scabs have fallen off.

Walene James: "Dr Campbell discovered smallpox was caused by the bite of a bedbug...and the degree of severity of the disease was directly proportional to the cachexia (general ill health and malnutrition) of the patient...He spoke of "scorbutic cachexia" relating it to scurvy, "the disease caused by lack of green food" and said "the removal of this perversion of nutrition will so mitigate the virulence of this malady as positively to prevent the pitting or pocking of smallpox." (Immunization p54. Bacteria Inc by Cash Asher 1949).

"There is no question but that perfect sanitation has almost obliterated this disease, and sooner or later will dispose of it entirely. Of course, when that time comes, in all probability the credit will be given to vaccination." -- [John Tilden MD](#)

"Smallpox...is a filth disease, that its microzymas grow in morbid soil only and that the smallpox eruptions are a sign of rapid elimination of hereditary and acquired disease traits. " -- Henry Lindlahr M.D.

"Noticing the class of people among whom the disease is most fatal, I was led to the conclusion that the cause in most cases was dirt, and that vaccination was powerless to prevent it. I found that where there was most overcrowding there smallpox was most prevalent. The worst case I have ever seen occurred three weeks after re-vaccination." -- Dr Allinson

"I am myself perfectly convinced that all zymotic diseases arise from and are intensified by unsanitary conditions and surroundings; that the abolition of the latter is the only radical method of stamping out this class of disease, that to put out one by a special prophylactic, while the conditions which produce all abound, is as illogical as it is impracticable; and that further, when that prophylactic is fraught with risk which, though it may be small, is yet not certainly avoidable, compulsory vaccination becomes cruel as well as ineffectual." -- Dr Collins

**Treatment:**

Many of the sources we checked while researching smallpox said that there is no treatment. They said that all you can do is administer the smallpox vaccine and treat the secondary infections, such as gangrene. Dr. Christopher said "There are no incurable diseases, there are only incurable people." So we checked to see what Dr. Christopher would do for smallpox. In his books, School of Natural Healing and Herbal Home Health Care, Dr. Christopher mentioned several herbs that would help with smallpox. These herbs are: Garlic, Bistort, Black Cohosh, Goldenseal, Hyssop, Lobelia, Pennyroyal, Tansy, Tormentil, and Yarrow. In addition, the [Anti-Plague formula](#) would be an excellent formula to use, as it boosts the immune system and has anti-viral properties. In addition, the lower bowel tonic would play a big part in the program in that keeping the bowel moving is extremely important in all health issues.

**Herbal Aids:**

Tansy: Use the infusion or decoction as a wash, etc. [SNH p.123] Infusion of tansy: See formula using tansy and distilled water. [SNH p.124]

Natural Cleansing of the Body: It is alarming to hear a mother say, "When my child was breaking out with chicken pox (measles, or some other childhood disease), he was given some suppressive medication, and only two or three small spots broke out on his body." Here, unknowingly, the parents have gone against nature's procedure for cleaning out the toxins of the body. They have locked in the harmful condition, which may give the body trouble, perhaps many years later. [HHH p.21]

General Instructions: Give the child a warm catnip tea enema. Herbal teas such as catnip and peppermint, pleurisy root and catnip, red raspberry leaf, and yarrow or pennyroyal, elder flowers and peppermint with vinegar and water will relieve the itching. Also, bathe or sponge skin with tea made of burdock root, golden seal and yellow dock root in case of severe itching. [HHH p.50]

More General Instructions: The proper program is to cleanse the body and to follow the program of moist heat and bring out a good showing of the pox. Use the following instruction for all types of high fever diseases. (See aids to fevers and their causes, appendix D.) [HHH p.170] If the child is slow in breaking out, give him a good hot (warm) bath. Have him drink lots of liquids throughout the day -- fruit and vegetable juices, lemonade sweetened with honey (no sugars), and fruits. If this program is followed, the disease should follow a mild course with little discomfort. [HHH p.50]

Skin Eruptions: When rashes and pus eruptions of disease break out on the body, do not stop them. This is poison in the body that should be released. Keeping the skin from breaking out is again defeating nature's efforts for a complete healing and housecleaning. The larger the breakout of rashes (chicken pox, measles, etc.) the better off the child! If the body is in a fairly clean condition and you follow these suggestions of natural therapy you may see that the rash is not as heavy as you might expect -- because there was not that amount of toxic waste to eliminate. In other cases the body can be well covered with the dermal or dermatitis breakout.

There is nothing to fear as long as you are willing to work with nature. [There is much more information about skin eruptions in the appendix on p. 174.] [HHH p.174]

Yarrow: If you give the tea to children during the early stages of eruptive diseases, such as measles, chicken pox, smallpox, etc., the tea will help the disease to break out more quickly and thus shorten the time. Dr. Christopher recommended a mixture of Yarrow, pleurisy root and lady's slipper (or skullcap) for the measles.

Anytime there is a fever, no matter what the disease, Yarrow can help break it and bring the disease to a speedier ending. [UW-Yarrow]

Vinegar: A child suffering from the itch of chicken pox or measles can be sponged with a solution of 1/2 apple cider vinegar and 1/2 distilled water. [NL 4-7]

General Instructions: This disease must be brought to the surface through the skin as rapidly as possible. Diaphoretic herbs such as yarrow and raspberry leaf are excellent. Use vapor baths (such as ginger, mustard and cayenne), which bring the toxic wastes to a head quickly. Moisture

is required or the organic calcium will turn into inorganic calcium because of the feverish dry body heat, which causes further tissue damage. [Rheumatic fever](#) is often the aftermath of diseases such as chicken pox and measles. Take care of the bronchi and the eyes. Avoid bright light, since the eyes are weak at this time. The bowels should be kept open with the lower bowel tonic [Fen LB](#). A catnip enema is soothing and beneficial. Ripe fruits will assist in the cleansing process. [SNH p.36]

**General Instructions Especially for Children:** If the child is slow in breaking out, give a good hot bath. It is important to clean out the bowels, so give the patient a warm catnip (tea) enema each day. Put him to bed and give a tea made of equal parts of yarrow, pleurisy root and lady's slipper (use valerian root or catnip if lady's slipper is unavailable). Give this tea freely to produce perspiration which will also lower the fever. (Red sage, red raspberry leaf or chamomile teas are also excellent for a patient with measles.) Also, a pleasant herbal tea made of equal parts catnip, raspberry leaf, peppermint leaf, can be given freely throughout the day. It is best to keep the room dark so that the eyes will not become irritated. In the event the child's eyes do become sore, bathe them two or three times a day with a solution (tea) made of equal parts of eyebright, raspberry leaf, and golden seal. If the child complains of itching, bathe or sponge the skin with a tea made of yellow dock and burdock root and/or golden seal. Adding a little apple cider vinegar to a tub of bath water is also helpful. Guard the patient against bronchial troubles and earache and have him drink plenty of liquids (distilled water, herbal teas, as recommended, and fruit juices). The diet should be simple--plenty of fresh ripe fruit, fruit juices and fresh vegetable juice. One very good combination is carrot juice with celery, spinach and parsley juice added to taste. [HHH p.105]

**Bistort:** Bistort decoction, powder, etc., is very cleansing, astringing and toning; also combine equal parts with red raspberry leaves (*Rubus idaeus*). [SNH p.162]

**European Pennyroyal:** Give the infusion in teacupful doses, repeated frequently (every 1-2 hours), and when the herb is unavailable, 1-3 drops of the oil in warm water is excellent. Pennyroyal has an agreeable and warming influence on the stomach, and its diaphoretic and stimulative action recommends it highly for feverish conditions, bronchial congestion, eruptive diseases (measles, smallpox, etc.). [SNH p.283]

**Golden Seal Wash:** Use as a wash the formula using golden seal and linseed oil. [SNH p.439]

### **Vaccination:**

Vaccination against smallpox is not recommended to prevent the disease in the general public and therefore is not available. Routine vaccination for smallpox was discontinued in 1972. Read on for more information concerning the smallpox vaccine:

"There is no question but that perfect sanitation has almost obliterated this disease, and sooner or later will dispose of it entirely. Of course, when that time comes, in all probability the credit will be given to vaccination." -- [John Tilden MD](#)

"I well remember, some years ago, listening to a knighted medical researcher as he spoke, on the radio, about vaccines. He told two classical stories from the history books. The first concerned Edward Jenner who, according to history, watched as the milkmaid caught cowpox and this protected her from smallpox. So Jenner got some of the 'cowpox' and inoculated it into someone's arm - it fostered and the pus was then inoculated into someone else - 100% success was claimed. 100%!! How absurd - complete with all sorts of germs including [hepatitis](#), [syphilis](#) and whatever. If one did that today, without antibiotics, the death rate would be huge."-- [Dr Kalokerinos, M.D.](#)

"The lymph used was of unknown origin, kept in capillary glass tubes, from whence it was blown into a cup into which the lancet was dipped. No pretence of cleaning the lancet was made; it drew blood in very many instances, and it was used upon as many as 276 during the first day (on board ship). .....no one can estimate the number of healthy, innocent children, as well as adults, who are inoculated with syphilis or other foul disease." -- William Tebb 1884 ([Compulsory Vaccination in England by William Tebb](#))

"The doctor, dipping his lancet in the bottle of mystery, wiped it on a spot on the arm, and cut and cross-cut the skin, and then, after rapidly stretching and closing the incisions with his thumbs, gave the wretch his ticket and passed him on. Such was the ordinance of Vaccination-a sight not

to be forgotten." -- [F. SCRIMSHAW 1883](#)

"HUMAN AND Bovine Tuberculosis.-At a meeting of the National Veterinary Association, on May 8, in a paper written by Mr. J. K. Cox, of the Army Veterinary Department, several cases were cited where the milk from "wasting cows " was used for food, and those using the milk were attacked with phthisia and died. Apparently there is no question among veterinarians that tuberculosis is communicable in the milk and flesh of animals to man; and if thus communicable in the process of digestion, how much more must it be communicable when the products of disease from tuberculosis animals are inoculated in the blood under the euphemism of "pure lymph from the calf!" . ([Vaccination Inquirer 1883 Vol5 p114](#))

"I should be sorry to see a leper cook, and I go further than that. In vaccinating, I think hardly a medical man would take vaccine lymph from the arm of a leper infant. I know it has been our practice for the last twenty years not to do so." -- 1883 Dr Henry Ebden, President of the (South African) Medical Board ([Leprosy & Vaccination by William Tebb](#))

"The chief of the Public Health Department was clearly not aware that until a comparatively recent period arm-to-arm vaccination was practically the only method in vogue; and at the time Mr. Ritchie's declaration was made, to the effect that none of the lymph in use had passed through the human body, at least three-fourths of the lymph in use in the United Kingdom was the variety known as arm-to-arm vaccination virus." -- [William Tebb 1893](#)

"LYMPH, a colourless nutritive fluid in animal bodies" (Chambers' Dictionary). How misleading to apply this term to a product of disease, used to produce another disease, and now admitted to be capable of transmitting some of the most horrible diseases which afflict mankind-syphilis and leprosy!" -- [Alfred Wallace](#)

"Perhaps the greatest evil of immunization lies in its diversion of public attention from true methods of disease prevention. It encourages public authorities to permit all kinds of sanitary defects and social problems to remain undressed, particularly in schools. It ignores the part played by food and sunlight and many other factors in the maintenance of health. It exaggerates the risk of diphtheria and works upon the fear of parents. The more it is supported by public authorities, the more will its dangers and disadvantages be concealed or denied." -- [M. Meadow Bayly, M.R.C.S., 1944](#)

To test the effectiveness of natural immunity versus vaccination, the nonvaccinated Kingston Clinic staff challenged six vaccinated doctors to join them, in 1936, in a smallpox isolation unit. The doctors had the very good sense not to accept the offer.

"Smallpox is considered one of the most virulent of contagious diseases, and it is generally believed that persons exposed are almost invariably attacked, unless protected by vaccination. This is one of the most stupendous exaggerations to be found in medical literature. My experience has been that very few people take it when exposed to it." -- [John Tilden MD](#)

### **Severity of Smallpox:**

Many people are panicking about the possibility of a smallpox outbreak due to biological warfare. These people need to be reminded about the conditions in which smallpox thrived in the 1700's, and how the majority of the population no longer live that way. We no longer throw our trash and sewage into the street. We have indoor plumbing, we live clean lives, and the care that our patients receive is a lot better than it was back then. Our patients are clean, they get clean sheets, and they are not crammed into sickrooms with tons of other patients. Nor are they bled or given mercury, both of which will kill you. Read on for further information regarding the severity of the smallpox disease:

"Dr. Bridges, in his Report, observes that "of 796 visitors who paid 1118 visits, only 3 were afterwards admitted into the hospital with small-pox." Mr. Sweeting, of the Fulham Hospital, writes :-" 33 patients were visited by 48 persons, who made altogether 76 visits; only one of the visitors was afterwards admitted with small-pox." ...Dr. Bernard, of the Stockwell Hospital, writes :-" 1056 visits were paid into the wards of the hospital. It is interesting to be able to say that, as far as I have heard, no one caught small-pox thereby;" -- [The Fable of the Smallpox Nurses and Revaccination](#)

"As a matter of fact, perhaps it is safe to say that not more than 10 per cent of the people ever would take smallpox if sleeping in the same bed with an infected smallpox victim." -- [Dr Hay](#)

"Both Press and Radio continue to preach that smallpox is a terribly infectious and deadly scourge. They never tell us that " - . - provided no mischief be done either by physician or nurse, it is the most safe and slight of all diseases". (Dr. Thomas Sydenham, 1688). -- [Lionel Dole](#)

"For years Dr. Matthew J. Rodermund, MD of Wisconsin, USA, offered \$10,000 to anyone who could prove scientifically that smallpox is contagious. Nobody ever claimed the money. Dr Charles A.A. Campbell, MD of San Antonio, USA, who was for years in charge of an isolation hospital made exhaustive experiments in order to demonstrate that smallpox is contagious, but found that this is not the case." -- [Keki Sidhwa ND](#)

"Dr Rodermund, a physician in the state of Wisconsin, created a sensation by smearing his body with the exudate of smallpox sores in order to demonstrate to his medical colleagues that a healthy body could not be infected with the disease. He was arrested and quarantined in jail, but not before he had come into contact with many people. Not a single case of smallpox developed through this "exposure"....I have ...handled intimately thousands of cases of contagious diseases, and I do not remember a single instance where any of us was the least affected by such contact." -- [Henry Lindlahr MD](#) (Philosophy of Natural Therapeutics p 39).

An Obstinate Baby -- At a public meeting held in the Town Hall, Derby, March 2, 1871, a working man caused much amusement by asking Dr Greaves how it was that when four out five of his children were down with smallpox, the fifth, unvaccinated, would not take the disease, although placed between two of the others in bed.

"In a recent number of the Leicester Free Press, it is said : " So far as we are concerned in Leicester, a town containing 120,000 inhabitants, with many thousands of unvaccinated children, smallpox seems to be about the least dangerous of all diseases, and is not to be named by the side of scarlet fever, measles, whooping cough, diarrhea, or even consumption. If a case of small-pox is discovered, instant isolation is adopted, and during the last five years we have hardly had five deaths. That being the state of the case, one need not wonder that the fear of the disease should disappear, or that resistance to vaccination should increase." -- [William Tebb 1881](#)

"Dr. Russell T. Trall, the eminent Natural Hygienist, considered smallpox "as essentially . . . not a dangerous disease." He cared for large numbers of patients afflicted with smallpox and never lost a case. Under conventional medical treatment, patients were drugged heroically, bled profusely, were smothered in blankets, wallowed in dirty linen, were allowed no water, fresh air and stuffed with milk, brandy or wine. Antimony and Mercury were medicated in large doses. Physicians kept their patients bundled up warm in bed, with the room heated and doors and windows carefully closed, so that not a breath of fresh air could get in, and given freely large doses of drugs to induce sweating (Sudorifics), plus wine and aromatized liquors. Fever patients were put into vapor bath chambers in order to sweat the impurities out of the system. Given no water when they cried for it and when gasping for air were carried to a dry-hot room and after a while were returned to the steam torture. Many must have died of Heat Stroke!" -- [Dr Shelton DC](#)

"During the Brighton smallpox outbreak (1950-51), the usual BBC encephalitis campaign opened with an anonymous doctor assuring the world, with authoritative emphasis, that "smallpox is the most infectious disease known to Man"! The BBC had evidently never heard of influenza. During the smallpox outbreak of 1961-2, on the other hand, we heard medical officers of health saying on the radio such things as, "After all, smallpox is not such a very infectious disease." This would have been held to be pure blasphemy only a few years ago. May the good work go on!" -- [Lionel Dole](#)

#### Herbal Formulas:

[Ant-Plg](#): Dr. Christopher's Immune System Support Formula

Echinacea with Goldenseal

[X-Ceptic](#)

#### See Also:

[Dr. John R. Christophers "Cold Sheet Treatment"](#)

[2-9](#): Garlic: Man's Best Friend in a Toxic World

[Dr. John R. Christophers "Anti-Plague Formula"](#)

## Ailments

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## Snakebite

### Definition

A wound resulting from the piercing of the flesh by the fangs of a snake.

### Herbal Aids

Plantain: The American Indians used Plantain for a variety of ills. It is said that a South Carolina Indian was given a reward for the information that Plantain was the chief remedy for the cure of rattlesnake bite. Indians are said to have applied a poultice of Plantain for battle bruises and for drawing out snake poisons (Coon:211). The Shoshone Indians made poultices of the whole plant and applied them to the bruises of battles. In some cases, the poultices are combined with the foliage of wild clematis. The Indians of southern Massachusetts applied the leaves both for wounds and for snakebites (Coon:158). The Chippewas used it for inflammation, and as an application to draw out a splinter (Densmore:291). [UW-Plantain]

Echinacea: The Omaha Poncas used Echinacea as a basic herb for a variety of ailments. The fresh root was placed on toothaches until the pain subsided. It was used on enlarged glands--like mumps. A smoke fumigant of Echinacea was used to treat headaches, snakebite. [NL 6-12]

Black Cohosh: The bruised root, applied to the wound, was used by the Indians as an antidote for snakebite, with the juice in small amounts taken internally, apparently by chewing bits of the root (Hut:79). [NL 5-6]

Snakebite

[Tumors](#)

[Typhoid](#)

[Ulcers](#)

[Uterus](#)

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## Sour Stomach

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See [Dyspepsia](#)

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## Spasms

### Definition

A sudden, involuntary, and unnatural muscular contraction. [SNH p.45]

### Cause

Spasms may arise from calcium deficiency, panic, fear or overeating. [SNH p.45]

### Herbal Aids

General Instructions: If the spasm is in a muscle and easy to reach, a good nervine (especially wormwood oil) as a liniment massaged into the problem area will give quick relief. For internal spasms (such as in the stomach area) give a few drops of lobelia tincture each half hour. [SNH p.45]

About Antispasmodics and What They Do: Antispasmodics are herbal agents that prevent or relieve excessive contractions (spasms) or the voluntary or involuntary muscles in any part of the body. Many function by stimulating the higher nervous, coordinating, and power centers (the nervines); others by depressing all of the vital functions (lobelia, American hellebore, etc.); and a number stimulate the muscular fibers of the intestines to expel gaseous accumulations (asafoetida, valerian, wild yam, cajuput, etc.). The majority of these herbs act upon the functions of deranged nerves, and relieve nervous tension and irritability caused by irregular and painful action of the muscles. These herbs are most effective in cases of suspended animation or locked joints, so they are especially useful as anti-tetanus agents. [SNH p.369]

About Scullcap and How it Works: Scullcap is one of the best nervine agents that nature provides. It is as stimulating to the nerves as quinine, but lacks the harmful side--and aftereffects. It is especially calming and nutritive in neurasthenic conditions (neural conditions characterized by emotional conflict, worry, disturbances of digestion and circulation, etc.). It is an excellent antispasmodic agent for restlessness, tremors, spasms, twitching of the muscles, and hyperesthesia (hyper-sensitivity). Dr. Nowell asserted that: "It will influence the spinal cord and the sympathetic nervous system (supplying the various involuntary organs and blood vessels) as well as the brain, bringing to all a tonic influence which is quite permanent. . . It tones and soothes the nervous system, and, without any narcotic properties, quiets the patient and often brings about quiet, natural sleep." Dr. Shook concluded: "Scullcap is a slow-working, but sure remedy for practically all nervous affections, but it must be taken regularly for a long period of time to be of permanent benefit." [SNH p.370]

About Cramp Bark: Cramp bark is highly regarded as an antispasmodic agent. It is considered one of the best female regulators and relaxants of the ovaries and uterus, and is highly effective in preventing abortions due to nervous affections during pregnancy. Cramp bark will speedily quiet the uneasiness and relieve the pains of uterine and abdominal cramps, and is a remedy for nervous disorders and spasms of all kinds. [SNH p.392]

Using Tinctures (often rectally) for Spasms: These are often used in the anus to save lives, because after a person has gone into spasms or convulsions, nothing can be put into the body through the mouth. Never use a tincture at full strength, always dilute. Be very careful, for, although the tincture injection will not do any critical damage, it may cause inconvenience. With the average tincture (the way we make them to be administered per rectum), the dilution should be 1 teaspoonful to each cup of water or tea combination. [SNH p.495]

[Tumors](#)

[Sassafras](#): Pains and spasms in the region of the hearty flatulence. Give the warm infusion. [SNH p.79]

[Typhoid](#)

[Tansy](#): Take the infusion, making sure to preserve the volatile essential oils which possess much of the medicinal potency for these problems. [SNH p.123]

[Ulcers](#)

[Thyme](#): Give a cold infusion. [SNH p.227]

[Uterus](#)

[Catnip](#): Give 2 tablespoonfuls frequently; children: 2-3 teaspoonfuls. [SNH p.236]

[Varicose Veins](#)

[Babies Soothing Syrup](#) (stomach and bowel pains, aches, cramps, colic, spasms, convulsions, flatulence, common ailments): See formula using parsley seed, caraway seed, rhubarb, cinnamon bark, sugar, essence of peppermint and water. [SNH p.248]

[Vertigo](#)

[European Pennyroyal](#): Give the infusion in teacupful doses, repeated frequently (every 1-2 hours), and when the herb is unavailable, 1-3 drops of the oil in warm water is excellent. [SNH p.283]

[Vomiting](#)

[Rue](#): Chew 1-2 freshly-picked leaves. NEVER TAKE RUE IF YOU ARE PREGNANT. [SNH p.295]

[Warts & Moles](#)

[Syrup of Motherwort](#): See formula using motherwort, distilled water and yellow D sugar. [SNH p.299]

[Worms](#)

[Asthmatic Spasms \(inhalant\)](#): See formula using life root, mouse ear and wormwood. [SNH p.302]

[Yellow Fever](#)

[Lobelia](#): Thomson writes: In cases where the spasms are so violent that they are stiff, and the jaws become set, by pouring some of this liquid into the mouth between the cheek and teeth, as soon as it touches the glands roots of the tongue, the spasms will relax, and the jaw will become loosened so that the mouth will open; then give a dose of it, and as soon as the spasms have abated, repeat it. . . . [SNH p.361]

[Painful Cramps and Spasms](#): Give one teaspoonful of Antispasmodic tincture in 1/2 cup of sweetened warm water. This action will take about 15 seconds. [SNH p.363]

[Jamaica Ginger](#): Muscle spasms and irritations. Use in a liniment or plaster. [SNH p.414]

[Catnip & Fennel](#): Dr. Christopher's Catnip and Fennel Tincture: A blessing for infants. A fine combination for colic, biliousness, flatulence, spasms, etc. Use a few drops, or as much as needed, when desired. [HHH p.196]

[Antisp](#): Dr. Christopher's Anti-Spasmodic Tincture: Consists of skullcap herb, lobelia, cayenne, valerian root, skunk cabbage, gum myrrh, and black cohosh. To be used in cases of convulsions, fainting, cramps, delirium tremors, hysteria, etc., also good for pyorrhea, mouth sores, coughs, throat infections, tonsillitis, etc. Dose 1/2 to one teaspoon to glass of steam distilled water as a gargle and use until throat clears, also take one teaspoon in steam distilled water morning and evening. [HHH p.195] For baby convulsions, place a drop or two of the tincture on the tip of a clean finger and place it in the baby's mouth. This should stop the spasms immediately. The antispasmodic tincture, which combines equal parts of Lobelia, scullcap, skunk cabbage, gum myrrh, black cohosh, and a half part of cayenne, is even more effective. This is also used by the teaspoonful in sweetened warm water for painful spasms of any kind in the body. It should relieve attacks of epilepsy, lockjaw, delirium tremens, fainting, hysteria, suspended animation, etc. (SNH:363). [UW-Lobelia]

### Testimonials

[Lobelia](#): Most people agree that Lobelia is a specific treatment for asthma, as well as other bronchial or spasmodic troubles. Because the herb removes obstructions, giving it when an attack comes on will often cause vomiting; matter will accumulate in the stomach which will cause obstructions. When the person vomits, it removes the intestinal blockage and often removes the mucus accumulations in the bronchial system as well. Dr. Nowell told the story of a woman who at forty years old was pregnant with her first baby. She was suffering terribly with asthmatic spasms, unable to lie in bed, fighting for breath; both she and her husband begged their doctor to

stop the cough. They were told that nothing could be done until the child was born.

Dr. Nowell gave them a bottle of tincture of Lobelia, telling her to take a teaspoonful whenever the coughing began. The next morning, the patient told the Doctor that almost immediately after taking the first dose, the patient brought up long, thick masses of phlegm from the lungs the size of a man's fist. No further dose was taken and the patient never had a trace of any chest trouble since and lived a long and fruitful life (Klo:272). [UW-Lobelia]

#### See Also

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture

[Catnip & Fennel](#): Dr. Christopher's Catnip and Fennel Tincture

## Ailments

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## Sprains

### Definition

An injury to the tendons, muscles, or ligaments around a joint, marked by swelling and pain.

### Herbal Aids

Wormwood: Apply fomentation of the herb; or, use the oil as a liniment. [SNH p.108]

Tansy: Bruise and apply the green leaves, or use the herb preparation as a fomentation, wash, etc. [SNH p.124]

Balm of Gilead: Use the ointment (see "Formulas"); for skin diseases, burns, wounds, etc. apply on lint and bandage. [SNH p.202] Balm of Gilead ointment: See formula using Balm of Gilead, castor oil, eucalyptol and anhydrous lanolin. [SNH p.203]

Comfrey: Apply a comfrey poultice of the fresh, bruised leaves. It relieves pain in an hour. [SNH p.310]

Comfrey Paste: See formula using comfrey leaves, lobelia, honey and wheat germ oil. [SNH p.313]

See formula using marshmallow root or leaves and camomile flowers. [SNH p.331]

Liniment for Sprains: See formula using cayenne and apple cider vinegar. Apply over the area where needed without too much massage. [SNH p.410]

Another Liniment for Sprains: See formula using cayenne, lobelia, oil of wormwood, oil of rosemary and oil of spearmint. [SNH p.411]

See formula using myrrh, cayenne and echinacea. [SNH p.456]

Liniments: Massaging oils, tinctures, and teas on the skin are very beneficial. This may be done anywhere on the external tissue, but where rapid absorption is critical, an accentuating aid must be added. Massage the preparation in thoroughly and see that very little medicinal agent is left on the skin surface, but rubbed well into the skin and flesh itself. Liniments are excellent for sore muscles and sprains, and often lobelia is used here in combination with other herbal preparations, to ease the pain. [SNH p.500]

Dr. Christopher's Bone, Flesh and Cartilage: Soak the ankle in a hot foot bath. You can add some fresh, hot comfrey or BF & C tea to the bath if you have it. Alternate soaking the sprain in ice cold water. Drink lots of comfrey in tea or green drink. Apply a fomentation of BF & C and wrap it securely around the sprain. Use a combination of BF & C ointment and Professor Cayenne's Heating Balm. Take it easy until the pain eases. [EWH p.166]

Elder: The leaves are universally recommended for making salves and oils and ointments for wounds, burns, sunburn, bruises, contusions, sprains, and rashes. To make Elder leaf ointment, crush 4 ounces of Elder leaves, add to 6 ounces of melted lard, and place in a moderate oven. Stir frequently until the leaves are crisp and have lost their color. Strain through muslin and press, then add 2 teaspoonfuls of Eucalyptol, stirring it in thoroughly. Pour into jars and cool. [UW-Elder]

Onion: A finely-chopped onion mixed with sugar is spread on a cloth to treat sprains. [UW-Onion]

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[Wormwood](#): The herb is often used externally, mostly in the form of an oil, although the fomentation is sometimes used in rheumatism, swelling and sprains. The oil is rubbed on sprains, rheumatism, lumbago, etc. It can also help relieve the pains of neuralgia and arthritis but must never be taken internally, as it is a strong poison. [UW-Wormwood]

[Cayenne Ointment](#): (Red Sun Balm) This ointment can bring temporary relief to internal pains of arthritis, stiff neck, muscle soreness, sprains, bruises and other aches. It can be applied to the chest during respiratory ailments to ease pain and help breathing. The heat generated by the capsicum increases circulation to the area and facilitates healing. [NL 4-5]

[Cabbage Leaves](#): Tie three or four thicknesses of cabbage leaves around the sprained area and leave on over night. Next time you see the lowly cabbage plant consider that over the centuries many people have derived much relief from physical ailments through using it. [NL 4-12]

[Flaxseed Poultice](#) is probably one of the most famous applications of the herb. The ground seed is mixed with boiling water until it is a thick mush. Other herbs may be added to it for specific conditions, such as hops, mullein, etc. This is one of the best poultices, according to Kloss, for old sores, boils, carbuncles, inflammations, and tumors. It is an excellent herbal aid for enlarged glands, joints, swellings, pneumonia, pleurisy, sprains, bruises, contusions, or inflammations of any part of the body, according to Dr. Shook (ShoA: 182). Apply as hot as possible; cover with waxed paper or plastic, and keep warm, reapplying hot poultices as needed. It helps allay irritation and pain and promotes suppuration; lobelia will help assist the body with boils. It is commonly used for abscesses and other local affections (Gri:319). [NL 7-2]

#### See Also

[Cayenne](#): Dr. Christophers many Cayenne Combinations

[BF & C](#): Dr. Christopher's Bone, Flesh and Cartilage Formula

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## Stiff Neck

### Definition

Inability to move neck without pain and/or stiffness. [HHH p.113]

### Cause

Vertebrae in upper cervical thrown out, cold in the neck, etc. [HHH p.113]

### Herbal Aids

[General Instructions](#): The following explanation of our "bone, flesh, and cartilage" [\[BF & C\]](#) formula is the most complete program for this condition of a stiff neck. The fomentation as it penetrates into the area will relax the muscles and feed the nerves so the bone structure (vertebra) will adjust itself. At the same time it will build up the blood circulation to carry off waste materials as well as feed the painful area with herbal food to put it into a healthy state of self healing.

When this formula is not available (it should always be on hand), use hot and cold fomentations five or ten minutes of each; this will work on the effect--but the fomentation (bone, flesh and cartilage) will go to the cause.

Bone, flesh and cartilage (comfrey combination fomentation) is an aid for malfunction in bone, flesh, cartilage, etc. Make a tea of the following herbs: six parts oak bark, three parts marshmallow root, three parts mullein herbs, two parts wormwood, one part lobelia, one part skullcap, six parts comfrey root, three parts walnut bark (or leaves), three parts gravel root. Soak the combined teas in distilled water (at the rate of one ounce of combined herbs to a pint of distilled water), then, soaking four to six hours, simmer thirty minutes, strain and then simmer the liquid down to 1/2 its volume and add 1/4 vegetable glycerine (if desired). Example: One gallon of tea simmered (not boiled) down to two quarts and add one pint of glycerine.

Soak flannel, cotton, or any white material other than synthetics--never use synthetics. Wrap the fomentation (soaked cloth) around the malfunctioning area and cover with plastic to keep it from drying out. Leave on all night six nights a week, week after week, until relief appears.

Severe cases: Drink 1/4 Cup of finished concentrated tea with 3/4 cup of distilled water three times in a day. [HHH p.113]

[Cayenne Ointment](#): (Red Sun Balm) This ointment can bring temporary relief to internal pains of arthritis, stiff neck, muscle soreness, sprains, bruises and other aches. It can be applied to the chest during respiratory ailments to ease pain and help breathing. The heat generated by the capicum increases circulation to the area and facilitates healing. [NL 4-5]

[Thistle Leaves](#): A favorite remedy for a stiff neck was a poultice of mashed thistle leaves. [NL 4-11]

### See Also

[BF & C](#): Dr. Christopher's Bone, Flesh and Cartilage Formula

[Cayenne](#): Dr. Christophers many Cayenne Combinations

Stiff Neck

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## Stroke

### Definition

A sudden, severe seizure or attack often termed apoplexy. Apoplexy is generally accompanied by a stroke. A stroke does not necessarily mean apoplexy because a stroke can come without heat prostration which occurs in apoplexy. [SNH p.45]

### Cause

A calcium deficiency in the body, where the organic calcium has been burned out by a former fever or by an inheritance to an inorganic calcium, which is devoid of life and does not sustain the muscle, nerve, and bone structure. This causes weakness and inability to use the organ involved. [SNH p.45]

### Herbal Aids

[Cayenne](#): Cayenne should be used generously. Cayenne is known to have relieved paralyzed condition of strokes, even though the person has been in a wheelchair for years. Through the use of cayenne and the cleansing herbs many have been able to walk again. [SNH p.45]

[Incurables](#): This program has been used for many different malfunctions with great success in nearly every case: multiple sclerosis, muscular dystrophy, stroke, deteriorating bones, curvature of the spine, locked arthritis joints, tumors and cysts in nearly all parts of the body. We have seen great improvement, reduction in pain and often complete healing in cases supposedly incurable. As you read each step taken in this program, analyze it and see if it can do anything but good. You will see that not one harmful thing is recommended. [HHH p.85]

[Rosemary](#): After a stroke the Arabs restored speech by eating the flowers pounded with sugar. [UW-Rosemary]

[Different Types of Water](#): Allen E. Banik, O.D., with Carlson Wade in the book "Your Water and Your Health" (Keats Publishing Co., Connecticut 06840, 1974) gives us a listing of the ten basic kinds of water. [NL 1-10]

[BF & C](#): Dr. Christopher's Bone, Flesh and Cartilage Formula: We have had a formula developed called "bone, flesh and cartilage." [BF&C] This formula has done miraculous things with broken backs, legs, hips, etc. This formula has been used on curvature of the spine, polio, multiple sclerosis, and muscular dystrophy, stroke and arthritis of the bone. This formula is used externally as well as orally and has brought tremendously fast results. [NL 1-11]

[Water, and the Diet You Eat](#): One vulnerable area in the human body for this "hardening of the arteries" is found in the brain. Regardless of how intelligent an individual has been in the past, when the arteries in the brain area become hardened there is a resulting slowness in thinking, loss of memory, headaches, dizziness, dimming eyesight, paralysis, and one of the saddest conditions of all - senility.

When there has been a severe condition of stroke, or a long-standing case of senility, autopsy will often show a brain that has practically "turned to stone." So it is obvious that even the most brilliant scholar can become senile if he allows such a condition to occur in his body, i.e., clogged or hardened arteries.

Arteriosclerosis can be reversed if one will reverse the cause and the "cause" is the use of inorganic, dead, stale, processed and overcooked foods. Use fruits, vegetables, grains, nuts and

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seeds, and as many of these "raw" or "wholesome" as possible. Also, low-heated foods, such as grains, lentils, potatoes, etc., can be used.

Eliminate all sugar and flour products, and change from processed foods to live foods, and healthful drinks such as raw vegetable juices.

Another part of the "reversing program" of overcoming hardening of the arteries is the principle of flushing the system with steam distilled water. The amount used should be one ounce of steam distilled water for each pound of body weight per day. As an example, a person of 130 pounds of weight should drink no less than 130 ounces or approximately one gallon of this water each 24 hours. This (steam distilled) water is pure and can do miracles for a person who will drink it faithfully. [NL 2-1]

**B & B Tincture:** Dr. Christopher's Nervous System Formula with Black Cohosh: When the medulla oblongata, at the base of the skull and into the first and second vertebrae has been damaged, or has deteriorated from improper eating routine (arthritis, etc.), and in some cases because of weak inherent conditions handed down from generation to generation, we have trouble in body motion and movement. This area, when in malfunction, is the inability of the body to control itself, as it should.

This condition displays itself in many ways, as dizziness, lightheadedness, loss of control over locomotion - epilepsy, multiple sclerosis, muscular dystrophy, stroke, etc.

The "number one" part of the body that then needs help in these type of conditions is the motor nerve area, at the medulla.

We have a special formula that we first used with our epileptic patients years ago. This formula came as an answer to a prayer, when help was needed in a severe epileptic case. The formula is made up of blue cohosh, black cohosh, blue vervain, scullcap and lobelia in a regular "ninety proof" tincture form.

There are approximately three million, five hundred thousand herbs, and we do not know of any two herbs on earth that will do the job of rebuilding the motor nerve as well as do blue cohosh and black cohosh. I am glad the good Lord was kind enough to locate them for us; I could never have gone through that many herbs to locate these specific herbs for a specific job.

He also showed the use of scullcap in the formula for the use of rehabilitating and renewing the spinal cord, so it could again relay its messages from the motor nerve area to the parts of the body that required help and guidance. Lobelia is an antispasmodic, to act as a nervine and to discontinue spasms that were cutting off or slowing down the messages being sent.

These five herbs put into a formula, as they have been, have given thousands of people a new lease of life, by cleaning a fouled up message and delivery system and getting it into a smooth and natural response, instead of seizures and contortions as before. [NL 2-1]

**Milk:** Dr. Ellis gives an excellent discussion in the Health View Newsletter on the evils of milk and dairy products. These contain a substance which attacks the arteries, weakening them for such disorders as heart disease and stroke. [NL 2-7]

### Testimonials

Water: From one of Paul Bragg's books "The Shocking Truth about Water" (Burbank, CA 91303, Health Science, 1970), I would like to pass on to you the following:

Take my own life, for instance. I was born on a farm in Virginia, along the Potomac River. We got our drinking water from a well-crystalline, fresh, sparkling water. But it was very hard water, containing in solution-calcium carbonate and other inorganic minerals from limestone.

When we boiled this water, incrustations of these inorganic minerals formed in large slabs inside the kettles, and in time produced holes in the bottoms. Kettle after kettle had to be thrown away and replaced by another, with the same thing happening to the new one in time.

The hard water made dishwashing, laundering and cleaning difficult. The soaps used for these purposes simply would not make suds.

But the greatest damage done by this hard water was to the humans who drank it.

My grandfather was a man in his mid-sixties. He was a big, strong six-footer, about 200 pounds of solid muscle. He was an expert horseman, a finished hunter and a hardworking farmer.

I can remember when he had his first stroke. There was a large family of Braggs, and we were all seated at the dinner table. Suddenly there was a crash of dishes, and my grandfather slumped over the table. When the country doctor arrived, he stated sadly that grandfather had lost all control of his left side due to brain damage.

From now on this poor old man needed constant attention. With a completely paralyzed left side, he could not walk without the aid of someone to steady him. He had absolutely no control of his eliminative system. This, helpless, sick man went into rages of anger. There was great difficulty getting food into his body because he had lost the ability to chew it. Only very soft bland food could be fed him.

This fine man we knew and loved was, as far as real living was concerned, dead. You have no idea what a great burden he was on my parents and family. The poor, helpless man dragged on this way for three years and then the second and final stroke came and he was actually dead.

His body went to the John Hopkins Hospital in Baltimore, where the doctors who performed the autopsy stated that his arteries were like stone. My grandfather was born and reared on that farm and drank that hard water all his life.

It was many years before my questions were answered. In the meantime, I witnessed what the hard water was doing to my family and our relatives and friends.

Here we were living on a big, fine farm, with an abundance of foods of all kinds. We had a good, comfortable home. It was a beautiful farm on a majestic river. But there was suffering among the adults. These pains were bulked into one word, and that was "misery." Each day I would hear my mother ask different people, "How is your misery today?" And the sufferer would give a doleful answer to my mother's questions. [NL 1-10]

#### **See Also**

[B & B Tincture](#): Dr. Christopher's Nervous System Formula with Black Cohosh

[BF & C](#): Dr. Christopher's Bone, Flesh and Cartilage Formula

[Cayenne](#): Dr. Christophers many Cayenne Combinations

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## Sty

### Definition

Inflammation of one or more of the sebaceous glands of the eyelids. Painful and swollen eyelids. [HHH p.114]

### Cause

Toxic poison accumulation. [HHH p.114]

### Herbal Aids

Sarsaparilla Root: To give aid to healing a sty on the eyelid, make a fomentation of sarsaparilla root (*Smilax officinalis*) and apply over the eye. [HHH p.114]

Fomentation: Place a fomentation of mullein leaves, red raspberry leaves, golden seal, slippery elm, lobelia and marshmallow root over the eye. Apply for one hour each, a fresh application three or more times a day, or leave on all night, until healed. [HHH p.114]

[Herbal Eyebright](#): Dr. Christopher's Herbal Eye-Health Formula: This formula is excellent for helping promote the brightening and healing of the eyes, and it is known to help remove the cataracts and heavy film from the eyes: one part each bayberry bark, eyebright herb, golden seal root, red raspberry leaves, and 1/8 part cayenne. Make this into tea form and put into a glass eye cup. There will be a slight burning sensation when using the cayenne in the eye at first, but there is nothing to be concerned about. Tip head back and apply the eye cup to eye. Exercise eye while doing this as though you were swimming under water. Do this three to six times a day. Drink 1/2 cup a.m. and p.m. This formula has aided many sty cases. [HHH p.114]

Sarsaparilla: Apply a hot fomentation of strong tea over the eye. [SNH p.84]

Sarsaparilla-yellow parilla compound: See formula using sarsaparilla root, yellow parilla root, distilled water and glycerine. [SNH p.85]

### See Also

[Herbal Eyebright](#): Dr. Christopher's Herbal Eye-Health Formula

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## Syphilis

### Definition

A sexually carried disease caused by a type of bacteria, marked by three stages over a period of years.

### Herbal Aids

Plantain: Use as a tea and an external application. [SNH p.53]

See formula using red clover, burdock seed, Oregon grape root and blood root. [SNH p.58]

Poke Root: Use the liniment or the infusion as a wash, and drink internally. [SNH p.61]

Infusion of poke root: See formula using poke root and distilled water. [SNH p.61] Compound Poke Root Liniment: See formula using poke root, bayberry powder, sassafras, bay or laurel and tragacanth. [SNH p.62]

Burdock Root; Drink the decoction regularly. [SNH p.65] Decoction of burdock root: See formula using burdock root, distilled water and glycerine. [SNH p.65]

See formula using Oregon grape root, red clover, burdock seeds, cascara sagrada, blue flag, prickly ash berries and blood root. [SNH p.74]

Sassafras: Drink an infusion of equal parts sassafras and sarsaparillas (*Smilax ornata*) and 1/2 part *Guaiacum officinale*. [SNH p.79]

See formula using sumac berries, sumac bark, white pine bark and slippery elm bark. [SNH p.158]

See formula using mandrake root, poke root, yellow dock, sassafras, blue flag, elder flowers and caraway seeds. [SNH p.198]

See formula for external use, consisting of mucilage of comfrey, burdock root and distilled water. [SNH p.314]

Pine: The Pine needles were used as an herbal aid for syphilis by the Zunis. The patient chewed the needles, swallowed them, drank a quantity of cold water and then ran for a mile or until he perspired profusely. When he returned home he wrapped himself in a heavy blanket. Women patients were not required to run. A tea of the twigs was drunk warm in conjunction with chewing the needles. Syphilitic ulcers were scraped with the fingernails until they bled and the powdered pinion gum was sprinkled over them to promote healing (Nie:50). [UW-Pine]

Prickly Ash: Because it is an excellent alterative the herb has long been applied in constitutional syphilis and scrofula, being considered as good a herbal aid for the former as other specifics. The herb mixed with blue flag and mandrake should be given in small doses at short intervals. [UW-Prickly Ash]

True Sarsaparilla: True Sarsaparilla was discovered by the early Spanish settlers in Jamaica, Perus, St. Domingo and Brazil in the middle of the sixteenth century. It was introduced into Seville about 1536 from "New Spain" and another variety soon arrive from Honduras. Pedro de Cieza de Leon in 1553 wrote that he saw it growing in South America. It was recommended as a cure for syphilis and for some time was considered the only effective remedy for this ailment. ...It was from the time of its introduction considered a superior blood purifier. It fell into disuse for a while until Sir William Fordyce revived it in 1757. After this short resurgence it was ignored.

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During the latter part of the nineteenth century its use was considered the result of ignorant superstition.

In 1928, however, Perutz studied it extensively and concluded that it really did help in the treatment of syphilis, probably by stimulating the body's defensive mechanism (Luc:54). [UW-Sarsaparilla]

Stillingia: The herb is used in all the various forms of primary and secondary syphilitic affections in which it appears to have a most definite effect for healing. There is some disagreement about its actual effect in syphilis probably because in earlier years it was somewhat overrated, that poor preparations have been employed and that the proper preparations of the herb have not been followed. When the herb is correctly prepared and administered the results are said to be as good as those obtained from any of the antisyphilitics (Felk:1837). It should be used in those syphilitic conditions where the tissues are feeble and "tardily removed and renewed, the mucous membranes are predominantly affected and the skin secondarily and the mucous surfaces are tumid, red, glistening and the secretion is scanty." The tincture which should be extracted by alcohol or the fluid extract are the preferable modes of administration, usually 1/2 fluid dram of the tincture or 1 to 20 drops of the fluid extract are given three times a day. [UW-Stillingia]

Burdock: Dr. Shook, my teacher in herbal pharmacy, in his textbook says: An excellent blood purifier is Burdock (*Arctium Lappa*), as a blood purifier we use the root. Nature has not produced for us many herbs whose food and medicinal value equal this one. Its ancient history as a reliable herbal aid for bad blood, ulcers, tumors and many skin diseases such as what we today call Eczema, Pityriasis, Psoriasis, Furunculosis (Boils), Acne, Lupus, etc., to say nothing of internal disorders such as Syphilis, Scrofula, Leprosy, Cancer, etc., and the modern proofs of its marvelous efficacy in the treatment of humanity's most fearsome and loathsome diseases is proof positive that very few if any herbs are more virtuous or possess more curative powers. ...The following formula, a decoction, is helpful for syphilis, scrofula, skin diseases, furunculosis, tumors, abscesses, acne, and a general cachectic condition of the system.

Put 4 ounces of the dried cut herb into three pints of distilled water. Soak four hours or more and then simmer 30 minutes slowly. Strain, cool and keep in a cool place.

Dose for adults. A wineglassful (2 oz) 3 or 4 times a day. For children, less according to age.

If it is desired to make up more of this decoction, and it is desired to keep it for any length of time, it should be boiled down to 1/3 of its original amount and add to the finished amount of tea 1/2 vegetable glycerine. In other words to one pint of tea add 8 oz. or to a quart add one pint, etc. [NL 1-2]

Gotu Kola: The plant portion above the ground contains a large amount of Vellarin which is a substance that fights infections diseases like leprosy, syphilis, and eczema. Care is taken to dry this herb in the shade to preserve this valuable substance. [NL 5-1]

Barberry: Barberry is also used for specific ailments, notably syphilis. Felter (EMMP&T:244) mentions that Barberry seems to clear up the bone, mucous membrane and skin ailments of the disease, when given persistently in appreciable doses, to a patient who otherwise takes good care of himself. Most practitioners combine Barberry with other herbs for this ailment. [NL 5-4]

Cloves: Another combination, containing Cloves, sandalwood paste, and saffron is said to help in syphilitic affections as an alterative and tonic (Ibid.). This was recently tested in cases of secondary syphilis, with marked benefits to the patients. [NL 6-6]

Echinacea: Many people have observed its good effects in cases of syphilis. The longest time, reported Ellington, to effect the cure was nine months (Ell:363). The patient begins to feel a general improved condition after taking the remedy a few days. It removes the pain and discomfort, removes the fever, and abates the evidences of the disease without after-effects. [NL 6-12]

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## Teeth

### Definition

Decay of teeth: Decomposition due to lack of live organic atoms in the food to nourish the teeth. [HHH p.117]

### Symptoms

Pain or a dying in one or more teeth, sometimes accompanied by swelling of the gums. [HHH p.117]

### Cause

Tooth problems start several generations back. The weakness of calcium deficiency is passed from parent to child. By following the same parental pattern of "poor food selection," each new crop of babies becomes weaker. "The sins (of omission and of commission) of the parents are passed on to the third and fourth generation." While the baby is being carried in the womb, Mother Nature is interested in that which is being produced more than the one producing. She is continually trying to upgrade humans and animals by drawing on the mother to supply the child. How often do we hear the expression, "Well, I'm carrying another child, that means more varicose veins and loss of more teeth - I don't see why mothers have to suffer this way." Please don't blame the Lord for these conditions, rather blame the use of pastries, soda pop, candy, sugar, ice cream, etc. The sugar leaches the calcium out of the body. Pregnancy is a strain on body calcium, because the mother must have enough calcium in her body for both her and the baby being formed, and later for nursing. If there is not enough calcium for her, because of this leaching process by the sugar (of past and present), the fetus draws on the mother's body. The calcium it now takes is from the bones, muscles, and the teeth, etc. Sometimes so much is taken from the mother that she will, after a number of babies, have bone and muscle problems from a great lack of calcium.

When a child is being formed and there is not enough calcium being supplied to the fetus, the jaw of the child will not form fully. It will be narrow instead of broad. When it is time for the child to cut teeth, they cannot come in "Straight" because of a crowded jaw space. So, naturally, they will come in crooked. Later as there is not enough room for the wisdom teeth, they must often be extracted before coming through. When the day comes that the jaw is adequately large and well-shaped to accommodate all thirty-two teeth without crowding them to crookedness, and the wisdom teeth can remain until old age (and in comfort), it will mean we humans have "gained enough wisdom" to keep them!

The basic cause of calcium loss, of course, as mentioned, is leaching out the calcium with sugars and a toxic body condition. Nearly all tooth decay comes from the blood stream, saliva, and the inside of the teeth, not only from the external surface. The teeth deteriorate but it is from the toxic blood stream and the enamel-destroying toxic saliva which is a result of an impure (toxic) blood stream. If a child has good wholesome food and has been given a "good solid start in life" with a full healthy set of teeth and jaws, he can go through life without tooth problems. The condition of perfect teeth is, of course, dependent upon a continual use of wholesome and proper foods. [HHH p.117]

### Herbal Aids

[Plantain](#) for Toothache: Apply the fine powder of the roots to the affected area. [SNH p.53]

Tumors

Sassafras Oil for Toothache: Apply the oil onto the affected area (dilute slightly with olive oil). [SNH p.80]

Typhoid

Poppy Flowers for Toothache: See formula using camomile flowers and poppy flowers. Break up the poppy heads and mix together; pour on sufficient boiling hot water to make a poultice. [SNH p.219]

Ulcers

Elecampane for Tooth Decay: Chew the root (preserves the teeth from putrefaction). [SNH p.342]

Uterus

Hops for Toothache: Apply a flannel bag of hops, and moist heat over the affected area. [SNH p.396]

Varicose Veins

Cayenne for Toothache: Clean the cavity and place cotton saturated with oil into the cavity. [SNH p.407]

Vertigo

Cloves and Peppermint in Toothache: Rub oil of cloves and oil of peppermint on gums. [SNH p.421]

Vomiting

Prickly Ash for Toothache: Chew the bark or berries. [SNH p.427]

Warts & Moles

Organic Calcium: Calcium is a "must" throughout life. It is needed for the formation of good teeth and strong bones.

Whooping Cough

Children need calcium if bones and teeth are to grow strong and well-formed. Adults need an adequate amount of calcium every day. During periods of pregnancy and lactation, women require much more calcium than normally, as they must also furnish extra calcium for the baby. Botanical or herbal sources for calcium are: arrow root, comfrey, camomile, chives, dandelion root, flaxseed, horsetail grass, nettle, okra pods, oat straw, plantain, shepherds purse (and, of course, eat good foods rich in calcium). [HHH p.117]

Worms

Calcium from Eggshells: Another type of natural calcium is found in the use of eggshells. A chicken consumes grit and sandy materials, and these materials go into and through the gizzard into the blood stream. Then these calcium-type materials are taken from the blood stream to form the egg shell. After breaking the eggshell open, be careful to pull out the small membrane that lines the shell. This membrane is high in cholesterol and it is wise to eliminate it. Dry the shells at room temperature or under 130 °F. When thoroughly dry, powder the shells in a blender, nut mill or with a rolling pin. When the powder from one dozen eggshells is ready and finely powdered, cover with one pint of apple cider vinegar or one pint of lemon juice (lemon juice will sour and spoil quicker than the apple cider vinegar). Mix the eggshell powder and liquid in a large container, because the chemical reaction will cause the solution to foam.

For the adult, use two or more tablespoons (or add to distilled water, tea or juice if desired) and for children in proportion. Some people like to add a tablespoon of honey for each tablespoon of the vinegar-calcium mix, as this is a great help in adjusting the hydrochloric acid balance in the body as well as feeding calcium to the system (read Cyril Scott's book on Folk Remedies). [HHH p.118]

Alfalfa to Retard Tooth Decay: A doctor at the University of Indiana pointed out that Alfalfa is especially rich in iron, calcium and phosphorus, all necessary for strong, healthy teeth. Some claim that Alfalfa not only retards tooth decay but actually rebuilds the teeth (Kirsch:35). [UW-Alfalfa]

Catnip: Applied locally, it gives a sense of warmth and partial anesthesia, for which reason it is used for toothache and other localized pain. [NL 6-2]

**Testimonials**

No Root Canal: After breaking a tooth from biting my fingernails, I had to have a crown put on one of my bottom front teeth. This tooth aches all the time. Sometimes it's from the weather, sometimes from eating something, and sometimes from headaches. My tooth was so sensitive I couldn't eat corn on the cob! When I complained about the pain, my dentist told me that if it keeps bothering me we might have to do a root canal. I started using Dr. Christopher's Herbal Tooth Powder to brush my teeth once or twice a week. As long as I remember to brush with the

tooth powder, my tooth doesn't hurt. Whenever I forget to use it, my tooth starts to hurt again. I love the tooth powder, because it helped me avoid a root canal.

**See Also**

[Calc Tea](#): Dr. Christopher's Calcium Formula

[Herbal Tooth Powder](#): Dr. Christopher's Herbal Tooth Powder

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## Throat

### Definition

Any ailment having to do with the throat such as sore throat, ulcerated or inflamed throat, thrush, etc.

### Cause

Sore throat is by no means pleasant. The causes are varied. The tonsils may be swollen from a clogged lymphatic system, or the throat can be sore and irritated from coughing. What we need here is instant relief from pain and something to soothe and heal the throat. [NL 4-1]

### Herbal Aids

General Instructions: For the serious sufferer who wants very quick relief, cayenne pepper taken in juice or water will bring great results. The stimulating effects of the cayenne will help increase the circulation in the throat area, minimizing the pain. Jethro Kloss, the self-educated healer and author of Back to Eden, states that pain results from poor circulation in an area of the body. Warm ginger tea is an excellent herbal aid for pain of sore throat. A hot fomentation of mullein and lobelia [[Mullein & Lobelia](#)] over the throat can also speed healing. It, too, increases circulation. The soothing demulcent such as slippery elm and marshmallow root tea can lessen throat irritation. Mullein is another valuable herbal aid. Sage tea has been used for centuries for helping with colds and sore throats. A few drops of the liquid antiseptic formula, consisting of oak bark, golden seal, capsicum, comfrey, garlic, and myrrh, can be dropped into the throat. This is one of our most wonderful formulas for the use on cuts and wounds. We have found that it also obliterates the irritation of sore throat for several hours. Because it is such a powerful herbal aid the taste is also very powerful. It needs to be used very sparingly. [NL 4-1]

Pomegranate: Sore Throat: Use the pomegranate fruit rind or flowers as a gargle. [SNH p.114]

Bayberry: Sore throat. Make a strong decoction solution (boil 2 ounces of the herb 15 minutes in 1 pint of water, strain and add sufficient glycerine to make up the pint, cool); spray the solution into the nose and throat every 1-2 hours during 1 day then gradually extend the time between applications. [SNH p.132]

Bayberry: Sore throat. Gargle the throat thoroughly with the decoction until it is clean, then drink a pint lukewarm to cleanse stomach. [SNH p.132]

Red Oak: Ulcerated and inflamed throat. Use the decoction as a gargle. [SNH p.139]

Red Raspberry: Sore mouth and throat, thrush, spongy gums. Use the strong infusion as a wash and gargle. [SNH p.143]

Gargle: Sore throat. See formula using raspberry leaves, cranesbill root, blackberry root and leptandra. [SNH p.149]

Cranesbill: Sore, inflamed, or irritated throat. Use the decoction of the root as a gargle. [SNH p.152] Decoction of cranesbill. See formula using cranesbill and distilled water. [SNH p.153]

Sore Throat (gargle). See formula using cranesbill root, bayberry bark, golden seal root, marshmallow root, wild indigo root and rosemary herb. [SNH p.156]

[Tumors](#)

Sumach: Sore throat. Infuse the berries for 1/2 hour in a quantity of water, strain and sweeten to taste with honey; mix with fresh pineapple juice; use as a gargle. [SNH p.158]

[Typhoid](#)

White Pond Lily: Apply a poultice of the fresh roots and leaves; also the strong decoction makes an excellent base for mixing other ingredients for application; the powder is often mixed equal parts with crushed flax seed (linseed) or powdered slippery elm. [SNH p.165]

[Ulcers](#)

Balm of Gilead: Sore throat. Gargle with an infusion of the buds. [SNH p.202]

[Uterus](#)

Ulcerated Throat: Use equal parts of the sage infusion and apple cider vinegar as a gargle. [SNH p.234] Infusion of garden sage. See formula using sage leaves, distilled water and glycerine. [SNH p.235]

[Varicose Veins](#)

Mullein Oil: Rub mullein oil in well, or apply on saturated cotton and cover. [SNH p.317]

[Vertigo](#)

Slippery Elm: Sore throat. Chew the bark. [SNH p.335]

[Vomiting](#)

Sore Throat: See formula using cayenne powder, red garden sage tea, apple cider vinegar, sea salt and honey. [SNH p.411]

[Warts & Moles](#)

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture: Consists of skullcap herb, lobelia, cayenne, valerian root, skunk cabbage, gum myrrh, and black cohosh. Used historically in cases of convulsions, fainting, cramps, delirium tremors, hysteria, etc., also good for pyorrhea, mouth sores, coughs, throat infections, tonsillitis, etc. Dose 1/2 to one teaspoon to glass of steam distilled water as a gargle and use until throat clears, also take one teaspoon in steam distilled water morning and evening. [HHH p.195]

[Whooping Cough](#)

[B & B Tincture](#): Dr. Christopher's Nervous System Formula with Black Cohosh: Black cohosh, blue cohosh, blue vervain, skullcap, and lobelia. This is used to help aid in nervous conditions, sore throat, hiccups, and aid to restoring malfunctioning motor nerves and assisting in adjusting poor equilibrium and hearing, and a great blessing to epileptics. Massage into the medulla (base of skull), and upper cervicals, follow instructions in No. 14 formula, and take six to ten drops in a little water or juice two or three times a day. [HHH p.195]

[Worms](#)

[Chickweed Ointment](#): Dr. Christopher's Chickweed Ointment: This is made of chickweed herb and bees wax and oils. Excellent for eczema and/or other skin infections, sores, burning, itchy skin or genitals, swollen testes, acne, hives, also for ulceration of mouth and throat. This is a wonderful healing ointment. [HHH p.196]

[Yellow Fever](#)

Aloe Vera: A piece of the plant, held in the mouth and allowed to release its juice, clears the throat for singers and speakers. [UW-Aloe Vera]

Oak Bark: Gargle for sore throat. 1 oz. powdered oak bark simmered in 3 pints of water for about 30 minutes. Simmer to 2/3 of original volume. [NL 2-10]

Juices: Sore throat. Pineapple, celery, coconut, fig. [NL 3-5]

Sassafras: Inflamed throat. Give the mucilage of sassafras pith. [SNH p.79] Mucilage of sassafras pith: See formula using sassafras pith and distilled water. [SNH p.80]

Onion: The Onion is so powerful, he said, that once a medical doctor in the East had a patient with strep throat that nothing would touch and the patient was getting worse. The doctor thought he'd try an old-fashioned remedy that his grandpa had told him about. He just diced up a big dried onion, put it on a saucer, and placed it on a table by the man's bed, not where he could reach it or use any of it, but just inhale it. The next morning the strep throat was gone. Just from inhaling it! Just from breathing it! [UW-Onion]

**See Also**

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture

[B & B Tincture](#): Dr. Christopher's Nervous System Formula with Black Cohosh

[Cayenne](#): Dr. Christophers many Cayenne Combinations

[Chickweed Ointment](#): Dr. Christopher's Chickweed Ointment

[Comfrey-Mullein-Garlic](#): Dr. Christopher's Asthma Formula

[Mullein & Lobelia](#): Dr. Christopher's Glandular Formula

[Coughs](#)

[Quinsy](#)

## Ailments

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## Thrush

### Definition

Fungi infection of the tissues of the mouth.

### Herbal Aids

Plantain: Make a decoction, simmering one ounce of seeds in one and one half pints of water and reducing to one pint; sweeten with honey and give one tablespoonful three or four times daily. [SNH p.53]

Bayberry: Spray mouth and throat with tea in atomizer. If too young or throat too sore to gargle, then drink 1 or 2 tablespoons each hour until relief. [SNH p.132]

Red Raspberry: Use the strong infusion as a wash and gargle. [SNH p.143]

Thrush Infection in Babies: If your baby has thrush, which you can determine from white spots on the sides of the mouth, a white tongue, or soreness during nursing, you can try several remedies. Dip a Q-tip in X-ceptic (an herbal extract) and swab the area several times per day, then give raspberry tea in a bottle. Other remedies may include washing the white parts with a Q-tip soaked in yogurt or, from a drugstore, purchase Gentian Violet, which is an inexpensive germicide, not necessarily an herb but an old-fashioned and effective remedy. With a Q-tip dipped into the liquid, don't soak but just coat the infected surfaces. Gentian Violet will stain anything it comes into contact with.

In order to get to the source of the problem, you need to help the baby feel no stress, make sure your own yeast infections are under control...and help restore the baby's proper bacteria composition in the intestine. Use acidophilus freely yourself, and give the baby acidophilus, either the liquid or a capsule dissolved in a little sterile water. [EWH p.94]

Blueberries: The Blueberry has a substance, myrtillin, which combats the bad bacteria in the intestinal tract. Because of this the berry is useful in bowel diseases and diarrhea. A tea made from the berries has been used in cases of thrush or other mouth and throat infections...A half of a cup of berries in a quart of water boiled to one pint will yield a solution that can be used internally or externally such as in cases of eczema or other skin disorders. [NL 5-1]

### Testimonials

1. Small Boy Quickly and Totally Healed of Thrush: We had an interesting case in Taylorsville, Utah. The patient was a little boy about 18 months of age. As I stepped into the house the stench of Thrush was so strong it nearly staggered me, yet the child was across the large living room from the entry.

Quickly we mixed oak bark tea and concentrated it down to half its original volume. With the little boy on my knee, an atomizer was used to spray oak bark tea into his mouth through his swollen lips, white sores and swollen tongue. Since he couldn't swallow well because of the sores and swelling in the throat, it was necessary to tip him over so that the liquid would run out of his mouth. This procedure was repeated several times. This child could swallow only small amounts of fluid that would seep down his throat. Instructions were given to the parents to give him only red raspberry tea to drink and as much oak bark tea as possible until he healed. I was called back the next day because of an injury to an older boy, and as I stepped in the house, the little boy who had been treated for Thrush came rushing over, threw his arms around my leg and looked up with

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a big smile. His lips were down to normal size the white sores showed a healing pink. He was happy.

During a lecture, a student related the details of another case of Thrush in Flagstaff, Arizona. She told how two men took turns holding a little girl afflicted with Thrush 24 hours a day for two weeks to comfort her in her agony. Another woman told of her personal acquaintance with Thrush. She had suffered over six months with the disease of the gums, and her gums had been trimmed down to the bone. She has lost all her teeth and now was wearing dentures that were sitting on the bone of the jaws with no suction. Yet our little patient healed rapidly in less than 24 hours with herbs. [NL 2-10]

2. Bayberry and Thrush: An architect called his medical doctor about a child with mouth problems, which the M.D. diagnosed as thrush, sometimes called trench mouth or hoof-and-mouth disease. The physician was dubious about clearing the case at all, perhaps, he said, in several months, although the child might be in danger of losing his teeth. Unhappy with this news, the architect called Dr. Christopher, who lived about forty miles away.

When he arrived, Dr. Christopher nearly reeled from the stench in the house. The child, only eighteen months old, just stood there crying, with a mouth so full of sores that his tongue was sticking out, all swollen up. Dr. Christopher had asked the parents to boil some water, and he made bayberry tea, and, putting the child on his knee, sprayed some of it into the boy's mouth and let it run into a pan, as the child couldn't swallow. He continued this many times, and told the parents to keep doing it, adding that they should give him raspberry tea to drink later, as well as more bayberry tea to drink.

In less than twenty-four hours, instead of in months as the M.D. had predicted, the child was smiling and the case was nearly cleared up.

Bayberry is an astringent; it promotes greater density and firmness of tissues--as contrasted with laxatives, for instance, which open up tissues. Astringents cleanse mucus and lessen or arrest internal hemorrhages by coagulating the albumin. As in the case of thrush above, they contract and strengthen the tissues weakened by disease. [NL 5-5]

#### See Also

[X-Ceptic](#): Dr. Christopher's Antiseptic Tincture

## Tonsillitis

### Definition

Tonsillitis is the inflammation of the tonsils, acute catarrhal infection, redness and swelling, the result of overworking them. Tonsils, many authorities say, are the first line of defense. Their job is to control the entrance into the body of large armies of germs--invited when the waste matters in the body accumulate too heavily.

Tonsils are the filtering system for the reproductive organs and are needed by the body, or the Creator would not have installed them in the first place. As a person goes from childhood into adulthood through the stage of puberty, the young people making this transition will be easier to live with if they still have their tonsils. The girls will have easier menstrual periods and the boys less chance for prostrate malfunction and will have a better teenage life.

We have ten fingers, but if we got infection in one of them, we would not cut it off until we tried to clear up the infection. As soon as the tonsils become swollen with infection the first thing we think of is to have the tonsils cut or burnt out, without trying to save them. Use our suggested program and keep the individual in a "whole state," as the Creator intended! [HHH p.192]

### Symptoms

Dr. Kloss describes the symptoms as follows: chilly feeling, fever, throat swollen, practically closed with soft palate hanging at the tongue. The throat and mouth are dry, and then soon lots of poisonous mucus accumulates. The tonsils are swollen and red in color. Small ulcers appear on the tonsils. Often the glands of the neck swell.

### Herbal Aids

General Information: With tonsillitis we use the same fomentation used for the glandular system, the three parts mullein and one part lobelia combination. (You may obtain this already made up in the Mullein & Lobelia Formula). In addition to drinking the mullein and lobelia tea (as well as applying the fomentation), use an abundance of red raspberry tea, as much as can be taken for three days. Use no foods on these days except unsweetened vegetable and fruit juices.

When the tonsils swell up and are sore and painful, the first thing we think of is "to remove them." We saw a picture recently of seven or eight children spread out on a king-sized bed, all with "wrapped-up throats." The caption explained that the family got a bargain by having them all operated on at once for "tonsillectomies."

Here was a group of children who had lost a very valuable organ the Lord put into the body--it was not put there by mistake or carelessness, but because it was needed. This organ is the filtering system for the body, and when removed leaves us with a weaker system (Dr. B. Jensen in *The Joy of Living*, Santa Barbara, California: J. F. Rowney Press).

A girl with her tonsils intact will have an easier time through puberty and her menstrual cycles than she will if they have been removed. Delivery of babies is much easier for women who still have their tonsils, because of less toxic waste in the body.

The young boy with his tonsils intact will have better seed for reproducing and less chance of prostrate problems because of a cleaner blood stream. To repeat, we have ten fingers and if we get infection in one of them we would not think of chopping it off without trying to heal the finger first. We only have two tonsils and, when there is a little infection in them, how foolish to cut or burn them out! As stated earlier, let's save these tonsils for better, stronger and more peaceful generations to come.

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Make a fomentation of three parts mullein and one part lobelia, dip the flannel in the fomentation, wrap around the neck at night, and cover with plastic. Do this each night until the condition clears up. Drink 1/2 cup of the mullein and lobelia [Mullein & Lobelia] tea morning and evening and one cup or more of comfrey (leaf or root) tea each day, and, most specifically, use red root tea. [HHH p.193]

When the tonsils become enlarged or inflamed, clean up the bowels, go off solid foods, go on the three-day cleanse. [HHH p.157]

[Children's Laxative](#); Tonsillitis (Young children): See formula using senna leaves, red raspberry and pennyroyal. [SNH p.192]

[Antisp](#): Dr. Christopher's Anti-Spasmotic Tincture: Consists of skullcap herb, lobelia, cayenne, valerian root, skunk cabbage, gum myrrh, and black cohosh. Used historically in cases of convulsions, fainting, cramps, delirium tremors, hysteria, etc., also good for pyorrhea, mouth sores, coughs, throat infections, tonsillitis, etc. Dose 1/2 to one teaspoon to glass of steam distilled water as a gargle and use until throat clears, also take one teaspoon in steam distilled water morning and evening. [HHH p.195]

[Sage](#): For tonsillitis a strong Sage tea is made, two ounces to the quart of boiling water. It is allowed to steep for two hours. Strain, and then add a small bit of pulverized alum. One woman who tried this gargle wrote that her oldest boy had recurrent tonsillitis, so she prepared this Sage-alum tea and had him gargle with it several times a day. The next morning he got up without any tonsillitis although he had suffered for weeks with it previously and could not eat or sleep (Luc:Secrets:67). [UW-Sage]

[Mullein & Lobelia](#): Dr. Christopher's Glandular Formula: When the lymph system is showing signs of being over-loaded with toxic wastes, the intelligent thing to do is to start cleaning up this condition as soon as is possible. Beat this criminal "to the draw" by eliminating mucus-making materials (ofttimes it's hard to label some of the merchandise we eat as "food"), and use fresh fruit and vegetables, juices, and plenty of distilled water. During the "cleaning up period," it is good to use a special herbal food for the cleansing and feeding of the lymph system--a combination of mullein herb and a small part of lobelia herb (such as three parts mullein and one part lobelia). For instance, the adult dose for tonsillitis is a cup of the tea three or more times in a day, and for younger people it is a full-adult dose twelve years and up, one half dose eight to twelve years, one fourth dose four to eight years, and under that age in "careful proportion."

In addition to the oral use of the tea (infusion of one ounce of the combined herbs to a pint of boiling water, poured over the herbs, covered, and allowed to steep approximately twenty minutes), it is also to be used externally. After straining the herbal tea, soak flannel cloth (never man-made synthetic cloth) in the remaining tea and apply over the swollen gland areas (throat for tonsils, etc.). Cover the fomentation cloth with plastic to keep the moisture in. It is good to do this procedure at night and leave the fomentation on all night. Some cases take more than one application, but many see the finest results with the overnight program. [NL 1-9]

[Decoction of Oak Bark](#): (Used as external compress for hemorrhoids, dermatitis, as a gargle for tonsillitis, pharyngitis, and as an enema). 1 handful of pounded oak bark into a liter of water. [NL 2-10]

[Tincture of Cayenne](#): This tincture heals wounds, cuts through mucus, good for sore throats, and tonsillitis; milder solutions can be used in the nose, eyes, and ears for cleaning up microscopic "lounge lizards" in infections. Has been successfully used for resuscitation of newborn infants; a few drops administered orally. The best and safest stimulant known to man. [NL 3-2]

[B & B Tincture](#): Dr. Christopher's Nervous System Formula with Black Cohosh: Consists of black cohosh, blue cohosh, blue vervain, skullcap and lobelia. Helps in cases of motor nerve injury, epilepsy, hearing loss, warts and tonsillitis. [NL 3-5]

[Juice](#): Carrot, celery & parsley. [NL 3-5]

[Prevention](#): Maurice Messegue, a second generation French Herbalist, suggests winter prevention of tonsillitis by taking a nightly infusion of two pinches of thyme to a cupful of water. Thyme contains the powerful antiseptic thymol as the active ingredient. [NL 4-1]

### Testimonials

Dr. Christopher's Tonsils: I was born with a set of tonsils which, when infected, swelled almost up to the size of golf balls. My parents, following the advice of the standard medical opinion makers of the day ushered me off to the local hospital in Salt Lake City and paid to have my tonsils removed. As most of you know, the Good Lord left the plans and specifications for the regeneration of the human body. So, my tonsils, being faithful creations grew in again. I was very sickly as a child and tonsillitis set in regularly. My folks again took me in for procedural surgery. After the third set of tonsils grew in my parents (rather than becoming tonsil-poor) decided to let me live with the usual winter infections in the throat. To this day I have been remembered as one of the only kids on my block who grew in three sets of tonsils.

The surgeon looks upon the tonsils as the seat of bacterial infection and states that he can stop bacterial infiltration into the rest of the body by removing the tonsils. Actually, this procedure does nothing but make it possible for infection to settle in other lymph nodes. Clean up the whole system and you can avoid cutting out the affected part. [NL 4-2]

### See Also

[Antsp](#): Dr. Christopher's Anti-Spasmodic Tincture

[B & B Tincture](#): Dr. Christopher's Nervous System Formula with Black Cohosh

[Cayenne](#): Dr. Christophers many Cayenne Combinations

[Mullein & Lobelia](#): Dr. Christopher's Glandular Formula

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## Tuberculosis

### Definition

A long term grainy tumorous infection caused by an acid-fast bacillus. Exposure is usually by breathing in or eating infected droplets.

### Symptoms

Usually affects the lungs, although the infection of other organ systems by other ways of getting the disease occurs.

### Herbal Aids

Echinacea: Fine results have been obtained by using echinacea alone or in combination with elecampane root. [SNH p.89]

Garlic: Inhale the vapors of the freshly expressed juice that has been diluted with equal quantities of water. [SNH p.100]

Garlic Syrup; Give 2 teaspoons to 1 tablespoonful of the syrup 3-4 times daily between meals. [SNH p.100] Tincture-syrup (glycerine) of garlic: See formula using garlic cloves, apple cider vinegar, distilled water, glycerine and pure honey. [SNH p.102]

Dr. Coffin's Formula for Tuberculosis or Consumption: See formula using raspberry leaves, agrimony, barberry bark, cleavers, ground ivy, European centaury, horehound, cayenne and licorice. [SNH p.149]

Comfrey: Combine comfrey with garlic (add 1 tablespoonful of fresh garlic juice to every pint of mucilage of comfrey) and stir well. This is the best remedy ever discovered for this problem, according to Dr. Shook. [SNH p.310] Stir well or shake together. 1 wine glassful - 1 teacupful, every 4 hours. [SNH p.312]

Tuberculosis or Consumption Remedy (with hemorrhage and antipathy garlic): See formula using mucilage of comfrey, elecampane root, garlic juice and distilled water. [SNH p.314]

Strong Decoction (inflamed tissues, tuberculosis... pulmonary complaints): See formula using mullein leaves, distilled water and glycerine. [SNH p.317]

Use the "Asthma remedy" Formula, adding 1 teaspoonful of garlic juice; take 1 teaspoonful frequently, according to the severity of the case. [SNH p.335] Asthma remedy: See formula using slippery elm, horehound, garden thyme, red clover tops, yerba santa, lobelia, resin weed, cayenne, blackstrap molasses and glycerine. [SNH p.339]

General Body Nutritive, Flesh Builder, Tuberculosis, Whooping Cough, etc.: See formula using elecampane, sweet almond oil and comfrey mucilage. [SNH p.343]

Tuberculosis, with Severe Hemorrhage: See formula using elecampane, comfrey root, horehound, licorice root, Iceland moss, Peruvian bark, composition powder, cayenne, acacia, sugar, queen's delight tincture, and anti-spasmodic tincture. [SNH p.345]

Coughs, Consumption, Tuberculosis: See formula using cayenne, slippery elm, lemon and honey. [SNH p.410]

[Resp-Free](#): Dr. Christopher's Herbal Formula for Lungs and Respiratory Tract: This

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combination of herbs in tea form or the powder in capsules is an aid to help relieve irritation in the respiratory tract, lungs and bronchials. This is an aid in emphysema as well as other bronchial and lung congestions such as bronchitis, asthma, tuberculosis, etc. This formula is extremely valuable in helping promote the strengthening and healing the entire respiratory tract. It helps promote the discharge of mucus secretions from the broncho pulmonary passages. Suggested amount for an adult is a cup two or three times a day, or two or three capsules two or three times a day with a cup of comfrey tea. For additional help in the program, it is good to add three to six drops of tincture of lobelia to each cup of tea.

This formula consists of comfrey root, mullein, chickweed, marshmallow root and lobelia. [HHH p.188]

Alfalfa: Dr. H. E. Kirschner, relating the research efforts of one of the pioneers of Alfalfa, Frank Bower, retold the story of a man who was very anemic. He was considered a borderline tuberculosis case and had no appetite at all. Bower supplied the landlady of the boarding house where both of them took their meals with a liberal amount of Alfalfa tea, to be taken at meals. All the boarders liked it, and after about two weeks, the sick man began to eat with gusto. They all ate so heartily that larger meals had to be prepared to meet their demands (Kirsch:28). [UW-Alfalfa]

Mullein: The herb was formerly used, before tuberculosis was so well-controlled, to relieve the cough of that ailment and facilitate expectoration (Coon:204). We do not know if modern medicine may someday be unavailable to us as the last days come upon us, so it is good to know that Mullein is considered, in Ireland, a specific for all lung troubles, especially tuberculosis, and that it is extensively cultivated there and kept on hand for that purpose. Mullein contains both potassium and calcium phosphate. These two organic minerals are absolutely necessary for the nervous system and bone structure. As the ravaging effect of tuberculosis is to feed on all the tissues of the body until they are literally wasted away, it is possible and probable that the presence of these two vital salts renders the Mullein so effective in checking this disease (ShoA:194-5). A simple infusion, sweetened with honey, is good for the beginning stages of the disease, as well as for hemorrhage of the lungs, stomach, intestines, or other internal parts. When the disease is more advanced, a strong decoction is more useful. It helps calm and quiet the nerves, soothing the inflamed tissues markedly. Shook said that tuberculosis has been cured in its earlier stages by this one herbal aid alone; in all stages it is said to help give prompt relief and help promote rest and sleep. Its narcotic principle is not well-known, but it is well known that it is non-poisonous.

Enormous amounts of it have been taken, and there is no case on record of injury or harm to patients who have taken as much as a quart a day (ShoA:195). Shook did recommend for advanced stages of tuberculosis a strong decoction of Mullein mixed with the mucilage of comfrey root, to help expectoration and to soothe, and a syrup of garlic, to stop the decay of cells in the body. This also helps with almost any serious condition of the body, he said, especially all diseases that show a marked deficiency of calcium and sulfur. It is indicated in all wasting diseases, and gives prompt relief to any pulmonary troubles. Since Mullein has been reputed to have some antibacterial properties, mild and inoffensive as the herb is, it is not surprising that it can help with these serious problems. [UW-Mullein]

### Testimonials

1. Dr. Christopher and Tuberculosis: Dr. Christopher recommended the use of Onion as an alternative to Garlic if it wasn't available. It works much the same, but is weaker in action. He said, however, that there is a specific use for onions, and here is the story he told.

He was practicing with a small band many years ago. He was going to travel to Europe, entertaining on board a ship. But as he would play his banjo, he had such a bad cough that he would cough in rhythm! The French dancer who was going with them said, "That's awful". "We can't continue this way." She went off into the kitchen in her apartment. When she came back to finish the practice, she brought him a bowl of onion syrup. Dr. Christopher had had this cough for four years. He had been working in a planing mill, running a three-gun sander and the sandings from the hardwood--mahogany and similar wood--came into his face. It was during the Depression and they couldn't afford a mask, so he had to contrive a mask himself. However, it didn't work, and he got his chronic cough. Medical doctors and his family physician, told him he had tuberculosis, which they said they couldn't treat or cure.

But after just a spoonful of this Onion syrup, Dr. Christopher had the first peace and ease he had

had in a long time.

Here is the way you make the syrup. Dice up big dried onions, whatever amount you want, and put them into a stainless steel, unchipped enamel, or Pyrex pan. Don't use aluminum. When you have about the amount you want, pour liquid honey over them until they are covered. Add nothing else. The honey extracts the Onion power, which is the greatest antihistamine known. This goes into the honey solution and provides a wonderfully effective cough syrup. [UW-Onion]

2. Distilled Water, Good Nutrition, Sunshine and Fresh Air and Exercise: I have met Paul C. Bragg and want to say that here was another great man (although now deceased) that did a lot for mankind, in teaching the use of distilled water for better health. As a teenager, Paul Bragg had tuberculosis and his doctors had told him there was no cure, that he was "not going to make it."

The little Swiss nurse was angry with the doctors and after they left she told him he could be cured in Switzerland. She took him back to Dr. August Rollier, and there in Switzerland he had a "rebirth" with just natural healing methods, no drugs of any kind-just distilled water, good nutrition, sunshine and fresh air (deep breathing) and exercise.

He became well and, as he put it, "strong as a young stallion." He studied two years in Switzerland and then he moved to London to study and prepare for his life's work. His landlord and his wife were very sick, so he started them on the use of distilled water and other simple aids, i.e., pure foods, etc., and performed a miraculous healing. At first these two had great difficulty in climbing the stairs but after a "cleaning out" could climb up and down the stairs within three weeks, something his landlord had not done in seven years. [NL 1-10]

#### See Also

[Resp-Free](#): Dr. Christopher's Herbal Formula for Lungs and Respiratory Tract

## Ailments

[A - B](#)   [C - E](#)   [F - I](#)
[J - P](#)   [Q - Z](#)
[Quinsy](#)
[Rheumatic Fever](#)
[Rheumatism](#)
[Shock](#)
[Skin Problems](#)
[Smallpox](#)
[Snakebite](#)
[Sour Stomach](#)
[Spasms](#)
[Sprains](#)
[Stiff Neck](#)
[Stroke](#)
[Sty](#)
[Syphilis](#)
[Teeth](#)
[Throat](#)
[Thrush](#)
[Tonsillitis](#)
[Tuberculosis](#)

## Tumors

### Definition

A swelling. An abnormal formation of parasitic, non-inflammatory cells or tissue arising from the cells of the host, yet progressive and independent in their growth. Tumors can be malignant or non-malignant, they can be fast-growing or slow-growing, and they can be in many parts of the body, such as the lymphatic glands or nodes, the urinary and genital areas, or the abdominal structure. [SNH p.45]

Brain Tumors: The most common tumors of the brain are the meningiomas, derived from the coverings of the brain, and the gliomas. Sarcomas and cancers do occur but are almost always derived from tumors in other parts of the body, for example, the breast and the bowel. Tumors of any size and duration produce certain general symptoms indicative of an increase in the intra cranial pressure, namely, headache, vomiting and optic neuritis or swelling of the optic nerve just as it enters the eyeball. Dizziness is another common symptom, and in the late stages mental changes may occur. In tumors of the frontal lobe mental changes are sometimes the earliest indication of the disease process. Tumors of the temporal lobe often produce a dreamy state, sometimes associated with hallucinations of smell. The position of the tumor may often be determined by noting the muscular and sensory abnormalities of various parts of the body and correlating the findings with what is known regarding the localization of function in the brain."

The brain must be properly nourished and kept free of inorganic materials that can cause this tremendous organ to malfunction. [NL 2-1]

### Cause

The inability to eliminate unhealthy material. [SNH p.46]

Hundreds of women have wondered why they have tumors and cysts in their bodies. The cause, according to Dr. Christopher, is potassium deficiency. When a patient takes plenty of potassium foods (not supplements) you can remove the cause of the cysts and tumors. Other foods, which are lower in potassium, must not be increased when you are trying to increase the potassium in the system. When patients go on the three-day cleanse and mucusless diet and take the female corrective formulas [Nu Fem], they receive nourishment which is high in potassium. Miraculous things happen to them. For even faster results, you can add to each cup of herb tea six to ten drops of elderberry tincture or six to ten drops of black walnut tincture, both of which are extremely high in potassium.

Cysts and tumors are like leeches, but they stay in places where there is a body deficiency. As soon as the body is balanced and well, the cysts and tumors have to go, because the material is too healthy for them to live on.

This is why so many patients brought Dr. Christopher cysts and tumors in various sizes that they had expelled from their bodies. There is not enough food, in the form of dying or deficient body materials, so they just decide to leave.

There are several ways to receive your potassium. Dr. Bernard Jensen sells a potassium broth made from dehydrated vegetables. Dr. Bronner makes a similar, excellent product. You can also make your own potassium broth by simmering equal parts of red potatoes, celery, carrots, onions, and herbs to taste. Raw vegetable and fruit juices also flood the system with potassium.

When cysts or tumors grow in places where they can be seen outside the body, often we react by having them cut out. This defeats healing by working on the effect instead of the cause. You can cut cysts out, tumors off, and burn warts off (which are also a potassium deficiency), or get rid of as many moles as you wish, but unless you go to the cause, they will grow back again, and you

Tumors[Typhoid](#)[Ulcers](#)[Uterus](#)[Varicose Veins](#)[Vertigo](#)[Vomiting](#)[Warts & Moles](#)[Whooping Cough](#)[Worms](#)[Yellow Fever](#)

may end up with as many or more cysts, tumors, moles as before. Different signs of potassium deficiency will keep popping out on the body because the condition that needs correcting is on the inside. You have to go into the cause, Dr. Christopher always insisted, which is the way we have been eating. [EWH p.125]

**Herbal Aids**

General Instructions: Rebuild tissue so the body can slough off the tumor accumulation. This is done by toning the body generally with alternatives. [SNH p.46]

Scrofulous Tumor: See formula using plantain leaves, fumitory herb, yellow dock root, white resin, olive oil and yellow beeswax. [SNH p.54]

Compound Poke Root Liniment: See formula using poke root, bayberry, sassafras oil, bay or laurel and tragacanth. Apply to affected parts 4-5 times daily. For tumors and enlargements, use plenty of friction or kneading. [SNH p.62]

Garlic Juice for Indolent Tumors. Apply the freshly expressed juice. [SNH p.101]

White Pond Lily: Apply a poultice of the fresh roots and leaves; also the strong decoction makes an excellent base for mixing other ingredients for application; the powder is often mixed equal parts with crushed flax seed (linseed) or powdered slippery elm. [SNH p.165]

Cleavers for Breast Tumors: Use the expressed juice mixed with linseed meal, and apply to the breast; take 1 teaspoonful of the juice while fasting in the morning. [SNH p.268]

Slippery Elm Pack (female genito-urinary problems, growths, tumors, etc.): Take the slippery elm powder and add sufficient water to make a bolus. Knead the bolus until it is quite stiff, 3 inches long, and the size of the patient's middle finger. Cut into 3 pieces, each 1 inch long and procure a fine sea sponge, sew a piece of silk thread firmly to the sponge, leaving 3-4 inches of the thread to the hand. Smear the sponge with equal parts of Vaseline and glycerine and set aside for use. Dip 1 piece of the slippery elm bolus into hot water and insert as far as possible into the vagina. Follow with the second and third pieces. Next, insert the smeared sponge into the vagina opening (which will hold the bolus in place) and leave for 2 days. Remove the sponge by pulling down on the silk thread, syringe thoroughly with a cleansing agent such as yellow dock (*Rumex-crispus*), and repeat the pack, or use our Vaginal Douche [[Yellow Dock Combination](#)]. [SNH p.339]

Bolus: ([V.B.](#)) One of the valuable procedures in the healing program for a woman is the vaginal bolus. The bolus is inserted into the rectal area. There are two types of bolus: one that dissolves at body temperature and the other acts as a poultice. The poultice-type is made with healing herbs to draw the poisons and toxins; and to break loose cysts, tumors, and cancerous conditions even as far up as the abdominal area as the bolus has a widespread influence, effecting not only the vagina, but also other organs, such as the bowel and the urinary tract. This drawing-type bolus generally consists of a group of herbs. [SNH p.503]

Castor Oil Fomentation: In order to get rid of hardened mucus in the body, which may appear as cysts, tumors or polyps, the following fomentation is to be used:

Soak a piece of outing flannel or baby's diaper in castor oil, squeeze slightly so it won't drip much, then place over entire frontal torso (neck to groin and side to side). Place a hot water bottle (over the castor oil application) over the liver area (the liver is on the right side just above the waist). It should be noted that a heating pad is not too highly endorsed here, unless a wet towel is placed between it and the skin--but even then, a wet heat (such as the hot water bottle) is best. Leave all this on for 1 1/2 hours; the hot water bottle may have to be refilled with hot water several times, because it cools rapidly. The next three days, over the same area covered by the outing flannel and castor oil, massage in circular motion toward the heart with olive oil for 5 to 10 minutes.

The seventh day is a day of rest, not only from the fomentation, but every part of the program, drinking only water the entire day -- and every seventh day thereafter will be done the same way. On the eighth day then, begin again with the castor oil for three days and so forth, along with the mucusless diet. the herbs, etc., until healing is accomplished. In the use of the fomentation, the castor oil goes through the skin into the liver area and lymph glands and starts drawing out the

poisons and flushing them out, while the olive oil goes in and heals and rebuilds new tissue. This procedure may have to be carried on between six weeks to six months to properly clean up the system, depending on the case. [SNH p.525]

[Incurables Routine](#): This program has been used for many different malfunctions with great success in nearly every case: multiple sclerosis, muscular dystrophy, stroke, deteriorating bones, curvature of the spine, locked arthritis joints, tumors and cysts in nearly all parts of the body. We have seen great improvement, reduction in pain and often complete healing in cases supposedly incurable. As you read each step taken in this program, analyze it and see if it can do anything but good. You will see that not one harmful thing is recommended. For much more information on the entire program see HHH p.85. [HHH p.85]

[V.B.](#): Dr. Christopher's Vaginal and Rectal Herbal Bolus: Here is another excellent aid for the woman (or rectal bolus for the man) who have problems in the reproductive areas. Boluses are made with healing herbs that help promote the following: (1) draw out the toxins and poisons, (2) aid (with herbal foods) in making the malfunctioning area healthy, so that cysts, tumors, and cancerous conditions will not have waste material to survive on or live in, because they are all scavengers. Herbalists have found that they will release and will be dispersed. Herbalists have found that some will come out through the orifices and others disperse into the blood stream and will be eliminated if the program is followed faithfully. (3) The bolus spreads its herbal influences widely from the vagina or bowel through the entire urinary and genital organs. The formula consists of one part each: squaw vine herbs, slippery elm bark, yellow dock root, comfrey root, marshmallow root, chickweed herb, golden seal root, mullein leaves. These herbs are all in powder form. Coconut butter should be melted down so that it will mix well with the herb powder. Mix a small quantity of this powder, and wet to pie dough consistency with coconut butter (which can be purchased from the drug store, health food store, or herb shop). Next, roll this mass between hands until you have a pencil-like bolus approximately the size of the middle finger and about inch-long pieces. Harden in a refrigerator. Then these are to be inserted into the vagina much the same as suppositories would be. It will be necessary to wear a sanitary napkin in order to hold the bolus up in the vagina (or rectum).

Insert upon retiring and leave in all night, six nights a week. The coconut butter melts at body temperature, leaving only the herbs, and these are easy to douche out. The following morning use the Slant board combination - number 12 below. [HHH p.191]

[Yellow Dock Combination](#): Dr. Christopher's Yellow Dock Combination: This is to be used in conjunction with number 11 above. As an aid in prolapsed uterus, bowel, or other organs, to assist in giving relief, make concentrated tea (simmer down to half its amount) of six parts oak bark, three parts mullein herb, four parts yellow dock root, three parts walnut bark or leaves, six parts comfrey root, one part lobelia, three parts marshmallow root. Inject with a syringe (while head down on slant board) into vagina, 1/4 to 1/2 cup or more; or rectum, one cup or more; for prolapsus or hemorrhoid problems and leave in as long as is possible before voiding. Dose suggested is one fourth to one cup, one or more times in a day, and drink one fourth cup in three fourths cup of distilled water three times a day. When the tea is injected into the abdominal area and while on the slant board, knead and massage the pelvic and abdominal area to exercise the muscles, so the herbal tea (food) will be assimilated into the organs. [HHH p.192]

[Black Ointment](#): Dr. Christopher's Black Ointment (an excellent drawing ointment): Used historically (externally) on old ulcers, tumors, boils, warts, skin cancers, hemorrhoids, excellent for burns and as a healing agent. This is made with chaparral, comfrey, red clover blossoms, pine tar, mullein, beeswax, plantain, olive oil, mutton tallow, chickweed, poke root. [HHH p.196]

[Is There a Natural Way to Eliminate Fibroid Tumors?](#) A question to Dr. Christopher in his newsletter. His answer is: Yes, there is. A tumor is a swelling, an abnormal formation of parasitic, non-inflammatory cells or tissue arising from the cells of the host, yet progressive and independent in their growth. Tumors can be malignant or non-malignant. They can be fast growing or slow growing and they can develop in many parts of the body such as the lymphatic glands or nodes, the urinary and genital areas or the abdominal structure. The cause of the tumors is an inability to eliminate unhealthy materials and this generally stems from a lack of organic potassium in the diet.

Begin by observing the procedure in the [Three Day Cleanse](#) and [Mucusless Diet](#), keep the

bowels free with the lower bowel tonic [[Fen LB](#)] and use the following procedure: drink one to three cups of potassium broth each day. Make the broth with potato peelings at least one half inch thick, comfrey leaves, celery leaves, cut-up celery stalks, a few carrot tops from the garden, not wild, beet greens, spinach greens, chopped onions and garlic and several whole, black peppercorns as a stimulant and digestant. Cover the mixture well with distilled water and slowly simmer. If possible, keep the temperature around 130 degrees for six to ten hours. Do not boil. After simmering, strain the preparation. Use this broth between meals as you might a tasty tea being sure to chew it well.

Besides using this broth we also suggest one cup or more per day of elderberry tea. If elder blossoms are being used for the tea in place of the berry add about a fourth part of peppermint leaves to avoid nausea.

Over the tumorous area use the comfrey combination also known as the bone, flesh and cartilage [[BF & C](#)] combination. The use of this combination was explained in the answer to the first question of this issue of the newsletter.

If the tumors are in the reproductive organs see the herbal combinations mentioned in the booklet [The Three Day Cleanse](#) and [Mucusless Diet](#). They are listed under various titles, "herbal aid for female reproductive organs" [[Nu Fem](#)], "herbal prostrate formula," [[Prospallate](#)] and "herbal aids to equalize hormones and estrogens" [[Changease](#)]. Also, be aware of the rectal and vaginal bolus [[V.B.](#)] and the [Yellow Dock Combination](#) tea also explained in that booklet. Whenever possible use the castor oil fomentation which you will find in the cleanse program as well. [NL 1-3]

Chaparral: The Kelly Research Foundation in Grapevine, Texas has been active in cancer research. The following is a statement concerning chaparral by Dr. William Kelly:

"I've found that chaparral is very effective in 7% of the cases of malignancy. The action is not as many researchers believe--a specific activity against the cancer cell, but rather an indirect one. In about 7% of the cases of malignancy, the pancreas and the liver as well as other tissue of the body are so congested with poisons such as medications, sprays, drugs, metallic poisons, and pollutants, that these tissues cannot carry on normal activity. This is basically an antagonist to the enzyme and vitamin and mineral metabolism that goes on in the body. In cancer specifically, we find that the pancreatic enzymes are locked with the antagonists and are rendered totally ineffective. By chelating these antagonists from the pancreatic enzymes, we find that normal activity takes place and the person's own cancer defenses take over and destroy the tumor in malignant conditions. It has been found further and should be seriously investigated by the Federal Government that Chaparral works well in chelating the toxins out of the bodies of those who have been drug addicts. We recommend taking two Chaparral tablets before each meal. This seems to be an effective way of chelating antagonists from the body that otherwise could not be accomplished." [NL 3-4]

Cancer - Tumors and Cleansing the Body: Just a word about cancer. It is a systematic disease. It depends on filth in the bowel and the blood stream. Our understanding of cancer is different from that of the surgeon's. We see the body being able to "clean up its act" and stop recycling the same old toxins around and around in the body. All channels of elimination (including the skin) must be functioning. The food intake must be pure.

Even though a person is operated upon for a cancerous tumor, there is no guarantee that the cancer will not return simply because the cause was not studied.

"Cancer" is a frightening word. The one we use is "cell deterioration." This explains the process in the body more clearly than the word, "cancer."

Sometimes, during an operation for a tumor, blood spills over into the rest of the body. This blood contains some of the tumor cells. The doctors sometimes say, "Oh, the body will take care of those." Mendelsohn suggests that surgery would be unnecessary if the body could take care of the cells by itself.

The medical alternative to cancer surgery, chemotherapy, presents side effects that sound like horrors out of an old Frankenstein movie.

Our program, "The [Incurables](#)," is a safe, nontoxic method to restore health and strength. It is not as easy as surgery, however, it involves retraining the little tyrants known as the tastebuds.

Remember the old Biblical statement from the Old Testament, "If the eye offends you, pluck it out!" This phrase seems to be the general rule in most allopathic treatment from tumors to tonsils.

We now view the old medical practice of bloodletting (to let out the bad blood) to be primitive. How much more primitive it is to exclude an entire organ from the body as punishment for its diseased condition. An automobile will not function without a carburetor. A faulty carburetor can be replaced, rebuilt, or cleaned out and the car will run again. The design of the auto makes it necessary for each part of the engine to be integral. Parts cannot expect to be ripped out of the system and still have good driving possibilities. Every human organ is functional and contributes to the smooth operation of the entire organism. It's erroneous to think that removal of an organ is standard procedure. Surgery is no replacement for cleansing and rebuilding the body. We need to work with Nature instead of trying to second guess it. [NL 4-2]

Tumors on the Pineal and/or Pituitary Glands: From a letter to Dr. Christopher about a person in a coma. At the end of his answer he mentions that this same program can be used successfully with someone with tumors on the pineal and/or pituitary glands. Here is the question: If a person were in a coma caused by some hemorrhaging in the brain stem area, how might this be approached herbally?

Dr. Christopher's answer: We have an herbal formula we call "bone, flesh and cartilage" [\[BF & C\]](#) that has been used successfully in these types of conditions. Make a tea of the following herbs: six parts oak bark (*Quercus alba*; Fagaceae; Cupuliferae), three parts marshmallow root (*Althea officinalis*), three parts mullein herb (*Verbascum thapsus*), Two parts wormwood (*Artemisia absinthium*), one part lobelia (*Lobelia inflata*), one part scullcap herb (*Scutellaria lateriflora*), six parts of comfrey root (*Symphytum officinalis*), three parts walnut bark (*Juglans nigra*) (bark or leaves), three parts gravel root (*Eupatorium purpureum*). Soak the combined teas in distilled water (at the rate of one ounce of combined herbs to each pint of distilled water), then soak four to six hours, simmer slowly thirty minutes, strain and then simmer the liquid down to one half its volume and add one fourth vegetable glycerine (if desired). Example: one gallon of tea simmered (not boiled) down to two quarts and add one pint of glycerine.

Soak flannel, cotton or any white material other than synthetics--never use synthetics. Wrap the fomentation (soaked cloth) around the head area (like a nightcap), tied under chin to hold in place, also down the spine to the shoulders. The fomentation down the spine should be about four or five inches wide. Put a shower cap over the head and a piece of wax paper, oiled silk or plastic down the spine area. Keep this fomentation on the area approximately twelve hours each day, either during sleeping hours or during the day--whichever is more convenient. Drink 1/4 cup of finished concentrated tea with three fourths cup of distilled water three or more times a day. Do this entire program six days a week, week after week until healed.

This routine has been used with cases of tumors on the pineal and/or pituitary glands, and these tumors have decreased--in one case over 65 percent in six weeks, then over another month was completely gone. This herbal formula will aid in rebuilding the hemorrhaging area with surprising results. [NL 1-6]]

Juices: Carrot, spinach, pineapple. [NL 3-5]

Organic Potassium: Cancerous tumors have a very difficult time growing when there is the presence of organic potassium in the body, so the tinctures of black walnut or elderberry or any other foods high in potassium can be helpful here, providing that the bowel is in good condition so that proper assimilation can take place. [NL 3-6]

[Mullein & Lobelia](#): Dr. Christopher's Glandular Formula and [Red Clover Combination](#): Dr. Christopher's Blood Purifying Formula and Breast Tumors: When there is any problem with the breast, and this should be noticed early, we use the fomentation of 3 parts mullein and one part lobelia over the affected area. It may be taken internally as well. Many Indian tribes have used a fomentation of poke root externally to draw out the cancer. As with all cancers, they begin in the blood stream and radiate out to other parts of the body where they are manifested. The Red Clover Combination can be used to help purify the bloodstream, the nutrient transport system of the body. Cysts and tumors will not grow in an atmosphere where there is enough potassium. Elderberry tincture can be taken for potassium increase along with foods that are high in potassium. [NL 4-2]

Tumor in the Ear: If a tumor in the ear has been diagnosed, the Bone, Flesh and Cartilage [\[BF & C\]](#) fomentation is necessary along with the [incurables program](#). Tumors will not form when the body has sufficient potassium. Organic forms of potassium can be found in black walnut and

elderberry tincture. Grape juice or green drink are good sources, too. [NL 4-6]

Cabbage Leaves: The leaves, when cooked and applied to chronic ulcers, modify and heal them, and aid the resolution of tumors and wounds." [NL 4-12]

Red Beet: Our common red beet is a highly nutritious plant, The root is an excellent appetite stimulant and is easily digested. ...One therapy for leukemia and tumors is to consume a couple of pounds of raw, mashed beets daily. [NL 4-12]

Figs: Contain an active ingredient called benzaldehyde which has been found to be a very effective carcinostatic agent for reducing certain kinds of tumors found in the neck, throat, and general lymphatic system particularly the adenoids. [NL 5-1]

The Flaxseed poultice is probably one of the most famous applications of the herb. The ground seed is mixed with boiling water until it is a thick mush. Other herbs may be added to it for specific conditions, such as hops, mullein, etc. This is one of the best poultices, according to Kloss, for old sores, boils, carbuncles, inflammations, and tumors. It is excellent for enlarged glands, joints, swellings, pneumonia, pleurisy, sprains, bruises, contusions, or inflammations of any part of the body, according to Dr. Shook (ShoA: 182). Apply as hot as possible; cover with waxed paper or plastic, and keep warm, reapplying hot poultices as needed. It allays irritation and pain and promotes suppuration; lobelia will help cure boils. It is commonly used for abscesses and other local affections (Gri:319). [NL 7-2]

### Testimonials

1. Passed Some Tumors, One Almost the Size of a Grapefruit, and Cysts as Well: When Dr. Christopher was traveling, using chiropractic offices and naturopath's offices, diagnosing, reading eyes, and helping with herbs a lady...came to see him. In addition to the prolapsed transverse colon infecting the entire reproductive system, it had impinged on the bladder, so that whenever she laughed, sneezed, or coughed, she would void her urine, a very embarrassing problem. In addition, one of her breasts was so infected that the doctors were urging her to have it removed. Dr. Christopher told her he could give her advice as to what to do, but that he was traveling and wouldn't be able to guide her or see her for several months. She agreed to follow his instructions, and asked to see him when he returned.

He put her on the full program. She was to clear the bowel with the lower bowel formula [[Fen LB](#)], to clean the bloodstream using the red clover combination, and to rebuild the reproductive organs with the female corrective [Nu Fem] and the hormone-estrogen formula [[Changease](#)]. She was to continue the whole program, six days a week.

When he returned to that city six months later, she had called and prearranged an appointment. She bounced in, looking years younger, all smiles. She said her urine loss was under control now, with no unwanted voiding. She had no pains in the ovaries; in fact, she had dropped some stones from the three-day cleanse. She had also passed some tumors, one almost the size of a grapefruit, and cysts as well. When she went to the family doctor for an examination, he was astounded, because her body was rebuilding itself. The breast they were going to cut off had healed itself, with no more infection. She felt that it was a new world, and that life was worth living again.

Although she healed rapidly and consistently, Dr. Christopher pointed out that herbs don't work all at once, but you have to apply yourself and be patient to wait for the results of your hard work. [EWH p.114]

2. Tumor from Leg Decreases: I want to tell you this because maybe it will help someone else. I have a tumor on my leg (almost gone). I've been putting the B & B cotton balls on it, with plastic and tape. My leg got so itchy I couldn't stand it, also the skin all around the tumor got lumpy. Anyway, I thought maybe it was the plastic but when I didn't use it, the B & B would dry so fast I was changing it all day long. This is how I solved it. I cut a slice of potato, big around, cut a groove in the slice to make room for the cotton balls soaked in B & B. I put the plastic on the back of the potato slice (none of it touching the skin) put the tape (I have a very good silk tape) on the other side of the plastic to make a little pad, none touching the skin, then a cloth wound around, holding the whole thing in place.

This was a good sized tumor. I was amazed when I would take the bandage off it would just squirt

all over. Well, I've had it getting bigger for 15 years, and now its almost gone. I'm so glad I didn't have to have my leg all cut up. Wow, wouldn't it have left a hole. I don't even think I'll have a scar. [NL 2-2]

3. Comfrey: Dr. Charles MacAllister, M.D., was interested in the use of comfrey as a healing agent. He had written a paper in the 1896 edition of the British Surgical Journal, Lancet. In it, he gave his philosophy concerning the bloodstream and irregular cell growth. Dr. MacAllister wanted to look up his paper and noticed an article in the same issue by a Professor William Thompson, President of the Royal College of Surgeons in Ireland. Thompson recorded a case of a man who had been diagnosed as having a malignant tumor on his face. The patient had undergone surgery of the palate in an attempt to remove the cancer.

A month later, the cancer returned. This time it ran rampant throughout the patient's head. They gave up on cutting it out. It had gone too far, and they sent him home. Three months later he returned to Thompson's office and was examined. Thompson noted that the cancer had completely disappeared. The patient told Dr. Thompson that he had been applying comfrey poultices to the swelling and that it had gradually disappeared. The patient had a custom-made palate to fill in the hole left by surgery of the hard palate. Thompson states in the report that although he knows nothing of the use of comfrey, he does not believe that it would remove a sarcomatous tumor.

MacAllister was inspired by that article of Dr. Thompsons and began to wonder if there was actually anything in comfrey that would control or stabilize cell growth. He began an extensive study of comfrey although he had never before heard of its use as a medicine. Beginning with old books on materia medica (substances used medicinally), MacAllister found that after the mid-nineteenth century, comfrey or Symphytum was referred to as obsolete as a healing aid. He then began to search through the ancient and medieval herbals which told the history of the use of comfrey. There were several varieties of the plant used, one was known to Turks and Saracens for use in healing battle wounds. [There is much more to read about the comfrey and the components that MacAllister discovered. To read more go to the source of newsletter 4-3.] [NL 4-3]

#### See Also

[B & B Tincture](#): Dr. Christopher's Nervous System Formula with Black Cohosh

[BF & C](#): Dr. Christopher's Bone, Flesh and Cartilage Formula

[Black Ointment](#): Dr. Christopher's Black Ointment

[Changease](#): Dr. Christopher's Herbal Hormone Formula

[Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula

[Mullein & Lobelia](#): Dr. Christopher's Glandular Formula

[Nu Fem](#): Dr. Christopher's Herbal Aid for Female Reproductive Organs

[Red Clover Combination](#): Dr. Christopher's Blood Purifying Formula

[V.B.](#): Dr. Christopher's Vaginal and Rectal Herbal Bolus

[Yellow Dock Combination](#): Dr. Christopher's Yellow Dock Combination

[Cancer](#)

[Dr. John R. Christophers "Mucusless Diet"](#)

[Dr. John R. Christophers "Three Day Cleansing Program"](#)

## Typhoid

### Definition

A bacterial infection usually caused by Salmonella Typhi and is carried by contaminated milk, water or food.

### Symptoms

An infectious affliction characterized by an enlargement of the spleen and the mesenteric lymph nodes and catarrhal inflammation of the intestinal mucous membrane. After two or three weeks incubation, there is weakness, headache, vague pains, tendency to diarrhea and nosebleed, and pronounced stupor. The stools have a peculiar pea-soup color. At times there is constipation, and usually there is slight congestion of the lung accompanied by a cough. On the seventh to ninth day, peculiar eruptions of small, slightly elevated, rose-colored spots appear on the chest and abdomen. Frequently there is a complication of intestinal hemorrhoids, peritonitis, pneumonia, nephritis and perforation of the bowel. [SNH p.46]

### Cause

The basic cause is contagious cleansing-organisms that are introduced through contaminated foods. [SNH p.46]

### Herbal Aids

General Instructions: With fevers, use moist heat to facilitate the cleansing and eliminate the toxic backlog in the system. Induce profuse perspiration by the use of hot yarrow or raspberry leaf tea and by soaking in a tub of hot water with up to a pound of ginger, and a teaspoon each of mustard and cayenne. Follow with the [Cold Sheet Treatment](#). [SNH p.46]

Echinacea: Drink sufficient of the hot tea to induce diaphoresis, and administer hourly thereafter until the system is relieved of stagnated wastage. [SNH p.89]

Compound Antiseptic Oil (a good substitute for Listerine): See formula using oil of thyme, thyme, eugenol, menthol, eucalyptol and olive oil. May be taken internally or used externally with amazing and beneficial results. Internally: 1 teaspoonful in 1 cupful of water, sweetened with 1 tablespoonful of honey 3-4 times daily; good for ... typhoid fever.... [SNH p.230]

[Antisp](#): Dr. Christopher's Anti-Spasmotic Tincture: See formula using lobelia, skullcap, skunk cabbage, gum myrrh, black cohosh and cayenne. (This is the same formula as Dr. Christopher's Anti-Spasmotic Tincture). Give 1 teaspoonful of Antispasmodic tincture (see Formulas) in a little warm water every 1/2 hour. Wash the body daily, with 2 parts of hot water and 1 part apple cider vinegar. Change bedclothes and sheets daily, and give the patient warm water every 2 hours. [SNH p.362]

Delirium of Typhoid: Add a little cayenne to the lady slipper tea. [SNH p.382] Infusion of lady's slipper: See formula using lady's slipper root and distilled water. [SNH p.383]

Low States of Typhoid Fever: Combine lady's slipper with a positive stimulant such as cayenne or golden seal. [SNH p.382] Infusion of lady's slipper: See formula using lady's slipper root and distilled water. [SNH p.383]

Boneset: It is a bitter herbal aid, and in addition to its use in fevers and infections it is taken to

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**Typhoid**

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improve digestion and assimilation. It was recommended during the Civil War to replace quinine in cases of malaria, as well as for typhoid pneumonia. [UW-Boneset]

**Bugleweed:** It has been used frequently to reduce the high temperatures of typhoid fever without apparently weakening the patient. [UW-bugleweed]

**Garlic:** It is very well known that garlic contains all the elements except Vitamin D. It is also known that garlic essence warms the body and promotes better circulation of the blood .... Aillin, an oily substance contained in garlic, diluted as much as 200 times can kill typhoid germs. [NL 2-9]

**Echinacea:** It is an intestinal antiseptic, although it may not have a direct chemical effect on bacteria, but destroys germs by building the resistance and cleansing the system so that the body itself can resist the germs. It therefore is excellent in the treatment of the serious fevers-typhoid, malaria, and the eruptive fevers, such as measles, chickenpox, and scarlet fever. It is similarly useful in influenza and la grippe. [NL 6-12]

**See Also**

[Antsp:](#) Dr. Christopher's Anti-Spasmodic Tincture

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## Ulcers

### Cause

Stomach and duodenal ulcers are caused by an excess of unneutralized digestive acids pouring into the delicate mucous membranes and literally eating a hole through them. A person could hemorrhage to death from ulcers. The causes can be numerous: the pancreas does not produce enough bicarbonate of soda to neutralize stomach acid; the gall bladder has been removed and there is nowhere to store bile which constantly drips into the duodenum; an over production of hydrochloric acid by the bottom third of the stomach from improper nerve impulse messages from the brain; worry and stress; drugs, alcohol; etc. [NL 3-10]

### Herbal Aids

**ULC:** Dr. Christopher's Ulcer Formula: Contains bayberry, chickweed, slippery elm, mullein. This formula is designed to help sooth the discomforts caused from stomach ulcers. It should be taken with hops or camomile tea. Please note, to help with an ulcer, take three teaspoons of cayenne pepper per day. This cayenne may be mixed in water or tomato juice. It is recommended that you start with only 1/8 teaspoon three times a day, and then gradually work up to the one teaspoon three times a day. [HHH p.197]

**Licorice:** The root tea can be used for treating stomach ulcers instead of the extracted principles; this has always been Dr. Christopher's recommendation, to use the entire herb instead of some isolate. It is best taken before the time when the pain is predictable, making a standard infusion. [UW-Licorice] Licorice root has also been known (and proven medicinally) to heal ulcers. This herb would be highly recommended. [NL 3-10]

**Plantain:** The fresh juice can be almost miraculous to treat stomach ulcers; it can be preserved with twenty-five percent vodka or ten percent grain alcohol, putting one teaspoonful into warm water before every meal until pain ceases. [UW-Plantain]

**Cayenne:** Dr. Christophers many Cayenne Combinations: Cayenne has been used for ages to aid stomach ulcer cases. We have seen some of the extremely painful cases given relief, and then healed by using cayenne faithfully each day over a period of weeks or months. It should be used until pains are gone and permanent relief is assured. [NL 1-2] We need to go to the cause of ulcers and eliminate those but we can begin by relieving the pain and healing the tissues. Cayenne pepper should be taken by the teaspoon (start with 1/4 tsp. three times a day and work up to 1 teaspoonful three times a day). The cayenne pepper will even cauterize a bleeding ulcer. [NL 3-10]

**Juices:** Carrot, carrot & coconut, papaya. [NL 3-5]

**Pumpkin Seeds:** Another good food for inflamed intestines, stomach ulcers and hemorrhoids is the Pumpkin. The pumpkin seed is much recommended for prostate problems, tape and other worm elimination and constipation. [NL 4-12]

**Slippery Elm:** The thick, mucilaginous infusion was drunk to reduce fever, to ease a sore throat, stomach ulcers and other stomach complaints. [UW-Slippery Elm]

**Tagamet Substitute:** The allopathic drug popular for "ulcer management" is Tagamet. This stops the production of hydrochloric acid by the stomach. We want to regulate the production of acid. Whether there is too much or not enough, this formula will be a great aid:

[Typhoid](#)[Ulcers](#)[Uterus](#)[Varicose Veins](#)[Vertigo](#)[Vomiting](#)[Warts & Moles](#)[Whooping Cough](#)[Worms](#)[Yellow Fever](#)

1 tbsp. raw honey

1 tbsp. apple cider vinegar in a glass of steam distilled water

Take this formula a half hour before meals. [NL 3-10]

### Testimonials

1. [Cayenne](#): A lady who had been attending Dr. Christopher's lectures over the years told the story of her husband who had a severe case of stomach ulcers. The doctor recommended that part of the stomach be removed, but the man preferred to suffer the pain rather than risk such an operation. But he also ridiculed his wife's recommendations to use Cayenne and other herbs. Whenever he would see Dr. Christopher in town, he'd bellow, "Hello, Doc! Killed anybody with Cayenne today?" Naturally, Dr. Christopher tried to avoid him, but one day he came directly to the Doctor--but this time without any sarcasm, instead being very apologetic, telling this story.

He had come home from work one night, so sick he wanted to die, with stomach ulcers. His wife was not home, but he was in such pain that he decided to commit suicide. When he looked into the medicine cabinet to find some kind of medicine poisonous enough to kill him, he discovered that his wife had discarded all the old bottles of pharmaceutical medicines. All he could find were some bottles of herbs and a large container of Cayenne pepper. He figured that a large dose of that would kill him, so he took a heaping tablespoon in a glass of hot water, gulped it down, rushed into the bedroom, and covered his head with a pillow so that the neighbors couldn't hear his dying screams.

The next thing he knew, his wife was shaking him awake the next morning. He had slept all night, the first time in years, instead of waking every half hour or so for anti-acid tablets. To his amazement, all his pain was gone. He continued using the Cayenne faithfully, three times a day, and never had any more trouble with ulcers. [NL 6-3]

2. Cayenne Again: Most medical doctors eliminate hot foods such as capsicum from the diets of ulcer patients and others with delicate digestion; as we have shown, this is directly opposite to that which is recommended by herbalists.

Their actions are influenced from medical research showing hemorrhaging occurring after introducing (mechanically) capsicum into the stomachs of persons prone to hemorrhages. Their observations are fact but tend to be inconclusive. Perhaps any substance introduced mechanically into the system could have caused hemorrhaging. From personal experience, I was very uncomfortable taking capsicum for my bleeding ulcers, but after one day of taking capsicum, in water, I never again experienced passing dark blood through my stools. Perhaps the immediate bleeding observed, by the researchers, would have been corrected through continued herb care. [NL 6-3]

3. Cayenne: I had symptoms of a stomach ulcer and I drank the Cayenne Pepper and now I have no more symptoms. Thank you again for your information on Cayenne and how it works for bleeding and heart attacks. [NL 4-7]

### See Also

[Cayenne](#): Dr. Christophers many Cayenne Combinations

[ULC](#): Dr. Christopher's Ulcer Formula

## Uterus

### Definition

The uterus or womb is the organ of gestation or pregnancy. [SNH p.275]

### Herbal Aids

Chaparral for Prolapsed Uterus: Use the infusion as a douche. [SNH p.71] Chaparral tea (not bitter): See formula using chaparral, elder flowers and peppermint. [SNH p.71]

Bayberry for Hemorrhage: Bayberry is an excellent tonic for the uterus (especially during pregnancy), and is a valuable agent for helping arrest hemorrhage of the uterus, bowels or lungs. When used with cayenne, it is very effective in reviving the heat in the body and in inducing diaphoresis. [SNH p.131]

Bayberry for Hemorrhage: Use the infusion or decoction alone, or in combination with suitable stimulants (cayenne, ginger, etc.). [SNH p.132] Decoction: See formula using bayberry root bark and distilled water. [SNH p.132]

Inflammation of the Uterus: See formula using raspberry leaves and myrrh. [SNH p.146]

Dr. Shook's Healing Douche for Prolapsed or Enlarged Uterus: See formula using raspberry leaves, sandalwood oil, Irish moss and glycerine. [SNH p.146]

Inflammation of the Uterus: See formula using White pond lily, comfrey root, slippery elm bark, uva ursi, wild yam root, licorice and cayenne. [SNH p.166]

Prolapsed Uterus, Flaccid Vagina and Uterus: See formula using uva ursi, squaw vine and dandelion root. [SNH p.261]

Hemorrhaging: A hemorrhage occurs in the lungs, stomach, uterus, or nose--flowing fast--just take a teaspoonful of cayenne in a glass of extra-warm water, drink it down, and by the count of ten the bleeding will stop. Instead of all the pressure being centralized, it is equalized, and the clotting becomes more rapid. Whether the bleeding is internal or external, a teaspoon of cayenne taken orally in a glass of hot water will stop the bleeding quickly. For the lungs, a vapor bath, along with the warm cayenne infusion will be very beneficial. [SNH p.409]

Jogging and a Prolapsed Uterus: All patients should do some jogging, which is a bouncing motion. This helps to improve circulation, tone the organs, and slough off the dead cell accumulations faster. Each person should work up to a mile of jogging a day, but start out with one-fourth mile or less. Never jog to the point of exhaustion because all the good that is done each day will be undone as a result of overexertion. If for some reason the jogging cannot be done outside, do it inside the house in front of an open window. This will especially vibrate the peristaltic colon muscle and give it tone, will revive the uterus from a prolapsed state in the female, and help heal the prostate in the male. [SNH p.526]

[Nu Fem](#): Dr. Christopher's Herbal Aid for Female Reproductive Organs: This is an amazing combination of herbs to help aid in rebuilding a malfunctioning reproductive system (uterus, ovaries, fallopian tubes, etc.). Over the years herbalists and patients have seen painful menstruations, heavy flowing, cramps, irregularity, etc., that have been helped and the patient now has a painless menstrual period, good menstrual timing, and a new outlook on life by using these aids to readjust the malfunctioning areas. The female corrective formula consists of golden seal root, blessed thistle, cayenne, cramp bark, false unicorn root, ginger, red raspberry leaves,

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squaw vine, and uva ursi.

Recommended dosage is one cup or 2 capsules or tablets morning and evening or three times a day if desired, six days a week for as long as required to get results desired. We have seen many severe cases who have had many years of suffering cleared up in ninety to 120 days. Some get relief sooner, some take longer--no two cases are alike. This is a food to rebuild the malfunctioning organs. [HHH p.190]

[Yellow Dock Combination](#): Dr. Christopher's Yellow Dock Combination: As an aid in prolapsed uterus, bowel, or other organs, to assist in giving relief, make concentrated tea (simmer down to half its amount) of six parts oak bark, three parts mullein herb, four parts yellow dock root, three parts walnut bark or leaves, six parts comfrey root, one part lobelia, three parts marshmallow root. Inject with a syringe (while head down on slant board) into vagina, 1/4 to 1/2 cup or more; or rectum, one cup or more; for prolapsus or hemorrhoid problems and leave in as long as is possible before voiding. Dose suggested is one fourth to one cup, one or more times in a day, and drink one fourth cup in three fourths cup of distilled water three times a day. When the tea is injected into the abdominal area and while on the slant board, knead and massage the pelvic and abdominal area to exercise the muscles, so the herbal tea (food) will be assimilated into the organs. [HHH p.192]

Goldenseal: For prolapsed uterus and prolapsed rectum, a small injection of the infusion can give results. One should remember that taking it internally can cause uterine contractions, so it should not be used during pregnancy, except as aforementioned. [UW-Golden Seal]

Gravel Root: Gravel Root is said to help with problems in the genital tracts. When there is impotence, Gravel Root can help tone and heal the system. It controls chronic irritability of the womb and will help clear up atony of the womb. It can help prevent habitual abortion if it is due to a prolapsed, retroverted uterus or to debility resulting from chronic inflammation of the area (Felk:741). [UW-Gravel Root]

Kelp: Kelp, as might be expected, is also of use in the female organs. It will help tone up a weak uterus and help produce a more healthy baby, as the balanced minerals will be supplied fully with the use of Kelp. [UW-Kelp]

Squaw Vine: By far and away the most extensive use of this herb is to help assist in pregnancy and childbirth. Combined with red raspberry leaf tea, it is an excellent way to strengthen the uterus during pregnancy and facilitate, according to Kloss, "a wonderfully easy delivery" (Klo:316). It is especially useful taken several weeks before the baby is due. [UW-Squaw Vine]

Bayberry: Bayberry is reputed to positively influence the uterus and all the female functions. It is the one dependable herbal aid in uterine hemorrhages (Cly:60), whether due to abortion, miscarriage, or afterbirth. The tea may be taken internally and the uterus may also be packed with sterile cotton saturated with the decoction. A weak tea may be used as a douche for amenorrhea or atonic leucorrhoea, using the tea or the tincture internally as well (Felk: 1294) A douche similarly will help control vaginal discharge (Tie:79). Bayberry tea will strengthen and restore a prolapsed uterus, and will induce better contractions during childbirth. It will moderate the flow of lochia after birth (Cly:61 ). [NL 5-5]

### Testimonials

1. Tipped Uterus and Other Major Female Problems Solved: Dr. Christopher always checked his patients with iridology before advising them. A lady came to him, aged about 45, asking for a reading to help with her condition. He saw that she had a prolapsed transverse colon which had dropped to a point where it tipped her uterus and pinched her bladder, and she was having a very serious trouble there. She had problems with the ovaries, with infection in both of them, and she was troubled with vaginal drainage. In addition, she had one breast that was badly infected, which might necessitate having part of the breast removed if she had asked another doctor for treatment. After the reading, Dr. Christopher asked why she had come to him and what she wanted him to do. She said that she had just spent three days in a clinic, where they had verified everything he had read from her irises, but they wanted her to go to the hospital immediately and have the uterus removed and the bladder stitched up to the spinal cord area, and also have her breast removed.

She was frightened of all this cutting, so she wanted to find help in some other way.

She promised that she would stay on the program that Dr. Christopher advised. She took the female corrective [\[Nu Fem\]](#) and hormone-balancing combinations, [\[Changease\]](#) used the vaginal bolus [\[V.B.\]](#) six nights a week, flushing out each morning with the slant board routine, [\[Yellow Dock Combination\]](#) massaging 15 to 20 minutes a day on the abdominal and pelvic area while the tea was inside. She was also to use the [Three Oil Massage](#) over the abdominal area, and go on the three-day cleanse and mucusless diet. In addition, she was to drink a gallon of steam-distilled water a day, and plenty of red raspberry leaf tea. She kept her bowels clean with the lower bowel formula [\[Fen LB\]](#), and kept the bloodstream cleaned up with the red clover combination tea.

Dr. Christopher did not see her again for six months. When she came to see him this time, she bounced in, not dragging as she had before, a totally different woman, much happier and healthier. She had no operations, and yet her prolapsed transverse colon had gone back into place, and her uterus and bladder had gone back into position. She was feeling like a new woman, and she did indeed have a new system by following through with the entire herbal program. [EWH p.112]

2. Lady with a Multitude of Problems: A lady called Dr. Christopher in Salt Lake City from Provo, Utah, saying that her daughter had flown in from out of town, extremely ill. She was afraid that she was going to die, so she had come to her mother to take care of her. She asked if he would come and read the young woman's eyes. When he arrived, the young woman ridiculed him, and said she thought it was a bunch of crazy ideas that her mother had, and she wasn't going to let him look into her eyes. So Dr. Christopher bowed out and left.

Nearly a month went by, and the lady from Provo asked him to come again, that the daughter was so sick that she was frightened and would talk with him.

When he came, they told him that they had tried the best doctors they could find, but no one could help the girl (Dr. Christopher never said what the problem was, however). He gave her an eye reading and she would remark, "Who told you that!" Each thing he told her was the same thing that the doctors had diagnosed. When he finished, she said she was still dubious about the natural program, but that the reading was so accurate, he must have something good. She agreed to follow the natural program. She was too sick to even get up and walk.

So they started off gradually on the [Incurables program](#), using juices to rebuild the body. Before many weeks had passed, she came to Dr. Christopher's classes and became quite a faithful student. She even began to study iridology and became good at it. She watched her own eyes and could see the healing taking place. She had been told, though she had been married for some time, that she could never have a baby because of an immature pelvic area and an underdeveloped uterus, as well as other problems in her reproductive system. By using the mucusless diet and herbs to rebuild her body--the female corrective [\[Nu Fem\]](#) and the hormone-balancing combinations [\[Changease\]](#)--and doing the exercises they advised, even these problems began to heal.

Eventually Dr. Christopher got a call from her husband on the West Coast; he was angry. It was a call of abuse, accusing the Doctor of keeping his wife up in Utah when she should be down with him. He was an electrical engineer, with a very important job, and felt he needed her with him. Dr. Christopher told him his wife had been too sick to even sit up alone, but with the aid of the program and the mother's assistance, she was improving. He told the husband she would be home with him as soon as possible.

The man told Dr. Christopher he was one of the worst quacks there could possibly be, let out some abusive language, and slammed down the receiver.

The wife did heal eventually, and traveled home on her own, without anyone assisting her. She was an excellent housewife, and she showed so much improvement that the husband was astonished, because he figured she didn't have too much longer to live.

Best of all, she had two beautiful children, with natural childbirth, and although the husband was an electrical engineer with a high-paying job, he was so delighted with the results that he became a chiropractor. He delivered their two children. [EWH p.116]

**See Also**

[Cayenne](#): Dr. Christophers many Cayenne Combinations

[Changease](#): Dr. Christopher's Herbal Hormone Formula

[Nu Fem](#): Dr. Christopher's Herbal Aid for Female Reproductive Organs

[V.B.](#): Dr. Christopher's Vaginal and Rectal Herbal Bolus

[Yellow Dock Combination](#): Dr. Christopher's Yellow Dock Combination

[Dr. John R. Christophers "Three Oil Massage"](#)

## Varicose Veins

### Definition

A twisted, widened vein with incompetent valves.

### Cause

Sugars, pastries, soft and alcoholic beverages, breads, candies, etc., leach the calcium out of the body, causing varicose veins, cramps, Charlie horses, loss of teeth, nervous upsets, etc. [SNH p.531]

### Herbal Aids

Red Oak: Use the decoction as a wash, and bathe 3-4 times daily (dilute for open sores); also a fomentation may be wrapped around the affected part and covered well with flannel. [SNH p.139]

Tormentil: Apply the decoction as a fomentation, wrap with plastic bandage; when nearly dry, renew the application. Also drink the decoction internally. [SNH p.168]

Witch Hazel: Apply a lint bandage and keep it constantly wet with the fluid. [SNH p.171]

Comfrey Mucilage: Paint the part with pure olive oil to prevent sticking, then saturate a thick layer of cotton with comfrey mucilage and apply to the affected parts. Cover with plastic or waxed paper, bandage, and leave on until nearly dry. Make a fresh application by following the same process. If pus is present, paint the part with oil of garlic instead of olive oil and take 1 teaspoonful of the oil, internally. This will prevent or stop putrefaction and pus formation, which will hasten the healing process. Give fomentation wrung out of a strong decoction. [SNH p.310]  
Mucilage of comfrey root: See formula using comfrey root, distilled water, honey and glycerine. [SNH p.310]

Calc Tea: Dr. Christopher's Calcium Formula: A wonderful natural calcium capsule, tea or tablet made up of horsetail grass, oat straw, comfrey root and lobelia. As explained in the book "Biological Transmutations," the silica in horsetail grass converts to calcium, and the other herbs work in close conjunction with this master calcium herb. We need calcium for nerve sheath, vein and artery walls, bone, teeth, etc. This combination is all pure herbs. It is also helpful for cramps, "Charlie horses," and for all calcium needs in the body.

Children with crowded, crooked teeth who later must have the wisdom teeth pulled because of a too narrow jaw are lacking calcium in the body. The pregnant woman should increase her natural calcium intake now for two people, so as to build for the child a good wide jaw and tooth material. Sugars, pastries, soft and alcoholic beverages, breads, candies, etc., leach the calcium out of the body, causing varicose veins, cramps, Charlie horses, loss of teeth, nervous upsets, etc. [HHH p.185]

Oak Bark: Dr. Christopher would ask his patients to go on the mucusless diet, and he had wonderful results with the following treatment. He made a strong white oak bark tea, simmering it gently until it reduced by three-fourths. Then he soaked stockings of white cotton in this concentrated tea and asked the patient to wear them, covering them with plastic, all night. He would also paint the legs with the concentrate, if stockings were not available. Many women had their varicosities reduced miraculously this way. You can drink a small quantity of this tea as well, if desired. [EWH p.167]

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We find that it is best to use wet flannel or other kinds of non-synthetic cloth soaked in the fomentation. These should be left on all night. For the leg area, white cotton or wool socks or stockings soaked in the tea, pulled over the afflicted area and covered with plastic wrapping make good fomentation material. Cut the toe end off a stocking and it can be pulled up onto the knee or other parts of the leg area for more localized treatment.

To clean and feed the veinous structure internally as well as externally, one fourth cup of oak bark tea in three fourths cups of water (distilled is preferred) may be used three or four times a day. With each cup of tea, it is best to take one half teaspoon or more of cayenne to speed up the action. The cayenne may be taken in capsule form or mixed in half a glass of water. [NL 2-10]

Dr. Shook's Liniment of Peppermint: Dr. Shook recommended making Liniment of Peppermint. To do so, heat 1 pint of pure olive oil, and add to it 1 dram (teaspoonful) of oil of Peppermint, 1 dram, menthol crystals, and 1 dram of flowers of camphor. Mix in a warm jar or bottle, shaking until dissolved. Let stand until cool, then keep in a cool place (ShoA:258). This can also be used to reduce varicose veins, clear up acne, boils, abscesses, eczema, etc. [UW-Peppermint]

Bayberry: Externally, Bayberry can improve atony of the skin, where the tissues are loose and flabby (Cly:61). Nearly all sources recommend it for bleeding or spongy gums, applied as a strong decoction or as a tincture. For nasal stoppage or inflammation, or for nasal polyps, sniff the powder, only a small amount, carefully into the nostril, holding the other nostril closed (Hut:60). For a sore mouth or throat, especially a chronic sore throat, gargle the decoction or reduced infusion. To reduce the infusion, prepare as usual, one teaspoon to the cup of boiling water. After steeping three to five minutes, strain, and then simmer gently to half its original amount, this makes a tea three times as strong as the infusion, called three power. A fomentation (a cloth soaked in the warm preparation and applied to the affected area, afterwards covered) on varicose veins can relieve, cure, and even prevent this unsightly condition (Tie:79). [NL 5-5]

### Testimonials

1. [Cayenne](#): After purchasing your book 'School of Natural Healing' and learning the value of cayenne pepper, I have been taking it regularly since last December. I have had a heart problem 18 years and have had a pace maker for the last six years. I had been on digorin and inderol for seven years. With the use of the cayenne along with your health food program, my health has improved greatly. I no longer have to take any heart medication and my health in general is much improved. I am even rid of most of my varicose veins. [NL 1-12]

2. Oak Bark Cures Severe Varicose Veins: (See formula from # 6 above). One of our students in the Provo, Utah area visited a lady who was suffering from varicose veins so severely that she had difficulty walking or standing for even a few moments, or even sitting down with her feet on the floor. At night the throbbing and pain would be so intense that she would have to elevate her legs for relief; then, in 15 or 20 minutes, the throbbing and pain of the elevated legs would become so painful that she would have to lower her legs again. Consequently, this woman could get no more than 20 to 30 minutes of sleep at a time. Upon seeing such suffering, our student told her friend about the healing properties of oak bark tea, which she had recently learned about in a lecture. The friend said, "Use anything you have to help, this is unbearable." So our student went home, prepared the tea and applied it to the victim's afflicted limbs. Following instructions, she took gauze and daubed on the tea, allowing it to dry. Another coat was added to the entire area of both legs. She planned to apply the 10 or 12 coats recommend lightly bandaging the legs and allowing the oak tea residue to be absorbed into the skin. It has been found that this procedure would give relief, and oftentimes would lessen the dark vein and/or phlebitis color by 20%. However, after only six coats of tea, the patient said she was drowsy and would like to doze off a few minutes, and asked our student to return and finish later. The husband said, "Oh, she never sleeps but a few minutes, never over a half hour." Upon this, our student went home, with the agreement to return when her patient awakened. That was around 9:00 - 10:00 in the evening. To the surprise and joy of everyone, the woman slept all night and woke up the next morning feeling refreshed. She was given more treatments and received complete relief. [NL 2-10]

**See Also**

[Calc Tea](#): Dr. Christopher's Calcium Formula

[Cayenne](#): Dr. Christophers many Cayenne Combinations

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## Vertigo

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**Vertigo**

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## Vomiting

### Definition

The forcible ejection or spewing of the stomach contents through the mouth. [SNH p.47]

### Cause

This may be either a voluntary body activity or it may be induced when it is necessary to cleanse the stomach of undigested food poison, and excess body waste. Enemas, fasting, the use of the lower bowel tonic [[Fen LB](#)], or mild herbal laxatives, will cleanse the stomach. The nerve action of fear or panic sometimes induces vomiting. [SNH p.47]

### Herbal Aids

General Instructions: Use some type of herb to calm the stomach area. This may be done simply by taking teas of peach, peppermint, or raspberry leaves, or by simply chewing cloves. For the more difficult advanced cases, turkey rhubarb will do a thorough job. [SNH p.47]

Red Oak: Drink a tea of the bark and powder of the cups. [SNH p.139]

Nausea, Vomiting (especially during pregnancy): See formula using turkey rhubarb, spearmint, cinnamon and cloves. [SNH p.187]

Vomiting and Nausea of Pregnancy: See formula using spearmint, cloves, cinnamon and turkey rhubarb. [SNH p.240]

Weak Stomach and Vomiting: A gruel of slippery elm is often well-received when all food is ejected. [SNH p.335] Slippery elm gruel (strengthening, soothing and healing of inflamed surfaces): See formula using slippery elm, raw milk, honey and cinnamon or nutmeg. [SNH p.336]

Wild Yam: Take 1 tablespoonful of the warm decoction every 30 minutes until relieved. [SNH p.403] Strong decoction of wild yam: See formula using wild yam, distilled water and glycerine. [SNH p.403]

General Instructions of Ways to Relieve Vomiting: The task here is not only to relieve the vomiting, but also to settle the nerves. Antispasmodic will give ease to the area and nervines will settle the nerves (often vomiting is caused from a nervous condition alone). A demulcent is used when soothing the stomach area, and hepatic herbs (such as barberry, etc.) when giving ease to the liver; it depends on the source of the nausea, of course. A cleansing laxative enema is always used to clean the bowel out, because there is less chance for the nauseated condition to persist when the bowel area is clean. [SNH p.505]

Boneset: In all cases of influenza, severe colds, chills and fever, the patient must be in bed warmly covered, and hot drinks of the infusion of boneset given in one half teacupful doses every half hour until a copious perspiration sets in. If it produces vomiting at first, so much the better. In that case wait until vomiting has completely subsided, then proceed until free perspiration is produced. [HHH p.55]

[Barberry LG](#): Dr. Christopher's Liver-Gallbladder Formula: To speed up the blood purifying process, it is good to have a good clean liver and gall bladder area. When the liver does not function properly, the bile does not excrete freely into the intestinal tract, and so it passes off into the blood stream and throughout the rest of the system, causing a toxic condition called cholemia,

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causing indigestion, sluggishness, fatigue, constipation, upset stomach, chills, vomiting and fever. Why wait until it gets to this condition? A combination of barberry (or Oregon grape root), wild yam, cramp bark, fennel seed, ginger, catnip and peppermint--will help relieve this condition.

Suggested dose: 1/3 Cup or one or two capsules or tablets, 15 to 20 minutes before a meal. [HHH p.183]

**Your Baby Vomiting:** If your baby vomits, you must be very careful to maintain hydration. A baby dehydrates very quickly. You can prepare the Labourade [EWH p.78], using maple syrup instead of honey. You can give small enemas of catnip tea mixed with slippery elm. The trick is to make them small enough so that the child retains them. The slippery elm soothes the baby's tract and helps the enema be retained. You can try nursing the baby for less than a minute every twenty minutes. The baby will scream for more, but this procedure might help keep the milk down. A drop or two of tincture of lobelia in baby's mouth can relax the tense muscles that cause vomiting. Sometimes a thin gruel of slippery elm will stay down when nothing else will. Don't overlook the wonderfully hydrating effects of a good, long soaking bath with mother. Put in a gallon or so of strong comfrey or camomile tea for nourishment and relaxation. You can massage the baby (with olive oil) for nourishment and relaxation. I have found this combination--hot herb bath, cold sponge, and subsequent massage--a wonderful remedy for teething, fevers, flu, and almost every other baby ailment. [EWH p.105]

**Ready Peppermint Water:** Dr. Shook recommended making a "Ready Peppermint Water" to be mixed for instant use, such as helping relieve pain almost instantly, to cure nausea and vomiting, to calm the nerves and reduce inflammation in stomach and intestines, to act as a sleep-bringer, and to flavor nauseating medicines. To make this water, triturate 1/2 teaspoonful oil of Peppermint in 1/2 teaspoon purified talc and 1/2 teaspoon powdered sugar. Triturate for five minutes. Add 1 tablespoon glycerine and triturate again for five minutes. Add 2 ounces of distilled water and triturate. Pour through a filter paper into a glass container. Rinse out mortar without enough distilled water to gather the remainder of the ingredients. Pour into filter, stir, and allow to filter. If the first filtrate is not clear, add two ounces distilled water; and filter again. This is somewhat tedious, he says, but once the mixture is made, it will keep indefinitely, and will always be ready for use. This is extremely strong (1 part in 64), and can be used, taken in hot water in honey, as needed. It also mixes with alcohol or glycerine in any proportion (ShoA 258). [UW-Peppermint]

**Corn:** A cup of parched corn to two quarts of water lightly boiled for 20 minutes then strained and drunk has been found useful in cases of nausea and vomiting in many diseases. [NL 5-1]

**Cloves:** Cloves are useful for the digestive system, useful to allay nausea and vomiting, to relieve flatulent colic, to improve digestion, as a healthy stomachic and as an astringent, also valuable as an ingredient in compounds for the cure of diarrhea and dysentery. Clove oil stimulates peristalsis and thus relieves flatulence. The infusion is given to relieve colic pains, or the powdered or bruised cloves wet with alcohol may be applied between cloths upon the epigastrium to allay nausea or vomiting and expel gas, and upon the abdomen to relieve colic, but for these purposes the aromatic powder is preferable. [NL 2-2]

### Testimonials

1. **Kelp:** Dr. Powell's ...patient was a lady who had suffered from digestive trouble for many years, suffering pain from even the smallest meal, vomiting frequently. She had spasm of the pylorus as soon as food entered her stomach. After prolonged treatment and constant failure with various remedies, the doctor tried Kelp. She experienced gradual relief and is now in a fair state of health. [UW-Kelp]

2. **Changease:** Dr. Christopher's Herbal Hormone Formula and **Nu Fem:** Dr. Christopher's Herbal Aid for Female Reproductive Organs: My greatest pleasure has resulted in freedom from pain for my seventeen year old daughter during her menstrual period She has been hospitalized three times in the past year for vomiting which could not be stopped over a six hour lapse of time. The Hormonal Estrogen Combination [**Changease**] & Female Corrective Combination [**Nu Fem**] have truly given her a "new lease on life". [NL 2-2]

**See Also**

[Barberry LG](#): Dr. Christopher's Liver-Gallbladder Formula

[Changease](#): Dr. Christopher's Herbal Hormone Formula

[Nu Fem](#): Dr. Christopher's Herbal Aid for Female Reproductive Organs

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## Warts & Moles

### Definition

An elevation of the skin, more rarely of the mucous membrane, formed by hypertrophy of the papillae. [HHH p.120]

### Symptoms

Generally raised, darkened areas on the body. [HHH p.120]

### Cause

Warts and moles are usually the result of a nutritional deficiency and they should be treated internally, as well as externally. [HHH p.120]

Potassium deficiency. [EWH p.125]

### Herbal Aids

[Sassafras for Warts](#): Mix the oil (undiluted) with a thick sugar syrup and apply to the affected part. [SNH p.79]

[Tormentil for Warts](#): Apply the decoction as a fomentation, wrap with plastic bandage; when nearly dry, renew the application. Also drink the decoction internally. [SNH p.168]

[General Information for Warts and Moles](#): The warts, moles and skin blemishes are helped externally and are often cleared up by using the white milk from dandelions and/or from milkweed. Applying castor oil or garlic oil to the area several times a day and taping a piece of gauze soaked with this oil over the wart during the night will aid in clearing the condition. The use of a clove of garlic cut in half (or mashed or grated) and kept over the wart all night until it is gone has aided many. Black walnut tincture and the following combination tincture have been used with such success that a number of people swear by them. The combination tinctures consists of blue vervain, black cohosh, blue cohosh, skullcap and lobelia herbs [B&B Tincture] in equal parts, using 90 proof or stronger alcohol as a base. [HHH p.120]

[More General Information for Warts and Moles](#): Use the mucusless diet and add plenty of raw carrots, kelp, dulse, or sea weed and onions to the diet. [HHH p.120]

[Black Ointment](#): Dr. Christopher's Black Ointment: an excellent drawing ointment for warts: Historically used externally on old ulcers, tumors, boils, warts, skin cancers, hemorrhoids, excellent for burns and as a healing agent. This is made with chaparral, comfrey, red clover blossoms, pine tar, mullein, beeswax, plantain, olive oil, mutton tallow, chickweed, poke root. [HHH p.196]

[Aloe Vera for Warts](#): It has been used ...to help remove warts, the juice of the fresh leaf being applied daily over a period of weeks until the wart is reduced or removed. [UW-Aloe Vera]

[Onions for Warts](#): Warts have been said to disappear when treated perseveringly with raw onion dipped in salt. [UW-Onion]

[Wild Lettuce for Warts](#): The expressed juice is "much regarded as an application to boils, abscesses and carbuncles, and if put upon warts will cause them to drop off. [UW-Wild Lettuce]

[Garlic for Warts and Moles](#): Here is a very successful routine for removal of these unwanted

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growths called moles, or warts. Take a button of garlic, slice or cut in two, and placed the cup area over a wart of mole. Tape it on, and as it dries out put a fresh piece. Many users have reported good results. [NL 2-9]

[Cashew Oil](#): The cashew oil, which must be used with great caution, is used as an application to warts, corns, ringworms, cancerous ulcers. [NL 5-1]

[Potassium Deficiency for Warts and Moles](#): When cysts or tumors grow in places where they can be seen outside the body, often we react by having them cut out. This defeats healing by working on the effect instead of the cause. You can cut cysts out, tumors off, and burn warts off (which are also a potassium deficiency), or get rid of as many moles as you wish, but unless you go to the cause, they will grow back again, and you may end up with as many or more cysts, tumors, moles as before. Different signs of potassium deficiency will keep popping out on the body because the condition that needs correcting is on the inside. You have to go into the cause, Dr. Christopher always insisted, which is the way we have been eating. [EWH p.125] Potassium sources: There are several ways to receive your potassium. Dr. Bernard Jensen sells a potassium broth made from dehydrated vegetables. Dr. Bronner makes a similar, excellent product. You can also make your own potassium broth by simmering equal parts of red potatoes, celery, carrots, onions, and herbs to taste. Raw vegetable and fruit juices also flood the system with potassium. [EWH p.125]

### Testimonials

**Cancerous Mole:** Most of the cancer research with chaparral has been done at the Universities of Nevada at Reno and Utah at Salt Lake City. (This does not include our success with hundreds of patients throughout the years). There is a well-known study by Dr. C. R. Smart, Dr. H. H. Hogle and others from the University of Utah College of Medicine Department of Surgery and College of Pharmacy at Salt Lake City. It involves an 85 year old man who had a recurring malignant melanoma (dark, cancerous skin growth) on his right cheek. The growth was associated with satellites of the original melanoma and a large tender mass in the right jaw and neck area. The man had lost much weight and was pale, weak, and lethargic. He had previously undergone three surgeries for removal of the melanoma and each time the mole grew back and increased in size. The fourth time the black mass of tissue measured about 3x4 cm, and the neck mass was about 5x7 cm. Surgery was again advised. The old man refused being repeatedly sacrificed to the same surgical specialist, declined any further treatment and went home. This was in October, 1967. In November of the same year, he began to take 2-3 cups of chaparral tea daily and faithfully on the advice of an Indian friend. By February, 1968, the cancerous growth had shrunk to 2 or 3 mm in diameter while the neck mass was entirely gone. His weight, color and general health had greatly improved. [NL 3-4]

### See Also

[Black Ointment](#): Dr. Christopher's Black Ointment

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## Whooping Cough

### Definition

An infectious catarrhal inflammation of the air passage with violent convulsive coughs (paroxysms), consisting of several expirations followed by a loud, sonorous whooping inspiration. This is generally a children's disease and begins with spasmodic coughing spells. The face reddens, and the eyes bulge. Sore throat, and often vomiting may occur. Advanced cases develop into bronchopneumonia. [SNH p.48]

### Cause

Whooping cough is a rapid accumulation of mucus in the throat, which causes choking and will cause death if not cleared. Eliminate the mucus as fast as possible. [SNH p.48]

### Herbal Aids

General Instructions: Lobelia herb or tincture used in fomentation, as well as a few drops internally every few minutes works well. To cut the phlegm, use a bayberry tea as a gargle (swallow after gargling). Use crushed garlic with cayenne and honey every few minutes to help clear the throat. [SNH p.48]

Red Clover: Drink the infusion freely. [SNH p.56]

Garlic: Inhale the vapors of the freshly expressed juice that has been diluted with equal quantities of water. [SNH p.100]

[Garlic Syrup](#): Where there is spasm, give 1 teaspoonful of the syrup with or without water every 15 minutes until the spasm is controlled, then give 1 teaspoonful every 2-3 hours for the rest of the day; thereafter give 1 teaspoonful of the syrup 3-4 times daily. Use the foot poultice; also, mix the freshly expressed juice with leaf lard and rub on the chest, throat, and between the shoulder blades. [SNH p.100] Foot Poultice: Remove the outer membranes of the cloves (small sections); chop finely a sufficient quantity to cover about 1/4 inch the bottom of each foot - mix this with Vaseline or lard, saturate the feet with olive oil (this is to prevent blistering), spread on the preparation; bandage each foot with soft cloth, place in plastic bags, then cover the feet with old socks to prevent the poultice from being kicked off during the night. Remove the poultice in the morning, or retain it longer if desired. [SNH p.101] Tincture-syrup of Garlic: See formula using garlic cloves, apple cider vinegar and yellow D sugar. [SNH p.101]

Thyme: Thyme is an old-time household herbal aid, with a very healing and antiseptic action. It is especially beneficial for respiratory, stomach, uterine and bowel problems, and it has a soothing sedative action on the nerves. It is powerful, yet harmless and non-poisonous, and it may be relied upon to help eliminate all infection, to help destroy worms, and help take away all foul odors. It will help restore health to children who are debilitated and exhausted by whooping cough. It forms the basis for the world-famous Listerine Antiseptic compound. There are over 60 varieties of thyme, but *Thymus vulgaris* is the best for both medicinal and culinary purposes. [SNH p.228]

Thyme: Mix 1 part of the infusion with 1 part honey (1 teaspoonful 1 tablespoonful); give when the cough is troublesome. [SNH p.229] Whooping cough: See formula using thyme and mistletoe. [SNH p.229]

See formula using hyssop, raspberry leaves, turkey rhubarb, bayberry bark and thyme. [SNH

p.233]

European Pennyroyal: Drink 1 teaspoonful - 1 tablespoonful of the fresh, sweetened juice. [SNH p.284]

Whooping Cough (specific): See formula using marshmallow root, thyme, yellow D sugar and distilled water. [SNH p.327]

Asthma Syrup (bronchitis, croup, whooping cough, etc.): See formula using slippery elm, boneset, licorice, flaxseed or linseed, and blackstrap molasses. [SNH p.337]

Asthma Remedy (also for bronchitis, chronic cough, whooping cough, lung trouble, cystitis, catarrh of bladder, poison ivy, burns, and tuberculosis): See formula using slippery elm bark, horehound, garden thyme, red clover tops, yerba santa, lobelia, resin weed leaves, cayenne, blackstrap molasses and glycerine. [SNH p.339]

Whooping Cough: See formula using black cohosh, red root, blood root and lobelia. [SNH p.401]

Onion Syrup: Dr. Christopher's onion syrup, described in the introduction, is an excellent syrup that has been used historically by herbalists for coughs and colds, bronchitis, croup, whooping cough, etc. He recommended adding licorice root powder, horehound and cherry bark to the syrup, and said to add 25% glycerine to the syrup if you plan to keep it. Keep it in a cool place or it will sour. [UW-Onion] Here is the way you make the syrup. Dice up big dried onions, whatever amount you want, and put them into a stainless steel, unchipped enamel, or Pyrex pan. Don't use aluminum. When you have about the amount you want, pour liquid honey over them until they are covered. Add nothing else. The honey extracts the Onion power, which is the greatest antihistamine known. This goes into the honey solution and provides a wonderfully effective cough syrup. [UW-Onion]

Garlic Juice: Another instance of the remarkable penetrating power of garlic is the fact that the expressed juice of fresh garlic mixed with olive oil and rubbed on the chest, throat, and between the shoulder blades gives great relief in whooping cough, asthma, bronchitis and dyspnea, according to an English physician who has used it with success for many years. [NL 2-9]

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## Pleurisy

### Definition

Inflammation of the pleura (membrane covering the lungs).

### Symptoms

Usually accompanied by fever, painful and difficult respiration, cough, and mucoid exudation into the pleural cavity. [SNH p.40]

### Cause

The cause of pleurisy is mucus forming in a weak area caused by the failure to breath deeply. It is common where there is general debility of the body, especially in the lung area. [SNH p.40]

### Herbal Aids

General Instructions: Use of pleurisy root (a specific), slippery elm, comfrey root, hyssop, and vervain. [SNH p.40]

Pleurisy Root: Pleurisy root was considered by the North American Indians to be one of the "Great White Father's best gifts to the children of nature" because of its specific action for the lungs. And for all chest complaints, including "pleural bronchitis," etc., it is most valuable in assisting expectoration, subduing inflammation rapidly, reabsorbing exudation from the tissues and serious cavities, and exerting a general and mild tonic effect upon the whole system. It is one of Nature's very best therapeutic agents for pulmonary catarrh and difficult or suppressed expectoration, through its beneficial influence on the mucous membranes and serious tissues. Pleurisy root influences the skin and circulation by relaxing the capillaries, thereby relieving the heart and arteries of undue tension, and stimulating a slow and steady perspiration of the sudoriferous glands, wherein the excessive heat due to congestion in the skin is gradually eased. [SNH p.221] Pleurisy root is quite harmless in correct doses, but is not recommended for children because of its powerful action. Do not use this agent when the skin is cold and the pulse is weak, but use a more stimulating diaphoretic. [SNH p.222]

Pleurisy Root: Give hot infusion while the patient is closely-covered in bed; repeat the dosage every 30 minutes until free perspiration is produced; apply hot cloths externally, wrung out in the infusion. [SNH p.222]

See formula using pleurisy root, hyssop, comfrey root, vervain and cayenne. [SNH p.223]

Mullein: Rub mullein oil in well, or apply on saturated cotton and cover. [SNH p.317]

Lobelia: Add lobelia to a catnip enema. [SNH p.362]

Lobelia: Give lobelia and pleurisy root in an infusion. [SNH p.362]

Plaster: Make a compress or plaster of lobelia, of hops, bran, or lard. [SNH p.363]

Myrrh: After a vapor bath, when the patient is rubbed dry, washing the surface with a partially diluted tincture of Myrrh protects him against cold, and strengthens and improves the condition of the skin. This is especially useful in cases where the skin is relaxed and the patient feeble, such as chronic bronchitis, chronic pleurisy, asthma, chronic rheumatism, etc. (Cly:99). [UW-Myrrh]

Juices: Carrot & cucumber, carrot & spinach. [NL 3-5]

Slippery Elm: Slippery elm was used in cases of typhoid fever. The bark is also wonderful for any type of bronchial disorders. Maude Grieve gives a remedy for pleurisy: 2 oz. each of pleurisy root, marshmallow root, licorice root, and slippery elm bark. Simmer in three pints of water down to 1/2 the volume. Take 1/2 teaspoonful every half hour. The mixture should be ingested warm. Slippery elm is one of the herbs which should be stored for times of need. It is a concentrated food which can be handy for survival. [NL 4-7]

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## Pneumonia

### Definition

A swelling of the lungs. Parts of the lungs become plugged with a fiberlike fluid.

### Herbal Aids

Garlic Syrup: Where there is spasm, give 1 teaspoonful of the syrup with or without water every 15 minutes until the spasm is controlled, then give 1 teaspoonful every 2-3 hours for the rest of the day; thereafter give 1 teaspoonful of the syrup 3-4 times daily. Use the foot poultice; also, mix the freshly expressed juice with leaf lard and rub on the chest, throat, and between the shoulder blades. [SNH p.100] Tincture-syrup of Garlic. See formula using garlic cloves, apple cider vinegar and yellow D sugar. [SNH p.101]

Pleurisy Root: Give hot infusion while the patient is closely-covered in bed; repeat the dosage every 30 minutes until free perspiration is produced; apply hot cloths externally, wrung out in the infusion. [SNH p.222]

Garden Sage: Clear the bowels, give 3-5 cupfuls of hot infusion 1/2 hour apart. Keep well covered in bed. [SNH p.234]

See formula using pennyroyal and elder flowers. [SNH p.285]

See formula using comfrey root, pleurisy, horehound and cayenne. [SNH p.313]

Mullein: Rub mullein oil in well, or apply on saturated cotton and cover. [SNH p.317]

Lobelia: Add lobelia to a catnip enema. [SNH p.362]

Plaster: Make a compress or plaster of lobelia, of hops, bran, or lard. [SNH p.363]

Hot and Cold Bath: The best procedure in either retaining or restoring skin vitality is to take a good hot bath, then a cold one to close the pores. "What's one man's meat is another man's poison," as far as how much bathing a person should do. There are some who feel that to wash their hair once a week, or to take a bath on Saturday night, is adequate. There are many like me, however, who do not feel the day has started off right without the early morning bath and meditation. As far as the hair is concerned, a woman with long tresses will have a more difficult time washing hair every day as a man with short hair does, but I personally wash my hair every day, and it always feels good and clean, and lends to clear thinking. The water acts as a good tonic to the skin, because it goes in, flushes and cleanses the skin, and in the process, much of this water will go right on into the blood stream. It is relaxing to have the right temperature of water, which would be tepid to slightly warmer, but water that is too hot is not relaxing. The heat expands the body tissue and brings toxic poisons to the surface, and after that is discharged and eliminated, then the cold water will contract the tissue, close the pores and cause the skin to be sealed again where it will not allow a cold, exposure, flu or pneumonia to set in. Our advice (where one is just starting to take cold baths) is to sponge the body with cold wash cloth, then go into a quick, cold shower, and eventually a longer one; then, if you want to really enjoy the bath properly, try lying in a cold tub of water after the hot bath. This will be very beneficial to the body if done gradually, but if done too soon, it will cause a shock to the heart. [SNH p.498]

Steam Baths: One of the most important procedures of water therapy are the steam or sweat baths, and these will bring the poisons out of the body wonderfully. There are various types of steam baths, and these are all very valuable, very invigorating and health giving. This therapeutic

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procedure is recommended for arthritis, asthma, bursitis, colds, flu, hay fever, neuritis, pneumonia, rheumatism, sinusitis, stiff joints, etc. Someday, I hope to see a steam cabinet in every home (not a chicken on every plate and a car in every garage). In sweat therapy, we also have the [Cold Sheet Treatment](#)--a positive remedy for colds, flu, and pneumonia--which can be effectively used even in advanced and chronic cases. [SNH p.502]

Henry Box Pneumonia Cure: The great herbalist, Henry Box of Plymouth, England, says: For colds, influenza, fevers, inflammation of the brain, pneumonia (inflammation of the lungs), stomach, bowels or any part, this is a certain cure. I have never known it to fail, even when given up, and at the point of death. It will not only save at the eleventh hour, but at the last minute of that hour. Besides, it is so safe and harmless that you cannot use it amiss. This wonderful, wise old man had been a physician of herbs for over sixty years and was known as one of the great doctors of all times.

The infusion for the tea is made as follows:

2 ounces elder flowers

2 ounces peppermint leaves (crushed)

1 1/2 pints boiling distilled water

Pour boiling water over herbs, cover and allow to steep (not boil) in a hot place 20 minutes. Strain and sweeten with honey, then drink the whole amount of tea as hot as possible while closely covered in bed. Cover a hot water bottle with a cloth or towel dipped in apple cider vinegar and place on the feet. In a few minutes there will be copious perspiration, and the pulse will slow down and the patient will sleep peacefully for hours...When taken alone, elder flowers are inclined to be emetic, and somewhat nauseous to some people. This effect can be prevented by combining them with peppermint (*Mentha piperita*). Peppermint is stimulant, nervine, calmative, and antiemetic, which helps offset the undesirable effects of the elder flower. This combination is world-famous as a great fever and cold remedy. [HHH p.53]

Onions: Roasted onions can be crushed for the same purpose (as a plaster); they have been used in pneumonia. Raw grated onions will also work but you must coat the skin with olive oil beforehand and check for blistering consistently. [EWH p.190]

### Testimonials

1. Water Cure - [Cold Sheet Treatment](#): An old story of the first written instances of the water cure is as follows: Many years ago a peasant was heading home on foot, with miles to go. He was racked with fever, colds, and lumbago. While crossing a stream, over a log for a bridge, he slipped and fell into the icy cold water and was drenched to the skin. It was a bitterly cold day and the man had to walk home in the cold in sloppy wet clothes. By the time he had arrived home, his clothes were nearly dried out. The fevers and heat in his body had been raised, while hurrying miles home, to a point of healing climax and was down to nearly normal at the end of his journey. The lumbago and fever were gone and he rejoiced! The next time he got lumbago and fevers he knew the cure--he would return to the stream, fall in and walk home again.

We are going to explain a procedure that will do the job at home without "falling into the stream" and this is a life saver, when pneumonia, colds, flu and fevers hit. It is called: The [Cold Sheet Treatment](#). [HHH p.70]

For detailed information on the [Cold Sheet Treatment](#): [HHH p.70]

2. Onion Syrup Cures Dr. Christopher's Pneumonia: Here is the way you make the syrup. Dice up big dried onions, whatever amount you want, and put them into a stainless steel, unchipped enamel, or Pyrex pan. Don't use aluminum. When you have about the amount you want, pour liquid honey over them until they are covered. Add nothing else. The honey extracts the Onion power, which is the greatest antihistamine known. This goes into the honey solution and provides a wonderfully effective cough syrup.

At one time he couldn't fly out of upper New York, but he had to be in Boston the next day to lecture for a three-day series. No planes were available, so he had to go on a train. He joked that he thought it must have been the same train that George Washington rode on. It was so drafty that

by the time he got to Boston, he had pneumonia, and was all choked up. It was close to midnight, and the hotel kitchen was closed. He asked, "Can you fix me something for an emergency?" They would. He had them chop up a big dried onion and pour honey over it, and he ate the whole thing. In fact, he said, he had an audience. All the hotel staff there--the clean-up people, cooks, waitresses and all--came to watch him eat that onion down. But the next day he lectured in Boston. [UW-Onion]

3. [Oil of Garlic](#) Saves Two Year Old with Double Pneumonia: I remember one time we were called out to a house in the wee hours of the morning. This call was to see a little boy, under the age of two years, that had double pneumonia. The physician on the case had informed the parents that nothing more could be done and he would come back in the morning to sign the child's death certificate. Seeing as it was well under forty degrees below zero and nearly fifty miles from ambulance service, the parents were told that the boy, if taken by car to a hospital, would surely die. These parents tried to get other doctors, but at that time of night, and in such a remote area, no one would offer help. A friend told them about us, then living in Evanston, Wyoming, and to try to call us. Having been told of the boy's condition we went expecting to give him the cold-sheet treatment. Upon arriving there we found that the plumbing was frozen and there was not running water in the house. We found enough in the toilet tank above the bowl to give the little chap an enema. We were not able to give the [Cold Sheet Treatment](#) (no water) so only the garlic paste was made up and applied. This was done after a complete massage of the body and the feet. After oiling the feet up to the ankles, thoroughly, and massaging the olive oil in well, a half-inch thickness of the garlic paste was applied to the soles of his feet. (This is put on only the soles and not up onto the sides). Then gauze was placed over to cover the paste, bandages to hold it into place, and a loose white cotton sock was pulled over the bandages to hold them securely.

Garlic paste is made by taking freshly peeled buttons of garlic and garlic about half and half with Vaseline. This amount can vary, according to the toughness of the feet, more Vaseline for tender feet, less for thicker skin. Many of the health minded readers will be shocked by our using a low-vibration ointment like Vaseline instead of using anhydrous lanolin or some lighter more organic type. The reasoning for this is that the lighter type ointments will penetrate more quickly into the skin, but the Vaseline will hold the garlic on the ointment form. This will also keep the garlic from blistering as easily. (A garlic blister looks bad, but does not hurt and heals back quickly.) The little boy was running an extremely high fever and was delirious when he was covered and put back into bed. (This was well after 2:00 a.m.). We assured the parents the child would be all right and would get well. A few days later we were called again by these parents. They told us that the doctor came back to sign the death certificate that next morning, but the little boy was sitting in his high chair, drinking some juice and breathing normally as if nothing had happened the night before. The doctor became so angry and demanded to know the name of the other doctor who had taken over the case before it had been released by him. He wanted a hearing by "the board" to have the other doctor thrown out of practice for going "against procedure" by taking over a case without written release. The parents asked if his "release" was the death of their child? He probably changed his mind because we were not brought before a hearing.

I had forgotten this case until nearly twenty years had passed. One evening, after a lecture in another state, a fine-looking young fellow in his early twenties came up to the podium and shook my hand vigorously, saying he had always wanted to meet me. His mother had told him of our long trip in sub-zero weather at night to their house, of using the natural methods on, and saving his life. He stated that he enjoyed living so much he had been looking forward to meeting me.

That paid off for a cold night out on a house call by far more than the small fee that was charged. [NL 2-9]

## Poison Ivy and Poison Oak

### Definition

Skin contact with poison ivy and poison oak resulting in an allergic reaction with skin swelling.

### Herbal Aids

[Sassafras](#): Give the infusion internally and use it often externally as a wash. [SNH p.79]

[Infusion of Sassafras](#): Apply the infusion on saturated cotton to the affected area, cover with plastic and bandage, or use as a wash; also drink the infusion internally. See formula using sassafras bark, glycerine and distilled water. [SNH p.80]

[Poison Ivy](#): Apply the "[Comfrey-Mullein-Garlic](#): Dr. Christopher's Asthma Formula" as a fomentation locally to the affected parts and allow to remain 1 hour. Wash off with biodegradable soapy water and rinse. Reapply until all itch and symptoms disappear. [SNH p.336] [Asthma remedy](#): See formula using slippery elm, horehound, garden thyme, red clover, yerba santa, lobelia, resin weed, cayenne, blackstrap molasses, and glycerine.[SNH p.339]

[Virginia Snake Root](#): Nettle rash or poison ivy. Apply a wash of fluid extract. [SNH p.417]

[Virginia Snake Root](#): Nettle rash or poison ivy. Give infusions as freely as the patient can take it for a few hours, then stop: keep patient off of any mucus-forming foods. [SNH p.417]

[Wheat Grass](#): Poison oak. Place a poultice of freshly crushed wheat grass pulp on the afflicted area and cover with thin gauze. [SNH p.545]

[CMM](#): Dr. Christopher's Healing Ointment: Made of comfrey, marshmallow, marigold, bee's wax, and oils, this is an antiseptic to be helpful with lesions, eczema (dry), poison ivy, inflamed surfaces, abrasions, burns, hemorrhoids, for bruises and swellings. Good to have on hand at all times. [HHH p.196]

[General Instructions for both Poison Ivy and Poison Oak](#): Dr. Christopher used to say that the remedies for these plants grow right near the site of infestation. Burdock leaves and plantain leaves, as well as jewel weed where it grows, can help neutralize the poison. Mullein, houndstongue and lilac leaves will counter the irritation. A poultice of comfrey root, marshmallow root, slippery elm, aloe vera, and witch hazel, as many as you have available and in equal parts, can help heal the rash once it starts. Immersion in cold water is very effective. Internally, you can take blood-cleansing and -building herbs, such as chaparral, yellow dock, and echinacea, to help stop the reaction. Internally, lobelia and valerian or catnip or camomile can stop the pain. [EWH p.162]

[Aloe Vera](#): It has been used to reduce the itch of insect bites, the itching and burning of poison ivy. [UW-Aloe Vera]

[Mullein](#): It is also an excellent remedy for poison ivy or poison oak, etc. Dr. Christopher said that if you run into a patch of these plants, or perhaps stinging nettle, if you will look around the area, within view will be Mullein, plantain, or hound's tongue. Take only one of these leaves, bruise it, and rub it over the area. You will get immediate relief from the plant "sting" and not have to suffer for weeks with it. [UW-Mullein]

[Chickweed Ointment](#): Dr. Christopher's Chickweed Ointment: Use chickweed ointment, plantain ointment, or mullein ointment to help promote the relief of the itching and help aid in

[A - B](#)   [C - E](#)   [F - I](#)
[J - P](#)   [Q - Z](#)
[Jaundice](#)
[Kidney](#)
[Laryngitis](#)
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[Lice](#)
[Liver](#)
[Lockjaw](#)
[Measles](#)
[Meningitis](#)
[Menopause](#)
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[Migraine](#)
[Miscarriage](#)
[Moles](#)
[Motion Sickness](#)
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neutralizing the poisons. [NL 3-1]

[CMM](#): Dr. Christopher's Healing Ointment: Comfrey, Marigold, and Marshmallow Root ointment: Another soothing and healing ointment for poison ivy, oak, etc. [NL 3-2]

[Burdock](#): The newly crushed leaves of burdock help alleviate the pain and swelling and itching of poison oak or poison ivy or stinging nettle (Herbalist: April, 1977:125). Interestingly, Burdock usually grows nearby wherever these poisonous plants grow, as do Mullein and Plantain, both also specifics to relieve poison oak or ivy. The old rhyme goes Nettle in, dock out, dock rub nettle out. [NL 5-12]

### Testimonials

1. Eraser on the Pencil: One man said that his little six-year-old was helping him in the garden and all of a sudden he ran into a stinging nettle. He let out a yip as he started to dig. He said, "I'll take care of it, Dad". He walked over to where some Mullein was, bruised it in his hand, rubbed it over the affected area, and smiled. "There it is," he said. "How did you know that?" his dad asked. "Well, you know, you told me when I was five last year about that. I remembered. I know what Mullein is and I know what stinging nettle is." Dr. Christopher said that the herbs will automatically neutralize the poison; the Lord has put an "eraser on the pencil." [UW-Mullein]

2. I Have Had a Long History of Poison Oak. I would get it from my children's clothing, our dog, or sitting on a couch the dog managed to get on for a short time. Once it went internal and I was in bed six weeks because I could not take cortisone, being in first six weeks of pregnancy. Once I got it, it just got worse and worse until I took cortisone. The doses became larger and larger. Large doses of Vitamin C and Niacin help a few times, then no longer helped, as did other things I tried. Twice I got blood poisoning in my arm from poison oak. I was desperately searching for a cure when someone led me to herbs and Naturalife. It took me about three years to find the cure but I did. As soon as I realize I have poison oak, I start taking licorice root, which is a natural cortisone and use Dr. Christopher's CMM Ointment. This dries it up in just a few days. I usually take rose hips for good measure. As for the blood poisoning, the first time my poison oak went into blood poisoning, I took penicillin. The second time, my arm was swollen, big red swollen, full of fever and painful. I put chickweed ointment [[Chickweed Ointment](#)] on a bandage, taped it on my arm over the affected area and went to bed. In the morning the swelling was gone, the pain was gone, the fever was gone, and the large red area was gone. This has really been exciting to me to find natural cures. [NL 1-8]

### See Also

[BF & C](#): Dr. Christopher's Bone, Flesh and Cartilage Formula

[Chickweed Ointment](#): Dr. Christopher's Chickweed Ointment

[CMM](#): Dr. Christopher's Healing Ointment

[Itch](#)

## Ailments

[A - B](#)   [C - E](#)   [F - I](#)

[J - P](#)   [Q - Z](#)

[Jaundice](#)

[Kidney](#)

[Laryngitis](#)

[Leukemia](#)

[Lice](#)

[Liver](#)

[Lockjaw](#)

[Measles](#)

[Meningitis](#)

[Menopause](#)

[Menstruation](#)

[Migraine](#)

[Miscarriage](#)

[Moles](#)

[Motion Sickness](#)

[Mumps](#)

[Nausea](#)

[Nerves](#)

[Neuralgia](#)

[Neuritis](#)

## Polyps

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See [Adenoids - Polyps](#)

[Nightmares](#)

[Nipples](#)

[Nosebleeds](#)

[Obesity](#)

[Osteoporosis](#)

[Palpitations](#)

[Paralysis](#)

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## Ailments

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[Menstruation](#)

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[Miscarriage](#)

[Moles](#)

[Motion Sickness](#)

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[Nausea](#)

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## Pregnancy

### Definition

The process of growth and development within a woman's body of a new person.

### Herbal Aids

Nausea, Vomiting (especially during pregnancy): See formula using turkey rhubarb, spearmint, cinnamon and cloves. [SNH p.187]

Strong Decoction of Wild Yam for Nausea of Pregnancy: See formula using wild yam, distilled water and glycerine. [SNH p.403]

Homemade Ginger Ale for Morning Sickness: We have discovered a wonderful recipe for Ginger Ale which is not only delicious, but it helps the nausea of pregnancy as well. Fortunately, it is a very pleasant remedy. Bring 2 gallons of water to a boil with 1 tablespoon ground Ginger. Allow to cool to lukewarm and strain. Add two cups of honey to the water-Ginger mixture and stir well. Add the juice of four lemons and just 1/4 teaspoon of dry baking yeast (wine yeast would work even better but is less available). Put into absolutely clean gallon jars and cover lightly. Allow to stand for two days. It should be nice and sparkly by now. If it gets too sparkly, refrigerate. This drink is popular with the whole family as well as a lady with morning sickness, and it is surely more wholesome than the sugared varieties purchased at stores. [NL 7-3]

Cramps from Pregnancy, Uterine Pains, or any Nervous Troubles During Pregnancy: See formula using cramp bark, squaw vine, wild yam and blue cohosh. [SNH p.333] Wild yam relaxes the muscular fibers, soothes the nerves, and gives positive relief from pains, especially those associated with bilious colic, gall stones, and uterus. It is of great value in nervousness, restlessness, nausea, and pains that are common to pregnancy. Wild yam has a potent tonic effect on the uterus when taken throughout the period of pregnancy. It is excellent for helping to promote the relief of cramps during pregnancy (especially during the latter stages), and will help greatly assist in preventing a miscarriage. Wild yam helps relieve flatulence of the stomach and bowels, and soothes any abdominal and intestinal irritations and spasms. [SNH p.402]

False Unicorn & Lobelia: Dr. Christopher's Anti-Miscarriage Formula: False Unicorn, 3 parts, and Lobelia, one part, constitute this combination. Unless otherwise specified, teas are always made with one teaspoon of herbs to a cup of distilled water (if obtainable). If hemorrhaging starts during pregnancy, stay in bed, use a bed pan when needed, and use 1/2 cup of this tea each 1/2 hour until bleeding stops, then each waking hour for one day, while in bed as much as possible and then three times in a day for three weeks. If bleeding continues instead of decreasing, see a doctor. [SNH p.532]

Pre-Natal Tea: Dr. Christopher's Pre-Natal Tea: Using this tea (or two or three capsules or tablets) morning and evening is an aid in giving elasticity to pelvic and vaginal area and strengthening the reproductive organs for easier delivery. Should be used only in the last six weeks before time of birth. These are the herbs used: Squaw Vine, Holy Thistle, Black Cohosh, Pennyroyal, False Unicorn, Raspberry Leaves, Lobelia. [SNH p.532]

Red Raspberry is a great agent for cleansing a canker condition of the mucous membranes in the alimentary tract, leaving the tissue toned. In pregnancy the infusion, when taken regularly, will quiet premature pains, and will produce a safe, speedy and easy delivery. Raspberry leaves stimulate, tone and regulate (both the leaves and fruit are high in citrate of iron which is the active alterative, blood-making, astringent and contractive agent for the reproductive area) before and

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during childbearing, assisting contractions and checking hemorrhage during labor, relieving after-pains, then strengthening, cleansing, and enriching the milk of the mother in the post-delivery period. [HHH p.4] Dr. Christopher recommended taking at least a daily cup of Red Raspberry tea throughout pregnancy. He said that in addition to its good effects on the uterus it is also anti-nausea. A woman who was expecting her ninth child often experienced nausea during pregnancy. When she suspected that she might be pregnant again she began taking the tea even before she began to feel morning sickness. She never experienced any discomfort so she wondered if it might just be an unusual or unhealthy pregnancy, so she discontinued the tea. Not long after she began to feel nausea! She quickly began to take the tea again and felt no discomfort since then. [UW-Red Raspberry]

[Pregnancy Green Drink](#): Interestingly the [Red Raspberry] berries are said to provide many of the medicinal factors of the leaves. We have been encouraged by midwives to eat freely of the berries, if possible, for the same good effect during pregnancy--a lovely medicine! Since some people never get used to the taste of the tea a good way to use the leaves (aside from capsules or tablets) is to make a green drink. Our "pregnancy green drink", to which we have grown so accustomed that we can hardly imagine pregnancy without it, is made thus: To a cup or more of pineapple juice in a blender container, add a handful of Red Raspberry leaves, a handful of comfrey leaves and a few alfalfa leaves. Blend until the fibers of the leaves are broken down and drink immediately. You can add a couple of ice cubes or a little cold water if you want an icy or thinner drink. [UW-Red Raspberry]

[Nu Fem](#): Dr. Christopher's Herbal Aid for Female Reproductive Organs and [Changease](#): Dr. Christopher's Herbal Hormone Formula: If the female organs are in a questionable condition, it is well before and during pregnancy (also in the post-delivery period) to use our female corrective formula [Nu Fem] (an herbal food to strengthen and rebuild the entire reproductive area) and the estrogen hormone combination [Changease] (herbal aid) to assist in supplying needed hormones and estrogens in the correct amount. The human body is computerized to a point that it will take from an herbal formula such as this one the different types of estrogens and hormones it needs, and easily discard the ones not used. These herbs can be not only accepted into the body, but assimilated when needed and eliminated when not required. [HHH p.5]

[Nu Fem](#): Dr. Christopher's Herbal Aid for Female Reproductive Organs: This is an amazing combination of herbs to aid in rebuilding a malfunctioning reproductive system (uterus, ovaries, fallopian tubes, etc.). Over the years herbalists and patients have seen painful menstruations, heavy flowing, cramps, irregularity, etc., that have been helped and the patient now has a painless menstrual period, good menstrual timing, and a new outlook on life by using these aids to readjust the malfunctioning areas. The female corrective formula consists of three parts of golden seal root and one part of each of the following: blessed thistle, cayenne, cramp bark, false unicorn root, ginger, red raspberry leaves, squaw vine, and uva ursi.

Recommended dosage is one cup or 2 capsules or tablets morning and evening or three times a day if desired, six days a week for as long as required to get results desired. We have seen many severe cases who have had many years of suffering cleared up in 90 to 120 days. Some get relief sooner, some take longer--no two cases are alike. This is a food to rebuild the malfunctioning organs.

[Changease](#): Dr. Christopher's Herbal Hormone Formula: Here are herbs that are an aid to assist the function of developing the hormone and estrogen balance in both female and male. This combination consists of the following herbs: black cohosh, sarsaparilla, ginseng, blessed thistle herb, licorice root, false unicorn root and squaw vine. Adult suggested amount is one to three number 0 capsules morning and evening, as desired. As an aid to youth going into puberty, for expecting mothers, as well as at menopause times.

These two combinations, the female corrective [Nu Fem] and the hormone-estrogen combinations [Changease] can be used during the entire time of pregnancy (and also before and following), as it is an herbal food like any other food and "is there to be used, if needed," but can do no harm in any way.

If there is yeast infection and or Herpes Simplex before or during pregnancy, add also, the [V.B.](#): Dr. Christopher's Vaginal and Rectal Herbal Bolus and the slant board routine [[Yellow Dock Combination](#)] included herein. These are very beneficial and yet are harmless to the mother and child-to-be. [HHH p.7]

**Calc Tea:** Dr. Christopher's Calcium Formula: Another way to have a healthy child (one that is not a worry because of repeated sicknesses), a mother-to-be should use a good calcium formula during the entire pregnancy and also during the lactation period. There is a good herbal formula that we use which is strictly an assimilable vegetable (herbal) type combination. It consists of six parts horsetail grass, four parts comfrey root, three parts oat straw and one part lobelia. The horsetail grass is almost pure silica but by biological transmutation, so says renowned scientist Professor Louis C. Kervran, the human body is able to make the molecular change to transform the silica into assimilated calcium. To aid this we have a number of trace minerals in the comfrey that speeds up the transformation.

It is a known fact that there is a lack of adequate calcium in the diet of the average adult today. One reason, of course, is the use of processed "foods" which have been robbed of much of the calcium they originally had. The next cause of calcium deficiency is the use of so much inorganic sugars and starches (the starches turn to sugars). This sugar leaches out the calcium from the body of the mother. The fetus is drawing on the calcium for self preservation, as well as leaching out by sugars of more and more calcium. The young mother-to-be then wonders why the varicose veins (breaking and darkening of veins), the loss of teeth during pregnancy, and the "Charlie horses" (cramps) and muscle weakness, etc. etc.! [HHH p.11]

**Alfalfa:** Many people consider Alfalfa an important herb to take throughout pregnancy. If an expectant mother is suffering from morning sickness, she can eat Alfalfa sprouts in her diet and can take from eight to sixteen tablets of Alfalfa until the condition is under control, then she can reduce the dosage (Mal:252). Many people consider that a daily green drink consisting of Alfalfa, comfrey and fresh red-raspberry leaves is an excellent pregnancy drink; it is preferred to a tea made of the same substances. After the birth, Alfalfa is sometimes taken to prevent hemorrhages. Some women have eaten Alfalfa tablets after their births like candy in order to shorten the postpartum bleeding time. Alfalfa is also thought to dramatically help bring the milk in for the nursing mother. It certainly enriches the quality of the milk and is much preferable to other hot beverages, such as regular tea, which can pollute the breast milk. It can be flavored with mint, orange peel, and honey. [UW-Alfalfa]

**Irritable Bladder of Pregnancy:** When the mother-to-be needs to urinate every few hours due to irritation and pressure; often when a mother sneezes or coughs or even walks, urine is expelled. Gravel Root will help alleviate this condition, as long as it does not result from actual fetal pressure on the bladder itself. [UW-Gravel Root]

**Toxemia and Kelp:** Kelp, as might be expected, is also of use in the female organs. It will tone up a weak uterus and help produce a more healthy baby, as the balanced minerals will be supplied fully with the use of Kelp. Some women who had lost babies in childbirth and others who had not been able to carry babies were helped by the use of Kelp by Dr. Powell's prescription of Kelp to carry healthy babies full term. Especially when toxemia threatens during the last stages of the pregnancy, Kelp, being a carrier of important minerals and a toner and an antiseptic, can help clear up an otherwise dangerous condition. [UW-Kelp]

**Onions:** To help build the blood or to help prevent obesity, to help provide strength during pregnancy or to help prevent toxemia, take Onions three times a week cooked, two times a week raw. [UW-Onions]

**Heartburn during Pregnancy:** Many women experience indigestion and heartburn, and sometimes gas, during pregnancy. This may be caused by the stomach having less room to do its work, nervous tension which inhibits good digestion, too many stomach acids, or a relaxed stomach, which allows foods to back up. Be sure that you do not take antacids during pregnancy. They further inhibit digestion, and they may cross over the placenta into the baby. To deal with these symptoms, Dr. Christopher first emphasized that we must chew our food. Many of us just gulp it down, and the large particles cause gas, fermentation, and pain. Chew well; even juices should be swished in the mouth to mix them with saliva and begin digestion. Don't drink with your meals; water or other liquids dilute the digestive fluids; you may, however, want to take broth or juices with the meal, but you should "chew" these, too. Increase your B-vitamin foods, including whole grains, brewer's yeast, wheat germ, yogurt, perhaps acidophilus. Don't smoke or drink tea or coffee; these irritate the stomach and increase heartburn. Eat small meals frequently; if you must be away from home, take juice, fruit and nuts with you to prevent your blood sugar going down and stomach acids overproducing. Papaya can aid digestion--fresh, dried or in tablets.

Some women take tablets of activated charcoal to absorb gases in the system. Slippery elm gruel will alleviate heartburn and absorb gases and toxins. [EWH p.41]

### Testimonials

1. Scars from Caesarean Section Almost Prevent From Having More Children: A lady who had had three children by Caesarean section came to Dr. Christopher because she was "baby hungry." Medical doctors had told her that her scars were so bad that if she dared become pregnant again, the strain on her system would kill both her and her baby. Another section, they insisted, was totally impossible; one doctor crudely said that they couldn't even crochet her back together again if she attempted another pregnancy.

But she wanted another child. Dr. Christopher advised her to begin the usual program with [Dr. John R. Christophers "Three Day Cleansing Program"](#) once monthly, [Dr. John R. Christophers "Mucusless Diet"](#), the hormone-balancing [\[Changease\]](#) and female corrective formulas [\[Nu Fem\]](#). In addition, he told her to do the [Three Oil Massage](#), which is detailed in our section on Hair Loss, [EWH p.136]. The lady was to sunbathe as well, and to exercise.

Time passed, and Dr. Christopher had pretty much forgotten about this case. But the lady came to him with a baby in her arms. The scar tissue had begun to soften, and eventually became healthy tissue. She had an easy home birth vaginally, with no complications. This lady went on to have other children, grateful to Dr. Christopher for her healing with herbs. [EWH p.114]

2. [Pre-Natal Tea](#): Dr. Christopher's Pre-Natal Tea: Amateur herbalists, after reading that Pennyroyal must not be taken during pregnancy because it is an abortive, criticized Dr. Christopher for including it in his five-week formula which is taken by expectant mothers during the last five weeks of their pregnancy to facilitate an easy labor and delivery. Dr. Christopher explained that the Pennyroyal is included there to help prepare the uterus for easy delivery and that the quantity is quite small compared to the rest of the formula. Also during the last five weeks his small amount acts as a tonic and regulator rather than a strong abortive. He told many stories of how women received great relief during their labors because of the use of the five-week formula. One woman who had had two very difficult and long labors before was questioning whether she wanted to have another baby. The ordeal seemed to her too difficult. She began to take the five-week formula for the third pregnancy and to her delight her labor was just a few short hours and the delivery extremely easy.

Another woman took the formula routinely with each of her pregnancies preceding the last five weeks with daily doses of red raspberry, comfrey, and alfalfa. Her labors were extremely short and easy. The first baby came within two hours, the second within an hour, the third within a half hour, and so on!

Pennyroyal is not a particularly trustworthy herb. It only works a quarter of the time anyway, and could cause problems with a fetus if it were taken during the first part of a pregnancy. Recently a woman took a large dose of Pennyroyal in order to induce an abortion and died, although it was found later that she intended to commit suicide. Instead of taking the herb, she took the essential oil, which contains the very concentrated medicinal factors. Three women were involved in this case. Two ingested a quarter ounce each and lived, while the third consumed a full ounce of the herb oil and died painfully. It was thought that all three women were trying to induce abortion although a subsequent investigation revealed that the woman had been despondent and had talked of suicide and that she probably knew from her former experience with herbs that the ounce of the oil would be lethal. However, the story was widely published and prompted the director of the Rocky Mountain Poison Control Center to label the health food industry "murderers". Many people take herbs without knowing the full risk. In all cases they should follow the advice of Dr. Christopher who recommended that we do not generally take herbs in extracted or concentrated forms but that we take the herb in its natural form or at the most, in a tincture, so that we have the balanced elements needed for proper use. [UW-Pennyroyal]

3. Red Raspberry: Dr. George Zofchak reported that almost forty years ago he and his wife had their first son and after a few years they decided they wanted more children. But his wife Irene had trouble carrying the babies and there were several miscarriages. Finally Dr. Zofchak learned

that Red Raspberry leaves helped a woman in many ways throughout her pregnancy, strengthening the attachment of the fetus and easing delivery at the time of the birth. Although he had been selling herbs for some years he had overlooked the use of the Raspberry leaf tea. When his wife became pregnant again she began drinking a few cups of the tea during the pregnancy, which proceeded normally even though ten years had passed since the birth of their first son. They had two other children through the use of the Red Raspberry leaf tea (Bri:233). [UW-Red Raspberry]

4. Sickly Girl Gets Well and is Able to Get Pregnant: The Female Corrective Formula [[Nu Fem](#)] will strengthen the reproductive system of the female, while the Prostate Formula [[Prospallate](#)] will help the prospective father. Both parents will benefit by the Hormone and Estrogen Formula [[Changease](#)]. Both parents should begin these detoxification procedures before conception. During pregnancy, the mother should drink plenty of red raspberry leaf tea; approximately one quart a day. One may find a more detailed discussion on preparation for pregnancy in the volume Childhood Diseases, by John R. Christopher. People could do much to correct high risk pregnancies with the Creator's available remedies if only they would take the time to learn about how to care for the body.

I well remember an incident a number of years ago, of spending some time counseling with a young lady and her boy friend. They had brought the girl's parents with them. They were deeply in love and wanted to get married. However, the girl, as much as she loved this young man, had begged him not to pressure her to marry him because of her present physical condition. Her whole system was in such a deplorable condition that there was no menstrual cycle to be detected in any accuracy at all. The menstrual period would start; then shortly she would stop flowing and in several days might start again and continue for several weeks of heavy flow. Other times she would go six or eight weeks, or more, without another menstrual period. When her mother had come to see me a few days earlier, the girl had menstruated for so many weeks, she was anemic. Her period had been so long and frequent that she was so weak and run down, she spent much of her time in bed. This weak condition was so bad, she had been told by her doctor that she could never have children if she did get married or planned to; but she would be better off to remain single.

Her fiance insisted that they should get married and he would take care of her throughout her life, not worrying whether or not she could bear him children. But, she did not want to spend the rest of her life a sickly woman.

I advised them to follow a blood rebuilding program and both assist and encourage each other. The program started with [three-day cleansing cycles](#) and then included a mostly vegetarian (and [mucusless](#)) diet with lots of fresh fruits and vegetable salads, pure fruit and vegetable juices (especially carrot) and the use of Dr. Christopher's Female Corrective herbs [[Nu Fem](#)] as well as our special formula for the glands. (Read his book "[The Incurables](#)" as well as "[Three Day Cleanse](#)" pamphlets, etc.) We promised that if they would cooperate and follow instructions, her bloodstream could be rebuilt and her system strengthened before the year was over.

They got married and he nursed her at home, watching her diet carefully, and helped her step by step to follow the mucusless diet and to use various herbs to assist in the rebuilding of her reproductive organs. They watched her blossom out over the next few months. In a little over a year of married life, the young lady became the proud mother of a healthy baby boy. How much nicer it is to be a healthy happy mother instead of an invalid! This couple proved that an "ounce of prevention" is better than a "pound of cure." [NL 2-5]

5. Rh Factor: Up in the Brigham City, Utah area I had an extremely interesting case come to our study group to see if we had a program that could be of some assistance. The lady wanting help had had three children and all three had Rh negative factor problems. (Each of the three children had to have their blood drained out and different blood filled in). All had a difficult time pulling through the ordeal and staying alive.

Any mother having this condition Rh factor, and having three children, one right after the other with the same problem, if she is an average woman, would say "no more"! But the good Lord made brave women from the beginning for a lot of us to have as valiant mothers who love holding and caring for another new baby so much that they will still take the chance! Anyway, to add

insult to injury, this lady did not only have the Rh factor problem, but had just had open heart surgery. The obstetrician warned her that if she became pregnant again, she and/or the baby could die. But she wanted a large family.

The first thing we had her do was go on the "basics"; for instance, to use the lower bowel formula [[Fen LB](#)] and clean out the bowels, and drink a gallon of steam distilled water each day to keep flushing the system. She drank no less than a quart of red raspberry leaf tea, using two capsules of [Red Clover Combination](#): Dr. Christopher's Blood Purifying Formula and followed [Dr. John R. Christophers "Three Day Cleansing Program"](#) and [Dr. John R. Christophers "Mucusless Diet"](#).

This woman's program was watched carefully during the entire nine months and the progress was excellent. When the next baby came it was with no Rh factor problem (no blood pumped out and replaced).

This woman and her husband became parents of two more babies born a few years later, and both of them were free of this Rh negative factor.

It has been very satisfying to the parents, as well as to us who helped guide them, to know that this serious condition can be cured if we will but do something about it "naturally" as explained herein.

Good common sense, knowledge of right foods, and the Lord's good herbs can make life better for all of us if we will just use these methods. [NL 2-5]

### See Also

- [Calc Tea](#): Dr. Christopher's Calcium Formula
- [Changease](#): Dr. Christopher's Herbal Hormone Formula
- [Nu Fem](#): Dr. Christopher's Herbal Aid for Female Reproductive Organs
- [Pre-Natal Tea](#): Dr. Christopher's Pre-Natal Tea
- [Prospallate](#): Dr. Christopher's Prostate Formula
- [Miscarriage](#)
- [Nausea](#)
- [Nipples](#)
- [Dr. John R. Christophers "Three Oil Massage"](#)
- Entire Newsletter "Herbs in Pregnancy and Childbirth Part 1" [NL 3-7]
- Entire Newsletter "Herbs in Pregnancy and Childbirth Part 2" [NL 3-8]

## Ailments

[A - B](#)   [C - E](#)   [F - I](#)

[J - P](#)   [Q - Z](#)

[Jaundice](#)

[Kidney](#)

[Laryngitis](#)

[Leukemia](#)

[Lice](#)

[Liver](#)

[Lockjaw](#)

[Measles](#)

[Meningitis](#)

[Menopause](#)

[Menstruation](#)

[Migraine](#)

[Miscarriage](#)

[Moles](#)

[Motion Sickness](#)

[Mumps](#)

[Nausea](#)

[Nerves](#)

[Neuralgia](#)

[Neuritis](#)

## Prostate

### Definition

The prostate consists of 3 lobes which manufacture seminal fluid. The tube which empties the bladder passes over the middle lobe. In later life, the prostate gland often becomes enlarged and causes problems by closing off the exit of urine from the bladder. This urine retention often starts by a decrease in the force of the stream of urine leaving the body. Prostate blockage of the flow of urine because of infection or cancer can be very serious --- even to the point of causing uremic poisoning within the body. The cause of enlargement of the prostate gland is the collection of mucus and sediment in the gland. Often the male hormones produced by the body are not enough to keep the prostate gland functioning well. The nitrates and nitrites in processed meats, hot dogs, baloney, and other cold cuts have a particularly important role in the formation of cancer of the prostate in the male. [NL 3-6]

### Herbal Aids

General Instructions: Before (or instead of) arriving at the decision to submit to the knife and have the prostate gland surgically removed, may we offer the following suggestions: In any form of cell-deterioration, the Red Clover Combination should be used to help clean up the blood stream. Of course the bowel must be cleared up first and foremost. Then, as a specific aid to the prostate area the following formula has aided in removing infection, sediment and the like.

[Prospallate](#): Dr. Christopher's Prostate Formula, [Cayenne](#), ginger, golden seal root, gravel root, juniper berries, parsley root or herb, uva ursi herb, and ginseng root. These capsules can be taken in the morning and at night, and they are best taken with parsley tea. Change the diet to the mucusless diet, and drink plenty of distilled water and fruit and vegetable juices. Cancerous tumors have a very difficult time growing when there is the presence of organic potassium in the body, so the tinctures of black walnut or elderberry or any other foods high in potassium can be helpful here, providing that the bowel is in good condition so that proper assimilation can take place. The [Changease](#): Dr. Christopher's Herbal Hormone Formula will help the body produce the necessary hormones for proper functioning of the glands. It consists of Black cohosh, Sarsaparilla, ginseng, licorice, false unicorn, blessed thistle and squaw vine. Don't worry if the formula contains estrogens as well as hormones. The body will select the substances it needs and will discard the rest in a natural formula such as this. [NL 3-6]

Gravel Root is used principally as a therapeutic agent for the urinary-genital areas, influencing the kidneys, liver, bladder, prostate gland and uterus. It relaxes moderately, stimulates, and tones the pelvic viscera and mucous membranes (helping to cast off any sediments that have settled on surfaces). It is good when used alone, or in combination with other herbs. Its popularity (note the name) has been due to its powerful solvent effect on stony deposits in the kidneys (here it can do the work alone, but its effects are improved with other herbal agents in combination). Gravel root is one of the greatest herbs to use for any kidney and urinary problem, and it is also great as a tonic and stimulant. As a nervine, it is reputed to influence the entire sympathetic nervous system. [SNH p.254]

Prostate Urinary Troubles: See formula using gravel root, marshmallow, parsley, juniper, lobelia, cayenne and golden seal. [SNH p.256]

Herbal Kidney Aid: See formula using cayenne, ginger, golden seal, gravel root, juniper berries, marshmallow, parsley and uva ursi. This will dissolve the stones that are in the kidneys, as well as clean out other sedimentation and infection in the prostate. Mix the powders and place

[Nightmares](#)[Nipples](#)[Nosebleeds](#)[Obesity](#)[Osteoporosis](#)[Palpitations](#)[Paralysis](#)[Parasites and Worms](#)[Pleurisy](#)[Pneumonia](#)[Poison Ivy and Poison Oak](#)[Polyps](#)[Pregnancy](#)[Prostate](#)[Pyorrhea](#)

in No. 2 capsules and take two morning and night. [SNH p.524]

[Prosallate](#): Dr. Christopher's Prostate Formula: (This is the same as in # 3 but already made into capsules). In case of malfunction we suggest this combination to help assist the male: cayenne, ginger, golden seal root, gravel root or queen of the meadow root, juniper berries, marshmallow root, parsley root or herb, uva ursi leaves. This will help dissolve the stones that are in the kidneys, as well as help clean out other sedimentation and infection in the prostate. Mix the powders and place in No. 0 capsules and take two or more morning and night, with parsley tea when possible. [HHH p.191]

[Alfalfa](#): Frank Bower conducted many interesting experiments with Alfalfa. Three hundred soldiers at Sawtelle, California, used the Alfalfa tea with remarkable improvement in bladder, prostate and other problems. [UW-Alfalfa]

[Kelp](#): Kelp is also recommended to tone the prostate gland. It improves the nutrition of the organ and the circulation of the blood through the tissues. It is necessary to take the herbal aid over a period of time to get the results, however. A seventy year old man was saved having a prostate operation through the persistent use of Kelp. [UW-Kelp]

[Processed Meat and the Prostate](#): The preservatives which are put into the hot dogs, baloney, and corned beef, are potassium nitrate and similar compounds which destroy the prostate gland in 55% of the male population of the world. At one time, these chemicals were used in black powder and rocket fuel, and to decrease the sexual libido of mental patients. Now men pay for it in their canned beef. Then they pay to have their prostate gland surgically removed. [NL 2-6]

[Zinc](#): In a youngster, normal growth and sexual maturity cannot proceed without sufficient zinc. If you are having muscle cramps, slow healing of wounds, poor absorption in the small intestine, or prostate gland disorders, you may have a zinc deficiency.

Chaparral is a great way to obtain manganese, copper and zinc in a concentrated form. When the Creator ordained herbs for the use of man, it was to eliminate unnecessary guesswork and laboratory work with regard to the needs of the human body. [NL 3-4]

[Pumpkin Seeds](#): The pumpkin seed has given much relief to prostate problems. [NL 5-1]

### Testimonials

1. [Cleanser of the Urinary Tract](#): About a year ago, we had the case of a man who was to be sent back to the Mayo Clinic for a prostate operation. It was serious enough that the doctors there wanted to handle it. We had to put the catheter in to get the liquid to flow at all and the man was in great pain; And even with this mechanical assistance, the pumping was very slow. This man was agreeable to do anything, so we changed his diet, and that was the roughest "medicine" we could have given him, as he was a big eater of the orthodox foods. But we changed his diet and put him on the gravel root herb (the "pelvic trouble" formula). Not more than six weeks had gone by before he happily told me, "I now have the fountain of youth." And he continued "This is the happiest that any man could ever be. It has been many, many years-since I've had this freedom and no pain." He was so enthusiastic about this miracle taking place within him that he said, "I would think that I can go on straight raw food now that I've got started that it will go faster." But we counseled, "No, please don't, because the mucus will break loose here so fast that we need to slow it down, so at least 1/3 of your foods should be baked or steamed." Well, he went ahead with the raw diet anyway. The mucus came fast and furious, and one string of mucus from the urinary tract was so long and painful that he thought he was going to have triplets with all that he went through. [SNH p.257]

2. [Parsley for Pressure of the Prostate](#): One doctor who made a trip to Holland was surprised to see medical doctors prescribing Parsley tea for kidney stone and other kidney and related complaints, including pressure of the prostate. He returned to his practice at home and began prescribing the same remedy with the same good results (Luc:Herbal:89). Parsley taken with boiled onions is said to be good to remove gallstones although some writers prescribe juniper berries instead of the onions which would also be a great specific for the urinary tract (Coon:154). [UW-Parsley]

3. Parsley to Help Urinate: One gentleman in his sixties was in great distress because he was unable to urinate. The doctor catheterized him several times and told him that he would have to undergo an operation. It was then discovered that the man had sugar in his urine and the operation was deemed too dangerous until the diabetes was under control. The patient's osteopath finally prescribed Parsley tea. The results were astonishing. Not only was he able to urinate freely but every trace of sugar disappeared from his urine. After first drinking the tea a lot of offensive substance came away in his urine. But it soon became normal and the patient was soon playing his normal rounds of golf with enjoyment and with no further thoughts of an operation (Luc:84). To void urine Dr. Christopher specifically recommended combining the Parsley with Juniper berries. [UW-Parsley]

4. [Juni-Pars](#): Dr. Christopher's Kidney Formula and [Prospallate](#): Dr. Christopher's Prostate Formula: First, I want to thank you for making your herbs and combinations and knowledge available! My husband was suffering from kidney/prostate troubles and had gone to the urologist after the local P.A. was unable to help him. The urologist had him on a sepra which made his health seem to improve for a couple of weeks--then he had the same symptoms all over again and a lot worse. So much so, he stayed home from work for four days, sleeping and very uncomfortable. When he went back to the urologist and had x-rays they weren't able to find anything, told him to go off the medicine and that the urologist felt he would just have to "live with it." He must of thought my husband was off upstairs or something, maybe. So we went to the health food store for help. Through reading material and the lady there he started on distilled water and KB [White Mallow] and PR [Prospallate]. He is much better and has been able to do heavy work again. Thank you greatly. [NL 3-4]

#### See Also

[Changease](#): Dr. Christopher's Herbal Hormone Formula

[Juni-Pars](#): Dr. Christopher's Kidney Formula

[Prospallate](#): Dr. Christopher's Prostate Formula

## Ailments

[A - B](#)   [C - E](#)   [F - I](#)

[J - P](#)   [Q - Z](#)

[Jaundice](#)

[Kidney](#)

[Laryngitis](#)

[Leukemia](#)

[Lice](#)

[Liver](#)

[Lockjaw](#)

[Measles](#)

[Meningitis](#)

[Menopause](#)

[Menstruation](#)

[Migraine](#)

[Miscarriage](#)

[Moles](#)

[Motion Sickness](#)

[Mumps](#)

[Nausea](#)

[Nerves](#)

[Neuralgia](#)

[Neuritis](#)

## Pyorrhoea

See [Gums](#)

[Pyorrhea](#)

[Nightmares](#)

[Nipples](#)

[Nosebleeds](#)

[Obesity](#)

[Osteoporosis](#)

[Palpitations](#)

[Paralysis](#)

[Parasites and Worms](#)

[Pleurisy](#)

[Pneumonia](#)

[Poison Ivy and Poison Oak](#)

[Polyps](#)

[Pregnancy](#)

[Prostate](#)

**Pyorrhea**

## Ailments

[A - B](#)   [C - E](#)   [F - I](#)

[J - P](#)   [Q - Z](#)

## Worms

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See [Parasites and Worms](#)

[Quinsy](#)

[Rheumatic Fever](#)

[Rheumatism](#)

[Shock](#)

[Skin Problems](#)

[Smallpox](#)

[Snakebite](#)

[Sour Stomach](#)

[Spasms](#)

[Sprains](#)

[Stiff Neck](#)

[Stroke](#)

[Sty](#)

[Syphilis](#)

[Teeth](#)

[Throat](#)

[Thrush](#)

[Tonsillitis](#)

[Tuberculosis](#)

[Tumors](#)

[Typhoid](#)

[Ulcers](#)

[Uterus](#)

[Varicose Veins](#)

[Vertigo](#)

[Vomiting](#)

[Warts & Moles](#)

[Whooping Cough](#)

**Worms**

[Yellow Fever](#)

## Ailments

[A - B](#)   [C - E](#)   [F - I](#)

[J - P](#)   [Q - Z](#)

[Quinsy](#)

[Rheumatic Fever](#)

[Rheumatism](#)

[Shock](#)

[Skin Problems](#)

[Smallpox](#)

[Snakebite](#)

[Sour Stomach](#)

[Spasms](#)

[Sprains](#)

[Stiff Neck](#)

[Stroke](#)

[Sty](#)

[Syphilis](#)

[Teeth](#)

[Throat](#)

[Thrush](#)

[Tonsillitis](#)

[Tuberculosis](#)

[Tumors](#)

## Yellow Fever

### Definition

An acute, infectious, often fatal, febrile affliction of the tropical and sub-tropical regions of America, characterized by jaundice, hemorrhages, vomiting, etc.

### Symptoms

The affliction begins with a chill and pain in the head, sudden onset of fever (103-105 degrees F), vomiting, constipation, scanty and albuminous urine. A period of diminution (remission) occurs, another fever attack, jaundice develops, and the vomit becomes darkened from the presence of blood. The disease is often fatal, occurring in the typhoid state or from uremia. [SNH p.49]

### Cause

A thick and sluggish blood stream. Mucus clogs the body to the point that a fever takes over (without which it cannot clear itself). Yellow fever or other forms of fever do not occur when the body is in a healthy condition. The clogged condition is triggered by an organism carried by a mosquito. [SNH p.49]

### Herbal Aids

Work the Fever Out through the skin by the use of diaphoretics, vapor baths, heat baths and [cold sheeting](#) and change the diet. [SNH p.49]

Cayenne (Capsicum): It is especially valued there for the deadly fevers, especially yellow fever, of which the native people have no fear as long as they have a goodly supply of Capsicum (Ibid.) [NL 6-3]

### See Also

[Cayenne](#): Dr. Christophers many Cayenne Combinations

[Typhoid](#)

[Ulcers](#)

[Uterus](#)

[Varicose Veins](#)

[Vertigo](#)

[Vomiting](#)

[Warts & Moles](#)

[Whooping Cough](#)

[Worms](#)

**Yellow Fever**

## Adrenetone

### Adrenals Formula

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#### Usages

Adrenals Formula: As this formula helps promote the correction of any imbalance in the adrenal gland it also compensates for any stress placed on the heart.

Relaxation, meditation, recreation, or some form of stress reducing activity will certainly help the cause of exhausted adrenals. We should wish to eliminate hate, anger, fear, and other negative emotions as they take their toll on the physical body. Listening to relaxing music has proven to be wonderful in easing hostile attitudes.

#### Dosages

This formula may be taken as capsules or as a tea. It may safely be given to a person suffering from hypertension. For those who wish to rebuild the adrenals and do not have the sodium retention problem, Licorice root can be used as a supplement the above formula in tablets, capsules, extract, or as a tea. The suggested dosage is one #0 capsule daily - six days each week.

#### Ingredients

Contains mullein, licorice, Siberian ginseng, gotu kola, hawthorne berries, lobelia, cayenne, and Ginger.

***Mullein and lobelia: the perfect glandular foods.***

***Siberian Ginseng: Successfully used in the Soviet Union to ease stress in everyday situations and tend endurance to athletes under great strain during training.***

***Gotu Kola: Known to help promote the stimulation of the brain and relieve fatigue when given in small amounts. Wonderful for the functioning of the pituitary in disorders of the adrenal system when used in conjunction with other herbs.***

***Hawthorn Berries: A celebrated cardiac tonic for many centuries. Under conditions of stress, the heart often "works overtime." Hawthorn berries can help in treatment of high or low blood pressure, tachycardia, and arrhythmia. It is also anti-spasmodic, sedative, and soothing to nerves, especially in nervous insomnia.***

***Cayenne: Nature's finest stimulant; source of calcium and vitamin A. Aids in circulation of blood which brings oxygen and other nutriment to cells in need of repair.***

## Formulas

### Adrenetone

[Ant-Plg](#)

[Antsp](#)

[AR-1](#)

[AT-GS](#)

[B & B Tincture](#)

[Barberry LG](#)

[Bee Power](#)

[BF & C](#)

[BF & C Ointment](#)

[Black Ointment](#)

[Black Walnut Tincture](#)

[BPE](#)

[Bugleweed Combination](#)

[Calc Tea](#)

[Catnip & Fennel](#)

[Cayenne](#)

[CC](#)

[Changease](#)

[Chickweed Ointment](#)

[CMM](#)

[Comfrey-Mullein-Garlic](#)

***Ginger***: A stimulant and a 'lead sheep' herb, bringing the other herbs in the formula into the abdominal area. Ginger differs from cayenne as a stimulant, in that the cayenne stimulates the heart, arteries, veins and then the capillaries. Ginger starts its stimulating effect in the capillary, flushing out the "constipated" capillary, driving these wastes into the veins for disposal.

**Useful in Treating:**

[Adrenals](#)

[Diabetes](#)

[Hypoglycemia](#)

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

[Ephedratean](#)

[False Unicorn & Lobelia](#)

[Fen LB](#)

[Garlic, Rosehips, and Parsley](#)

[Hawthorn Berry Syrup](#)

[Herbal Composition](#)

[Herbal Cough](#)

[Herbal Eyebright](#)

[Herbal Tooth Powder](#)

[Immucalm](#)

[INF Combo](#)

[Juni-Pars](#)

[Jurassic Green](#)

[Kelp-T-Comb](#)

[Kid-E-Mune](#)

[Kid-E-Soothe](#)

[Master GL](#)

[Mem](#)

[MindTrac™](#)

[Mullein & Lobelia](#)

[Nose Ointment](#)

[Nu Fem](#)

[Oil of Garlic](#)

[Panc Tea](#)

[Pre-Natal Tea](#)

[PreTrac™](#)

[Prospallate](#)

[Red Clover Combination](#)

[Relax-Eze](#)

[Resp-Free](#)

[Sen Sei Balm](#)

[Sha Tea](#)

[Smoke Out](#)

[ULC](#)

[V.B.](#)

[VF Syrup](#)

[Vitalerbs](#)

[Wild Lettuce and Valerian](#)

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## Ant-Plg

Anti-Plague Formula

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### Usages

1. This is a good formula to help with car, plane, or boat sickness; in fact, for most any motion sickness. It is also for nausea from pregnancy, etc.
2. Historically speaking this formula has been used to help clear up flu, earache, eruptive diseases, car-sickness, etc.
3. The best insurance in the world against the "predicted coming plagues" and "killing diseases" is to have the body in a good healthy condition. Disease germs are merely scavengers and can only live on toxins, mucus and residue from junk foods. They cannot and will not be damage healthy cell structure. Therein lies the key! Have a healthy, clean body and disease germs will by-pass you--wanting nothing to do with your body, because it would be "obnoxiously clean" (in their language) and no filth for them to live on.  
If the plague, or some other epidemic hits before you are in a good healthy condition, it is good to have an aid for a fast cleaning.
4. Nausea: Tendency to vomit, sickness of the stomach. Use the anti-nausea formula...You may also use the anti-plague formula.

### Dosages

Dosage is as follows: 1 tsp. 3 times a day; or 1 tablespoon every 1/2 hour if infected.

### Ingredients

Anti-Plague contains the following herbs.

- Fresh garlic**
- apple cider vinegar**
- pure vegetable glycerine**
- U.S.P.**
- honey**
- garlic juice**
- fresh comfrey root**
- wormwood**
- lobelia**

<a href="#">CSK</a>	<input type="checkbox"/> <b>marshmallow root</b>
<a href="#">CSR</a>	<input type="checkbox"/> <b>oak bark</b>
<a href="#">Deep Heating Balm</a>	<input type="checkbox"/> <b>black walnut bark</b>
<a href="#">DRI</a>	<input type="checkbox"/> <b>mullein</b>
<a href="#">Ephedratean</a>	<input type="checkbox"/> <b>skullcap</b>
<a href="#">False Unicorn &amp; Lobelia</a>	<input type="checkbox"/> <b>uva-ursi</b>
<a href="#">Fen LB</a>	
<a href="#">Garlic, Rosehips, and Parsley</a>	
<a href="#">Hawthorn Berry Syrup</a>	
<a href="#">Herbal Composition</a>	
<a href="#">Herbal Cough</a>	
<a href="#">Herbal Eyebright</a>	
<a href="#">Herbal Tooth Powder</a>	
<a href="#">Immucalm</a>	
<a href="#">INF Combo</a>	
<a href="#">Juni-Pars</a>	
<a href="#">Jurassic Green</a>	
<a href="#">Kelp-T-Comb</a>	
<a href="#">Kid-E-Mune</a>	
<a href="#">Kid-E-Soothe</a>	
<a href="#">Master GL</a>	
<a href="#">Mem</a>	
<a href="#">MindTrac™</a>	
<a href="#">Mullein &amp; Lobelia</a>	
<a href="#">Nose Ointment</a>	
<a href="#">Nu Fem</a>	

This has also been called Four Thieves. The origin of the name "Four Thieves" is as follows. "It in Marseilles, a garlic-vinegar preparation known as the Four Thieves was credited with protecting many of the people when a plague struck that city. Some say that the preparation originated with four thieves who confessed that they used it with complete protection against the plague while they robbed the bodies of the dead. Others claim that a man named Richard Forthave developed and sold the preparation, and that the "medicine" was originally referred to as Forthave's. However, with the passing of time, his surname became corrupted to Four Thieves."

### Testimonials

1. Garlic Wormwood Soup: From a letter to Dr. Christopher's newsletter. We have been making and giving the "anti-plague" remedy all last winter and spring, and I must say, I am amazed at its power! There hasn't been a case of acute respiratory or gastrointestinal illness that hasn't responded favorably, and quickly! It tastes like broth to me so I call it "garlic-wormwood soup". [NL 1-8]

2. Dr. Christopher's First Anti-Plague: (Ant-Plg) While lecturing in Snowflake, Arizona one night, one of the group asked if we had an anti-plague formula, and I was prompted to give them a "certain combination" of herbs to use.

The people there were very impressed to go right to work and prepare this liquid, having it read for use. We had told them that plagues come at unexpected times and it could be tomorrow or maybe even years away, but expect the unexpected and be ready now. If the formula was still unused, from "no need" years later, we could all be happy but "TIS BETTER SAFE THAN SORRY".

These good people made it up in gallon lots and had it on hand. Months later while speaking in Tucson, Arizona, someone asked for the "anti-plague remedy." I was surprised and asked where they had heard of it, as we had only given it out once. We were informed that a plague-like condition or flu had hit the Snowflake area and when other aids failed, this combination of herbs in liquid form performed its job with amazing speed.

At our next series of lectures in Snowflake, some time later, we heard one testimony after another about the many different types of ailments that were given quick relief by using this formula. The formula has now spread in many areas from coast to coast and is being used with good results. A man picked us up at an airport on the west coast a short time ago, and on the floor of his car was a bottle with liquid in it. When asked what it was he said, "oh, that's your anti-plague remedy, we never travel without it as it works good on about any sickness that comes up while we are traveling. We are also never without a bottle of it at home." [NL 2-9]

3. Dr. Christopher said that the tea of the leaves is a perfect remedy for colds and flu. He said to take no foods or other liquids but to drink large amounts of Red Raspberry leaf tea. His son, David, used this method when he came down with a cold and became well so fast that he and his wife went out to eat that night before the cold was completely cleared. His cold returned and so he decided to repeat the Red Raspberry treatment but it would not work the second time. He had to use the anti-plague formula which is somewhat nasty but effective. [UW-Red Raspberry]

- [Oil of Garlic](#)
- [Panc Tea](#)
- [Pre-Natal Tea](#)
- [PreTrac™](#)
- [Prospallate](#)
- [Red Clover Combination](#)
- [Relax-Eze](#)
- [Resp-Free](#)
- [Sen Sei Balm](#)
- [Sha Tea](#)
- [Smoke Out](#)
- [ULC](#)
- [V.B.](#)
- [VF Syrup](#)
- [Vitalerbs](#)
- [Wild Lettuce and Valerian](#)
- [X-Ceptic](#)
- [Yellow Dock Combination](#)

**Useful in Treating:**

- [Earaches](#)
- [Flu](#)
- [Motion Sickness](#)
- [Nausea](#)

**Also See:**

- [Dr. John R. Christophers "Anti-Plague Formula"](#)
- [Anti-Plague Formula](#)

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[Comfrey-Mullein-Garlic](#)

## Antsp

### Antispasmodic Formula

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#### Usages

1. Croup: As an aid for croup.
2. Apoplexy: The suddenness with which apoplexy comes necessitates the fastest therapeutic action. [Cayenne](#) pepper (one teaspoon to the cup) may be administered quickly; tincture of lobelia (three drops to one-half teaspoon, according to the size and age of the individual) should be given regularly; the antispasmodic tincture is excellent.
3. Asthma: Another helpful method is to take a vapor bath twice a week, inhaling steam from a decoction of cudweed ragwort, wormwood, or a decoction of the following herbs, taken warm, (equal parts) will prove very beneficial: elecampane root, horehounds, hyssop, skunk cabbage root, vervain, wild cherry bark (and to this preparation add tincture of lobelia or antispasmodic tincture).
4. Cough: It is very beneficial to massage the chest and across the back with antispasmodic tincture and to take six drops or more of the antispasmodic tincture several times each hour with a little distilled water. In addition, give a fourth cup or more of tea made of equal parts of wood betony, spearmint, peppermint, and catnip. (Give this two or three times a day.)
5. Earache: Place a few drops of tincture of lobelia (warmed) into each ear and plug with cotton. Substitute antispasmodic tincture or Black Cohosh Tincture Combination [B & B Tincture](#) if needed.
6. Hiccoughs: Relaxation is the most important thing, so drinking a mild nervine tea will help. Drinking a little orange juice is also helpful or take a teaspoon of onion juice. A few drops of antispasmodic tincture taken internally and rubbed on the chest area will often help promote relief, as will a cayenne poultice on the chest area or black or blue cohosh tea.
7. General Uses: This formula has been used historically in cases of convulsions, fainting, cramps, delirium tremors, hysteria, etc., also good for pyorrhea, mouth sores, coughs, throat infections, tonsillitis, etc.
8. Indigestion: Peppermint tea can help promote the soothing of the digestive tract and eliminate gas. Add six to ten drops of lobelia or antispasmodic tincture.
9. Babies Convulsions: For baby convulsions, place a drop or two of the tincture on the tip of a clean finger and place it in the baby's mouth. This should help stop the spasms immediately.
10. Rheumatism: The antispasmodic tincture is often applied externally for swellings and rheumatism.

#### Dosages:

Dose 1/2 to one teaspoon to glass of steam distilled water as a gargle and use until throat clears, also take one teaspoon in steam distilled water morning and evening.

#### Ingredients:

 skullcap herb

 lobelia

[CSK](#)[CSR](#)[Deep Heating Balm](#)[DRI](#)[Ephedratean](#)[False Unicorn & Lobelia](#)[Fen LB](#)[Garlic, Rosehips, and Parsley](#)[Hawthorn Berry Syrup](#)[Herbal Composition](#)[Herbal Cough](#)[Herbal Eyebright](#)[Herbal Tooth Powder](#)[Immucalm](#)[INF Combo](#)[Juni-Pars](#)[Jurassic Green](#)[Kelp-T-Comb](#)[Kid-E-Mune](#)[Kid-E-Soothe](#)[Master GL](#)[Mem](#)[MindTrac™](#)[Mullein & Lobelia](#)[Nose Ointment](#)[Nu Fem](#) [cayenne](#) [valerian root](#) [skunk cabbage](#) [gum myrrh](#) [black cohosh](#)

### Testimonials

**1. Epilepsy:** I just received your newsletter, and in reading the information on epilepsy I found that you didn't mention your antispasmodic tincture.

I have epilepsy and have followed your program with the [B & B Tincture](#) and [Oil of Garlic](#) and I'm sure this is effective over a period of time; but the antispasmodic tincture will stop the seizure in the process. I have used it successfully--even during home childbirth. This is a very good test, as epileptics could tell you, as childbirth always causes seizures.

I have also given the tincture to a friend for her baby. They had just spent almost \$1,000 on tests and medication the "AMA Way" and were having no success in stopping the seizures. They say this tincture has changed their lives. Having experienced epileptic seizures, I know that is no exaggeration.

I have never read or heard of this tincture being used for epilepsy, but was led by the Spirit to use it. I hope this might be of help to others who are suffering. God bless you.

**2. Croup and Coughing:** I'm very interested in learning more about herbs and one day studying it so I would feel more confident using them as I do, medicinally. I've used lobelia tincture for my son's teething problems and on insect bites and rubbing on body for fever, etc. I've used antispasmodic tincture for his croup and coughing. It works great!! I wish the medical profession would accept this miracle remedy for croup and get off their high horse!

**3. Fever:** My main reason for my letter is: My neighbor's little son of 3 ½ had a fever of 104 F. for three days. I brought him one cup of honey-cider vinegar and water and the antispasmodic tincture. He drank ½ cup of the mixture (1 tsp. of each) took ½ dropper of the tincture and in three hours the fever was broken--his mother thought it was a miracle. So do I.

### Useful in Treating:

[Acidosis](#)[Dyspnea](#)[Neuritis](#)[Apoplexy](#)[Epilepsy](#)[Paralysis](#)[Asthma](#)[Fever](#)[Rheumatic Fever](#)[Cholera Morbus](#)[Hemorrhage](#)[Spasms](#)[Convulsions](#)[Hiccoughs](#)[Throat](#)[Coughs](#)[Hysteria](#)[Tonsillitis](#)[Croup](#)[Inflammation](#)[Typhoid](#)[Diphtheria](#)[Nausea](#)

[Antsp](#)

[Oil of Garlic](#)

[Panc Tea](#)

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[Relax-Eze](#)

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[Sen Sei Balm](#)

[Sha Tea](#)

[Smoke Out](#)

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[VF Syrup](#)

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[Yellow Dock Combination](#)

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[Changease](#)
[Chickweed Ointment](#)
[CMM](#)
[Comfrey-Mullein-Garlic](#)

### AR-1

Arthritis/Rheumatism Formula

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#### Usages:

Here is a combination of herbs that helps promote detoxification; help act as a solvent for the accepted but not assimilated calcium deposits; herbs that help promote the relief of pain; herbs rich in new acceptable organic calcium that can be assimilated and useful; herbs that kill fungus and infection and that have the ability to help promote wonderful relief. Historically speaking this relief is not immediate because here is a long rebuilding job--gradual relief can come, and full healing, if the program is followed faithfully:

#### Dosages:

A cup two or three times a day (two capsules in Brigham tea or steam-distilled water).

Use as a hot fomentation over extremely painful or crippled areas (in addition to this formula), formula called bone, flesh and cartilage [BF & C](#).

Also drink 1 or 2 quarts of kidney bean pod tea daily. In addition for relief, an external application of formula Antiseptic Tincture [X-Ceptic](#) is recommended. Even though one uses these aids yet continues on with improper diet, one may get some help but not as much as going all the way. Remember the teachings for years have been--"No healing in this condition." We are giving people hope if they will follow through with these formulas and the mucusless diet

#### Ingredients:

 hydrangea root

 Brigham herb

 yucca

 chaparral

 black walnut

 lobelia

 burdock root

 sarsaparilla

 wild lettuce

 valerian

- [CSK](#)
- [CSR](#)
- [Deep Heating Balm](#)
- [DRI](#)
- [Ephedratean](#)
- [False Unicorn & Lobelia](#)
- [Fen LB](#)
- [Garlic, Rosehips, and Parsley](#)
- [Hawthorn Berry Syrup](#)
- [Herbal Composition](#)
- [Herbal Cough](#)
- [Herbal Eyebright](#)
- [Herbal Tooth Powder](#)
- [Immucalm](#)
- [INF Combo](#)
- [Juni-Pars](#)
- [Jurassic Green](#)
- [Kelp-T-Comb](#)
- [Kid-E-Mune](#)
- [Kid-E-Soothe](#)
- [Master GL](#)
- [Mem](#)
- [MindTrac™](#)
- [Mullein & Lobelia](#)
- [Nose Ointment](#)
- [Nu Fem](#)

**wormwood**

**cayenne**

**black cohosh**

**Useful in Treating:**

[Arthritis](#)

[Rheumatism](#)

[Oil of Garlic](#)

[Panc Tea](#)

[Pre-Natal Tea](#)

[PreTrac™](#)

[Prospallate](#)

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[VF Syrup](#)

[Vitalerbs](#)

[Wild Lettuce and Valerian](#)

[X-Ceptic](#)

[Yellow Dock Combination](#)

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## AT-GS

Anti-Gas Formula

### Usages:

This formula was designed to help promote the relief of flatulence.

### Dosages:

To make tea, take one teaspoon in a cup of boiling water.

### Ingredients:

- fennel
- wild yam
- catnip
- ginger
- peppermint
- spearmint
- papaya
- lobelia

### Testimonials:

One particular woman was worried that she was dying of a heart attack. Dr. Christopher checked her eyes and told her that there wasn't anything wrong with her heart; in fact, it was in excellent condition. He wished his own heart were as good as hers! He assured her that she was not having a heart attack.

She was somewhat belligerent: "Well, don't tell me, I should know, it's me that's having them. I can be washing dishes and all of a sudden, my heart will stop beating and I fall on the floor and pass out. Or I'll be walking down the street, shopping, and pass out. They rush me to the hospital, and I always come to before anything is done, like operations. "Dr. Christopher told her she hadn't any heart problems at all, but that she did have a condition on her descending colon, where she had a bowel pocket, a gas pocket, and whenever she got gas in that, it pushed up against her heart valves and cut the heart off. That is why the heart would stop, because of the gas pressure. She said that she was having a heart pain right then and that the heart was constantly troubling her. She was afraid she would pass out.

He told her to hang on, and he called on the intercom to the laboratory, where they always had hot water ready. He had them mix up a teaspoon of wild yam and a cup of hot water. Within a very short time he strained out a cup of wild yam tea for the woman. She was just about ready to pass out. She took a couple of drinks of the tea and started to burp. Finally the gas was completely relieved.

After taking Dr. Christopher's advice and not gulping her food, but chewing more thoroughly, using wild yam as she needed, she got over this problem and never had another attack.

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

[Ephedratean](#)

[False Unicorn & Lobelia](#)

[Fen LB](#)

[Garlic, Rosehips, and Parsley](#)

[Hawthorn Berry Syrup](#)

[Herbal Composition](#)

[Herbal Cough](#)

[Herbal Eyebright](#)

[Herbal Tooth Powder](#)

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## B & B Tincture

### Nervous System Formula

#### Usages:

Ear infection, epilepsy, vertigo, to aid M.S., swimmers ear, stop hiccups and is great to use by drops in the ear with [Oil of Garlic](#) to clear up earaches, and has even restored hearing in some cases. Helps in cases of motor nerve injury, epilepsy, hearing loss, warts and tonsillitis.

#### Dosage:

1. Ear Infection: If your baby gets an ear infection, try home remedies before you take him or her to the doctor. Two drops of [garlic oil](#) followed by two drops of tincture of lobelia or Dr. Christopher's *B&B tincture*, plugged with a bit of cotton, often removes the pain and the congestion. You can rub the lymph glands below the ears with the same preparations, or with oil of [Mullein & Lobelia](#). Ear infections can be a result of a systemic infection, or they can point to dietary problems, either allergies or too many mucus-forming foods in the other. Examine your own condition carefully when your baby gets sick. If the infection remains acute, take the baby to a doctor you trust. Even if you do not purchase the prescription he offers, he will be able to tell you the exact condition of the ears. Some parents have purchased earscopes with which they can examine their own children's ears.
2. Epilepsy: Putting it into the ears, giving it internally, massaging the back of the neck.
3. Vertigo may result from disease of the middle ear (Menere's disease), from cardiac, gastric, or ocular disorders, from some peripheral irritations (as laryngeal vertigo) as a precursor on an epileptic fit, in hysteria, from toxemia (as Bright's disease), from an organic brain disease, and from unrecognized causes (essential vertigo).

Use *B & B Tincture* as follows: place four to six drops of oil of garlic in the ear with our eyedropper and follow this with four to six drops of *B & B* in ear, then plug ear with cotton. Turn the other ear up and do the same as with first ear-plug this one also and leave in all night, or night and day if desired, and flush ears on the seventh day. This is done by using a small ear syringe and flush with warm apple cider vinegar and distilled water (half and half) then continue on. Apply [garlic oil](#) and *B & B tincture* this same way week after week until desired effects are acquired.

Have the patient drink six to ten drops of the *B & B tincture* three or more times a day. (This could be done each hour in severe cases.) Massage *B & B tincture* on the cords back of the ears down the neck area and on the base of the skull (medulla area) several times a day.

4. Hearing Loss: We generally put four to six drops of [oil of garlic](#) into the ears first (with an eye dropper) then follow this with four to six drops of this special nerve tincture (more or less according to the size of the ear, that is, age of patient). It is best to do this procedure at night, plugging the ears with cotton and leaving it in all night, removing the cotton the next morning. Do this routine six days a week and on the seventh day of each week flush out the ears with a small ear syringe. The liquid used (to flush) is warm apple cider vinegar and distilled water--half and half. Use a small ear syringe (most drug stores carry them) but do not use heavy pressure, just an easy rinse. This program is done week after week until results are obtained. With some folks we have seen the hearing restored and hearing aids discarded in just a few months. In other cases, this program must be followed for far longer periods of time before results are noticed. No two people heal alike, so be patient and follow instructions, then see what happens!

[CSK](#)[CSR](#)[Deep Heating Balm](#)[DRI](#)[Ephedratean](#)[False Unicorn & Lobelia](#)[Fen LB](#)[Garlic, Rosehips, and Parsley](#)[Hawthorn Berry Syrup](#)[Herbal Composition](#)[Herbal Cough](#)[Herbal Eyebright](#)[Herbal Tooth Powder](#)[Immucalm](#)[INF Combo](#)[Juni-Pars](#)[Jurassic Green](#)[Kelp-T-Comb](#)[Kid-E-Mune](#)[Kid-E-Soothe](#)[Master GL](#)[Mem](#)[MindTrac™](#)[Mullein & Lobelia](#)[Nose Ointment](#)[Nu Fem](#)**Ingredients:** **black cohosh** **blue cohosh** **blue vervain** **skullcap** **lobelia.****Testimonials:**

1. M.S.: Don is in his middle 30's and has had M.S. for approximately 10 years. He has been through the whole gambit of the medical field to ease his condition but to no avail. Don was always a very active person and to be stricken in the prime of life to a crutch and many times a hospital bed was his heaviest burden. In February of this year I started working with him after some study in natural healing which included Dr. Christopher's book "The [Incurables](#)." Don and I decided on a modified program as outlined in the book. He received twice a week treatments of B & B tincture rubbed into the spine and nape of the neck, foot reflexology, total body deep massage and meridian stroking. Daily he gave himself a garlic and catnip enema, a dry brush massage, and at night *B & B tincture* and oil of garlic drops were placed in his ears. He also took daily [red clover](#) and [Relax-Eze](#) herb combination. His diet consisted of demineralized water, increased raw fruits and vegetables and many whole grains. He avoided products which were refined and had additives.

Don is now walking without a crutch. He can stand alone whereas before it was impossible. He feels the muscles in his thighs, buttocks and lower back developing and he has strength to do many things to his amazement. This is only the beginning after only four months of treatments. Many thanks are given for the pioneer work done in natural healing to make this success story in progress possible. [NL 1-12]

2. Tumor: I want to tell you this because maybe it will help someone else. I have a tumor on my leg (almost gone). I've been putting the *B & B* cotton balls on it, with plastic and tape. My leg got so itchy I couldn't stand it, also the skin all around the tumor got lumpy. Anyway, I thought maybe it was the plastic but when I didn't use it, the *B & B* would dry so fast I was changing it all day long. This is how I solved it. I cut a slice of potato, big around, cut a groove in the slice to make room for the cotton balls soaked in *B & B*. I put the plastic on the back of the potato slice (none of it touching the skin) put the tape (I have a very good silk tape) on the other side of the plastic to make a little pad, none touching the skin, then a cloth wound around, holding the whole thing in place.

This was a good sized tumor. I was amazed when I would take the bandage off it would just squirt all over. Well, I've had it getting bigger for 15 years, and now its almost gone. I'm so glad I didn't have to have my leg all cut up. Wow, wouldn't it have left a hole. I don't even think I'll have a scar. [NL 2-2]

3. Swimmers Ear: I have used...your combination of [Oil of Garlic](#) and *B & B Tincture* for swimmers ears all with equal success. [NL 2-2]

4. Epilepsy: A boy 12 years old, was brought to me as a patient several years ago, who was having severe epileptic seizures and these had started after the child had received head injuries in an automobile accident. I have had success treating epileptic patients up to this time, by using our basics; bowel cleaning and blood purification, as well as using antispasmodic herbs. However, none of the procedures I had used over the years so successfully, worked at all with this new 12 year old patient.

One night I sat alone in my office, after all my patients had left for the day, wondering why I was not getting the results with this boy as I had with others with the same condition. I realized that I needed "help" and so I prayed earnestly that something could be done for this child and after

some time of praying and meditating an "idea" for a "formula" of herbs for nerves came to my mind. I quickly wrote down: blue cohosh, black cohosh, blue vervain, scullcap, and lobelia in a 90 proof tincture. I immediately went to the lab we had out in back of the office, and made up the tincture. When this formula was given to the epileptic boy patient, there was an immediate reaction, and before long, he showed great improvement. [NL 2-11]

**Useful in Treating:**

[Deafness](#)

[Hiccoughs](#)

[Throat](#)

[Dizziness](#)

[Nerves](#)

[Tonsillitis](#)

[Earaches](#)

[Stroke](#)

[Tumors](#)

[Epilepsy](#)

[Oil of Garlic](#)

[Panc Tea](#)

[Pre-Natal Tea](#)

[PreTrac™](#)

[Prospallate](#)

[Red Clover Combination](#)

[Relax-Eze](#)

[Resp-Free](#)

[Sen Sei Balm](#)

[Sha Tea](#)

[Smoke Out](#)

[ULC](#)

[V.B.](#)

[VF Syrup](#)

[Vitalerbs](#)

[Wild Lettuce and Valerian](#)

[X-Ceptic](#)

[Yellow Dock Combination](#)

## Formulas

[Adrenetone](#)[Ant-Plg](#)[Antsp](#)[AR-1](#)[AT-GS](#)[B & B Tincture](#) [Barberry LG](#)[Bee Power](#)[BF & C](#)[BF & C Ointment](#)[Black Ointment](#)[Black Walnut Tincture](#)[BPE](#)[Bugleweed Combination](#)[Calc Tea](#)[Catnip & Fennel](#)[Cayenne](#)[CC](#)[Changease](#)[Chickweed Ointment](#)[CMM](#)[Comfrey-Mullein-Garlic](#)

## Barberry LG

### Liver-Gall Bladder Formula

#### Usages:

If the liver is particularly congested, we suggest the liver-gall bladder formula which contains the herbs barberry, wild yam, cramp bark, fennel seed, ginger, catnip and peppermint. This combination will aid in purifying the blood stream. For if the bile does not flow freely into the intestinal tract, it goes directly into the blood stream and circulates throughout the system causing a toxic condition known as cholemia, producing indigestion, sluggishness, fever, fatigue, constipation, upset stomach, chills, and vomiting, among some of the symptoms. In addition to the above formula, the castor oil fomentation may be used over the liver. This will open the constipated capillaries within the liver.

Excesses in eating and drinking should be avoided. If gallstones are present and the ducts are blocked, bile may be forced back into the liver and enter into the bloodstream. The skin may take on a jaundiced color. Ultimately, the bile is excreted through the urinary tract. The urine is often dark red or amber color and is very concentrated. Clay color stools are another symptom. During a time of a gall bladder inflammation, heavy eating should not be done. Fruit and vegetable juices are recommended along with the liver-gallbladder herbal formula. The bowels should be kept open and unconstipated through the use of the lower bowel formula [Fen LB](#). Olive oil (2 tablespoons, 3 times a day) should be taken to lubricate the bile ducts. Our hydrangea root formula, made with 1 quart of apple juice and one ounce of hydrangea root soaked together for three days in a cool place and taken in two ounce doses during the three day cleanse, is capable of dissolving stones anywhere in the body. Light, more frequent meals are preferred over large heavy ones.

#### Dosages:

Suggested dose: 1/3 Cup or one or two capsules or tablets, 15 to 20 minutes before a meal.

#### Ingredients:

 **barberry** **wild yam** **cramp bark** **fennel seed** **ginger** **catnip** **peppermint**

[CSK](#)[CSR](#)[Deep Heating Balm](#)[DRI](#)[Ephedratean](#)[False Unicorn & Lobelia](#)[Fen LB](#)[Garlic, Rosehips, and Parsley](#)[Hawthorn Berry Syrup](#)[Herbal Composition](#)[Herbal Cough](#)[Herbal Eyebright](#)[Herbal Tooth Powder](#)[Immucalm](#)[INF Combo](#)[Juni-Pars](#)[Jurassic Green](#)[Kelp-T-Comb](#)[Kid-E-Mune](#)[Kid-E-Soothe](#)[Master GL](#)[Mem](#)[MindTrac™](#)[Mullein & Lobelia](#)[Nose Ointment](#)[Nu Fem](#)**Testimonials:**

1. Liver Transplant Avoided: A 45 year old man scheduled for a liver transplant took 6 capsules of the *Barberry LG* combination three times a day and drank 1/2 gallon of carrot juice each day while waiting for the operation. Four weeks later after a medical exam, he was removed from the waiting list because of his marked improvement (others needed the transplant more than he did.) -R.C., Provo, UT [D. Christopher]

2. Polymyalgia: H.M. of Martha's Vineyard developed Polymyalgia (pain and stiffness of the muscles) later in life, after her doctor put her on drugs. Doctor's put her on prednisone to ease pain. However, after two years on this drug, she couldn't walk. She started taking herbs, trying to find relief. She took Dr. Christopher's *Barberry LG* formula, with Marshmallow and Astragalus for two and half weeks and started feeling better. She started walking again, and her sedimentary rate (lab work) dropped from 74 to 11. Two years later she only has problems with her knees. [D. Christopher]

**Useful in Treating:** [Gallstones](#) [Liver](#) [Vomiting](#)

[Oil of Garlic](#)

[Panc Tea](#)

[Pre-Natal Tea](#)

[PreTrac™](#)

[Prospallate](#)

[Red Clover Combination](#)

[Relax-Eze](#)

[Resp-Free](#)

[Sen Sei Balm](#)

[Sha Tea](#)

[Smoke Out](#)

[ULC](#)

[V.B.](#)

[VF Syrup](#)

[Vitalerbs](#)

[Wild Lettuce and Valerian](#)

[X-Ceptic](#)

[Yellow Dock Combination](#)

## Formulas

[Adrenetone](#)

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[Antsp](#)

[AR-1](#)

[AT-GS](#)

[B & B Tincture](#)

[Barberry LG](#)

[Bee Power](#)

[BF & C](#)

[BF & C Ointment](#)

[Black Ointment](#)

[Black Walnut Tincture](#)

[BPE](#)

[Bugleweed Combination](#)

[Calc Tea](#)

[Catnip & Fennel](#)

[Cayenne](#)

[CC](#)

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[Chickweed Ointment](#)

[CMM](#)

[Comfrey-Mullein-Garlic](#)

## Bee Power

Energy Combination

---

Rather than being an unnatural energy jolt that shocks the body, this formulation provides energy and vitality through wholesome nutrition.

### Ingredients:

**Siberian ginseng**

**bee pollen**

**licorice root**

**gotu kola**

**Brigham tea**

**yerba mate**

**ginger root**

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

[Ephedratean](#)

[False Unicorn & Lobelia](#)

[Fen LB](#)

[Garlic, Rosehips, and Parsley](#)

[Hawthorn Berry Syrup](#)

[Herbal Composition](#)

[Herbal Cough](#)

[Herbal Eyebright](#)

[Herbal Tooth Powder](#)

[Immucalm](#)

[INF Combo](#)

[Juni-Pars](#)

[Jurassic Green](#)

[Kelp-T-Comb](#)

[Kid-E-Mune](#)

[Kid-E-Soothe](#)

[Master GL](#)

[Mem](#)

[MindTrac™](#)

[Mullein & Lobelia](#)

[Nose Ointment](#)

[Nu Fem](#)

[Oil of Garlic](#)

[Panc Tea](#)

[Pre-Natal Tea](#)

[PreTrac™](#)

[Prospallate](#)

[Red Clover Combination](#)

[Relax-Eze](#)

[Resp-Free](#)

[Sen Sei Balm](#)

[Sha Tea](#)

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[X-Ceptic](#)

[Yellow Dock Combination](#)

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## Formulas

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**BF & C**

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[Bugleweed Combination](#)

[Calc Tea](#)

[Catnip & Fennel](#)

[Cayenne](#)

[CC](#)

[Changease](#)

[Chickweed Ointment](#)

[CMM](#)

[Comfrey-Mullein-Garlic](#)

## BF & C

Bone, Flesh, & Cartilage Formula

### Usage:

1. The bone, flesh, and cartilage combination, does wonders in restoring flesh and internal healing of bones and cartilage.

It can be taken in any of its forms, capsules, syrup, tea (internally and externally as a fomentation) and topically in a salve. All will do the job. The choice of how you take it depends on what the problem is.

2. This formula has done miraculous things with broken backs, legs, hips, etc. This formula has been used on curvature of the spine, polio, multiple sclerosis, and muscular dystrophy, stroke and arthritis of the bone. This formula is used externally as well as orally and has brought tremendously fast results.

This formula is a "power house" and has been used on (and restored to health) cancer of the spine, arthritis and polio, and has helped rebuild torn cartilage and sinews, fractures, etc. etc.

### Dosage:

1. BF&C Salve is an ointment using an olive oil and beeswax base.

2. BF&C Capsules or tea may also be taken daily: either two or three capsules three times daily or three cups of the tea.

3. BF&C Fomentation: Soak the combined teas in distilled water (at the rate of one ounce of combined herbs to a pint of distilled water), then soaking four to six hours, simmer thirty minutes, strain and then simmer the liquid down to 1/2 its volume and add 1/4 vegetable glycerine (if desired). Example: One gallon of tea simmered (not boiled) down to two quarts and add one pint of glycerine.

Soak flannel, cotton, or any white material other than synthetics--never use synthetics. Wrap the fomentation (soaked cloth) around the malfunctioning area and cover with plastic to keep it from drying out. Leave on all night six nights a week, week after week, until relief appears.

4. BF&C Fomentation: Another method. To make and use a fomentation: This is applying herbs to convey heat, moisture, and medicinal aid in order to relieve pain, to reduce inflammation, and to relax affected areas. Soak a Turkish towel or gauze or similar material in hot tea, lightly wring (just enough that the liquid will not run off the body), and place as hot as possible without causing blistering. Generally keep the fomentation moist and warm by placing plastics, oilcloth, etc., over fomentation. Dosage: Wet enough that the moisture will not run off the body, cover entire malfunction area, keep damp and change periodically.

5. Tea for Severe Cases: Drink 1/4 Cup of finished concentrated tea with 3/4 cup of distilled water three times in a day.

6. Stiff Neck: The following explanation of our "bone, flesh, and cartilage" formula is the most complete program for this condition of a stiff neck. The fomentation as it penetrates into the area will relax the muscles and feed the nerves so the bone structure (vertebra) will adjust itself. At the same time it will build up the blood circulation to carry off waste materials as well as feed the painful area with herbal food to put it into a healthy state of self healing. Soak flannel, cotton, or any white material other than synthetics--never use synthetics. Wrap the fomentation (soaked cloth) around the malfunctioning area and cover with plastic to keep it from drying out. Leave on all night six nights a week, week after week, until relief appears.

[CSK](#)[CSR](#)[Deep Heating Balm](#)[DRI](#)[Ephedratean](#)[False Unicorn & Lobelia](#)[Fen LB](#)[Garlic, Rosehips, and Parsley](#)[Hawthorn Berry Syrup](#)[Herbal Composition](#)[Herbal Cough](#)[Herbal Eyebright](#)[Herbal Tooth Powder](#)[Immucalm](#)[INF Combo](#)[Juni-Pars](#)[Jurassic Green](#)[Kelp-T-Comb](#)[Kid-E-Mune](#)[Kid-E-Soothe](#)[Master GL](#)[Mem](#)[MindTrac™](#)[Mullein & Lobelia](#)[Nose Ointment](#)[Nu Fem](#)**Ingredients:** oak bark comfrey leaves marshmallow root mullein herb walnut bark (or leaves) gravel root wormwood lobelia skullcap**Testimonials:**

1. Movement in Body after 15 Years Immobility: While sitting in his family restaurant that used to be located in the University Mall, across the hall came the most grotesquely-built wheelchair the Doctor had ever seen; it was all out of shape, having been built for someone deformed. And sitting in the chair was one of the most deformed people he had seen. The lady's arms and legs and back were twisted out of shape. She was being pushed by a young lady, who took her right up to Dr. Christopher.

"I am surprised to see you, Dr. Christopher," the lady in the chair said, "I just had to stop and thank you; you have done so much for me."

He began to wonder what the thank-you could be, because she was terribly malformed.

She said that she had been like a vegetable for nearly fifteen years, having to be fed and given liquid to drink. She couldn't even raise a hand or leg. She started on the [Incurables program](#), with some people helping her, and they put the *BF & C* fomentation down her crooked back and over other parts of her body--and she said, "Just look at me now."

She was moving her hand, and she raised it off the wheelchair a little bit. She did the same with the other hand. She could turn her head and move her shoulders. She could even move her back a little, although it had not moved for those fifteen years previous. Grateful for her new life, she felt that she would live to get up out of that wheelchair and walk. She was so grateful for the formula. And Dr. Christopher said it would be a wonderful day when this young lady could walk and be on her own after fifteen years. [EWH p.116]

2. Scabs All Over Body: Here is an unusual case where Dr. Christopher used the *BF & C formula* on a young girl. He was lecturing in the Safford region of Arizona, and a man, who sponsored the lectures there, wished something could be done for his daughter, a teenager. They hated to sit down at the table with her, because she always scratched and picked at her head, digging the scabs out. The man brought her to the baths where the lecture series was located so Dr. Christopher could take a look at her.

The girl had red hair, but there wasn't much of it. You could see her scalp, covered with sores which could not be cleared up. Dermatologists and other specialists could do nothing to stop the irritation on her head.

Dr. Christopher had her use the *BF & C* combination as a fomentation on her head. She soaked a cotton stocking cap--white, he emphasized, as herb combinations should never react with dye--with the concentrated *BF & C* formula tea, wearing this at night with a bathing cap over it.

[Oil of Garlic](#)[Panc Tea](#)[Pre-Natal Tea](#)[PreTrac™](#)[Prospallate](#)[Red Clover Combination](#)[Relax-Eze](#)[Resp-Free](#)[Sen Sei Balm](#)[Sha Tea](#)[Smoke Out](#)[ULC](#)[V.B.](#)[VF Syrup](#)[Vitalerbs](#)[Wild Lettuce and Valerian](#)[X-Ceptic](#)[Yellow Dock Combination](#)

This would be left on all night, six nights a week.

After three months, Dr. Christopher lectured in the area again, and the girl came to show him that the scabs were all gone. Within the first week the itching stopped, and the sores healed up. But the hair that had been so thin was thickening, and by the time Dr. Christopher came back, she had a good head of hair, beautiful red and full as it had been years before. [EWH p.12]

3. Grandmother's Face Hits Cement: "The main reason for writing to you was to tell you what happened to my husband's 92 year-old grandmother who was visiting with us late July. While she was sweeping our porch off, her shoe loosened and she was climbing a short flight of cement stairs. She tripped and fell flat on her face. Her daughter, my mother-in-law, heard her face hit the cement, very loud crack. Grandma was taken care of--for the first aid part--by my husband (who teaches first aid and advanced courses for the Red Cross) and she rested. Grandma did not want any ice of the face for fear of catching a cold, so only cool towels could be used. She rested and claimed she was feeling fine -- but oh, did she look terrible.

Almost immediately her face turned purple. She is a spry lady and she went on being her chipper self, even after the accident. The rest of the family had the hard time -- looking at grandma and feeling so bad for her. THEN -- tada -- my shipment from the Herb Shop came with the *BF&C* syrup, the very next day. I convinced my mother-in-law to try some syrup on grandma's face -- to (hopefully) take the bruise away. Grandma had scraped her face on her nose and forehead, and the syrup felt immediately good, so the rest of her face was covered with it. The syrup is so simple to use, too.

The day the shipment came, grandma went to the doctor to make sure nothing had broken or was damaged that was not obvious to us. He assured her that everything was fine, but that the purple would change to green, yellow -- the whole schmeer! Also, her face would be swollen upon rising in the morning, but not to worry. Four days after the beginning application (2-3 times a day) her face was almost completely back to normal color. There had been no swelling in the morning, as the doctor predicted either. By the fourth day she was with her daughter in Hawaii for a visit and she called to tell me that her mother was feeling fine -- and looking back to normal." [NL 2-5]

4. Physical Injuries: Any physical injury to the kidneys, bladder, etc., can be remedied by the use of the *BF&C* fomentation to the outside of the body. [NL 3-6]

5. Bone Spurs from Arthritis: I have tried your comfrey herb combination for dissolving calcified bone spurs (caused by arthritis when a teenager). My metatarsal arch in left foot was in such bad shape, it had become very painful to walk. The herb began bringing results immediately. [NL 3-7]

6. Broken Toe: I would like to relate the experience that I had with Dr. Christopher's *BF & C*. I was working in a kitchen when I dropped a #10 can on my large toe. The bone was crushed and even after proper care, it didn't set straight. Even though this was an old injury, I believed that Dr. Christopher's formula would help, even if it was only to relieve the discomfort. I made an ointment of the formula using olive oil as the base. I applied this ointment liberally on my toe, but after several weeks, to my surprise, my toe lost all structural support. I was naturally quite concerned, so I called Dr. Christopher, who wasn't very surprised, but told me to keep applying the ointment. I did and to my amazement, the cartilage formed, hardened into bone and now you can't even tell that it had been deformed. [NL 3-7]

7. Spinal Disorders and Backaches: Serious diseases such as degenerative arthritis account for less than 5% of back pain. We treated a lady once who had such a disease. One of her vertebrae was degenerated and the doctors had given up on healing her. The bone had holes eaten through. She refused to change her diet in any way but she agreed to try some herbs. A friend persuaded her to use the *BF & C* spinal formula as a nightly fomentation. in about six months the woman had grown a new vertebrae--that is, the old one was completely restored and regenerated. The ...formula is truly one of nature's herbal miracles and can be used wherever there is damage along the spine. Where tumors are present, one would want to add the elderberry tincture or some other form of high potassium food as an internal supplement.

Although we always want to work on the cause of backache, we can relieve the symptoms by using the cayenne heating balm. This consists of cayenne pepper, wintergreen oil, pure mint crystals, and other essential oils in a base of olive oil and untreated beeswax--apply sparingly to sore places. We have found that the [BF & C Ointment](#) works well together with the cayenne ointment. One takes the other into the skin more quickly and brings relief. [NL 3-12]

8. Severe Cases of Skin Diseases: For the most severe cases of skin diseases in the advanced

stage, use ... combination, internally and externally. Soak the combined herbs in distilled water (at the rate of one ounce of the combined herbs to the pint of distilled water) for four to six hours, simmer thirty minutes (do not boil), strain and then simmer the liquid down to one-half its volume. Example: One gallon of tea simmered down to two quarts of tea, which is called "concentrated" tea.

Soak flannel, cotton, or any white material other than synthetic--never use synthetic--wrap fomentation (soaked cloth) around the malfunction area and cover with plastic or wax paper, leave on all night six days a week and for as many weeks as needed until relief appears. Then continue a week or two for severe cases. Drink one fourth cup of finished concentrated tea with three-fourths cup of distilled water three times or more each day. [HHH p.68]

9. Scales/Psoriasis: After a lecture, a woman came to ask Dr. Christopher to help her daughter, about fourteen years old, who tried to commit suicide. This girl required constant adult supervision to prevent her from harming herself. She had a skin disease diagnosed as being worse than psoriasis or anything else the doctors had seen. Scales covered her arms from the elbows down, her legs from the knees down, and her neck and face, with secondary bleeding. Having suffered with this for so many years, the girl could not attend school any longer, and was isolated at home. She gained tremendous excess weight, because in order to pacify herself, she would eat all day. Her mother called her a fat blob! And because she was getting worse and worse, she tried to kill herself.

As usual when presented with a difficult problem, Dr. Christopher offered a quick prayer, asking for guidance. The formula for the *BF & C* came to him, step by step, and he told the woman to write it down. She wrote down all the herbs he mentioned, as well as the directions on how to put them together. ... After soaking one ounce of the combined herbs in a pint of distilled water for four to six hours, she would simmer the mixture for thirty minutes, strain, and then simmer the liquid down to half its original volume. This could be made in larger amounts, whatever was needed. The mother would dip cotton flannel in this tea, or white cotton or wool stockings to cover the legs, with other long stockings to cover the arms. After covering all affected parts with these soaked cloths, she should wrap the arms and legs with plastic bags. This should remain on the girl all night, every night, until the morning. After a period of fresh air each day, the process would be repeated.

The mother tried this, and her daughter was very cooperative. The program began on a Tuesday, and although this disease had been worsening for many years, by Friday of that week all the scales had dropped off, and the skin was pink, healing.

After six months, when Dr. Christopher lectured in that city again, he learned that this young lady was back in high school, participating as a cheerleader, being very active. She was on the three-day cleanse and mucusless diet, as well as the red clover combination tea, the blood cleansers. Staying with this, she went from a large fat blob into a slender, well-shaped girl, overcoming her weight problem as well as the skin infection. [EWH p.10]

10. Finger Regeneration: Once, when at a convention in the Northwest, a beautiful young lady came up to Dr. Christopher and his son, David. "How do you like my fingers?", she asked. They were well taken care of and the nails were done nicely. Dr. Christopher said, "Fine," and she asked, "Can you tell which finger has been cut off?" They couldn't tell. She showed him the finger that had been cut off; she used the *BF & C*, and the knuckle grew back, and the bone and flesh grew back in. The nail, which had been completely gone, grew back on, as pretty as the others. This was a truly unusual case of healing. [EWH p.11]

11. Cervical Arthritis: From a question to Dr. Christopher in his Newsletter. What could be done in a case where cervical arthritis is present, where X-rays show a narrowing of the interspace between C-5, C-6 and C-7, and where anterior and posterior spurs, heading for spondylosis, are present? Is there any way whereby the calcium deposits can be removed, extracted or eliminated to free the body from its painful burden?

We have seen numerous cases of the condition described in this question in most areas of the spine all the way from the Atlas Axis down to the tail base. After beginning the therapy with cleaning and mucusless dieting, they followed this procedure: make a fomentation of a tea combination which we call ... "comfrey combination"... Soak the combined teas in distilled water at a rate of one pint of distilled water to one ounce of combined herbs. Continue the soaking from four to six hours and then simmer the preparation for thirty minutes followed by a straining. After

the straining, simmer the tea down to one half of its volume. If desired, a volume of natural vegetable glycerine equivalent to one fourth the volume of the tea may then be added. For example, if there is a gallon of the tea after the straining, simmer it down to two quarts and add one pint of the vegetable glycerine. Soak some flannel, cotton or other material except for synthetics which should never be used and wrap the soaked cloth fomentations around the malfunctioning area and then cover with plastic, oil paper or oiled silk. In turn cover the area with toweling and leave on all night. Repeat this for six nights a week until relief is accomplished and the calcified deposits disappear. Also, drink 1/4 cup of the finished tea, with or without the glycerine, but diluted with 3/4 cup of distilled water. This should be done three times a day for six days of each week until relief occurs. [NL 1-3]

12. Hemorrhaging in the Brain Stem: Question to Dr. Christopher in his Newsletter. If a person were in a coma caused by some hemorrhaging in the brain stem area, how might this be approached herbally?

[See dosage # 3 above]...Wrap the fomentation (soaked cloth) around the head area (like a nightcap), tied under chin to hold in place, also down the spine to the shoulders. The fomentation down the spine should be about four or five inches wide. Put a shower cap over the head and a piece of wax paper, oiled silk or plastic down the spine area. Keep this fomentation on the area approximately twelve hours each day, either during sleeping hours or during the day--whichever is more convenient. Drink 1/4 cup of finished concentrated tea with three fourths cup of distilled water three or more times a day. Do this entire program six days a week, week after week until healed.

This routine has been used with cases of tumors on the pineal and/or pituitary glands, and these tumors have decreased--in one case over 65 percent in six weeks, then over another month was completely gone. This herbal formula will aid in rebuilding the hemorrhaging area with surprising results. [NL 1-6]

13. Hernias: A hernia commonly refers to the escape of some part of the intestine from the abdominal cavity, through an opening in the abdominal wall. The intestine is pushed out from the inner body, often to a point just below the surface of the skin. When it reaches this point, we have a visible hernia. At first it is about the size and shape of a marble, and grows larger as more and more of the intestine escapes.

A number of patients with hernias and ruptures have used the *BF & C* formula with great success. This formula, ... is applied over the afflicted area as a fomentation a day and night, using a truss or pad to hold in place. Then soak some flannel in this tea and apply. It can also be obtained in a concentrated liquid form or as an ointment. Use whichever type is best in your case. It is also helpful to take the formula internally as a tea, or in capsule or tablet form--two or three of these three or more times per day. [NL 1-8]

14. Wrinkles: I must say the comfrey ointment is fabulous. You probably already know that there isn't any equal to it for getting rid of wrinkles. I had deep wrinkles around my eyes (crow's feet) when I attended your seminar, I started using the comfrey ointment day and night. In a few short weeks, they were gone. Glory to God! A few months ago a friend of mine asked me to try some "wrinkle oil" she sells, I finally agreed to try it. I used it only under my left eye and in about 2 weeks the wrinkles started coming back. I then asked her which eye looked the best, she naturally picked the right eye (it was obvious). Now she uses the comfrey ointment instead of the oil she sells... [NL 4-6]

15. Open and Draining Abdomen: "An open and draining abdomen, caused by extensive massive surgery, totally healed within 7 days time by using comfrey poultices and by taking *BF & C*. A special thanks to you. The abdomen was draining for three years!" [NL 3-7]

### **Useful in Treating:**

[Abrasions](#)

[Dizziness](#)

[Poison Ivy and Poison Oak](#)

[Arthritis](#)

[Eczema](#)

[Skin Problems](#)

[Athlete's Foot](#)

[Hernia](#)

[Sprains](#)

[Broken Bones](#)

[Inflammation](#)

[Stiff Neck](#)

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## BF & C Ointment

Bone, Flesh, and Cartilage Ointment Formula

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Convenient form of formula [BF & C](#). It is made into an ointment using an olive oil and beeswax base. Apply [Nose Ointment](#) after this for better penetration and quicker healing.

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

[Ephedratean](#)

[False Unicorn & Lobelia](#)

[Fen LB](#)

[Garlic, Rosehips, and Parsley](#)

[Hawthorn Berry Syrup](#)

[Herbal Composition](#)

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[Immucalm](#)

[INF Combo](#)

[Juni-Pars](#)

[Jurassic Green](#)

[Kelp-T-Comb](#)

[Kid-E-Mune](#)

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[Nose Ointment](#)

[Nu Fem](#)

[Oil of Garlic](#)

[Panc Tea](#)

[Pre-Natal Tea](#)

[PreTrac™](#)

[Prospallate](#)

[Red Clover Combination](#)

[Relax-Eze](#)

[Resp-Free](#)

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**Black Ointment**

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## Black Ointment

Skin Formula

### Usages:

An excellent drawing ointment. For use externally on old ulcers, tumors, boils, warts, skin cancers, hemorrhoids, excellent for burns and as a healing agent.

### Dosages:

Use as desired.

### Ingredients:

chaparral

comfrey

red clover blossoms

pine tar

mullein

beeswax

plantain

olive oil

mutton tallow

chickweed

poke root

### Testimonials:

1. Skin Cancer: "We have used your *Black Ointment* with great results--I had skin cancer on my forehead--in six weeks it healed up Beautifully." [NL 2-12]
2. Skin Cancer: A few years ago, about 2, I wrote to tell you that I used the black ointment for skin cancer and got perfect results. The Hershey Medical Center doctor wanted to refer me to a Skin Cancer Specialist, but I told him I was going to try the home remedy that an Herbalist Doctor recommended. Needless to say, he was persistent, and wanted me to go to the Specialist,

but I was also persistent and told him it was my body and I would try the remedy you recommended, first. Praise the Lord-in 6 weeks it was all cleared up and that was over 2 years ago. My husband is presently using the *Black Ointment* on his nose for Skin Cancer. [NL 4-7]

3. Skin Cancer: I just wanted you to know that the *Black Ointment* I bought from your Herb Shop has really helped my husbands skin cancer. He has not had to visit a Doctor or have any spots cut out since using it. [NL 4-10]

**Useful in Treating:**

[Boils](#)

[Hemorrhoids](#)

[Burns & Sunburns](#)

[Tumors](#)

[Cancer](#)

[Warts & Moles](#)

[CSK](#)

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## Black Walnut Tincture

### Fungus Formula

#### Usages:

1. This is one of the best known remedies for fungus. Use externally and apply frequently.
2. Black walnut tincture can be applied on itching skin. This works especially well if the irritation is due to a fungus or similar invasion.
3. Lice.
4. Build up potassium as for cysts and tumors.

#### Dosages:

1. Lice: For quick relief, bathe the head or body parts with straight apple cider vinegar, oil of garlic, or black walnut tincture or tea.
2. Fungus Such as Impetigo, Contagiosa: This is a contagious disease, caused by staphylococci masked by flat vesicles that become pustular and then crusted. The best aid that can be given to clear up a fungus condition is the use of black walnut tincture as a fomentation externally and 6-10 drops three or more times a day taken orally in liquid (fruit juices or herbal teas).

#### Ingredients:

Black walnut and alcohol.

#### Testimonials:

1. Fungus: Then the fungus that my husband gets when he goes into or near the woods, the [Red Clover Combination](#) plus *Black Walnut Tincture* 6-10 drops taken orally and that has helped him a great deal. We live in the woods so it's difficult not to pick up a condition of the fungus. However, it's not as bad as it was and again we say "Thank-You." [NL 4-11]
2. Dr. Christopher Cures Jungle Rot During WW II: It's one of the greatest herbs, according to Dr. Christopher. He told the story of the time he enlisted in the army in World War II:
 

"I was stationed at Fort Lewis, Washington. I wanted to help people, so I went into the Army as a conscientious objector because I didn't believe in taking life. I said that I would do anything I could, even go out to the front lines with a stretcher, but that I would not kill people. Because of my status as conscientious objector I couldn't get any rank; I couldn't go any higher than a buck private."

"They had given me a dispensary, one of eight in North Fork, Fort Lewis, Washington. Officers and enlisted men alike came to be treated for their ailments. I was in charge of several people, including a special helper and a clean-up-man."

"One Monday morning, during the time we had our regular meetings, Major Shumate, who was over all eight of the dispensaries, brought in a soldier suffering from a case of impetigo contagiosa. Major Shumate discussed the case: 'I've been a consulting dermatologist, and have my own clinic in New York, as you know, which is being run for me while I am here, so I am quite experienced in skin disorders, but I have never seen a case like this.' The soldier had three-quarters of an inch of scab over the entire hair area; the hair had been clipped as close to the scalp as possible and the scab covered the entire hair area. This man had been hospitalized at one of the largest hospitals in the Northwest, in fact, in the largest Army hospital in the West. He had

[CSK](#)[CSR](#)[Deep Heating Balm](#)[DRI](#)[Ephedratean](#)[False Unicorn & Lobelia](#)[Fen LB](#)[Garlic, Rosehips, and Parsley](#)[Hawthorn Berry Syrup](#)[Herbal Composition](#)[Herbal Cough](#)[Herbal Eyebright](#)[Herbal Tooth Powder](#)[Immucalm](#)[INF Combo](#)[Juni-Pars](#)[Jurassic Green](#)[Kelp-T-Comb](#)[Kid-E-Mune](#)[Kid-E-Soothe](#)[Master GL](#)[Mem](#)[MindTrac™](#)[Mullein & Lobelia](#)[Nose Ointment](#)[Nu Fem](#)

been hospitalized nine times in all, treated with ammoniated lead and mercury and such things. The disease would subside somewhat in thirty to thirty-six days, but never completely clear. They would release him to go back into service, but in a few days, the impetigo would pop back out again. He had gone through this procedure nine times."

"The Army wanted to release him on a medical discharge. The patient said to Major Shumate, 'I don't want a medical discharge. I came into the Army a clean man and you left me with this dirty stuff to take back to my family. I don't want to go.'"

"Shumate said, 'I've brought all sorts of specialists in from all over the United States and nobody can help you. There's nothing that can be done. So you've got to take a discharge.'

" 'He can be healed,' I said."

"Shumate whirled around to me and said, 'some of your blankety-blank herbs!'"

"'Yes, with some of my herbs,' I said calmly. I had been through this so often, people ridiculing me, that I didn't let it upset me."

"'I don't care if he puts horse manure on my head,' said the soldier. 'If it'll heal me, do it!'"

"One of the other fellows who headed one of the clinics said sarcastically, 'When's the unveiling going to be?'"

" 'Seven days from today,' I snapped back. Now this man had been hospitalized thirty to thirty-six days at a time and nothing had worked. Here I said that in seven days the man could be cured. When they left, the dispensary heads asked if they could come back the following Monday to have the meeting in my dispensary, instead of meeting at one of the others. Major Shumate agreed."

"The patient had to sign two papers before he was turned over to me: one stated he was no longer a member of the United States Armed Forces, and the other said he was no longer a United States citizen, but a foreigner, an isolated individual there at Fort Lewis under treatment. The Army could have been sued, otherwise, if anything happened to him.

"I called Salt Lake, where I knew a man who had a Black Walnut tree in his yard; he was a professor at the University of Utah. I asked him if he had some husks from the outside of the nuts. He said, 'Oh, yes, we've harvested this year, but the husks are under two feet of snow.'"

"'Will you go out and dig up that pile of husks and send me a big sack of them up to Fort Lewis? Can you get them on the plane tonight so I can have them the following morning?' He did, and I had those husks the following morning in Fort Lewis."

"I made up a gallon of tincture of Black Walnut using rubbing alcohol. In the Army, the dispensaries were not allowed to handle 90 proof or any other proof grain alcohol; if we had, had it we could have used the tincture internally as well as externally. So I had to use rubbing alcohol, but never before and never since have I used rubbing alcohol for a tincture! The gallon of tincture was ready in two days. The usual time to make a tincture is fourteen days. but I was under a lot of pressure there, so this one was ready in two days and I credit the Lord for giving the tincture its potency.

"We made up a night cap that covered the man's head like a football helmet. It was made of layer after layer of gauze till it was very thick. It was covered with adhesive tape and we taped it to hold it down. At the crosses where the tape didn't cover, there was room to insert a syringe filled with the tincture into the gauze to keep it wet. Because I lived off the base, I was only there so many hours in the day. When I left, I instructed the next shift to keep this man under observation twenty-four hours a day. The man was also kept under guard as he now had the status of a foreigner."

"He spent four days, Thursday through Sunday, with the fomentation on his head. Monday morning came, and for the first time all the dispensary heads were there on time, sitting on the edges of their chairs, waiting for the show."

"The two MP's brought the soldier in, sat him down, and Major Shumate said, 'Let's see the case.' So I loosened the adhesive tape where it was holding the headpiece down and took it off. Inside the helmet was three-quarters of an inch of horrible-looking scar tissue and scab. But his head was clean as a baby's. There was no sign of impetigo at all. There had been some secondary infection where the scalp had bled, and that was healing. The men had all gasped when I took the bandages off. Major Shumate used a few words I wouldn't repeat, but then he said, 'I have been a dermatologist for years and I have never seen a case as horrible as this--and never have I seen anything heal as rapidly as what you've used.' In front of the men who were either lieutenants,

majors, or captains, Major Shumate sanctioned me to treat all patients brought in to me with herbs. He officially made me an herbal doctor in the United States Army, the only one known in World War II. I brought back into the dispensary cases that I had, had to use the 'skull and crossbones' medicines on, with no success, and I treated them with herbs-and they were healed. We got quite a name for ourselves. Men from all over Fort Lewis, even generals, came over because I had the only formula, Black Walnut tincture, that would heal jungle rot. The only one! And so we were very busy herbalists." [NL 4-11]

**Useful in Treating:**

[Acne](#)

[Cysts](#)

[Athlete's Foot](#)

[Dandruff](#)

[Boils](#)

[Itch](#)

[Cuts](#)

[Oil of Garlic](#)

[Panc Tea](#)

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## BPE

Blood Circulation Formula

### Usages:

1. This formula is given to assist blood purifying teas to work more efficiently and to also aid the clearing up of allergies, etc. This group of herbs feeds cayenne (a stimulant) and ginger (stimulant) into the circulatory system where the cayenne works from the bloodstream to the heart and arteries, out into the veins. The other herbs in the formula assist these two herbs and work together to equalize the blood pressure (whether high or low) and to bring it to a good systolic over the diastolic reading. Blood flow is life itself
2. To speed (up the healing process after an injury) it is very good to see that the blood stream is flowing properly to carry food to the cells and to carry off the toxins and waste material. The blood circulation combination *BPE* will do this job effectively.

### Dosages:

Two capsules three times a day.

### Ingredients:

**Cayenne**

**Parsley**

**Ginger**

**Golden Seal**

**Siberian Ginseng**

**Garlic**

### Testimonials:

Dr. Christopher's B.P. combination regulated a severely fluctuating blood pressure (up one day, down the next, etc.) in a woman in her late seventies who had been confined to bed for many weeks. The B.P. combination was effective within a week! Within a month she was strengthened and no longer bedridden. Hallelujah! -MS, Michigan

### Useful in Treating:

[Allergies](#)

[Blood Pressure](#)

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

[Ephedratean](#)

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## Bugleweed Combination

Pollutant Extraction Formula

Heavy Mineral Formula.

### Usages:

This is the herbal combination for combating pollution, both external and internal. It helps draw out minerals, drugs, and other pollutants trapped in our systems.

### Dosages:

The dosage is take two #0 capsules daily in conjunction with 6 #0 chaparral capsules, this should be done three times a day. Also, every other day bathe in 1 to 3 pounds of Epsom salts in a tub of hot water. The bathing routine should continue for three weeks then rest a week, but continue taking the herbs.

### Ingredients:

bugleweed

yellow dock

lobelia

### Testimonials:

Irritability and Lethargy: Several years ago I was experiencing a number of minor health problems not the least of which were irritability and lethargy. I presumed they were caused by a build up of heavy metals leaking from my teeth that had been recently filled with amalgam. I turned to the book I consider my herb bible School of Natural Healing and found a combination for heavy metal poisoning. I began taking the *bugleweed combination* Dr. Christopher's *Heavy Metal Formula* in a tea form and with the very first dosage gained a surge of energy and emotional clarity. The joy of having sufficient energy stayed with me for several days. The herbs in this combination really stimulated a cleanse for my entire body. -G.W., Mesa, AZ

### Useful in Treating:

[Allergies](#)

[Asthma](#)

[Bronchitis](#)

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## Calc Tea

Calcium Formula

### Usages:

1. We need calcium for nerve sheath, vein and artery walls, bone, teeth, etc. This combination is all pure herbs. It is also used for cramps, "Charlie horses" and for all calcium needs in the body.
2. Children with crowded crooked teeth, and later the wisdom teeth are pulled because of not enough room, is caused by a narrow jaw from not having enough calcium in the body. The mother carrying the baby before birth should increase her natural calcium intake, now for two people, her and the baby, so it will be built with good wide jaw and tooth material.
3. Sugars, pastries, soft and alcoholic beverages, breads, candies, etc., leach the calcium out of the body, causing varicose veins, cramps, Charlie horses, loss of teeth, nervous upsets, etc.
4. Allergy to milk is quite common, symptoms including asthma, nasal congestion, skin rash and various chest infections plus other, less noticed, symptoms such as irritability and fatigue. Milk also causes allergies, by diminishing hydrochloric acid necessary to digesting protein, causing the undigested protein to enter the bloodstream and promote allergic reactions. The calcium in milk does not metabolize properly, either; Dr. Ellis recommends eating green vegetables, sesame butter and sardines to obtain calcium.
5. Dr. Christopher feels that Calcium is the way to help a teething child get a tooth to come through easily. Fevers work in several ways. One is to raise enough temperature to move the body-building materials from one part of the body to a malfunctioning area. A good example of this is when a baby is trying to cut teeth. The tooth bud appears, becomes swollen and red, painful and irritating; but there is not enough calcium in the mouth area to help get the tooth through. When there is no surplus calcium available, the fever goes higher and higher, and the infant often goes into convulsions. Time after time we have seen the fever drop quickly as organic calcium has been given to the child. The convulsion stops, and the child falls asleep (from fatigue). In a short time the tooth or teeth start "popping through." If the parent uses medication to lower or suppress the fever and nothing else is done, he is merely working on the effect, and not going into the cause. In other words, he is stopping the attempt of a building process without assisting it to accomplish what the body is trying so hard to do.
6. Osteoporosis: "I would advise women to start calcium and Vitamin D supplements at age 30, or perhaps 25," says Dr. Jennifer Jowsey of the Mayo Clinic. With the average American diet, there's apparently a long term gradual loss of bone mineral exceeding the rate of mineral uptake and bone formation. In later years, when hormonal changes increase the susceptibility to osteoporosis, the skeleton has already lost a good deal of its substance. By then, because of previous loss, the rate of bone formation must not only equal the rate of bone demineralization (the normal condition) but must exceed it if bone strength is to be restored. It is far more difficult, Dr. Jowsey warns, to induce new, compensatory bone formation that it is simply to slow down bone demineralization. Adequate calcium and Vitamin D in the diet will go far to accomplish the latter. But preliminary finds, the Mayo scientist says, indicate that lost bone will not be automatically restored by such dietary correction.
7. Cortisone Users: How many people who are taking cortisone--all those several million of them--are aware that the drug can cause brittle bones? And how many doctors are going to tell their patients that it is a good idea to get substantially more calcium and Vitamin D into their diets before they begin splintering their bones
8. The Difference Between Organic and Inorganic Calcium. It has been mentioned in this article the difference between organic and inorganic calcium, and other minerals. The inorganic minerals

[CSK](#)[CSR](#)[Deep Heating Balm](#)[DRI](#)[Ephedratean](#)[False Unicorn & Lobelia](#)[Fen LB](#)[Garlic, Rosehips, and Parsley](#)[Hawthorn Berry Syrup](#)[Herbal Composition](#)[Herbal Cough](#)[Herbal Eyebright](#)[Herbal Tooth Powder](#)[Immucalm](#)[INF Combo](#)[Juni-Pars](#)[Jurassic Green](#)[Kelp-T-Comb](#)[Kid-E-Mune](#)[Kid-E-Soothe](#)[Master GL](#)[Mem](#)[MindTrac™](#)[Mullein & Lobelia](#)[Nose Ointment](#)[Nu Fem](#)

are the ones that can be accepted into the body, but not assimilated. The inorganic minerals are accumulative, lie in deposits in weakened or injured parts of the body, to later give side effects or after effects.

Often times in purchasing calcium, potassium, phosphorus, iron, zinc, etc., we buy minerals of the inorganic type that has not gone through plant life and by osmosis made organic and given life so it can be assimilated. The type that can be assimilated is from herbs, fruits, vegetables, grains, nuts and seeds.

These are non-toxic, non-poisonous and non-habit forming, if chosen by one who knows assimilable herbs. We have been using a calcium formula for years to aid our patients and students in regaining a more perfect body structure.

9. A lack of calcium may be signified by headaches and/or leg cramps.

10. Colitis: In this disorder, the lower bowel is inflamed. There is often a connection between colitis and stress. We see diarrhea, pain, cramps, and even in the later stages, bleeding and dehydration. Calcium deficiency is common. Treatment include the mucusless diet, the lower bowel tonic [Fen LB](#), slippery elm and comfrey tea and plenty of distilled water. An herbal calcium and nervine supplement will be beneficial.

#### Dosages:

1. Broken Bone: After the doctor has set a bone, drink three or more cups of comfrey tea [BF&C] each day--the more the better. With each cup of tea take the calcium *Calc Tea* combination. For children old enough to take capsules, use two #00 capsules or more, three times in a day. As suggested, take these capsules with the comfrey tea. Mix the powder with blackstrap molasses, if it is hard to swallow the capsules.

2. Migraine Headaches: For a really severe migraine headache, apply cold packs to the neck and head while the patient soaks in a very hot tub or whirlpool. Be sure to drink lots of feverfew tea and water, take copious amounts of *Calc Tea* and try to enjoy the bath.

#### Ingredients:

*Calc-Tea* is made of horsetail grass, oat straw, comfrey leaves and lobelia. As explained in the book "Biological Transmutations" the silica in horse tail grass converts to calcium, and the other herbs work in close conjunction with this master calcium herb.

#### Testimonials:

1. Tooth Grows Back: My oldest daughter age 13 now, had a dental cavity at age 7 (the only dental cavity among our six children). We had the cavity drilled out and a filling put in by our local dentist. Two years later, the filling came out and a hole was left in her tooth. Nothing more was done about it except the herbal calcium formula *Calc Tea* that you recommend in your book, School of Natural Healing, made up of: comfrey, horsetail, oatstraw, and lobelia. This combination of herbs has been used very consistently by the entire family over the last two years. We have recently discovered that the hole where the filling was is now completely grown over and is absolutely unnoticeable even under close inspection. [NL 1-9]

2. Insomnia Cured: I have found great relief by taking Dr. Christopher's calcium formula and thyroid formula through the night which was recommended in his "How Important is Calcium" newsletter. I have recommended this treatment to others and to my mother and they all have found it helps their insomnia also. -A.R., Williston, ND [D. Christopher]

#### Useful in Treating:

[Arthritis](#)[Nerves](#)[Pregnancy](#)[Breast](#)[Nosebleeds](#)[Rheumatism](#)[Broken Bones](#)[Osteoporosis](#)[Teeth](#)[Headache](#)[Paralysis](#)[Varicose Veins](#)

[Calc Tea](#)

[Oil of Garlic](#)

[Panc Tea](#)

[Pre-Natal Tea](#)

[PreTrac™](#)

[Prospallate](#)

[Red Clover Combination](#)

[Relax-Eze](#)

[Resp-Free](#)

[Sen Sei Balm](#)

[Sha Tea](#)

[Smoke Out](#)

[ULC](#)

[V.B.](#)

[VF Syrup](#)

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[Wild Lettuce and Valerian](#)

[X-Ceptic](#)

[Yellow Dock Combination](#)

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## Formulas

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[Antsp](#)

[AR-1](#)

[AT-GS](#)

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[Barberry LG](#)

[Bee Power](#)

[BF & C](#)

[BF & C Ointment](#)

[Black Ointment](#)

[Black Walnut Tincture](#)

[BPE](#)

[Bugleweed Combination](#)

[Calc Tea](#)

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[CMM](#)

[Comfrey-Mullein-Garlic](#)

## Catnip & Fennel

Infant Health Formula

### Usages:

A blessing for infants. A fine combination for colic, biliousness, flatulence, spasms, etc.

The *catnip and fennel* tincture works wonders in a colicky baby, and it is so mild that you can feel confident in giving it as needed. If you are uncomfortable with the alcohol content, drop the dose into a spoonful of boiled water and let the alcohol evaporate; then give the dose by spoon. In ten minutes or so the cramping should cease and the baby cheer up.

*Catnip and fennel* extract massaged into the gums help take off the edge.

### Dosages:

Use a few drops, or as much as needed, when desired.

### Ingredients:

[Catnip herb](#)

[fennel seed](#)

[grain alcohol base](#)

### Testimonials

J.H. of San Antonio, Texas says Kid-e-Col is wonderful. "Best Colic remedy around." [D. Christopher]

### Useful in Treating:

[Colic](#)

[Flatulence](#)

[Spasms](#)

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

[Ephedratean](#)

[False Unicorn & Lobelia](#)

[Fen LB](#)

[Garlic, Rosehips, and Parsley](#)

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[MindTrac™](#)

[Mullein & Lobelia](#)

[Nose Ointment](#)

[Nu Fem](#)

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[V.B.](#)

[VF Syrup](#)

[Vitalerbs](#)

[Wild Lettuce and Valerian](#)

[X-Ceptic](#)

[Yellow Dock Combination](#)

## Formulas

[Adrenetone](#)[Ant-Plg](#)[Antsp](#)[AR-1](#)[AT-GS](#)[B & B Tincture](#)[Barberry LG](#)[Bee Power](#)[BF & C](#)[BF & C Ointment](#)[Black Ointment](#)[Black Walnut Tincture](#)[BPE](#)[Bugleweed Combination](#)[Calc Tea](#)[Catnip & Fennel](#)[Cayenne](#)[CC](#)[Changease](#)[Chickweed Ointment](#)[CMM](#)[Comfrey-Mullein-Garlic](#)

## Cayenne

### Cayenne Salve

Joints, Muscles, Neck, Headache Formula

---

Cayenne

Cayenne Salve (Red Sun Balm)

and Cayenne Tincture

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#### Usages:

1. Heart Attacks: In 35 years of practice, and working with the people and teaching, I have never on house calls lost one heart attack patient and the reason is, whenever I go in--if they are still breathing--I pour down them a cup of cayenne tea (a teaspoon of *cayenne* in a cup of hot water, and within minutes they are up and around). This is one of the fastest acting aids we could ever give for the heart, because it feeds that heart immediately. Most hearts are suffering from malnutrition because of processed food we are eating, but here it gets a good powerful dose of real food and it's something that has brought people in time after time. This is something that everyone should know how great it is, because a heart attack can come to your friends or loved ones any time. And even yourself. The warm tea is faster working than tablets, capsules, cold tea, because the warm tea opens up the cell structure--makes it expand and accept the *cayenne* that much faster, and it goes directly to the heart, through the artery system, and feeds it in powerful food.
2. Sterilize and Stop Bleeding: The old herbalists claimed that *cayenne* pepper (Capsicum or red pepper) should be poured directly into a fresh wound, to sterilize and stop the bleeding.
3. Menstrual Cramps: If a young woman has menstrual problems, she can suspect that her female organs might not be in good condition. Although it should be needless to say, we should avoid drugs in managing our menstrual cramps. In order to treat the symptoms, some people favor red raspberry tea, peppermint tea, camomile tea, or catnip tea. You can take a capsule of cayenne with any of these to help warm the internal organs. If the cramps are really severe, you can use cayenne ointment externally on the abdomen to act as a counter-irritant, but be sure to cover the application with gauze, as it can stain your underthings.
4. Eyes and Ulcers: See testimonials.
5. Tincture of Cayenne heals wounds, cuts through mucus, good for sore throats, and tonsillitis; milder solutions can be used in the nose, eyes, and ears for cleaning up microscopic "lounge lizards" in infections. Has been successfully used for resuscitation of newborn infants; a few drops administered orally. The best and safest stimulant known to man.
6. Cayenne Salve: Deep Heating Balm: It is excellent for stiff necks, sore muscles, headaches, pain, stiff joints, arthritis, etc.

#### Dosages:

1. Stop Bleeding: A wound, external or internal, will stop bleeding if the individual will drink a cup of water (preferably hot) with a teaspoon of *cayenne* pepper (red pepper) stirred into it. The bleeding will stop generally by the time a person can count up to ten after drinking the *cayenne* tea. The *cayenne* equalizes the blood pressure from the top of the head to the feet. This keeps the

[CSK](#)[CSR](#)[Deep Heating Balm](#)[DRI](#)[Ephedratean](#)[False Unicorn & Lobelia](#)[Fen LB](#)[Garlic, Rosehips, and Parsley](#)[Hawthorn Berry Syrup](#)[Herbal Composition](#)[Herbal Cough](#)[Herbal Eyebright](#)[Herbal Tooth Powder](#)[Immucalm](#)[INF Combo](#)[Juni-Pars](#)[Jurassic Green](#)[Kelp-T-Comb](#)[Kid-E-Mune](#)[Kid-E-Soothe](#)[Master GL](#)[Mem](#)[MindTrac™](#)[Mullein & Lobelia](#)[Nose Ointment](#)[Nu Fem](#)

pressure from the hemorrhage area so it will clot naturally, which it cannot do with heavy blood pressure pumping the blood rapidly at the hemorrhage area.

2. Nosebleeds: A teaspoon of *cayenne* in a cup of water (hot preferred) taken internally will stop most nosebleeds quickly. In an emergency such as this we use cayenne. As mentioned a teaspoon of cayenne pepper in a glass of water and drunk right down will stop a nosebleed in nearly every instance, by the time you can count to ten. This is not a miracle; it is the principle of the cell stimulant cayenne traveling through the entire blood stream and regulating the pressure so the pressure of the flow is the same in the feet as in the head or any other part of the body. This takes the heavy pressure off the hemorrhaging area and allowing a quick coagulation. [HHH p.110]

3. Salve: Deep Heating Balm: As needed topically.

#### Ingredients:

**Pure cayenne is the only ingredient in the powdered cayenne.**

**Salve Deep Heating Balm ingredients are Olive Oil, African Birdpepper (Cayenne), Oil of Wintergreen, pure distilled mint crystals and beeswax.**

**The tincture consists of cayenne and alcohol.**

#### Testimonials:

1. Eyes: *Cayenne* is also used for eyes, however extreme that might sound. Dr. Christopher recalled a student of his standing in front of a lecture and throwing a pinch of cayenne into one eye. Dr. Christopher was sure the student had lost his senses! But in a few moments the eye stopped watering, and it became clear, bright and healthy-looking. (This is why Dr. Christopher has Cayenne in his [Herbal Eyebright](#) formula).

2. Deep Cut: A person in our audience told how he had cut deeply with a sharp instrument the inside of his hand, fingers and palm. The blood spurted out in streams. He poured a large amount of *cayenne* pepper into the wound, and within seconds the blood flow slowed down to congealed dripping and the bleeding stopped entirely before many seconds had passed. With a goodly amount of *cayenne* covering the wound, he then wrapped it. He was so excited about the rapid results he could hardly wait for the regular herb meeting. But, as he said, the "punch line" was lost, because instead of a nasty ragged scar to show how severely he had been hurt, the area was healed and there was no scar.

3. Ulcers: A lady had been attending our herbal lecture series for some time. One day she told us about her husband's severe case of stomach ulcers. The recommendation from their doctor was to have part of his stomach removed, but he said he would rather suffer the pain than risk such an operation. He also refused his wife's suggestion to try *cayenne*, ridiculing her studies. When he would see me in town, he would bellow, "Hello, Doc! Killed anybody with cayenne, today?" He became so obnoxious, I avoided him when I could. Months went by and one day I saw him coming down the street toward me. I tried to avoid him but he came "head on." This time I was amazed because there were no cutting remarks or sarcasm. In fact, he was very apologetic and asked if he could talk to me for a minute, and then told me this story: He had come home from work one night, "sick enough to die," with stomach ulcers. His wife was not home. He was in such pain he wanted to commit suicide. He went to the medicine cabinet to find some kind of medicine poisonous and deadly enough to kill him. But he discovered his wife had thrown out all the old bottles of pharmaceutical medicine. All that was left in the medicine cabinet were some herbs and a large container of *cayenne* pepper. He was so angry that, upon seeing the *cayenne*, he figured it in a large dose would kill him by burning him up. He took a heaping tablespoon of *cayenne* in a glass of hot water, gulped it down and rushed into the bedroom. He fell upon the bed and covered his head with a pillow so the neighbors couldn't hear his "dying screams." The next thing he knew, his wife was shaking him awake the next morning. She told him he had slept all night (instead of being up every half-hour for anti-acid tablets). To his amazement he discovered that the pain was gone, for the first time in months. He continued using *cayenne* three times a day

[Oil of Garlic](#)[Panc Tea](#)[Pre-Natal Tea](#)[PreTrac™](#)[Prospallate](#)[Red Clover Combination](#)[Relax-Eze](#)[Resp-Free](#)[Sen Sei Balm](#)[Sha Tea](#)[Smoke Out](#)[ULC](#)[V.B.](#)[VF Syrup](#)[Vitalerbs](#)[Wild Lettuce and Valerian](#)[X-Ceptic](#)[Yellow Dock Combination](#)

faithfully.

4. Blood Pressure - Dr. Christopher's Own Story: I had hardening of the arteries, during my 20 and 30 year span, to a point that it was very severe. No insurance company at this time, would even take me for a \$1,000 policy. So you can tell how bad of a condition I was in. I was quite concerned about it, and started using *cayenne*. I worked up to a teaspoon three times a day, and I continued on from the time I was thirty-five and am still using it. It was amazing! By the time I was forty-five years of age, ten years after I had started using cayenne, a group wanted me to have a \$100,000 policy to insure them on a business deal we were working out. I went for the examination. Being this large a policy, the insurance company required two medical doctors, each to give two physicals at various times (being four times to have physicals with these two doctors). I took the examination and one medical doctor when he got through, said, "Well, this is astounding. I see your age is forty-five years, but you have the venous structure of a teenage boy." He said, "This is excellent," and he gave me a clean bill of health. I went to the other doctor and on his second examination he did the blood pressure test on my arm. He pumped his equipment up five different times and my arm was getting irritated by it, and I was getting a little perturbed, and I said, "What's the matter, doesn't your equipment work?" "Oh yes, it always has up till now, but I keep looking at your chart and it says you are 45 years of age and yet your systolic over your diastolic is absolutely perfect. I cannot comprehend it." I said, "That's correct. It is perfect." And he also gave me a clean bill of health. So I passed at 45 years of age for a \$100,000 policy with a good blood pressure showing, thanks to the *cayenne*.

I have been told by medical doctors, that because of my arthritis, hardening of arteries, stomach ulcers and some auto accidents that banged me up pretty badly, that I couldn't live past my 40th year. Yet, at 45 years I was pronounced in good condition. This, to me, was one of my biggest sales points on cayenne. If it could help me, it could help anybody. I have seen it used so many times over the years with such success, that I feel that it is one of our great herbs.

**See also:**

[Herbal Eyebright](#)

[Cayenne Information from the 100 Herb Syllabus](#)

**Useful in Treating:**

[Nosebleeds](#)

[Paralysis](#)

[Stroke](#)

[Ulcers](#)

[Varicose Veins](#)

## CC

Colitis Formula

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### Usages:

This formula is for the relief of colitis, and should be used in conjunction with the lower bowel formula [Fen LB](#) and the [Dr. John R. Christophers "Mucusless Diet"](#).

### Dosages:

To make tea, take one teaspoon in a cup of distilled water.

### Ingredients:

marshmallow

slippery elm

comfrey root

lobelia

ginger

wild yam

### See also:

[Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula

[Dr. John R. Christophers "Mucusless Diet"](#)

### Useful in Treating:

[Colitis \(Colon Trouble\)](#)

## Formulas

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[Antsp](#)

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[AT-GS](#)

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[Barberry LG](#)

[Bee Power](#)

[BF & C](#)

[BF & C Ointment](#)

[Black Ointment](#)

[Black Walnut Tincture](#)

[BPE](#)

[Bugleweed Combination](#)

[Calc Tea](#)

[Catnip & Fennel](#)

[Cayenne](#)

CC

[Changease](#)

[Chickweed Ointment](#)

[CMM](#)

[Comfrey-Mullein-Garlic](#)

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

[Ephedratean](#)

[False Unicorn & Lobelia](#)

[Fen LB](#)

[Garlic, Rosehips, and Parsley](#)

[Hawthorn Berry Syrup](#)

[Herbal Composition](#)

[Herbal Cough](#)

[Herbal Eyebright](#)

[Herbal Tooth Powder](#)

[Immucalm](#)

[INF Combo](#)

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[Jurassic Green](#)

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[Resp-Free](#)

[Sen Sei Balm](#)

[Sha Tea](#)

[Smoke Out](#)

[ULC](#)

[V.B.](#)

[VF Syrup](#)

[Vitalerbs](#)

[Wild Lettuce and Valerian](#)

[X-Ceptic](#)

[Yellow Dock Combination](#)

## Formulas

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[Changease](#)

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[CMM](#)

[Comfrey-Mullein-Garlic](#)

## Changease

Herbal Hormone Combination (hormone balancer)

### Usages:

1. Produce Milk: Dr. Christopher reminded us that it requires a certain balance of hormones--estrogens and progesterones--to produce milk. If a woman doesn't seem to be making enough milk, she should balance up her hormones by taking a few capsules of this formula.
2. Rebuilding Weak and Malfunctioning Areas: These are natural herbal foods that are needed by both men and women at all ages. Being "natural" herbs, the human body can accept, assimilate and use those materials that are needed to produce estrogens and other hormones naturally. This formula will assist in rebuilding the weak malfunctioning areas and help keep the organs healthy so they can supply the proper amounts of hormones and estrogens themselves. Herbs are a natural food, so they do not have "side effects" and "after effects" as are so evident in man-made and synthetic drugs.

Whenever malfunction shows in either woman or man, in the reproductive areas, it is good to use the two formulas together, i.e., [Nu Fem](#) and *Changease* and for women and Dr. Christopher's [Prospallate](#) and *Changease* for men.

3. Youth, Expecting Mothers and Those in Menopause: This combination, called *Changease*, helps youths going into puberty, expecting mothers whose hormones sometimes cause problems (one husband says that when his wife is pregnant her "hormones are raging"), women going through the change of life and men, too.

### Dosages:

Two capsules three times a day. This dosage may be doubled or tripled as needed.

### Ingredients:

**black cohosh**

**sarsaparilla**

**ginseng**

**licorice**

**false unicorn**

**holy thistle**

**squaw vine**

### Testimonials:

[CSK](#)[CSR](#)[Deep Heating Balm](#)[DRI](#)[Ephedratean](#)[False Unicorn & Lobelia](#)[Fen LB](#)[Garlic, Rosehips, and Parsley](#)[Hawthorn Berry Syrup](#)[Herbal Composition](#)[Herbal Cough](#)[Herbal Eyebright](#)[Herbal Tooth Powder](#)[Immucalm](#)[INF Combo](#)[Juni-Pars](#)[Jurassic Green](#)[Kelp-T-Comb](#)[Kid-E-Mune](#)[Kid-E-Soothe](#)[Master GL](#)[Mem](#)[MindTrac™](#)[Mullein & Lobelia](#)[Nose Ointment](#)[Nu Fem](#)

1. Rh Problem Solved Without Transfusion: Dr. Christopher worked during pregnancies to heal women with serious problems, and his results seem to us miraculous. One of his students from northern Utah had had three children with the Rh problem; in each case, they had to have a complete blood transfusion, having their blood completely drained out of them. This lady was told that because of her advanced Rh problem, she was not to have any more children. In addition to the Rh problem, she would require open heart surgery, and another pregnancy might kill not only her, but the child. She asked Dr. Christopher for help. He could promise her nothing, but tried to help her cleanse her blood. She took the [Red Clover Combination](#) tea in order to cleanse the blood, the female corrective formula [Nu Fem](#) and hormone-balancing formula, *Changease* and plenty of red raspberry leaf tea. After a lecture some time later, the lady approached Dr. Christopher with a new baby, born naturally with no Rh problem whatsoever. The lady had several children since that time, with no more trouble. This shows that the Rh factor stems from a problem of toxicity inside the mother, which can be overcome with herbs and diet. [EWH p.50]

2. Surgery on Uterus, Bladder and Breast Avoided: Dr. Christopher always checked his patients with iridology before advising them. A lady came to him, aged about 45, asking for a reading to help with her condition. He saw that she had a prolapsed transverse colon which had dropped to a point where it tipped her uterus and pinched her bladder, and she was having a very serious trouble there. She had problems with the ovaries, with infection in both of them, and she was troubled with vaginal drainage. In addition, she had one breast that was badly infected, which might necessitate having part of the breast removed if she had asked another doctor for treatment. After the reading, Dr. Christopher asked why she had come to him and what she wanted him to do. She said that she had just spent three days in a clinic, where they had verified everything he had read from her irises, but they wanted her to go to the hospital immediately and have the uterus removed and the bladder stitched up to the spinal cord area, and also have her breast removed. She was frightened of all this cutting, so she wanted to find help in some other way.

She promised that she would stay on the program that Dr. Christopher advised. She took the female corrective [Nu Fem](#) and hormone-balancing combinations *Changease*, used the vaginal bolus [V.B.](#) six nights a week, flushing out each morning with the slant board routine, massaging 15 to 20 minutes a day on the abdominal and pelvic area while the tea was inside. She was also to use the [Three Oil Massage](#) over the abdominal area, and go on the three-day cleanse and mucusless diet. In addition, she was to drink a gallon of steam-distilled water a day, and plenty of red raspberry leaf tea. She kept her bowels clean with the lower bowel formula [Fen LB](#), and kept the bloodstream cleaned up with the [Red Clover Combination](#) tea.

Dr. Christopher did not see her again for six months. When she came to see him this time, she bounced in, not dragging as she had before, a totally different woman, much happier and healthier. She had no operations, and yet her prolapsed transverse colon had gone back into place, and her uterus and bladder had gone back into position. She was feeling like a new woman, and she did indeed have a new system by following through with the entire herbal problem. [EWH p.111]

3. Doubting Husband and Wife Lives Changed by Dr. Christopher: A lady called Dr. Christopher in Salt Lake City from Provo, Utah, saying that her daughter had flown in from out of town, extremely ill. She was afraid that she was going to die, so she had come to her mother to take care of her. She asked if he would come and read the young woman's eyes. When he arrived, the young woman ridiculed him, and said she thought it was a bunch of crazy ideas that her mother had, and she wasn't going to let him look into her eyes. So Dr. Christopher bowed out and left.

Nearly a month went by, and the lady from Provo asked him to come again, that the daughter was so sick that she was frightened and would talk with him.

When he came, they told him that they had tried the best doctors they could find, but no one could help the girl (Dr. Christopher never said what the problem was, however). He gave her an eye reading and she would remark, "Who told you that!" Each thing he told her was the same thing that the doctors had diagnosed. When he finished, she said she was still dubious about the natural program, but that the reading was so accurate, he must have something good. She agreed to follow the natural program. She was too sick to even get up and walk.

So they started off gradually on the [Incurables program](#), using juices to rebuild the body. Before many weeks had passed, she came to Dr. Christopher's classes and became quite a faithful student. She even began to study iridology and became good at it. She watched her own eyes and

[Oil of Garlic](#)[Panc Tea](#)[Pre-Natal Tea](#)[PreTrac™](#)[Prospallate](#)[Red Clover Combination](#)[Relax-Eze](#)[Resp-Free](#)[Sen Sei Balm](#)[Sha Tea](#)[Smoke Out](#)[ULC](#)[V.B.](#)[VF Syrup](#)[Vitalerbs](#)[Wild Lettuce and Valerian](#)[X-Ceptic](#)[Yellow Dock Combination](#)

could see the healing taking place. She had been told, though she had been married for some time, that she could never have a baby because of an immature pelvic area and an underdeveloped uterus, as well as other problems in her reproductive system. By using the mucusless diet and herbs to rebuild her body--the female corrective [Nu Fem](#) and the hormone-balancing combinations *Changease*--and doing the exercises they advised, even these problems began to heal.

Eventually Dr. Christopher got a call from her husband on the West Coast; he was angry. It was a call of abuse, accusing the Doctor of keeping his wife up in Utah when she should be down with him. He was an electrical engineer, with a very important job, and felt he needed her with him. Dr. Christopher told him his wife had been too sick to even sit up alone, but with the aid of the program and the mother's assistance, she was improving. He told the husband she would be home with him as soon as possible.

The man told Dr. Christopher he was one of the worst quacks there could possibly be, let out some abusive language, and slammed down the receiver.

The wife did heal eventually, and traveled home on her own, without anyone assisting her. She was an excellent housewife, and she showed so much improvement that the husband was astonished, because he figured she didn't have too much longer to live.

Best of all, she had two beautiful children, with natural childbirth, and although the husband was an electrical engineer with a high-paying job, he was so delighted with the results that he became a chiropractor. He delivered their two children. [EWH p.116]

4. Decrease Nerves, Eases Menopause and No Hot Flashes: "Several years ago I started having female problems with excessive flow; and the doctor I was going to suggested that I would be in for a hysterectomy. I did some herbs or vitamins at first, and got it semi-under control. When I hit 40, I started into the change. The vitamin therapy just didn't take care of the whole problem. I started with this for several years and I went to work for an herb company where I was introduced to Dr. Christopher's formula, *Changease*. I began taking this formula and there were several things that happened that were very important to me and to my health. I had been very, very nervous and that's the first thing I noticed, that my nerves calmed down. I had a lot of back pain and that was eased. My disposition improved considerably because of my nerves being able to be calmed down. I had more strength and more energy, the periods were regulated and the flow decreased. I did not have hot flashes as many women complained of; I would sometimes feel a little bit warm, but not anything that was so terribly uncomfortable. After a couple of years of taking the *Changease* Formula, my periods have completely stopped and I have not had any really traumatic problems as many women do when they go through the change. I have been very, very grateful for this formula and for the help it has given to me; and I appreciate all that Dr. Christopher has done in this area." [D. Christopher]

#### Useful in Treating:

[Acne](#)[Cysts](#)[Infertility](#)[Menopause](#)[Menstruation](#)[Osteoporosis](#)[Pregnancy](#)[Prostate](#)[Tumors](#)[Uterus](#)[Vomiting](#)

## Formulas

[Adrenetone](#)[Ant-Plg](#)[Antsp](#)[AR-1](#)[AT-GS](#)[B & B Tincture](#)[Barberry LG](#)[Bee Power](#)[BF & C](#)[BF & C Ointment](#)[Black Ointment](#)[Black Walnut Tincture](#)[BPE](#)[Bugleweed Combination](#)[Calc Tea](#)[Catnip & Fennel](#)[Cayenne](#)[CC](#)[Changease](#)[Chickweed Ointment](#)[CMM](#)[Comfrey-Mullein-Garlic](#)

## Chickweed Ointment

Eczema / Skin Ointment

### Usages:

1. Excellent for eczema and/or other skin infections, sores, burning, itchy skin or genitals, swollen testes, acne, hives, also for ulceration of mouth and throat. This is a wonderful healing ointment.
2. Poison Oak and Poison Ivy or Stinging Nettle: Whenever you feel the sting from poison oak, poison ivy or stinging nettle, there will be, within eyesight, one or more of the following herbs growing; mullein, hounds tongue, plantain or lilac leaves. Bruise the leaves of any of these and apply over the irritated areas and it generally gives quick relief. Use *chickweed ointment*, plantain ointment, or mullein ointment to relieve the itching and aid in neutralizing the poisons.

### Dosages:

1. Hemorrhoids and Rectal Cancer: Bathe the area 2-3 times daily with the decoction, infusion, or diluted tincture (as warm as possible), then apply chickweed ointment.
2. Inflamed Surfaces, Skin Diseases, Skin Eruptions, Cancerous Sores, Itching Dermatitis, and Hives: Drink burdock seed tea (as a diaphoretic to open skin pores and glands from the inside), and wash the affected parts with a strong decoction 2 or more times daily (more often for local eruptions). Apply chickweed ointment, or a chickweed bath is also excellent.
3. Erysipelas: No matter how bad the pain and swelling, make a decoction from a handful or two of fresh chickweed. Bathe the surface every 1/2 hour and apply chickweed ointment (the pain and swelling will be gone in a few hours).
4. Swollen Testicles, Burning and Itching Genitals: Bathe the area with a strong decoction of chickweed and apply chickweed ointment.

### Ingredients:

This is made of chickweed herb and bees wax and oils.

### Testimonials:

1. Blood Poisoning from Poison Oak: As for the blood poisoning, the first time my poison oak went into blood poisoning, I took penicillin. The second time, my arm was swollen, big red swollen, full of fever and painful. I put chickweed ointment on a bandage, taped it on my arm over the affected area and went to bed. In the morning the swelling was gone, the pain was gone, the fever was gone, and the large red area was gone. This has really been exciting to me to find natural cures. [NL 1-8]
2. Dog Story: The next story is about my large black dog. I did something dumb -- put some chemical anti-itch stuff on him to keep him from itching. Well, the next morning my husband said for me to check Chip's mouth, it seemed swollen. (He had licked it all off during the night - yuk!) I knew what had happened and said, I would, turned over and went back to sleep.

When I did see him (about one hour later) I was glad my husband had said to check him out. His pour mouth and lips were swollen out to the size of his head -- about 3 times the normal size. Poor baby. I was concerned about getting the swelling down, but also that his throat might swell up and he would not be able to swallow, or breathe. His tongue seemed okay and so did his throat. I put

the [BF & C](#) syrup on the outside of his mouth -- he turned his face right after that so I could reach the other side. Then I gave him some yellow dock tablets to keep him from scratching. Also, he ate about 1½ jars of chickweed ointment. It seemed to soothe his mouth while the poison went out. We discovered he liked the [CMM](#) for poison oak -- he would lick it off my husband, given the chance. Strange dog. However, since we gave him the jars of chickweed, his appetite for it diminished to zero. The next morning Chips was fine -- in fact a few hours later the swelling was down dramatically. A happy ending to a dumb beginning. I'm learning. [NL 2-5]

**Useful in Treating:**

[Acne](#)

[Poison Ivy and Poison](#)

[Eczema](#)

[Oak](#)

[Hemorrhoids](#)

[Skin Problems](#)

[Itch](#)

[Throat](#)

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

[Ephedratean](#)

[False Unicorn & Lobelia](#)

[Fen LB](#)

[Garlic, Rosehips, and Parsley](#)

[Hawthorn Berry Syrup](#)

[Herbal Composition](#)

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[Immucalm](#)

[INF Combo](#)

[Juni-Pars](#)

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[Kid-E-Mune](#)

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[Master GL](#)

[Mem](#)

[MindTrac™](#)

[Mullein & Lobelia](#)

[Nose Ointment](#)

[Nu Fem](#)

[Oil of Garlic](#)

[Panc Tea](#)

[Pre-Natal Tea](#)

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[Prospallate](#)

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[Relax-Eze](#)

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[Sen Sei Balm](#)

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[Wild Lettuce and Valerian](#)

[X-Ceptic](#)

[Yellow Dock Combination](#)

## CMM

### Healing Ointment

---

#### Usages:

This is an antiseptic to be used on lesions, eczema (dry), poison ivy, soothes inflamed surfaces, abrasions, burns, hemorrhoids, for bruises and swellings. Good to have on hand at all times.

#### Dosages:

Hemorrhoids and Rectal Cancer: Bathe the area 2-3 times daily with the decoction, infusion, or diluted tincture (as warm as possible) of chickweed, then apply [Chickweed Ointment](#) or Dr. Christopher's Healing Ointment *CMM*.

#### Ingredients:

**comfrey**

**marshmallow**

**marigold**

**bee's wax**

**oils**

#### Testimonials:

1. I Have Had a Long History of Poison Oak. I would get it from my children's clothing, our dog, or sitting on a couch the dog managed to get on for a short time. Once it went internal and I was in bed six weeks because I could not take cortisone, being in first six weeks of pregnancy. Once I got it, it just got worse and worse until I took cortisone. The doses became larger and larger. Large doses of Vitamin C and Niacin help a few times, then no longer helped, as did other things I tried. Twice I got blood poisoning in my arm from poison oak. I was desperately searching for a cure when someone led me to herbs and Naturalife. It took me about three years to find the cure but I did. As soon as I realize I have poison oak, I start taking licorice root, which is a natural cortisone and use Dr. Christopher's *CMM* Ointment. This dries it up in just a few days. I usually take rose hips for good measure. As for the blood poisoning, the first time my poison oak went into blood poisoning, I took penicillin. The second time, my arm was swollen, big red swollen, full of fever and painful. I put [Chickweed Ointment](#) on a bandage, taped it on my arm over the affected area and went to bed. In the morning the swelling was gone, the pain was gone, the fever was gone, and the large red area was gone. This has really been exciting to me to find natural cures. [NL 1-8]

2. Dog Story: The next story is about my large black dog. I did something dumb -- put some chemical anti-itch stuff on him to keep him from itching. Well, the next morning my husband said for me to check Chip's mouth, it seemed swollen. (He had licked it all off during the night - yuk!) I knew what had happened and said, I would, turned over and went back to sleep.

## Formulas

[Adrenetone](#)

[Ant-Plg](#)

[Antsp](#)

[AR-1](#)

[AT-GS](#)

[B & B Tincture](#)

[Barberry LG](#)

[Bee Power](#)

[BF & C](#)

[BF & C Ointment](#)

[Black Ointment](#)

[Black Walnut Tincture](#)

[BPE](#)

[Bugleweed Combination](#)

[Calc Tea](#)

[Catnip & Fennel](#)

[Cayenne](#)

[CC](#)

[Changease](#)

[Chickweed Ointment](#)

**CMM**

[Comfrey-Mullein-Garlic](#)

[CSK](#)[CSR](#)[Deep Heating Balm](#)[DRI](#)[Ephedratean](#)[False Unicorn & Lobelia](#)[Fen LB](#)[Garlic, Rosehips, and Parsley](#)[Hawthorn Berry Syrup](#)[Herbal Composition](#)[Herbal Cough](#)[Herbal Eyebright](#)[Herbal Tooth Powder](#)[Immucalm](#)[INF Combo](#)[Juni-Pars](#)[Jurassic Green](#)[Kelp-T-Comb](#)[Kid-E-Mune](#)[Kid-E-Soothe](#)[Master GL](#)[Mem](#)[MindTrac™](#)[Mullein & Lobelia](#)[Nose Ointment](#)[Nu Fem](#)

When I did see him (about one hour later) I was glad my husband had said to check him out. His pour mouth and lips were swollen out to the size of his head -- about 3 times the normal size. Poor baby. I was concerned about getting the swelling down, but also that his throat might swell up and he would not be able to swallow, or breathe. His tongue seemed okay and so did his throat. I put the [BF & C Ointment](#) syrup on the outside of is mouth -- he turned his face right after that so I could reach the other side. Then I gave him some yellow dock tablets to keep him from scratching. Also, he ate about 1½ jars of [Chickweed Ointment](#). It seemed to soothe his mouth while the poison went out. We discovered he liked the *CMM* for poison oak -- he would lick it off my husband, given the chance. Strange dog. However, since we gave him the jars of chickweed, his appetite for it diminished to zero. The next morning Chips was fine -- in fact a few hours later the swelling was down dramatically. A happy ending to a dumb beginning. I'm learning. [NL 2-5]

#### **Useful in Treating:**

[Abrasions](#)[Cancer](#)[Blood Poisoning](#)[Eczema](#)[Bruises](#)[Hemorrhoids](#)[Burns & Sunburns](#)[Poison Ivy and Poison Oak](#)

[Oil of Garlic](#)

[Panc Tea](#)

[Pre-Natal Tea](#)

[PreTrac™](#)

[Prospallate](#)

[Red Clover Combination](#)

[Relax-Eze](#)

[Resp-Free](#)

[Sen Sei Balm](#)

[Sha Tea](#)

[Smoke Out](#)

[ULC](#)

[V.B.](#)

[VF Syrup](#)

[Vitalerbs](#)

[Wild Lettuce and Valerian](#)

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[Yellow Dock Combination](#)

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## Comfrey-Mullein-Garlic

Asthma Formula

---

### Usages:

An excellent asthma syrup. Can be used for sore throats and mucus. Excellent for fighting toxins.

### Dosages:

Recommended use--a teaspoon or more, as required, as often as needed.

### Ingredients:

**comfrey**

**mullein extracts**

**garlic syrup**

**vegetable glycerine**

### Testimonials:

Cough and Cold Helped: When my little girl Hanann came down with a cough and cold we struggled to get her to take some herbal remedies but she refused because of their taste. Then we tried the *Comfrey-Mullein-Garlic* syrup and hit a home run. The runny nose, lung congestion, and sore throat quickly diminished and she was up and going in no time. Her cousin of the same age who lives next door came down with the same thing and required 2 additional weeks to get over it (they don't use herbs). Hanann now has her own bottle of *Comfrey-Mullein-Garlic* syrup and she goes to the fridge to take it when she needs it. -L.M., Mapleton, UT [D. Christopher]

### Useful in Treating:

[Asthma](#)

[Throat](#)

## Formulas

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[Mullein & Lobelia](#)

[Nose Ointment](#)

[Nu Fem](#)

[Oil of Garlic](#)

[Panc Tea](#)

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[VF Syrup](#)

[Vitalerbs](#)

[Wild Lettuce and Valerian](#)

[X-Ceptic](#)

[Yellow Dock Combination](#)

## Formulas

[Adrenetone](#)

[Ant-Plg](#)

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[AR-1](#)

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## CSK

Anti-Obese Herbal Food Combination

### Usages:

Combine this anti-obese aid to the mucusless diet and you have a winner. This is not a crash program of fast loss of weight, but graduated and accurate loss, without robbing the body of needed nutrients that so many fad diets do. This acts as a blood purifier, aids kidneys in relieving excess fluids, feeds the body for relief from nervous tension generally caused by diets, appeases the appetite, feeds the thyroid and other malfunction glands and thus gains a healthier state for holding weight control.

### Dosages:

Take two or three capsules three times in a day with a cup of chickweed tea.

### Ingredients:

**Chickweed**

**Saffron**

**Burdock**

**Kelp**

**Licorice**

**Fennel**

**Parsley Root**

**Echinacea**

**Black Walnut**

**Papaya**

**Hawthorn Berries**

**Mandrake**

Licorice is used here because it decreases the desire to overeat while it gives energy to the body.

[CSK](#)[CSR](#)[Deep Heating Balm](#)[DRI](#)[Ephedratean](#)[False Unicorn & Lobelia](#)[Fen LB](#)[Garlic, Rosehips, and Parsley](#)[Hawthorn Berry Syrup](#)[Herbal Composition](#)[Herbal Cough](#)[Herbal Eyebright](#)[Herbal Tooth Powder](#)[Immucalm](#)[INF Combo](#)[Juni-Pars](#)[Jurassic Green](#)[Kelp-T-Comb](#)[Kid-E-Mune](#)[Kid-E-Soothe](#)[Master GL](#)[Mem](#)[MindTrac™](#)[Mullein & Lobelia](#)[Nose Ointment](#)[Nu Fem](#)

The licorice root actually feeds the adrenal glands. Every 5 hours or so, the adrenal glands need a "meal", that is, some sort of nourishment. Many people try to fill this need by filling their intestines with empty calories. Licorice root provides this lift for the adrenals and thereby can sustain an individual's stamina without them having to eat a large meal for energy.

**See Also:** [Dr. John R. Christophers "Mucusless Diet"](#)**Useful in Treating:** [Adrenals](#) [Glands](#) [Obesity](#)

[Oil of Garlic](#)

[Panc Tea](#)

[Pre-Natal Tea](#)

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## CSR

Cold Sore Relief Formula

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### Usages:

Cold Sore Relief was designed to attack the indicated virus where it lies dormant in the spine. Because the Herpes virus is seated in the spinal cord, the herb skullcap is being used in the cold sore relief remedy.

### Dosages:

As needed.

### Ingredients:

**Golden seal**

**garlic**

**skullcap**

### Useful in Treating:

[Canker Sores](#)

## Formulas

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[B & B Tincture](#)

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[Comfrey-Mullein-Garlic](#)

[CSK](#)

[!\[\]\(3860c1f430eb09c25a07dcc031374064\_img.jpg\) CSR](#)

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## Formulas

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## Deep Heating Balm

Pain Relief Formula

### Usages:

This penetrating salve is excellent for stiff necks, sore muscles, headaches, pain, stiff joints, arthritis, etc. Although we always want to work on the cause of the pain, we can relieve the symptoms by using the cayenne heating balm. We have found that the BF & C Ointment works well together with the cayenne ointment. One takes the other into the skin more quickly and brings relief. [NL 3-12]

### Dosage:

1. Apply sparingly to sore places.
2. First apply BF & C Ointment. Then apply the Deep Heating Balm. Work the two ointments into the skin; the deeper they seep into the skin, the greater the relief will be.

### Ingredients:

 Olive oil Cayenne Oil of wintergreen Pure distilled mint crystals Other herb oils Beeswax

### Testimonial:

My husband had a spot between his shoulder and neck that would repeatedly get a knot in it. It would take days for the pain to go away. One day I decided to try a combination of the [BF & C](#) massage oil and the Deep Heat Balm. My husband did not think that it would work, but I said "Let's just try it." I put some [BF & C](#) on the spot, rubbed it in, and then put some Deep Heat Balm on him, and rubbed that in. I repeated that order several times, and then worked the ointments in as best I could without hurting him. The next morning the pain was gone, and he was a believer. Whenever the pain returns, we do the same thing and the pain goes away immediately.

[CSK](#)

[CSR](#)

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## Formulas

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## DRI

Bed Wetting Formula  
(Incontinence)

---

### Usages:

For more severe cases of incontinence, enuresis (bedwetting, etc.), a formula we have used a long time is *DRI*. This formula is a specific for controlling or overcoming bedwetting and to strengthen the entire urethral canal, kidneys, bladder, etc.

### Dosages:

Recommended dosage two #0 capsules three times a day with a cup of parsley tea. Upon retiring at night fasten about a six- or eight-inch ball of yarn or string or cloth onto night clothes in the middle of the back. This is for the purpose of preventing the individual from lying on the back, as this is generally the time the valves release to void urine.

### Ingredients:

 parsley root

 juniper berries

 marshmallow root

 white pond lily

 gravel root

 uva ursi

 lobelia

 ginger root

 black cohosh root

### Testimonials:

1. Incontinence: We drink your [Red Clover Combination](#) tea all the time and have for months. I have been using your [Herbal Eyebright](#) on my eyes and also take the capsules every day. My eye doctor says I was beginning to form cataracts in my eyes, so I read about your eyebright and have been using it ever since. I am also using your herb capsules called *DRI* which helps me a lot. You can see how much you are helping people.

2. 5 Years of Incontinence Cured: E. B. of Jonesborough, CA had suffered with incontinence for

over 5 years and had tried everything. She used three capsules of Dr. Christopher's *DRI* formula three times a day and cleared up the problem in 1 1/2 weeks. [D. Christopher]

**Useful in Treating:**

[Bed Wetting](#)

[Incontinence](#)

[Kidney](#)

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

[Ephedratean](#)

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[Fen LB](#)

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## Formulas

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[Antsp](#)

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## Ephedratean

### Sinus Congestion Formula

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This very powerful formula consists of Brigham tea, horseradish, and cayenne. For immediate relief of sinus pressure due to cold or allergies, use 20 drops (1/4 teaspoon) in 1/4 cup of hot water. May be taken every 1/2 hour.

[CSK](#)

[CSR](#)

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[PreTrac™](#)

[Prospallate](#)

[Red Clover Combination](#)

[Relax-Eze](#)

[Resp-Free](#)

[Sen Sei Balm](#)

[Sha Tea](#)

[Smoke Out](#)

[ULC](#)

[V.B.](#)

[VF Syrup](#)

[Vitalerbs](#)

[Wild Lettuce and Valerian](#)

[X-Ceptic](#)

[Yellow Dock Combination](#)

## Formulas

[Adrenetone](#)[Ant-Plg](#)[Antsp](#)[AR-1](#)[AT-GS](#)[B & B Tincture](#)[Barberry LG](#)[Bee Power](#)[BF & C](#)[BF & C Ointment](#)[Black Ointment](#)[Black Walnut Tincture](#)[BPE](#)[Bugleweed Combination](#)[Calc Tea](#)[Catnip & Fennel](#)[Cayenne](#)[CC](#)[Changease](#)[Chickweed Ointment](#)[CMM](#)[Comfrey-Mullein-Garlic](#)

## False Unicorn & Lobelia

### Anti-Miscarriage Formula

#### Usages:

We offer you a formula here for those who have indication of aborting. This combination should always be on hand because this emergency can appear so quickly that it is shocking and frightening.

This combination of *false unicorn and lobelia* will stop the bleeding as explained in the instructions--if the fetus is in a good healthy condition. If the fetus is dead, in many cases, the dead fetus is aborted with ease. Without this help, the fetus, when dead, will rarely abort, lying in the womb and causing infection.

*False Unicorn & Lobelia*, which helps nourish the reproductive system supplying hormone building nutrients that can help to sustain pregnancy.

#### Dosages:

Unless otherwise specified, teas are always made with one teaspoon of herbs to a cup of distilled water if obtainable. If hemorrhaging starts during pregnancy, stay in bed, use a bed pan when needed, and use 1/2 cup of this tea each 1/2 hour until bleeding stops, then each waking hour for one day, while in bed as much as possible, and then three times in a day for three weeks. If bleeding continues instead of decreasing, see a doctor.

#### Ingredients:

The anti-miscarriage formula consists of these two herbs: false unicorn and lobelia.

#### Testimonials:

1. Couple Able to Conceive: Dr. Christopher had many successes helping couples conceive. One young married man came to see him about his wife, because he felt she was going to lose her mind. She wanted to have a baby so badly that she would hug her pillow at night. They had been married for some years without any success at conception. Dr. Christopher advised them to do the following: they should both begin to use the mucusless diet. In addition, they were to take two tablespoons of wheat-germ oil three times a day (this contains natural vitamin E, among other constituents, which helps the reproductive system). They were to take two capsules three times daily of false unicorn and lobelia combination. If they were faithful with this program, the Doctor promised that they would conceive.

And they did! They brought the little baby in to see Dr. Christopher, and the new mother was absolutely glowing with health and joy at the baby in her arms. This couple had other children as well after following the simple herbal program. [EWH p.23]

2. Dead Fetus Evacuated Naturally and Easily: Lobelia is also an important herb in the anti-miscarriage formula. It will do such wonders as seal up a tear in the bag of waters in an instance of a threatened miscarriage. It will also help to expel, without complication, a fetus that is already dead. One lady who was about five and one half months along in her pregnancy began to show signs of bleeding, as if a miscarriage was about to occur. Some women who were assisting her gave her one-half cup of the tea every half hour, while the pregnant woman remained in bed. The women noticed that the bleeding had not subsided after several hours, so they packed her off to the hospital. No sooner had she arrived in the emergency room and was about to be

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

[Ephedratean](#)

[False Unicorn & Lobelia](#)

[Fen LB](#)

[Garlic, Rosehips, and Parsley](#)

[Hawthorn Berry Syrup](#)

[Herbal Composition](#)

[Herbal Cough](#)

[Herbal Eyebright](#)

[Herbal Tooth Powder](#)

[Immucalm](#)

[INF Combo](#)

[Juni-Pars](#)

[Jurassic Green](#)

[Kelp-T-Comb](#)

[Kid-E-Mune](#)

[Kid-E-Soothe](#)

[Master GL](#)

[Mem](#)

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[Mullein & Lobelia](#)

[Nose Ointment](#)

[Nu Fem](#)

examined by the doctor, when she expelled a fetus that had been dead for several weeks, unbeknownst to her. The doctor was amazed, and questioned the attendants about the events leading to this spontaneous abortion. The women told him about the *false unicorn and lobelia*. The doctor commented, "Never in all my years of practice have I seen a dead fetus evacuated from the womb in such a clean manner. Usually we have to surgically remove particles of the placenta which adhere to the uterine walls. The herbs you have used are miraculous. I wish I could use them in my practice--but my hands are tied". [UP-Lobelia]

3. Unaborted Baby Later Thanks Dr. Christopher: Dr. Christopher was lecturing in a large city when a young man came up to the podium to shake his hand; he nearly shook the Doctor's hand off! He said he had been trying to catch up with the Doctor for a long while. His mother had told him that one night, when the weather was fifty below zero, the Doctor had traveled forty miles to their home. The mother was aborting, ready to lose her baby. The Doctor had given her some herbs and saved the baby--and the young man was that baby! He was about twenty-five years old. He said, "I enjoy life. I love you, sir, and I had to thank you". [UP-Lobelia]

**Useful in Treating:**

[Miscarriage](#)

[Pregnancy](#)

[Oil of Garlic](#)

[Panc Tea](#)

[Pre-Natal Tea](#)

[PreTrac™](#)

[Prospallate](#)

[Red Clover Combination](#)

[Relax-Eze](#)

[Resp-Free](#)

[Sen Sei Balm](#)

[Sha Tea](#)

[Smoke Out](#)

[ULC](#)

[V.B.](#)

[VF Syrup](#)

[Vitalerbs](#)

[Wild Lettuce and Valerian](#)

[X-Ceptic](#)

[Yellow Dock Combination](#)

## Formulas

[Adrenetone](#)[Ant-Plg](#)[Antsp](#)[AR-1](#)[AT-GS](#)[B & B Tincture](#)[Barberry LG](#)[Bee Power](#)[BF & C](#)[BF & C Ointment](#)[Black Ointment](#)[Black Walnut Tincture](#)[BPE](#)[Bugleweed Combination](#)[Calc Tea](#)[Catnip & Fennel](#)[Cayenne](#)[CC](#)[Changease](#)[Chickweed Ointment](#)[CMM](#)[Comfrey-Mullein-Garlic](#)

### Fen LB

Lower Bowel Formula

---

#### Usage:

In most cases, improper diet has caused the peristaltic muscles of most people to quit working, and it will take six to nine months with the aid of the lower bowel tonics for the average individual to clean out the fecal matter and to rebuild the bowel structure sufficiently to have the peristaltic muscles work entirely on their own.

Most people have pounds of old dried fecal matter that is stored in the colon which is toxifying the system and keeping the food from being assimilated.

#### Dosage:

Over ninety percent of all diseases and malfunctions of children's bodies (as with adults) stem from the unclean intestinal tract, constipation (Latin constipatio meaning crowding together), with infrequent or difficult evacuation of the feces, retention of the feces, and lack of coordination in the nerve and muscle functions of the colon and bowel.

The Lower Bowel Tonic, *Fen LB* is a CORRECTIVE FOOD for the intestinal tract. In bowel movements no two people are alike, and often a person will taper down on the lower bowel tonic over a period of time to one capsule three times daily, then to a single capsule a day--then all of a sudden, the herb is getting to the outside walls of the intestines and breaking loose some of this hard fecal matter, and it goes down the intestines and begins to clog you up.

So during your cleansing cycles--when the body is throwing off more of its accumulated wastage, or when the Lower Bowel Tonic is getting to the outside of the intestinal tract and breaking loose some of this hard fecal matter from the walls and with subsequent intestinal congestion--you should remember to accentuate or intensify your use of the Lower Bowel Tonic and take the necessary quantity (up to maybe 8, 10, 15 and even 20 capsules a day) to break it loose; and when that is accomplished, then taper back down again.

#### Ingredients:

- 1 part Barberry bark (*Berberis vulgaris*)**
- 2 parts Cascara sagrada bark (*Rhamnus purshiana*)**
- 1 part Cayenne (*Capsicum minimum*)**
- 1 part Ginger (*Zingiber officinale*)**
- 1 part Golden seal root (*Hydrastis canadensis*)**
- 1 part Lobelia herb and/or seeds (*Lobelia inflata*)**
- 1 part Red raspberry leaves (*Rubus idaeus*)**

[CSK](#)[CSR](#)[Deep Heating Balm](#)[DRI](#)[Ephedratean](#)[False Unicorn & Lobelia](#)[Fen LB](#)[Garlic, Rosehips, and Parsley](#)[Hawthorn Berry Syrup](#)[Herbal Composition](#)[Herbal Cough](#)[Herbal Eyebright](#)[Herbal Tooth Powder](#)[Immucalm](#)[INF Combo](#)[Juni-Pars](#)[Jurassic Green](#)[Kelp-T-Comb](#)[Kid-E-Mune](#)[Kid-E-Soothe](#)[Master GL](#)[Mem](#)[MindTrac™](#)[Mullein & Lobelia](#)[Nose Ointment](#)[Nu Fem](#)**1 part Turkey rhubarb root (*Rheum palmatum*)****1 part Fennel (*Foeniculum vulgari*)****Testimonials:**

1. Chronic Colitis Cured: It's been a long time since I have written you and I feel that I must tell you that I have gotten rid of the colitis I had for years and the doctors diagnosed as a nervous stomach and prescribed tranquilizers, which of course I didn't take. At that time I came across an article written by you, entitled, "Does Your Colon Feed or Poison You." I immediately started to take [Red Clover Combination](#) plus Naturalax 2 *Fen LB*, it took about six months but it finally went. The pain was very bad but all I heard from doctors was "you have a nervous stomach." but I knew it had to be more than that. I thank GOD and you. Dr. Christopher for cure that I have had due to that wonderful pamphlet that came my way, just when I needed it most. [NL 4-11]

2. Polyps: I am taking your Naturalax 2 *Fen LB*. I had surgery two years ago for polyps, they removed two large ones. Now not quite two years, they found another one thru x-ray. I started on your lower bowel cleaner *Fen LB*. It is helping very much. I think I passed that polyp the other day, so I am doing all this cleaning and take another x-ray in February. Also, I just purchased your book, School of Natural Healing. My husband and I like it best of all the books we have ever purchased. [NL 4-12]

3. Child Born with Constipation-Cured: My friend has a granddaughter about seven years old. Her parents told me she was born with constipation. She had one bowel movement a week, (all of her life). For two days each week before her bowel movements, she could not eat because she was in so much pain. They had spent hundreds of dollars to physicians trying to help her. They were told not to worry. One bowel movement a week was normal for her granddaughter.

They changed the granddaughter's diet and put her on cleansing herbs *Fen LB* and [Red Clover Combination](#). In two or three weeks she was having three bowel movements a week. They then added Cascara Sagrada, and in another two weeks, the granddaughter was having three bowel movements a day. [NL-2-1]

4. Gas and flatulence Relieved: I must tell you why I am subscribing to your newsletter. My confidence in you arose from the most remarkable help I received in the use of your Naturalax II *Fen LB* (incidentally, I am 73 years old).

For years I have suffered from gas and flatulence to an extreme degree--with no answer or relief from my own physician nor a specialist to whom he referred me. After the first day of use of your herbal formula, I had relief which has continued consistently for the month I have been taking it. I feel like a new human being--and needless to say, I am most grateful to you! [NL 2-2]

5. Pain Eased: I have a friend who had had eight major surgeries. She lived in constant pain, very seldom was she able to go places and her physician had told her there was nothing more they could do.

She went on Dr. Christopher's Three Day Cleanse and Mucusless Diet. She started on herbs to cleanse the colon, [Fen LB] the blood ([Red Clover Combination](#)) Cayenne, [Calc Tea](#), Yucca AR [AR-1](#), [Herbal Eyebright](#), etc. In a matter of about three weeks, her pain was gone. She was able to start living again. In about 3 or 4 months her arthritis left her.

She had had glaucoma for 13 years. Her glaucoma medicine was making her ill, so she went to her eye specialist. He tested her and said there is not even a trace of glaucoma left. there is virtually no cure for glaucoma, how did you do it. Her reply was thru herbs and diet. She was told whatever it is, don't stop it. He took her off her glaucoma medication, and a special pair of glasses. She now tells me her eyes have improved so much that she can now watch TV without glasses, which she never before had done. She started on this program less than a year ago. Her dark brown eyes are now turning green. She has a ways yet to go, but she is really living again. She is a composer and this past holiday season, had a Christmas Album published. [NL 2-2]

**Useful in Treating:**



[Constipation](#)

[Diarrhea](#)

[Dysentery](#)

[Flatulence](#)

[Headache](#)

[Hemorrhoids](#)

[Hernia](#)

[Impotency](#)

[Menstruation](#)

[Rheumatism](#)

[Tumors](#)

[Oil of Garlic](#)

[Panc Tea](#)

[Pre-Natal Tea](#)

[PreTrac™](#)

[Prospallate](#)

[Red Clover Combination](#)

[Relax-Eze](#)

[Resp-Free](#)

[Sen Sei Balm](#)

[Sha Tea](#)

[Smoke Out](#)

[ULC](#)

[V.B.](#)

[VF Syrup](#)

[Vitalerbs](#)

[Wild Lettuce and Valerian](#)

[X-Ceptic](#)

[Yellow Dock Combination](#)

## Formulas

[Adrenetone](#)

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[Antsp](#)

[AR-1](#)

[AT-GS](#)

[B & B Tincture](#)

[Barberry LG](#)

[Bee Power](#)

[BF & C](#)

[BF & C Ointment](#)

[Black Ointment](#)

[Black Walnut Tincture](#)

[BPE](#)

[Bugleweed Combination](#)

[Calc Tea](#)

[Catnip & Fennel](#)

[Cayenne](#)

[CC](#)

[Changease](#)

[Chickweed Ointment](#)

[CMM](#)

[Comfrey-Mullein-Garlic](#)

## Garlic, Rosehips, and Parsley

Colds and Infections Formula

---

### Usages:

This is a formula for colds and infections. This formula acts as an aid to assist in relieving colds, etc., or wherever garlic is needed to help stop infection!

### Dosages:

The adult amount can vary from one to six or more cups in a day or two or more capsules six or more times per day taken with a cup of steam-distilled water.

### Ingredients:

**garlic**

**rosemary**

**parsley**

**watercress**

**rosehips**

### Useful in Treating:

[Colds, Catarrh, Coryza, Influenza](#)

[Influenza \(Flu\)](#)

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

[Ephedratean](#)

[False Unicorn & Lobelia](#)

[Fen LB](#)

[Garlic, Rosehips, and Parsley](#)

[Hawthorn Berry Syrup](#)

[Herbal Composition](#)

[Herbal Cough](#)

[Herbal Eyebright](#)

[Herbal Tooth Powder](#)

[Immucalm](#)

[INF Combo](#)

[Juni-Pars](#)

[Jurassic Green](#)

[Kelp-T-Comb](#)

[Kid-E-Mune](#)

[Kid-E-Soothe](#)

[Master GL](#)

[Mem](#)

[MindTrac™](#)

[Mullein & Lobelia](#)

[Nose Ointment](#)

[Nu Fem](#)

[Oil of Garlic](#)

[Panc Tea](#)

[Pre-Natal Tea](#)

[PreTrac™](#)

[Prospallate](#)

[Red Clover Combination](#)

[Relax-Eze](#)

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[Wild Lettuce and Valerian](#)

[X-Ceptic](#)

[Yellow Dock Combination](#)

## Formulas

[Adrenetone](#)[Ant-Plg](#)[Antsp](#)[AR-1](#)[AT-GS](#)[B & B Tincture](#)[Barberry LG](#)[Bee Power](#)[BF & C](#)[BF & C Ointment](#)[Black Ointment](#)[Black Walnut Tincture](#)[BPE](#)[Bugleweed Combination](#)[Calc Tea](#)[Catnip & Fennel](#)[Cayenne](#)[CC](#)[Changease](#)[Chickweed Ointment](#)[CMM](#)[Comfrey-Mullein-Garlic](#)

## Hawthorn Berry Syrup

Heart Formula

### Usages:

The heart is our life pump, and when it is not properly fed (with wholesome foods) it suffers malfunction (weakness and heart attacks) causing the heart failure condition that is one of the world's greatest killers. The mucusless diet used over a period of time can rebuild a heart to a good strong condition, but if the heart, its valves, and other working parts are in a weakened condition and need quick help we use a great "heart food or tonic" to assist it back to health. This food is the hawthorn berry... This natural drug is claimed to be a curative remedy for organic and functional heart disorders such as dyspnea, rapid and feeble heart action, hypertrophy, valvular insufficiency sufficiency, and heart oppression."

Also used to treat leakage of the heart...lesions left by former heart attacks... cardiac dropsy, hypertrophy, and other functional and congenital heart disorders. There are several hundred types of heart diseases known to the medical profession, but the good thing about *hawthorn berry syrup* is that it will heal all of them, including 'broken hearts'.

### Dosages:

Recommended dosage is one half teaspoon three times in a day.

### Ingredients:

Hawthorn berry syrup is made with hawthorn berry juice concentrate using grape brandy and glycerine as aids and preservatives.

### Testimonials:

1. Heart Attack: One doctor who had learned the formula for *Hawthorn berry syrup* from Dr. Christopher raised his hand after a lecture to tell the following story. He had gone on a house call in response to a call about a heart attack, one so serious that the family was afraid that death was imminent. The doctor had no cayenne in his bag and the family had no cayenne; the doctor began to panic. He remembered that he had a bottle of *Hawthorn berry syrup* with him. The usual dose is a half-teaspoonful, but the doctor thought a little more might help, so he gave the patient a full tablespoonful. The patient drank it down, sat right up, and said, "Well, I feel okay". The doctor checked him with the stethoscope and the heart sounded alright. As the doctor said, "Talk about quick relief!" [UW-Hawthorn]

2. Heart Leakage Healed: During the second World War a man had been accepted to work in a large chemical depot. The firm had hired him because he was physically unfit for military service--he had a heart leakage--and they were short of manpower. They placed him in their construction division without a physical examination when he was sixty-two years of age, and he worked for them until he was sixty-five years old. He had begun using this heart tonic when he was sixty years old, using it faithfully because, according to him, it tasted good. Now he was sixty-five years old and the war came to an end. He was called into the company's main office, where they complimented his work record and asked him if he would remain as an employee. He wanted to, but feared the necessary physical examination. He finally agreed to take the examination.

You may imagine his surprise when he found that he had been given a clean bill of health. He

[CSK](#)[CSR](#)[Deep Heating Balm](#)[DRI](#)[Ephedratean](#)[False Unicorn & Lobelia](#)[Fen LB](#)[Garlic, Rosehips, and Parsley](#)[Hawthorn Berry Syrup](#)[Herbal Composition](#)[Herbal Cough](#)[Herbal Eyebright](#)[Herbal Tooth Powder](#)[Immucalm](#)[INF Combo](#)[Juni-Pars](#)[Jurassic Green](#)[Kelp-T-Comb](#)[Kid-E-Mune](#)[Kid-E-Soothe](#)[Master GL](#)[Mem](#)[MindTrac™](#)[Mullein & Lobelia](#)[Nose Ointment](#)[Nu Fem](#)

asked the doctor, "What about my heart leakage?" The doctor replied, "I wish I had a heart as good as yours. You should never worry about dying from a heart attack; in fact, if you don't get hit by a truck or lightning you will probably die quietly in your sleep from old age and won't even muss up the covers." This man worked several more years at the plant, retired, and then lived on until he was in his eighties. On a July evening in 1970, he went to the rodeo with his family and enjoyed the evening like a kid as he watched his son ride and perform. The next morning one of his sons came over to his home and found his father lying peacefully in his bed. He had passed away with his hands folded over his chest and, just as the doctor had predicted, the covers were not even mussed up. No heart attack, just the final sleep of old age. [UW-Hawthorn]

3. Edema: Hawthorn is also known for its specific action on edema. During one of Dr. Christopher's lectures, a young man asked if he could relate an experience of his mother's. He said that his mother had had such edema in the ankles that they were so swollen you couldn't even see the bones. Many remedies prescribed by various doctors had made no difference at all. The young man asked his mother to come up to the front of the lecture hall and stand on a chair so the audience could see her feet. She now had well-defined ankle bones after less than a week of using the syrup. [UW-Hawthorn]

4. Heart Operation: .... I called your friend J.D. about eight times the last part of February, as I had a close friend in the hospital that had two heart attacks and the team of doctors told his wife that his heart was not worth a by-pass.

J.D. gave me B.W.'s phone number, then she rushed me a pint of the (hawthorn berry) syrup. This gentleman had his second heart attack on a Thursday night. The doctors told her the sad news Friday, that they could not do anymore for him, as his heart was not worth a by-pass. I received the pint of syrup late Friday, so I called his wife early Saturday morning telling her that I was bringing the hawthorn syrup to her with a plastic spoon and a sheet on the story and history of the syrup, so she could read it to him before she gave it to him.

When she got to the hospital Saturday morning at 11 a. m. the nurses had just removed the tube from his mouth, so that helped. She read the paper to him, but the problem was he wanted to take it but the doctors and nurses were always in the room. Her quick thinking saved his life. She went to the water cooler and got a paper cup and put the syrup into the cup. Right in front of the doctors she kept giving him a sip every little while. They thought she was giving him water. She did that until 10 p.m.

The next day was Sunday when the doctors examined him again. They could not believe and never did figure out how his heart improved so fast. Now his heart was worth a by-pass.

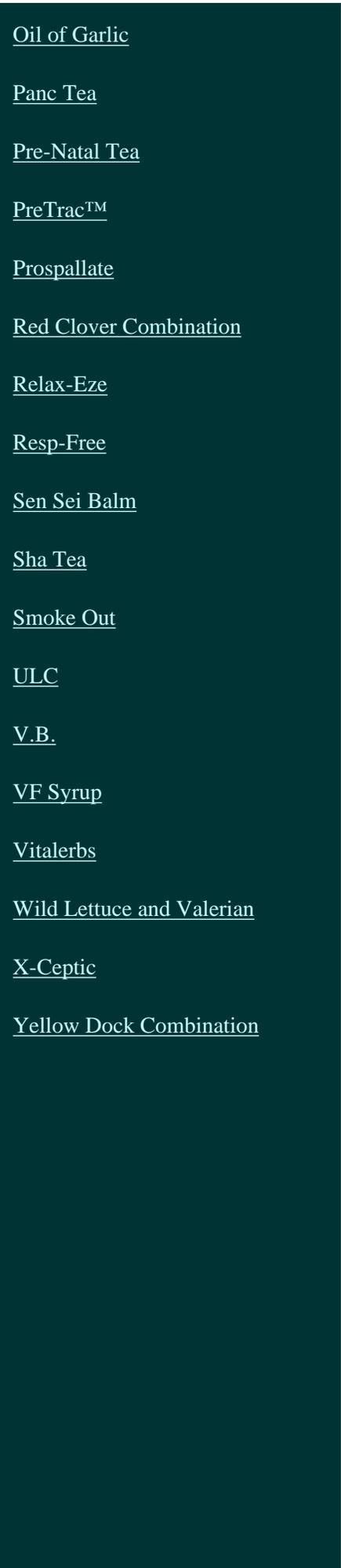
Monday they gave him a brain scan to learn that the blood was not reaching the brain like it should. Tuesday they operated on that through his arm. By Thursday he had an infection where the tube entered .... he also got an infection in his bladder. They had to let all of his infections heal while he suffered. Finally March 16th he received his by-pass and went home, on March 25th. Now he is doing fine. [NL 3-9]

5. Off Oxygen: .... Monday afternoon we took a bottle over to my 85 year old sister-in-law who has been in and out of hospitals for years with a bad heart and a bundle of other ailments. She kept a large oxygen tank in her living room, as she had trouble with breathing spells. Believe it or not, after the first ½ teaspoon of hawthorn berry syrup she never used oxygen again, in fact, they had Medicare pick up the tank last month. Then they charged her \$240 rental. [NL 3-9]

6. Moves Easier: "I am so much better--I am 66 years old and I couldn't pick up anything the least bit heavy. I couldn't bend over. Now I can pick up things and I can almost run. My dad is 92. He can walk without getting so tired and giving out. It is wonderful to know I can get the hawthorn syrup." [NL 3-11]

7. Angina: "Several people have scoffed at the story I have told that after 4 months on the *Hawthorn Berry Syrup*, my angina attacks have dwindled to almost zero and my premature ventricular contractions have been reduced to almost zero as well. For the first time in 10 years my cardiac blood tests have returned with results placing me in the protected shelter group whereas I had always been in the high risk group. The people who scoff at this insist that it is the 12% alcohol content that relaxes the heart muscles when I take it. It would be interesting to ask a cardiologist if a 12% solution of alcohol taken 3 times a day in ½ teaspoon dosages could accomplish the results I have achieved." [NL 3-11]

### Useful in Treating:



[Blood Pressure](#)

[Dropsy](#)

[Dyspnea](#)

[Heart](#)

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[Chickweed Ointment](#)

[CMM](#)

[Comfrey-Mullein-Garlic](#)

## Herbal Composition

Herbal Composition Powder

### Usages:

1. Fevers, flu, hoarseness, sluggish circulation, colic, cramps, colds, etc.
2. As Dr. Nowell, our instructor at the Dominion Herbal College, Let. of Vancouver, British Columbia gave in our textbook, quote:

"We have made and used composition powder for over forty years. When we state we regularly mixed it in batches of sixty pounds the student will readily see that we have had at least some experience with it. As a remedy in colds, beginning of fevers, flu, hoarseness, sluggish circulation, colic, cramps, etc. We believe it has done more good than any other single preparation ever known to man. If this compound were kept in every home, and used as the occasion arose, there would be far less sickness. Give it freely in your practice and your patient will bless you. Look over the ingredients, and consider how it will clear canker, ease cramps and pains in the stomach and bowels, raise the heat of the body equalizing the circulation, and remove congestions. It is safe. It is effective. We have on numberless occasions given a cup of composition tea every hour as warm as the patient could drink it, until the patient has perspired freely, and after four or five doses have seen our patient in a free perspiration, thereby removing colds and febrile trouble."

3. Composition Powder is safe for anyone, children and adults alike; its especial value is for breaking up colds, flu, etc. Brigham Young, the great Mormon prophet and colonist, used composition tea regularly, and recommended it to be used, weak, for children coming down sick, with a little cream and sugar added, instead of loading the child's stomach with heavy foods.

### Dosages:

1. After-Pains (childbirth); Uterine Hemorrhage, Miscarriage, Preventive: Drink the raspberry leaf tea with a little Composition Powder in it.
2. Where there has been a recent cold which has resulted in congestion, a relaxing diaphoretic may be all that is required, and often only a few doses of composition powder are needed to remove a cold and the resultant congestion.

### Ingredients:

Bayberry root powder

ginger

white pine bark

cloves powder

cayenne powder

**Useful in treating:**

[Colds, Catarrh,](#)

[Colic](#)

[Coryza, Influenza](#)

[Laryngitis](#)

[Influenza \(Flu\)](#)

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

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**Herbal Composition**

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[Herbal Eyebright](#)

[Herbal Tooth Powder](#)

[Immucalm](#)

[INF Combo](#)

[Juni-Pars](#)

[Jurassic Green](#)

[Kelp-T-Comb](#)

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[Kid-E-Soothe](#)

[Master GL](#)

[Mem](#)

[MindTrac™](#)

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[Nose Ointment](#)

[Nu Fem](#)

[Oil of Garlic](#)

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[V.B.](#)

[VF Syrup](#)

[Vitalerbs](#)

[Wild Lettuce and Valerian](#)

[X-Ceptic](#)

[Yellow Dock Combination](#)

## Formulas

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[Ant-Plg](#)

[Antsp](#)

[AR-1](#)

[AT-GS](#)

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[Bee Power](#)

[BF & C](#)

[BF & C Ointment](#)

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[Catnip & Fennel](#)

[Cayenne](#)

[CC](#)

[Changease](#)

[Chickweed Ointment](#)

[CMM](#)

[Comfrey-Mullein-Garlic](#)

## Herbal Cough

Cough Formula

---

### Usages:

A fine old fashioned combination for coughs.

### Dosages:

Recommended use--a teaspoon or more, as required, as often as needed.

### Ingredients:

**Fresh onion juice**

**licorice root**

**honey**

**vegetable glycerine**

### Useful in treating:

[Coughs](#)

[Croup](#)

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

[Ephedratean](#)

[False Unicorn & Lobelia](#)

[Fen LB](#)

[Garlic, Rosehips, and Parsley](#)

[Hawthorn Berry Syrup](#)

[Herbal Composition](#)

[Herbal Cough](#)

[Herbal Eyebright](#)

[Herbal Tooth Powder](#)

[Immucalm](#)

[INF Combo](#)

[Juni-Pars](#)

[Jurassic Green](#)

[Kelp-T-Comb](#)

[Kid-E-Mune](#)

[Kid-E-Soothe](#)

[Master GL](#)

[Mem](#)

[MindTrac™](#)

[Mullein & Lobelia](#)

[Nose Ointment](#)

[Nu Fem](#)

[Oil of Garlic](#)

[Panc Tea](#)

[Pre-Natal Tea](#)

[PreTrac™](#)

[Prospallate](#)

[Red Clover Combination](#)

[Relax-Eze](#)

[Resp-Free](#)

[Sen Sei Balm](#)

[Sha Tea](#)

[Smoke Out](#)

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## Formulas

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## Herbal Eyebright

### Herbal Eyewash Combination

#### Usages:

This formula is excellent for brightening and healing the eyes, and it is known to remove the cataracts and heavy film from the eyes.

#### Dosages:

1. Make this into tea form and put into a glass eye cup. There will be a slight burning sensation when using the [cayenne](#) in the eye at first, but there is nothing to be concerned about. Tip head back and apply the eye cup to eye. Exercise eye while doing this as though you were swimming under water. Do this three to six times a day. Drink 1/2 cup a.m. and p.m.
2. From a question to Dr. Christopher: "I have been using the herbal eyebright for several months now. I have followed the instructions exactly. Is there anything else I can do to help speed this along?"

Answer: In order for any herbal combination to be effective, the body must be in good working condition. This would include using the lower bowel combination [Fen LB](#) and strictly following the mucusless diet. In addition it is also important to improve the circulation to the head area. This can be accomplished by laying your head down on a slant board each day. Gradually work up to 20 minutes twice a day. There is also a tendency for the eyesight to seem to worsen for a while. This is due to the toxins being released from the system and coming to the surface of the eye to be washed away. This also indicates that the lower bowel formula [Fen LB](#) should be used as a means for keeping the eliminative channels open.

#### Ingredients:

One part each

bayberry bark

eyebright herb

golden seal root

red raspberry leaves

1/8 part cayenne

#### Testimonials:

1. Glaucoma: I have a friend who had had eight major surgeries. She lived in constant pain, very seldom was she able to go places and her physician had told her there was nothing more they could do.

She went on Dr. Christopher's Three Day Cleanse and Mucusless Diet. She started on herbs to cleanse the colon,... the blood ... [Cayenne](#), [Calc Tea](#), [AR-1](#), [Herbal Eyebright](#), etc. In a matter of

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

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[Nu Fem](#)

about three weeks, her pain was gone. She was able to start living again. In about 3 or 4 months her arthritis left her. She had had glaucoma for 13 years. Her glaucoma medicine was making her ill, so she went to her eye specialist. He tested her and said There is not even a trace of glaucoma left. There is virtually no cure for glaucoma, how did you do it? Her reply was thru herbs and diet. She was told whatever it is, don't stop it. He took her off her glaucoma medication, and a special pair of glasses. She now tells me her eyes have improved so much that she can now watch TV without glasses, which she never before had done. She started on this program less than a year ago. Her dark brown eyes are now turning green. She has a ways yet to go, but she is really living again. She is a composer and this past holiday season, had a Christmas Album published. [NL 2-2]

2. Cataracts: I have cataracts in both eyes, and my wife has one in one eye.

Since I have been using it by eyecup and orally by capsules, I can now see all the license plate numbers equally in both eyes! (I could not see license plate numbers or highway signs with my left eye. They looked 'foggy'. Also, at night, all lights had 'halos' around them as a fog. Now the left eye has equally as good vision as my right eye.) Further, without my glasses, I can see each individual brick in condos across our green belt, approximately 250 feet away, which I never could before. My eye doctor, a year ago, said I had cataracts in both eyes, and the worst in my left eye. Six months ago, on a check-up, they were no worse, but I had to come back in six months.

Two days ago, the doctor was amazed and delighted how my cataracts had shrunk (VERY RARE, he said) and he said my eyes were so good I need not come back for a whole year.

I'm nearsighted normally, and had slightly more negative corrections every change. Now I can see as good with my older (less strong) glasses, and my eyes feel great. The herbal eyewash still smarts for a few seconds, but my eyes feel so good afterward. I use the eyecup 3 times a day, and 3 capsules. I'm 62 years old. My wife, 61 years old, does not take the capsules saying they cause a slight diarrhea which I had not experienced. She's using the eyecup twice daily. We've been on Dr. Christopher's Herbal Eyebright now for over 3 months, and will stick on it for the next year, and let you know then." [NL 2-8]

3. Pain & Squishy Feeling in Eyes: "My husband has had a great deal of improvement in his eyes since using the herbal eyebright formula, both internally and as an eyewash. He formerly had a lot of pain in his eyes, and mentioned a "squishy feeling" around the eyeballs. Lots of mucus has come out of his eyes in the mornings after using the eyewash the previous night. He can see better now and has no more pain. He took the eyebright capsules, 2 at breakfast and 2 before retiring." [NL 2-8]

4. Glaucoma: I have had glaucoma for twelve years now. The eye pressure was so high, I had to have surgery to rechannel the waterway. I have had a little sight, not any the last years, in my left eye, due to kidney stone surgery years ago.

I have been using the Herbal Eyebright capsules internally, from another company in Utah that a friend told me about. I had not heard about Dr. Christopher's herbs, health newsletters, etc. until this winter while visiting in Southern California.

Now I have been using Dr. Christopher's Eyebright combination eyewash formula. And I can see a little more light. To my amazement, the other night, I looked at the typewriter keyboard, and was able to distinguish each letter on the keys. Newspaper headlines, the letters are too close together, I can not see them, but I'm going to keep on using the Herbal Eyewash and hope for good results in the future. [NL 3-6]

5. Staph Infection in Eyes: Dr. Christopher has spoken several times in Cincinnati and my wife and I have been privileged to hear him. By way of personal testimony, I have had a staph infection in my eyes for at least four years and have tried many different treatments. But I have now found that taking two tablets per day of your Herbal Eyebright formula has greatly relieved the situation. I am now in the middle of my second bottle and with the improvement that I have noted already I expect that in a short period of time this infection will be completely eliminated. [NL 3-6]

6. Cataracts: Your Herbal Eyewash really works miracles! After reading Healthview Newsletter's report about it, I sent some to an elderly friend who was told she must have a cataract operation. She used it religiously and noticed a change quickly. When she told the surgeon she was postponing the operation he said she was crazy, but if it happened to work, she should let him know, and they'd both make a fortune. Her reply to that was, "What do you mean, 'we'?"

After only ten days on the capsules and the eyewash, her vision improved sufficiently for her to

[Oil of Garlic](#)

[Panc Tea](#)

[Pre-Natal Tea](#)

[PreTrac™](#)

[Prospallate](#)

[Red Clover Combination](#)

[Relax-Eze](#)

[Resp-Free](#)

[Sen Sei Balm](#)

[Sha Tea](#)

[Smoke Out](#)

[ULC](#)

[V.B.](#)

[VF Syrup](#)

[Vitalerbs](#)

[Wild Lettuce and Valerian](#)

[X-Ceptic](#)

[Yellow Dock Combination](#)

drive without glasses--for the first time in 25 years! She's thrilled and is confident that she's beaten the surgeon. [NL 3-6]

7. Glaucoma and Cataracts: Thank you for the Healthview Newsletter on Dr. Christopher's Herbal Eyebright combination. I have been getting the Newsletter ever since it started and Dr. Christopher's herbal formula is one of my favorites.

I went on it just as a preventative against Glaucoma and Cataracts, and I have bought about 10 copies for friends.

It really works--A friend, age 81, had Glaucoma for years and was getting no better--after just six months no more Glaucoma and her Cataracts are almost gone. She just can't praise the formula enough--but most of her friends just don't believe it as their doctor didn't recommend it. [NL 3-6]

8. Eyelashes and Clearer Eyes: ...The *herbal eyebright* formula is another of my favorites. I use it twice every day. My eyes are clearer, I have better vision and would you believe my eye lashes are growing like crazy. I have people stop and ask me if I wear false eyelashes, and what brand are they? Can you believe it? [NL 4-6]

9. Glasses Thrown Away: Some time back in 1980 I learned about your *Herbal Eyebright* formula. I purchased my first bottle July 8, 1980, and am at present finishing my 21st bottle.

Today I am 64, I started wearing glasses when I was 18. As of my last eye examination, I do not wear glasses anymore, but still have to use 2.25 (purchased at the drug store) for reading. [NL 4-10]

10. My mother, who has had eyeglasses since before I can remember, began having trouble with inherent macular degeneration a year or two ago. Her father lost his sight to this. I told her to start using the [herbal eyebright](#) eyewash. She was using it only one time a day last summer when I went to visit her. She said it had kept the blind areas from getting any worse, but they had not healed completely. I explained, again, that she needed to go through the procedure at least 3 to 6 times a day with her condition, and to be sure to drink the tea. When we visited together during the recent holiday, she felt that her eyes had not only healed, but that she no longer needed glasses. She said she only kept them because her drivers liscence required them.

Tomorrow is her 69th birthday. She went to renew her drivers liscence and then called to tell me that she no longer needs glasses to drive. She no longer needs glasses at all.

Natalie from Mapleton, UT

**Useful in Treating:**

[Eye Ailments](#)

[Hay Fever](#)

[Hemorrhage \(Eye\)](#)

[Sty](#)

## Formulas

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[Antsp](#)

[AR-1](#)

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[Barberry LG](#)

[Bee Power](#)

[BF & C](#)

[BF & C Ointment](#)

[Black Ointment](#)

[Black Walnut Tincture](#)

[BPE](#)

[Bugleweed Combination](#)

[Calc Tea](#)

[Catnip & Fennel](#)

[Cayenne](#)

[CC](#)

[Changease](#)

[Chickweed Ointment](#)

[CMM](#)

[Comfrey-Mullein-Garlic](#)

## Herbal Tooth Powder

Herbal Tooth Powder

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### Usages:

This formula is used to help strengthen the gums (bleeding and pyorrhea-type infections of the gums), and assist in tightening loose teeth. This type tooth powder will brighten the teeth's luster and make for a healthier mouth.

### Dosages:

For severe cases place this powder combination between the lips and gums (up and lower) around entire tooth area and leave on all night, six nights a week (as well as brushing regularly) until improvement is evident. Then continue on with regular tooth brushing with this herbal food combination.

### Ingredients:

oak bark

oat straw

comfrey root

horsetail grass

lobelia

cloves

peppermint

### Testimonials:

Loose Teeth Made Tight and Didn't Have to be Pulled: I was lecturing at our former Herb Shop on South State Street in Salt Lake City, a few years ago, during a bad snow storm. We were just starting to discuss loose teeth and pyorrhea when the door opened and a lady in a snow covered hat and coat stepped into the lecture hall. She had brushed off the snow and just stood there. We asked her to come up front, as there was an empty seat but she shook her head and remained where she was, obviously just wanting to warm up before leaving. We went on with the discourse telling of using oak bark powder between the gums and lips during the night to tighten the teeth.

When I had finished, the lady opened the door, and with a blast of cold air, she left. Two weeks later, on the same night of the week this lady came again and asked to speak. Not recognizing her and thinking maybe she wanted to tell about someone leaving their car lights on or something, I told her to go ahead. She told us that she was from a small town and her teeth were all coming loose. Her dentist said it was pyorrhea and that there was no cure, and that he would send her to

Salt Lake City, as he was not prepared to do this type of job. He "consoled" her with the knowledge that after the teeth were pulled, she could have temporary dentures put in immediately. She was sick at heart, as she had perfect teeth with no cavities or fillings and how she would have to lose them. She had hoped that in the larger city some dentist would show her a cure; but it was the same story. That night she went to the hotel, but was so worried and upset that she could not sleep. She decided to dress and go for a walk in the snow storm, hoping to tire herself enough to return to the hotel and obtain some rest. It was dark, and she was cold and crying, however, she was led by the Spirit to our store. There was a light and the store looked warm, so she stepped inside just as we started on the subject of teeth and the gums. The next morning, she went to a health food store, got some oak bark powder and started to use it. In two weeks her teeth became tight, and the gums were firm. She proudly showed us her beautiful teeth which she could now keep. When she said goodbye, it was with tears of happiness for finding a good healing tooth powder. Here is a good tooth powder for everyone. (Although she used just the oak bark alone, it is the largest ingredient in the Herbal Tooth Powder, so this product would do the same.) [NL 2-10]

**Useful in Treating:**

[Gums](#)

[Teeth](#)

- [CSK](#)
- [CSR](#)
- [Deep Heating Balm](#)
- [DRI](#)
- [Ephedratean](#)
- [False Unicorn & Lobelia](#)
- [Fen LB](#)
- [Garlic, Rosehips, and Parsley](#)
- [Hawthorn Berry Syrup](#)
- [Herbal Composition](#)
- [Herbal Cough](#)
- [Herbal Eyebright](#)
- Herbal Tooth Powder**
- [Immucalm](#)
- [INF Combo](#)
- [Juni-Pars](#)
- [Jurassic Green](#)
- [Kelp-T-Comb](#)
- [Kid-E-Mune](#)
- [Kid-E-Soothe](#)
- [Master GL](#)
- [Mem](#)
- [MindTrac™](#)
- [Mullein & Lobelia](#)
- [Nose Ointment](#)
- [Nu Fem](#)

[Oil of Garlic](#)

[Panc Tea](#)

[Pre-Natal Tea](#)

[PreTrac™](#)

[Prospallate](#)

[Red Clover Combination](#)

[Relax-Eze](#)

[Resp-Free](#)

[Sen Sei Balm](#)

[Sha Tea](#)

[Smoke Out](#)

[ULC](#)

[V.B.](#)

[VF Syrup](#)

[Vitalerbs](#)

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## INF Combo

Infection Formula

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### Usages:

This formula can be made up in tea form, or as tincture, syrup, or ointment, as can most of our formulas. This wonderful formula kills infection, clears toxins from the lymph system, and is a natural infection fighter.

### Dosages:

Two to three capsules between meals.

### Ingredients:

plantain

black walnut

golden seal root

bugle weed

marshmallow root

lobelia

### Useful in Treating:

[Flu](#)

## Formulas

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[Antsp](#)

[AR-1](#)

[AT-GS](#)

[B & B Tincture](#)

[Barberry LG](#)

[Bee Power](#)

[BF & C](#)

[BF & C Ointment](#)

[Black Ointment](#)

[Black Walnut Tincture](#)

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[Catnip & Fennel](#)

[Cayenne](#)

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[CMM](#)

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[Deep Heating Balm](#)

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[Immucalm](#)

[!\[\]\(5343136ed468c795afe4bc7793dda7f1\_img.jpg\) INF Combo](#)

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## Juni-Pars

Kidney Formula

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### Usages:

Approximately 80% of the body is liquid, and much of this fluid must be pumped, filtered, etc., through the urinary system of the individual. We generally do not take the best care of this delicate tract. Through it circulates irritating and clogging-type materials, i.e., tea, coffee, soft drinks, hard water, alcohol, etc.

Over the years we have used a formula of herbs with people who have been afraid to be out in public because of lack of control over the urinary tract and unknowingly voiding urine. After using this formula, many people have found relief from this condition and are living normal lives again.

### Dosages:

Suggested use is 2 or 3 capsules between meals, or a cup of tea morning and evening taken with a cup of parsley tea.

### Ingredients:

**Juniper Berries**

**Parsley Root**

**Marshmallow Root**

**Golden Seal Root**

**Uva Ursi Leaf**

**Lobelia Herb**

**Ginger Root**

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

[Ephedratean](#)

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## Formulas

### Jurassic Green

#### Greens Combination Formula

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A blend of alfalfa, barley grass and wheat grass herbs grown organically in virgin soil and separated from urban and agricultural pollutants by the same mountains that provide its pure source of water. These herbs reduce acidity, provide needed chlorophyll and wholesome nutrients to the body.

[Adrenetone](#)

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[Antsp](#)

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[Black Walnut Tincture](#)

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[Comfrey-Mullein-Garlic](#)

## Kelp-T-Comb

Thyroid / Gland Formula

### Usages:

This is a thyroid and assisting glandular aid. This herbal group assists in controlling metabolism and gives herbal feeding to the thyroid glands to do their job more efficiently. This is a very fine glandular aid.

### Dosages:

Two capsules, 1 or 2 times daily as needed.

### Ingredients:

**kelp**

**watercress**

**mullein**

**parsley**

**nettle**

**Irish moss**

**Iceland moss**

**sheep sorrel**

### Testimonials:

Insomnia Cured: I have found great relief by taking Dr. Christopher's calcium formula and thyroid formula through the night which was recommended in his "How Important is Calcium" newsletter. I have recommended this treatment to others and to my mother and they all have found it helps their insomnia also. -A.R., Williston, ND [D. Christopher]

### Useful in Treating:

[Constipation](#)

[Dyspepsia](#)

[Glands](#)

[Headache](#)

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

[Ephedratean](#)

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**Kelp-T-Comb**

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## Kid-E-Mune

Immune Stimulating Formula

---

This formula is designed to enhance the body's ability to prevent the spread of bacteria and viruses.

### Ingredients:

**Echinacea in a glycerine base with Cinnamon flavor**

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

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[False Unicorn & Lobelia](#)

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[!\[\]\(bea2a7027d4d1da22757b5a9c7b6b21a\_img.jpg\) Kid-E-Mune](#)

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## Kid-E-Soothe

### Immune Calming Formula

---

This is designed to calm yet strengthen the body's immune responses. Many times we believe that we are allergic to certain foods, plants or animals, but in reality our immune system may be just overreacting. This simple combination of marshmallow root and astragalus has made life easier for those who suffer from allergies, hayfever, asthma, rheumatoid arthritis or any hyperactive immune response.

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## Master GL

### Pituitary Gland Formula

---

This formula is for the malfunctioning pituitary gland. It consists of carrot leaf for stimulation of the gland, gotu kola for nourishment, ginkgo for increased circulation, mullein for cleansing, Oregon grape to influence both pituitary and liver, and lobelia as an overall catalyst for the formula.

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## Mem

Memory Formula

### Usages:

To increase the ability of the mind to function. This product feeds the brain, helps memory.

### Dosages:

Two to six capsules when needed.

### Ingredients:

Blue vervain herb

gotu kola herb

Brigham tea

ginkgo leaf

blessed thistle herb

cayenne fruit

ginger root

lobelia herb

### Testimonials:

We have been using the MEM formula on a group of mentally retarded children. There has been a noticeable improvement in their thought processes. -D. B. Riverside, CA [D. Christopher]

### Also see:

[Relax-Eze](#): Dr. Christopher Nerve Herbal Food Combination

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## MindTrac™

Emotional Clarity Herbal Formula

MindTrac is an Alternative to drugs for:

**Depression**

**Anxiety**

**Hyperactivity**

MindTrac will benefit:

**Adults**

**Adolescents/Children**

**Seniors**

## Take Control of Your Mind

MindTrac™ contains properties similar to its drug counterparts without harmful chemicals.

Psychiatric drugs are far more dangerous to take than people realize. They have negative side effects including addiction, and they can produce withdrawal symptoms that are emotionally and physically distressing or even life-threatening. The herbs in MindTrac are formulated to support and heal the body naturally in response to stress. Drugs are used to treat the symptoms, NOT to cure the problem.

### Cleanses

Science continues to show that the mind and the body are connected. Stress creates biochemicals which circulate along with the blood. Because the liver is already burdened by pollutants, these "stressful" by-products are less likely to be eliminated quickly. To reduce the burden on the liver, MindTrac contains three herbs - Sarsaparilla, Dandelion and Oregon Grape Root - to cleanse the blood and to stimulate liver detoxification.

### Nourishes

A food base of Jurassic Green™ (flash dried Alfalfa, Barley, and Kamut) supplies the body with essential vitamins and minerals in an all natural form. B vitamins, Chlorophyll, Calcium, Magnesium, and Potassium help regulate nerve transmission and muscle response.

### Stimulates

St. John's Wort has been proven in scientific studies to mimic the effects of antidepressant drugs. It is so effective that we strongly advise against combining this herb with any antidepressant drug. To transition safely from prescription medicine to natural healing, check out our product called [PreTrac™](#).

MindTrac contains two additional stimulants, Gotu Kola and Ginkgo Biloba, to synergize the St. John's Wort herb! By improving the blood flow and oxygen circulation to the head, these herbs

have been used traditionally to improve memory, nerve response and mental alertness.

### Calms

Scullcap and Valerian root are both nervine sedatives and antispasmodics. Besides their calming nature on the nerves and muscles, these herbs promote regular and restful sleep. Mullein and Lobelia are antispasmodics as well as cleansers. They help cleanse the blood by assisting the lymph and the glandular systems.

### Dosage:

Take 2 capsules three times a day as a tonic dose or as needed. Children: 1/2 - 2/3 of adult dosage or Kid-e-Bright.

### Ingredients:

**Valerian Root**

**Scullcap**

**Ginkgo Biloba**

**Oregon Grape Root**

**St. John's Wort**

**Mullein**

**Gotu Kola**

**Sarsaparilla**

**Dandelion**

**Lobelia**

**Jurrasic Green.**

*There are serious consequences to using or discontinuing prescription drugs. Withdrawal from psychiatric drugs should be done slowly and only with professional guidance.*

### Testimonials on MindTrac® & ProTrac®:

1. "I've been carrying ProTrac® in the Herb Shop for a year. This is a wonderful product! It's packed full of herbs for nutrition and calming. It has helped one lady's hyperactivity, a man with sever temperamental mood swings, and a customer to quit substance addiction. We call this our Herbal Prozac®. Thank you very much for ProTrac®." -T. Dawber, Charlotte Harbor, FL.
2. "I have an 8 year old child with Down's Syndrome who is very hyperactive. After only one week of taking ProTrac®, he is noticeably calmer and much more attentive than before. We are so happy and we are telling friends and family about ProTrac®." -Name Withheld, TX.
3. "After being diagnosed with Clinical Depression, I spent 1 1/2 years on antidepressant

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medication. It basically ruined my health and relationships with other people. After deciding the medication was the cause, I quit the drugs and began the healing process. I started taking ProTrac® and it really helped me. My mind cleared up. I started sleeping at night, and best of all, I feel like my normal self again." -B Pearson, UT.

4. A worried mother of a hyperactive 9 year old boy tried ProTrac® instead of Ritalin® as the doctor suggested. She could not believe that in only three days he was calmer, more relaxed, and able to focus on daily activities. He's even sleeping better! She is ecstatic to see his old personallity return after two years of turmoil, and is introducing ProTrac® to her friends.  
-Delightful Foods Inc., Canada

## Mullein & Lobelia

### Malfunctioning Glands Formula

---

#### Usages:

This can be used as an aid to relieve mastitis, thyroid malfunction, etc., etc.

The Mullein and lobelia will reduce the swelling of mumps and the swollen palate, Dr. Christopher taught. It is also an excellent remedy for poison ivy or poison oak, etc. [UW-Mullein]

#### Dosages:

1. Tonsillitis: The tonsils are the tail end of the lymphatic system. They swell up with pus and infection when the body is overloaded with toxic material. When the system is overloaded with waste that an inactive lymphatic system cannot eliminate, the tonsils become enlarged and sore. They are a safety valve of the body - a warning system, if you wish. They should never be removed from the body. The lymphatic system can be cleared through exercise. The lymph system has no pump such as the bloodstream has the heart. Exercise can activate the lymph system to carry waste products from the cells. The glandular formula of 3 parts mullein and one part lobelia can be taken internally as a tea or capsules and externally as a fomentation around the neck covering the affected glands. Of course the tonsils will diminish in size and infectious content with adherence to the correct principles of nutrition contained in the mucusless diet. [NL 4-2]

2. Any Swollen Gland: Through the accumulation of toxic waste in the body from improper diet, poor blood stream and sluggish circulation of the blood system the glands become congested and infected, and swell up to cause much pain and misery. (There are glands that swell on the neck, breast, groin, under arm pits, etc.) Make a tea of three parts mullein and one part lobelia herb and use as a fomentation over swollen or malfunctioning glands. Leave on all night (covering fomentation with plastic), six days a week until relief is obtained. Use a fresh fomentation as warm as possible each night. This can be used as an aid to relieve mastitis, thyroid malfunction, etc., etc. In addition to the external fomentation, also drink a cup of this tea two or three times in a day or take two of the capsules or tablets with a cup of steam-distilled water.

3. Malfunctioning Thyroid: "The thyroid, through the hormone thyroxine determines growth, controls body temperature, regulates the metabolism or the burning of food in the body and influences, to a great extent, mental and emotional balance. Also, it is of special importance for the proper functioning of the reproductive system. The inter-relationship between reproductive functions and thyroid functions is very complex and not entirely understood, but it is known that various changes, especially in girls and women, are apt to cause changes in thyroid functions. For instance, a slight enlargement of the thyroid gland is common at puberty, during pregnancy and menopause.

"When the thyroid gland is functioning properly, we are hardly aware of its existence. It stores practically all of the body's supply of iodine, releases thyroxine into the blood stream at intervals and regulates all the bodily functions we have mentioned above. Disorders of the thyroid gland are apparently caused by two conditions:

(One) lack of sufficient iodine in the diet, so that the thyroid cannot obtain enough to manufacture thyroxine, or (two) some disorder of the body which creates a demand for more thyroxine than the gland can manufacture."

Our recommendations to aid the thyroid are in two parts. First we need to strengthen the deficiency of the gland by using Dr. Christopher's glandular formula *Mullein & Lobelia* as a

[CSK](#)[CSR](#)[Deep Heating Balm](#)[DRI](#)[Ephedratean](#)[False Unicorn & Lobelia](#)[Fen LB](#)[Garlic, Rosehips, and Parsley](#)[Hawthorn Berry Syrup](#)[Herbal Composition](#)[Herbal Cough](#)[Herbal Eyebright](#)[Herbal Tooth Powder](#)[Immucalm](#)[INF Combo](#)[Juni-Pars](#)[Jurassic Green](#)[Kelp-T-Comb](#)[Kid-E-Mune](#)[Kid-E-Soothe](#)[Master GL](#)[Mem](#)[MindTrac™](#)[Mullein & Lobelia](#)[Nose Ointment](#)[Nu Fem](#)

fomentation around the throat at the thyroid area. This formula is made up of mullein and lobelia in a combination that is beneficial in aiding and strengthening the glands of the body, in this case, the thyroid gland. It would also help to use two capsules of our gland formula *Mullein & Lobelia* three or more times a day.

Second, take Dr. Christopher's thyroid combination as an herbal food aid to this gland. It consists of the following herbs - parsley, watercress, kelp, Irish moss, romaine lettuce, turnip tops and Iceland moss. This herbal group assists in controlling metabolism and gives herbal feeding to the thyroid glands to do their job more efficiently.

These two aids will assist the thyroid to function properly whether it be underactive or overactive. [NL 3-4]

4. Undescended Testicle: Oftentimes, through some factor of heredity, one of the testicles will not descend in the fetus and the child is then born with an undescended testicle. If, during early childhood the testicle does not descend of its own accord, the child is sometimes made to undergo painful and unnecessary surgery to bring it down. We know of one case where the testicle was operated upon and then never developed later in life. That is, it atrophied, and remained almost imperceptible upon examination.

Here is where we would use the wonderful glandular formula *Mullein & Lobelia* of three parts mullein and one part lobelia. We apply this as a fomentation, that is, we make a tea of the herbs (one ounce to the pint) and concentrate it down to one half its original volume. A flannel or cotton cloth is dipped into the solution and put on the area, perhaps keeping the area warm with Turkish towels. The tea or capsules can be used internally as well.

#### Ingredients:

**Three parts mullein**

**One part lobelia herb.**

#### Testimonials:

1. Crushed Scrotum: He told the story of a boy and his friend playing by a two-wheeled trailer, the tongue of which was balanced on a log. The little fellow was sitting cross-legged by the trailer; the tongue dropped from the log and hit him between the legs, mashing the testicles and splitting the scrotum open. When his parents rushed out to see what all the screaming was, he was in a really serious condition. They called their family doctor, who said, "Bring him right up here and I'll castrate him". That wasn't what the father wanted, though, so he called Dr. Christopher, who rushed over. Since the testicles are glands and Mullein is the basis for the glandular herbal aids, Dr. Christopher told him to make a strong tea of Mullein and Lobelia, making a fomentation and applying it to the crushed scrotum, removing the old and providing a fresh fomentation when needed, always keeping it wet. The scrotum as well as the testicles were healed with no scar. The boy grew up normal. Dr. Christopher mentioned that this fomentation, together with drinking the tea, has been used for enlarged swollen testicles and also for those that have dropped down into the scrotum. [NL 3-4]

2. Mastitis: A woman in Roy, Utah, had mastitis; she was a nursing mother. Her breast was double its regular size, with red streaks. Anyone experiencing mastitis knows that it is terribly painful, and accompanying symptoms resemble flu. A mastitis fever is really uncomfortable. Her baby had nursed from the other side, but the mother couldn't let it get near the inflamed breast, which sometimes can relieve the pain and swelling if possible. The baby was crying from hunger; the mother was crying from pain; what misery for the two of them! The Doctor made a fomentation of three parts of Mullein and one part of lobelia. Plastic was put over the fomentation, and the mother was told to drink half a cup of the tea each half hour until time to sleep, then a half cup each hour the next day if needed, which the Doctor did not think would be necessary.

The next morning she called Dr. Christopher, happy to tell him that the swelling was all gone, as well as the soreness and flu symptoms, and the baby was nursing happily again on that side. [UW-Mullein]

[Oil of Garlic](#)[Panc Tea](#)[Pre-Natal Tea](#)[PreTrac™](#)[Prospallate](#)[Red Clover Combination](#)[Relax-Eze](#)[Resp-Free](#)[Sen Sei Balm](#)[Sha Tea](#)[Smoke Out](#)[ULC](#)[V.B.](#)[VF Syrup](#)[Vitalerbs](#)[Wild Lettuce and Valerian](#)[X-Ceptic](#)[Yellow Dock Combination](#)

3. Swollen Glands Behind Ears and on Backs of Necks: You may recall the story of the two children with swollen glands behind their ears and on the backs of their necks. If you have ever seen these on your children, you will know how distressing they are. Most doctors will tell you that the child cannot eliminate wastes fast enough, so that the lymphatic system stores them until the body can eliminate them. They say that the swollen glands will do no harm, yet we have seen the child debilitated and sickly because of this condition. Dr. Christopher recommended the same Mullein-Lobelia fomentation.

The stronger child, a robust boy of ten, experienced the reduction of the gland and the absorption and elimination of the poisons through his system. The weaker child, also ten years old, couldn't support that many toxins going through his system; his gland continued to swell, though with no pain, until it came to a head and broke open. Nearly a cup of infectious pus poured out and continued to drain a day or so longer; the mother considered that this saved the child's life. [UW-Mullein]

#### Useful in Treating:

[Breast](#)[Mumps](#)[Tonsillitis](#)[Cysts](#)[Quinsy](#)[Tumors](#)[Glands](#)[Throat](#)

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## Nose Ointment

Nose Ointment

---

### Usages:

This is a natural anti-histamine.

### Dosages:

Apply to the inside of nose when it is congested, dry, sensitive or chapped.

### Ingredients:

Made with spearmint, peppermint and Vaseline.

### Testimonials:

You need to put the Nose Ointment in a smaller container so I can carry it around. It works!  
When I'm stuffed up and can't draw any air up my nose, I use my finger to put the nose ointment inside my nostrils and in the air goes and WOW, instant relief! -W.C., Spanish Fork, UT [D. Christopher]

### Useful in Treating:

[Asthma](#)

[Colds, Catarrh, Coryza, Influenza](#)

[Flu](#)

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

[Ephedratean](#)

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[!\[\]\(ac6b7d3316140a8cbda0442086b85c6a\_img.jpg\) Nose Ointment](#)

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## Nu Fem

Herbal Aid for Female Reproductive Organs

### Usages:

This is an amazing combination of herbs to aid in rebuilding a malfunctioning reproductive system (uterus, ovaries, fallopian tubes, etc.). Over the years herbalists and patients have seen painful menstruations, heavy flowing, cramps, irregularity, etc., that have been helped and the patient now has a painless menstrual period, good menstrual timing, and a new outlook on life by using these aids to readjust the malfunctioning areas.

In addition, you can take the female corrective formula *Nu Fem* and the hormone-estrogen formulas [Changease](#) to work out problems in the feminine tract. These formulas can correct almost any problem you might have; they are non-specific and they are mild, so you can take them over a prolonged period of time without any problems.

If you exercise well in addition to following the above suggestions, eventually your PMS should disappear. For coping with the problem while you are healing, hot peppermint, catnip or camomile tea can relieve some of the pressure; try Dr. Christopher's nervine combination. Foods containing good B-vitamins, such as sprouted wheat and brewer's yeast, and those containing C, such as lemons and rose hips, are excellent for balancing the system.

These two combinations, the female corrective *Nu Fem* and the hormone-estrogen combinations [Changease](#) can be used during the entire time of pregnancy (and also before and following) as it is an herbal food like any other food and "is there to be used, if needed," but can do NO harm in any way.

### Dosages:

Recommended dosage is one cup or 2 capsules or tablets morning and evening or three times a day if desired, six days a week for as long as required to get results desired. We have seen many severe cases who have had many years of suffering cleared up in 90 to 120 days. Some get relief sooner, some take longer--no two cases are alike. This is a food to rebuild the malfunctioning organs.

### Ingredients:

The female corrective formula consists of three parts of golden seal root, and one part of each of the following:

**blessed thistle**

**cayenne**

**cramp bark**

**false unicorn root**

**ginger**

[CSK](#)[CSR](#)[Deep Heating Balm](#)[DRI](#)[Ephedratean](#)[False Unicorn & Lobelia](#)[Fen LB](#)[Garlic, Rosehips, and Parsley](#)[Hawthorn Berry Syrup](#)[Herbal Composition](#)[Herbal Cough](#)[Herbal Eyebright](#)[Herbal Tooth Powder](#)[Immucalm](#)[INF Combo](#)[Juni-Pars](#)[Jurassic Green](#)[Kelp-T-Comb](#)[Kid-E-Mune](#)[Kid-E-Soothe](#)[Master GL](#)[Mem](#)[MindTrac™](#)[Mullein & Lobelia](#)[Nose Ointment](#)[Nu Fem](#)[red raspberry leaves](#)[squaw vine](#)[uva ursi](#)**Testimonials:**

1. Ten Dollars of Herbs Cure Ten Year Old Problem: One woman in American Fork, Utah, was having difficult periods. These had started in puberty, and she had spent the whole of her adult life traveling from coast to coast, averaging a cost of over \$1,000 a year for ten years, paying medical doctors to tell her what was wrong. She suffered vicious menstrual cramps and extremely long periods. No one was able to help; she was very discouraged; but one of her neighbors said, "Why don't you go to the next town, to Orem, where a man called Dr. Christopher lives? He could give you some help."

When she arrived, Dr. Christopher read her eyes, noting that she did have problems with the reproductive organs. He told her to start on the female corrective formula *Nu Fem* and the hormone and estrogen formula [Changease](#) (which consists of black cohosh, sarsaparilla, ginseng, blessed thistle, licorice root, false unicorn root, and squaw vine). He promised her that if she would follow through, within 90 to 120 days she would get results. Within 120 days, she came back, saying that she was on a 28 day cycle, with no menstrual pains. She was delighted! Where she had spent over \$10,000 traveling from doctor to doctor, it cost her approximately \$10 for the herbs to cure her. [EWH p.16]

2. Rh Factor: Dr. Christopher worked during pregnancies to heal women with serious problems, and his results seem to us miraculous. One of his students from northern Utah had had three children with the Rh problem; in each case, they had to have a complete blood transfusion, having their blood completely drained out of them. This lady was told that because of her advanced Rh problem, she was not to have any more children. In addition to the Rh problem, she would require open heart surgery, and another pregnancy might kill not only her, but the child. She asked Dr. Christopher for help. He could promise her nothing, but tried to help her cleanse her blood. She took the red clover combination tea in order to cleanse the blood, the female corrective formula *Nu Fem* and hormone-balancing formula [Changease](#), and plenty of red raspberry leaf tea. After a lecture some time later, the lady approached Dr. Christopher with a new baby, born naturally with no Rh problem whatsoever. The lady had several children since that time, with no more trouble. This shows that the Rh factor stems from a problem of toxicity inside the mother, which can be overcome with herbs and diet. [EWH p.50]

3. No More Caesarean Sections: A lady in Springville, Utah, came to Dr. Christopher's office in Evanston, Wyoming. She had had three children, and her doctor told her the only way she could bear children was by Caesarean section, because she had a pelvic area that was rather immature. She had so much scar tissue on the abdominal area that the doctors said she could not be cut again. She wanted another baby very much so she came to Dr. Christopher to see what he might be able to do. He put her on the three-day cleanse and mucusless diet. She was to drink at least a quart of red raspberry leaf tea a day, to drink a gallon of steam-distilled water a day, and to use the [Three Oil Massage](#) over the abdominal area. That would be two days of castor oil massaging the area, two days of olive oil, and two days of wheat germ oil, and a day of rest. Dr. Christopher felt that if she would follow this program, she would heal rapidly. She also was to take the female corrective formula *Nu Fem* and the estrogen-hormone formulas [Changease](#) internally, and to keep her bowels clean with the lower bowel formula [Fen LB](#). She visited Dr. Christopher every week, beginning to feel much better. The hardness of her abdomen had softened so that it became pliable. The scar tissue began to show signs of new life.

During this time, Dr. Christopher moved into his offices in Salt Lake City, Utah, and Dr. Loretta Foote, who took care of all the obstetric cases, came in one day and said she would be gone for a couple of days, because she was going to assist a lady in delivery down in Springville, a patient of Christopher's. She reminded him of the lady who had had three Caesarean births, who was planning a home delivery. Dr. Foote returned to help the mother for about ten days (in those days it must have been easier than today!). The woman who was told that she could only have C-sections now had natural childbirths at home with ease. Many years later, this lady came up

[Oil of Garlic](#)[Panc Tea](#)[Pre-Natal Tea](#)[PreTrac™](#)[Prospallate](#)[Red Clover Combination](#)[Relax-Eze](#)[Resp-Free](#)[Sen Sei Balm](#)[Sha Tea](#)[Smoke Out](#)[ULC](#)[V.B.](#)[VF Syrup](#)[Vitalerbs](#)[Wild Lettuce and Valerian](#)[X-Ceptic](#)[Yellow Dock Combination](#)

after the lecture, and trailing her were four teenage children; she informed Dr. Christopher that all four of these were born after she'd been told she'd lose her life and her baby's if she dared another birth. She was a very happy woman. [EWH p.50]

4. Young Woman Gets Well Enough to Marry: Dr. Christopher told story after story about sick women he helped with simple remedies, simple treatments. For example, a man and his wife brought their daughter to Dr. Christopher's office in Salt Lake. This young lady was the sickest, saddest-looking person he had seen in a long while. She had met a young man who came to love her very much, and he wanted to marry her. But she refused, saying it wasn't fair to him, being in her condition, so anemic and sickly. He told her that he loved her enough to marry her and take care of her under any circumstances.

She was in a very serious condition, so they put her on the three-day cleanse and mucusless diet. She took extra cups of red clover combination tea, and drank a minimum of one pint of grape juice a day, chewing each mouthful. When she could, she took even more. She also ate plenty of raisins and grapes in addition to the juice. She used the yellow dock as a tea, and soon she began to show improvement. She exercised adequately, being careful not to overdo it, and changed her diet from mucus-forming food to the mucusless diet, having lots of salads and fruits, emphasizing as much raw as possible. She used the female corrective *Nu Fem* and hormone-estrogen formulas [Changease](#), and she also used the vaginal bolus [V.B.](#) and [Yellow Dock Combination](#) in the slant board routine. She showed improvement from the very beginning.

The parents had brought her to Dr. Christopher in the spring, and by fall they sent him an invitation to her wedding, because she had cleaned up her system and was very happy to get married. She was menstruating regularly and had gotten over her case of anemia. She was living a new life, healing it herself by following through on Dr. Christopher's instructions. [EWH p.111]

5. Myriad of Problems Cleared: Dr. Christopher always checked his patients with iridology before advising them. A lady came to him, aged about 45, asking for a reading to help with her condition. He saw that she had a prolapsed transverse colon which had dropped to a point where it tipped her uterus and pinched her bladder, and she was having a very serious trouble there. She had problems with the ovaries, with infection in both of them, and she was troubled with vaginal drainage. In addition, she had one breast that was badly infected, which might necessitate having part of the breast removed if she had asked another doctor for treatment. After the reading, Dr. Christopher asked why she had come to him and what she wanted him to do. She said that she had just spent three days in a clinic, where they had verified everything he had read from her irises, but they wanted her to go to the hospital immediately and have the uterus removed and the bladder stitched up to the spinal cord area, and also have her breast removed. She was frightened of all this cutting, so she wanted to find help in some other way.

She promised that she would stay on the program that Dr. Christopher advised. She took the female corrective *Nu Fem* and hormone-balancing combinations [Changease](#), used the vaginal bolus [V.B.](#) six nights a week, flushing out each morning with the slant board routine, massaging 15 to 20 minutes a day on the abdominal and pelvic area while the tea was inside. She was also to use the [Three Oil Massage](#) over the abdominal area, and go on the three-day cleanse and mucusless diet. In addition, she was to drink a gallon of steam-distilled water a day, and plenty of red raspberry leaf tea. She kept her bowels clean with the lower bowel formula [Fen LB](#), and kept the bloodstream cleaned up with the [Red Clover Combination](#) tea.

Dr. Christopher did not see her again for six months. When she came to see him this time, she bounced in, not dragging as she had before, a totally different woman, much happier and healthier. She had no operations, and yet her prolapsed transverse colon had gone back into place, and her uterus and bladder had gone back into position. She was feeling like a new woman, and she did indeed have a new system by following through with the entire herbal problem. [EWH p.112]

6. Woman Helped: When Dr. Christopher was traveling, using chiropractic offices and naturopath's offices, diagnosing, reading eyes, and helping with herbs, another lady with a similar problem as the above came to see him. In addition to the prolapsed transverse colon infecting the entire reproductive system, it had impinged on the bladder, so that whenever she laughed, sneezed, or coughed, she would void her urine, a very embarrassing problem. In addition, one of her breasts was so infected that the doctors were urging her to have it removed.

Dr. Christopher told her he could give her advice as to what to do, but that he was traveling and wouldn't be able to guide her or see her for several months. She agreed to follow his instructions,

and asked to see him when he returned.

He put her on the full program. She was to clear the bowel with the lower bowel formula [Fen LB](#), to clean the bloodstream using the red clover combination, and to rebuild the reproductive organs with the female corrective *Nu Fem* and the hormone-estrogen formula [Changease](#). She was to continue the whole program, six days a week.

When he returned to that city six months later, she had called and prearranged an appointment. She bounced in, looking years younger, all smiles. She said her urine loss was under control now, with no unwanted voiding. She had no pains in the ovaries; in fact, she had dropped some stones from [Dr. John R. Christophers "Three Day Cleansing Program"](#). She had also passed some tumors, one almost the size of a grapefruit, and cysts as well. When she went to the family doctor for an examination, he was astounded, because her body was rebuilding itself. The breast they were going to cut off had healed itself, with no more infection. She felt that it was a new world, and that life was worth living again.

Although she healed rapidly and consistently, Dr. Christopher pointed out that herbs don't work all at once, but you have to apply yourself and be patient to wait for the results of your hard work. [EWH p.113]

7. Spider Cancer Comes Out of Woman: A lady came to Dr. Christopher because she was having trouble with her reproductive organs. He asked her to follow the full female routine. One day, some months later, she came back to see him. She said, "This morning when I woke up, I thought, 'Look, I have been in this program for months now. I have taken the herbs orally, I have used the vaginal bolus [V.B.](#), and the [Yellow Dock Combination](#), and after so many months I am sick and tired of this.'"

She hadn't seen much change in her system, although she felt a little better, but not enough to continue. While she was thinking this, she was sitting on the toilet. And when she got up, she happened to turn around and glance into the bowl. And there was something about the size of a half dollar, with legs on it, swimming around in the water. This something had dropped out of her!

She screamed, and her husband came in. They put it into a bottle and took it right over to the family doctor. He examined it under the microscope and said, "I have never seen one of these whole like this. They have to cut them out of a person; it is a spider cancer. They never give up and leave by themselves." He was simply amazed that it had just come out of her. The reason was that her body had now become so healthy that the spider cancer didn't have any waste materials to maintain itself.

When this lady saw the spider cancer, she determined that even if it took six months or years she was going to continue with the program. Sometimes it takes shorter or longer with certain people than with others, but Dr. Christopher encouraged everyone to keep with the program, if they are doing everything properly. [EWH p.113]

8. Young Woman Healed of Ailments: A lady called Dr. Christopher in Salt Lake City from Provo, Utah, saying that her daughter had flown in from out of town, extremely ill. She was afraid that she was going to die, so she had come to her mother to take care of her. She asked if he would come and read the young woman's eyes. When he arrived, the young woman ridiculed him, and said she thought it was a bunch of crazy ideas that her mother had, and she wasn't going to let him look into her eyes. So Dr. Christopher bowed out and left.

Nearly a month went by, and the lady from Provo asked him to come again, that the daughter was so sick that she was frightened and would talk with him.

When he came, they told him that they had tried the best doctors they could find, but no one could help the girl (Dr. Christopher never said what the problem was, however). He gave her an eye reading and she would remark, "Who told you that!" Each thing he told her was the same thing that the doctors had diagnosed. When he finished, she said she was still dubious about the natural program, but that the reading was so accurate, he must have something good. She agreed to follow the natural program. She was too sick to even get up and walk.

So they started off gradually on the [Incurables program](#), using juices to rebuild the body. Before many weeks had passed, she came to Dr. Christopher's classes and became quite a faithful student. She even began to study iridology and became good at it. She watched her own eyes and could see the healing taking place. She had been told, though she had been married for some time, that she could never have a baby because of an immature pelvic area and an underdeveloped

uterus, as well as other problems in her reproductive system. By using the mucusless diet and herbs to rebuild her body--the female corrective *Nu Fem* and the hormone-balancing combinations [Changease](#) -- and doing the exercises they advised, even these problems began to heal.

Eventually Dr. Christopher got a call from her husband on the West Coast; he was angry. It was a call of abuse, accusing the Doctor of keeping his wife up in Utah when she should be down with him. He was an electrical engineer, with a very important job, and felt he needed her with him. Dr. Christopher told him his wife had been too sick to even sit up alone, but with the aid of the program and the mother's assistance, she was improving. He told the husband she would be home with him as soon as possible.

The man told Dr. Christopher he was one of the worst quacks there could possibly be, let out some abusive language, and slammed down the receiver.

The wife did heal eventually, and traveled home on her own, without anyone assisting her. She was an excellent housewife, and she showed so much improvement that the husband was astonished, because he figured she didn't have too much longer to live.

Best of all, she had two beautiful children, with natural childbirth, and although the husband was an electrical engineer with a high-paying job, he was so delighted with the results that he became a chiropractor. He delivered their two children. [EWH p.116]

9. Woman Gets Off of Commercial Hormones: Dr. Christopher recalled the case of a lady in Vancouver, B.C. She was climbing the wall with nervous tension due to menopause. Her hot flashes were driving her almost insane. When she would throw off the covers at night, her husband would get cross, and she was keeping him awake at night as she would get up and down with discomfort of hot flashes. She was using estrogen, but she felt it was doing her more harm than good, so she asked Dr. Christopher for help.

He put her on the three-day cleanse and mucusless diet, and she suffered for a time from extreme withdrawal symptoms from taking the commercial hormones. She took the female corrective formula *Nu Fem*, two or three capsules, three times a day, and the hormone-estrogen formula [Changease](#), using those three capsules, three times a day. After a short time, she came to Dr. Christopher and said that her whole life had changed. She could sleep all night, without throwing the covers off. She didn't have the nervous screaming jags as she had before, and her husband fell in love with her again. She felt that it was worth the dietary change and the effort to take the herbs to make this difference. [EWH p.171]

10. Letter to Dr. Christopher: In the past 20 years I have had a history of nine miscarriages. I have three children ages 20, 19, & 14. All the miscarriages took place in the 2nd and 3rd months. Also with the three children I have, I was in bed most of the first 3 months with spotting and threatened miscarriage.

Since I have been taking female corrective herbs *Nu Fem* and others for general building of health, I have become pregnant again. I am now 5½ months along and have not been down at all. The first 3 months if I felt any cramping I took the False Unicorn, Lobelia combination and the problem went away.

Also, during the first trimester of this pregnancy, we did quite a lot of traveling, attending 2 conventions in the mountains where I did a good amount of hiking which I never could have done. Because of my age of 41, I am at a disadvantage, but thanks to the herbs I feel better than I ever have.

I had a miscarriage last Spring just before I knew about the [False Unicorn & Lobelia](#) combination. I started taking the combination during the miscarriage and had the easiest miscarriage that I ever had.

Thank you very much for sharing your knowledge in this field. I know of many others that are being helped by the natural method that God has given to us. [NL 2-2]

11. Freedom from Menstrual Pain: My greatest pleasure has resulted in freedom from pain for my seventeen year old daughter during her menstrual period She has been hospitalized three times in the past year for vomiting which could not be stopped over a six hour lapse of time. The Hormonal Estrogen Combination [Changease](#) & Female Corrective Combination *Nu Fem* have truly given her a "new lease on life". [NL 2-2]

### Useful in Treating:

[Amenorrhea](#)

[Menstruation](#)

[Tumors](#)

[Cysts](#)

[Miscarriage](#)

[Uterus](#)

[Infertility](#)

[Pregnancy](#)

[Vomiting](#)

[Menopause](#)

## Formulas

[Adrenetone](#)[Ant-Plg](#)[Antsp](#)[AR-1](#)[AT-GS](#)[B & B Tincture](#)[Barberry LG](#)[Bee Power](#)[BF & C](#)[BF & C Ointment](#)[Black Ointment](#)[Black Walnut Tincture](#)[BPE](#)[Bugleweed Combination](#)[Calc Tea](#)[Catnip & Fennel](#)[Cayenne](#)[CC](#)[Changease](#)[Chickweed Ointment](#)[CMM](#)[Comfrey-Mullein-Garlic](#)

## Oil of Garlic

Hearing Loss &amp; Earache Formula

### Usages:

When this procedure is used as explained here, it can be an aid in assisting an improvement of poor equilibrium, failure of hearing, aiding the motor nerve, etc.

### Dosages:

With an eye dropper put into each ear at night four to six drops of oil of garlic and four to six drops of the herb tincture listed below [B & B Tincture](#), plugging ears overnight with cotton, six days a week, four to six months, or as needed. On the seventh day, flush ears with a small ear syringe using warm apple cider vinegar and distilled water half and half.

### Ingredients:

 **Garlic Oil** **Olive Oil**

### [B & B Tincture](#) Ingredients:

 **Blue Cohosh** **Black Cohosh** **Blue Vervain** **Skullcap** **Lobelia**

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

[Ephedratean](#)

[False Unicorn & Lobelia](#)

[Fen LB](#)

[Garlic, Rosehips, and Parsley](#)

[Hawthorn Berry Syrup](#)

[Herbal Composition](#)

[Herbal Cough](#)

[Herbal Eyebright](#)

[Herbal Tooth Powder](#)

[Immucalm](#)

[INF Combo](#)

[Juni-Pars](#)

[Jurassic Green](#)

[Kelp-T-Comb](#)

[Kid-E-Mune](#)

[Kid-E-Soothe](#)

[Master GL](#)

[Mem](#)

[MindTrac™](#)

[Mullein & Lobelia](#)

[Nose Ointment](#)

[Nu Fem](#)

 **Oil of Garlic**

[Panc Tea](#)

[Pre-Natal Tea](#)

[PreTrac™](#)

[Prospallate](#)

[Red Clover Combination](#)

[Relax-Eze](#)

[Resp-Free](#)

[Sen Sei Balm](#)

[Sha Tea](#)

[Smoke Out](#)

[ULC](#)

[V.B.](#)

[VF Syrup](#)

[Vitalerbs](#)

[Wild Lettuce and Valerian](#)

[X-Ceptic](#)

[Yellow Dock Combination](#)

## Formulas

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[CMM](#)
[Comfrey-Mullein-Garlic](#)

## Panc Tea

Aid for the Pancreas

### Usages:

Pancreas and other glands: Aid for pancreas and other affiliated glands that through malfunction cause high or low blood sugar (namely diabetes or hypoglycemia).

Many reports came in about heavy insulin users who continue using the insulin but by watching litmus paper or other types of diabetic checking have gradually tapered down on the insulin; and many, within a year of using two to three or more three times a day, six days a week of the pancreas formula tablets or capsules, have found complete relief. Of course, the closer a person stays on [Dr. John R. Christophers "Mucusless Diet"](#) and eliminates from the diet the unnatural sugars, soft drinks, candies, pastries, bread, etc., the quicker the results. [HHH p.185]

Almost everyone suffers from some sort of pancreatic disorder. Eating processed foods is one of the main causes of degeneration of the pancreas. In addition to producing insulin, the pancreas also produces its own natural bicarbonate of soda which is sent into the digestive tract to neutralize excess acids. Both "hypo" and "hyper" glycemia stem from the breakdown of the pancreas. This overactive or underactive pancreas affects the amount of bicarbonate of soda the pancreas produces. When there is not enough, the digestive tract can become overacid, thus leading to ulcerations. Dr. Christopher suggested his Pancreas Formula [Panc Tea] which included cedar berries to correct this disorder. other herbs in the formula are golden seal, uva ursi, cayenne, mullein, and licorice root. [NL 4-8]

### Dosages:

This combination has assisted many that have had hypoglycemia after six months or more of using two to three capsules or tablets three times in an day six days a week. (All herbal aids give faster results in six days a week instead of seven, using the same day of the week of each week.) They have had a glucose tolerance test with a clean bill of health on the pancreas area. [HHH p.185]

### Ingredients:

cedar berries

golden seal

uva ursi

cayenne

licorice root

mullein

**Testimonials:**

1. Pancreas formula helps with energy. During a trip to San Francisco, a black minister came up to Dr. Christopher and just hugged him, thanking him for the Pancreas formula *Panc Tea*. He said he could preach with more enthusiasm than ever before, and had much more energy and ability to work.[NL 6-4]

2. Brother and Sister Cured. Dr. Christopher emphasized that both diabetes and hypoglycemia stem from the same problem--a weak pancreas. One time, he was visited by a brother and sister, both in their middle years, each with pancreas problems that they had inherited as part of their family physical structure. The man had hypoglycemia, and the woman had diabetes.

The man's hypoglycemia was so severe that the family planned to have him institutionalized. He would go into raving fits if he got hungry--the family thought they could not live with him anymore. The lady, on the other hand, was using more than ninety units of insulin a day, which she had done for years. Dr. Christopher taught them about the three-day cleanse and the mucusless diet and gave them the Pancreas formula *Panc Tea*.

Within six months, the man took a glucose tolerance test and received a clean bill of health. The lady, in less than a year, was using no insulin at all. The same formula and the same program healed the pancreas in both cases.

When the pancreas is healed in this manner, it can last you for life. [NL 6-4]

3. How Dr. Christopher Discovered a Formula for the Pancreas. One day a man visited him with a kidney problem; he couldn't void his urine. Dr. Christopher told him to use juniper berries to quickly clear up the case. The man was happy about that--he had juniper berries in his own back yard, and so he went home to gather some for his kidney problem.

A few weeks later, the man came back and said, "Your juniper berries didn't do anything for me; they didn't help at all!" Dr. Christopher said that it was impossible, that juniper berries always work to clear up kidney problems. "Well, I've got some in my pocket; here they are."

"That's not a true juniper berry," said Dr. Christopher. "That's a monostone Cedar berry, from a Cedar tree, such as we commonly have in this area. The juniper berry has three stones and even seven stones, but the Cedar berry is a mono-stone; it's a cherry-stone type. Let me get you some juniper berries." He brought the man some, and showed him that it was a true juniper berry; the Cedar berry is in the same family, but it's just a "kissing cousin."

"Fine," said the man, "I'll go home and take some, but I'm going to keep using the Cedar berries, too."

"Why bother, if they aren't going to do you any good?" asked Dr. Christopher.

"It's an amazing thing," said the man, "but since I've been using them, I don't have to take as much insulin."

Dr. Christopher asked further into the effects of the berries. He asked the man to take six berries three times a day and to report his results.

After a few months, the man didn't have to use any insulin at all. From being a typical diabetic, dependent on insulin to monitor his blood sugar, he had to use no insulin at all. [NL 6-4]

**Useful in Treating:**[Adrenals](#)[Hypoglycemia](#)[Diabetes](#)[Osteoporosis](#)[Glands](#)[CSK](#)[CSR](#)[Deep Heating Balm](#)[DRI](#)[Ephedratean](#)[False Unicorn & Lobelia](#)[Fen LB](#)[Garlic, Rosehips, and Parsley](#)[Hawthorn Berry Syrup](#)[Herbal Composition](#)[Herbal Cough](#)[Herbal Eyebright](#)[Herbal Tooth Powder](#)[Immucalm](#)[INF Combo](#)[Juni-Pars](#)[Jurassic Green](#)[Kelp-T-Comb](#)[Kid-E-Mune](#)[Kid-E-Soothe](#)[Master GL](#)[Mem](#)[MindTrac™](#)[Mullein & Lobelia](#)[Nose Ointment](#)[Nu Fem](#)

[Panc Tea](#)

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[Panc Tea](#)

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[V.B.](#)

[VF Syrup](#)

[Vitalerbs](#)

[Wild Lettuce and Valerian](#)

[X-Ceptic](#)

[Yellow Dock Combination](#)

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## Pre-Natal Tea

Prenatal Formula

### Usages:

Using this tea (or two or three capsules) morning and evening is an aid in giving elasticity to the pelvic and vaginal area and strengthening the reproductive organs for easier delivery. Should be used only in the last six weeks before time of birth. [EWH p.11]

### Dosages:

Using this tea (or two or three capsules) morning and evening. Should be used only in the last six weeks before time of birth. [HHH p.193]

### Ingredients:

 Squaw vine holy thistle black cohosh pennyroyal false unicorn raspberry leaves lobelia

### Testimonials:

1. Much Easier Second Delivery: We have had, just recently, a report come to us about a young mother-to-be for the second time who had never heard of the "pre-natal combination" [Pre-Natal Tea] and her previous labor was very severe (lasted around 30 hours). After she became pregnant the second time she heard about this pre-natal combination, so got some, used it the last week before delivery, and cut the labor time down to about four hours. She just recently had her third baby with a very short labor and more ease than she had dreamed possible, after using the pre-natal formula for the last six weeks. Many people believe the change from difficult to easy delivery results from using red raspberry leaf tea (and squaw vine tea) throughout the nine months of pregnancy and using the pre-natal combination during the last six weeks. Of course, one of the main reasons one can have a healthy baby is when the mother is faithful with the mucusless diet and the three-day cleanse. This cleanse should be used at least once each month during pregnancy as well as later (during the time of lactation). [EWH p.11]
2. Breech Baby Turns: A naturopathic physician told this story at one of Dr. Christopher's lectures. He had had a patient for three pregnancies. Two times she had carried the baby breech,

and the doctors had taken them Caesarean. The third time, she happened to be carrying the baby breech, the same pattern as before, and she expected she would have to be operated on again. She began to take Dr. Christopher's pre-natal formula [Pre-Natal Tea] and began to assure herself that the baby would be born normally. The doctor said that it was impossible; no matter how good the formula is, it cannot work. When labor began, the baby was still in the breech position. The doctor said to put the lady on the table to prepare to operate, but she said, "No, when it's ready to come, it will turn and come out right." The doctor said, "That's ridiculous!" He had put on one rubber glove; the lady screamed, "Here it comes!" Before the doctor got the other rubber glove on, the baby came, head first, having previously flipped over. He had to catch it with one hand while the nurse was putting on the other glove. The doctor confided to this naturopath that he thought this could never happen. But with the use of the prenatal tea the baby came out normal. [EWH p.77]

**Useful in helping with:**

[Pregnancy](#)

[CSK](#)  
[CSR](#)  
[Deep Heating Balm](#)

[DRI](#)  
[Ephedratean](#)

[False Unicorn & Lobelia](#)

[Fen LB](#)

[Garlic, Rosehips, and Parsley](#)

[Hawthorn Berry Syrup](#)

[Herbal Composition](#)

[Herbal Cough](#)

[Herbal Eyebright](#)

[Herbal Tooth Powder](#)

[Immucalm](#)

[INF Combo](#)

[Juni-Pars](#)

[Jurassic Green](#)

[Kelp-T-Comb](#)

[Kid-E-Mune](#)

[Kid-E-Soothe](#)

[Master GL](#)

[Mem](#)

[MindTrac™](#)

[Mullein & Lobelia](#)

[Nose Ointment](#)

[Nu Fem](#)

[Pre-Natal Tea](#)

[Oil of Garlic](#)

[Panc Tea](#)

[Pre-Natal Tea](#)

[PreTrac™](#)

[Prospallate](#)

[Red Clover Combination](#)

[Relax-Eze](#)

[Resp-Free](#)

[Sen Sei Balm](#)

[Sha Tea](#)

[Smoke Out](#)

[ULC](#)

[V.B.](#)

[VF Syrup](#)

[Vitalerbs](#)

[Wild Lettuce and Valerian](#)

[X-Ceptic](#)

[Yellow Dock Combination](#)

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## Formulas

[Adrenetone](#)

[Ant-Plg](#)

[Antsp](#)

[AR-1](#)

[AT-GS](#)

[B & B Tincture](#)

[Barberry LG](#)

[Bee Power](#)

[BF & C](#)

[BF & C Ointment](#)

[Black Ointment](#)

[Black Walnut Tincture](#)

[BPE](#)

[Bugleweed Combination](#)

[Calc Tea](#)

[Catnip & Fennel](#)

## PreTrac™

Detoxification and Transition Herbal Formula

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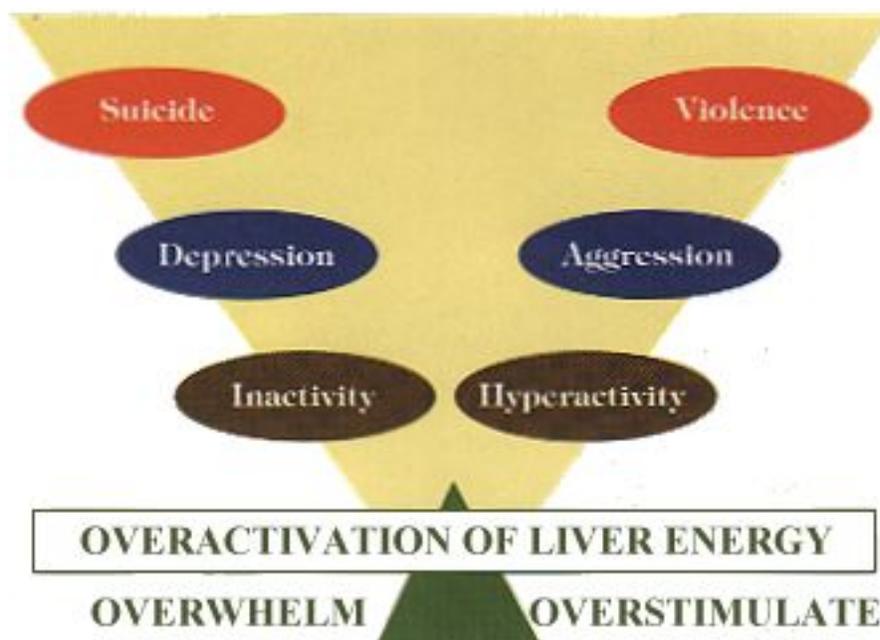
Balances the negative extremes in the body with herbs to cleanse, nourish, stimulate and calm your mind during the chemical detoxification process.

## Choose to go Natural

PreTrac™ aids in chemical detoxification.

The currently accepted therapy for "chemical imbalance" is to prescribe more chemicals. These drugs can cause negative side effects for children and adults - in both the short and long-term.

Two organs for detoxification, the liver and kidneys, are already working as hard as they can to keep up with the daily burden. *Why add to the Problem?* To overstimulate can result in an overload. Below is a behavioral spectrum depicting over-activated liver energy:

[Cayenne](#)[CC](#)[Changease](#)[Chickweed Ointment](#)[CMM](#)[Comfrey-Mullein-Garlic](#)[CSK](#)[CSR](#)[Deep Heating Balm](#)[DRI](#)[Ephedratean](#)[False Unicorn & Lobelia](#)[Fen LB](#)[Garlic, Rosehips, and Parsley](#)[Hawthorn Berry Syrup](#)[Herbal Composition](#)[Herbal Cough](#)[Herbal Eyebright](#)[Herbal Tooth Powder](#)[Immucalm](#)

PreTrac is for use before [MindTrac™](#). PreTrac is for the transition process of detoxification. Once the transition is complete, MindTrac is an alternative to drugs for emotional clarity. Usually, the detoxification process lasts one or two months, but each individual is different.

**The focus of PreTrac is to help the body eliminate toxins by supporting the efforts of detoxification. These toxins are accumulated not only from using prescription and/or recreational drugs, but also from the risk of living in a polluted environment.**

#### **Cleanses:**

The blood is our source of life, but it is also the root cause of all disease. Since the liver is the organ most responsible for cleaning the blood, PreTrac uses four herbs that act as tonics for the liver. Oregon Grape Root and Milk Thistle stimulate the liver in its effort to detoxify. Wild Yam Root supports both the liver and kidneys. Finally, Rosemary works as both liver cleanser and nervous calmate.

#### **Nourishes:**

Our life blood is our soil. It is our terrain. It is NOT our philosophy to eat inorganic multi-vitamins and minerals of "rocks". It is better to build a body with plants that grow from the rocks. For this reason, we include [JURASSIC GREEN](#), flash-dried and organically grown Alfalfa, Barley, and Kamut. This nutrient dense supplement nourishes our body with trace minerals, essential B vitamins, life-giving enzymes, and oxygen from the plant's equivalent to human blood - chlorophyll.

[INF Combo](#)[Juni-Pars](#)[Jurassic Green](#)[Kelp-T-Comb](#)[Kid-E-Mune](#)[Kid-E-Soothe](#)[Master GL](#)[Mem](#)[MindTrac™](#)[Mullein & Lobelia](#)[Nose Ointment](#)[Nu Fem](#)[Oil of Garlic](#)[Panc Tea](#)[Pre-Natal Tea](#) **PreTrac™**[Prospallate](#)[Red Clover Combination](#)[Relax-Eze](#)[Resp-Free](#)**Stimulates:**

To help sustain the body through a potentially tiring detoxification process, PreTrac includes two stimulating herbs, Korean Ginseng and Ginkgo Extract. Both of these activating ingredients promote increased circulation of blood and energy to the head and the body.

**Calms:**

To balance the stimulating herbs, PreTrac provides two calmative herbs, Rosemary and Scullcap. Both herbs act as sedatives and antispasmodics to relieve restlessness, anxiety, and nervousness - symptoms which commonly occur during drug withdrawal.

**Ingredients:** **Korean Ginseng** **Rosemary Leaves** **Ginkgo Extract** **Oregon Grape Root** **Milk Thistle Extract** **Wild Yam Root** **Scullcap** **Jurassic Green.**

*There are serious consequences to using or discontinuing prescription drugs. Withdrawal from psychiatric drugs should be done slowly and only with professional guidance.*

**Testimonials on MindTrac® & ProTrac®:**

1. "I've been carrying ProTrac® in the Herb Shop for a year. This is a wonderful product! It's packed full of herbs for nutrition and

[Sen Sei Balm](#)[Sha Tea](#)[Smoke Out](#)[ULC](#)[V.B.](#)[VF Syrup](#)[Vitalerbs](#)[Wild Lettuce and Valerian](#)[X-Ceptic](#)[Yellow Dock Combination](#)

calming. It has helped one lady's hyperactivity, a man with severe temperamental mood swings, and a customer to quit substance addiction. We call this our Herbal Prozac®. Thank you very much for ProTrac®." -T. Dawber, Charlotte Harbor, FL.

2. "I have an 8 year old child with Down's Syndrome who is very hyperactive. After only one week of taking ProTrac®, he is noticeably calmer and much more attentive than before. We are so happy and we are telling friends and family about ProTrac®." -Name Withheld, TX.

3. "After being diagnosed with Clinical Depression, I spent 1 1/2 years on antidepressant medication. It basically ruined my health and relationships with other people. After deciding the medication was the cause, I quit the drugs and began the healing process. I started taking ProTrac® and it really helped me. My mind cleared up. I started sleeping at night, and best of all, I feel like my normal self again." -B Pearson, UT.

4. A worried mother of a hyperactive 9 year old boy tried ProTrac® instead of Ritalin® as the doctor suggested. She could not believe that in only three days he was calmer, more relaxed, and able to focus on daily activities. He's even sleeping better! She is ecstatic to see his old personality return after two years of turmoil, and is introducing ProTrac® to her friends. -Delightful Foods Inc., Canada

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## Formulas

[Adrenetone](#)[Ant-Plg](#)[Antsp](#)[AR-1](#)[AT-GS](#)[B & B Tincture](#)[Barberry LG](#)[Bee Power](#)[BF & C](#)[BF & C Ointment](#)[Black Ointment](#)[Black Walnut Tincture](#)[BPE](#)[Bugleweed Combination](#)[Calc Tea](#)[Catnip & Fennel](#)[Cayenne](#)[CC](#)[Changease](#)[Chickweed Ointment](#)[CMM](#)[Comfrey-Mullein-Garlic](#)

## Prospallate

An Aid for the Prostate

---

### Usages:

1. In case of malfunction we suggest this combination to assist the male. This will dissolve the stones that are in the kidneys, as well as clean out other sedimentation and infection in the prostate. [HHH p.191]
2. To strengthen the reproductive system of the male take the Prostate Formula [Prospallate]. Both parents will benefit by the Hormone and Estrogen Formula [[Changease](#)]. Both parents should begin these detoxification procedures before conception. [NL 2-5]
3. Gonorrhea: [NL 3-10]

### Dosages:

Take two or more morning and night, with parsley tea when possible. [HHH p.191]

### Ingredients:

- Cayenne**
- ginger**
- golden seal root**
- gravel root or queen of the meadow root**
- juniper berries**
- marshmallow root**
- parsley root or herb**
- uva ursi leaves**
- siberian ginseng root**

### Testimonials:

Kidney and Prostate Problems: First, I want to thank you for making your herbs and combinations and knowledge available! My husband was suffering from kidney / prostate troubles and had gone to the urologist after the local P.A. was unable to help him. The urologist had him on a sepra which made his health seem to improve for a couple of weeks--then he had the same symptoms all over again and a lot worse. So much so, he stayed home from work for four days, sleeping and very uncomfortable. When he went back to the urologist and had x-rays they weren't able to find

anything, told him to go off the medicine and that the urologist felt he would just have to "live with it." He must of thought my husband was off upstairs or something, maybe.

So we went to the health food store for help. Through reading material and the lady there he started on distilled water and [Juni-Pars](#) and Prospallate. He is much better and has been able to do heavy work again. Thank you greatly. [NL 3-4]

**Useful in Treating:**

[Gonorrhea](#)

[Pregnancy](#)

[Infertility](#)

[Prostate](#)

[Kidney](#)

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

[Ephedratean](#)

[False Unicorn & Lobelia](#)

[Fen LB](#)

[Garlic, Rosehips, and Parsley](#)

[Hawthorn Berry Syrup](#)

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[Wild Lettuce and Valerian](#)

[X-Ceptic](#)

[Yellow Dock Combination](#)

## Red Clover Combination

### Blood Purifying Formula

#### Usages:

1. An Aid to Assist in Purifying the Blood Stream, same type formula as used by Hoxey for years [SNH p.527]
2. The blood stream is life itself and it is our job to keep it clean and pure so that we can have a good circulatory system for delivering food to the body properly and, in addition, to carry off the waste materials. [EWH p.195]
3. This herbal blood builder is made up of herbs that are cleansers, but also herbs that give astringency, others aid in removing cholesterol, kill infection, or build elasticity in the veins and to strengthen the vein and artery walls. [EWH p.195]
4. Acne and Boils: Dr. Christopher emphasized that we need to know the source of our problems. Perhaps our toxic condition begins with a poorly functioning bowel which should be taken care of with [Fen LB](#) the Lower Bowel Formula. But suppose a person has a case of boils or acne. The Red Clover combination should be used about three times a day, six days a week for six weeks. Then you can switch to another blood purifier such as burdock or chaparral or Brigham tea. Then switch back to the Red Clover combination. [UW-Red Clover]
5. Cancer: For many years Dr. Christopher taught that cancer is not an isolated problem in the body. If the cancer breaks out in a place where we have an old injury or a weakened portion in the body it only indicates that the cancer is in the bloodstream. It only accumulates, like a boil or an ulcer, in a weakened area and drains the poisons in the area. The medical profession cuts it out and says, "Well, the cancer's all gone!" The cancer breaks out in another place. The bloodstream must be cleaned. The Red Clover combination or even Red Clover alone has a powerful alternative effect to clean the bloodstream. [UW-Red Clover]
6. Rh Factor: See testimonial # 2.
7. A very fine herbal remedy for allergies, hay fever and sinus conditions. [HHH p.131]

#### Dosages:

1. General: These herbs are now in tablet form and the recommended adult daily use is two or three tablets three times in a day. It is suggested to take kelp or dulse tablets with these herbal blood purifying combinations as an additional aid. [SNH p.527]
2. Acne: In cases of acne, a six-week course of three cups of Red Clover tea a day, alternated with two weeks of burdock root tea, will bring good results in even the most stubborn cases. [UW-Red Clover]
3. Lupus: Lupus stems from a toxic condition in the system and we must attack the problem from several points: purifying the bowel, purifying the bloodstream, and maintaining a proper diet. To cleanse the bowel, the lower bowel tonic [Fen LB](#) is recommended in conjunction with a blood-purifying tea such as our Blood Purifying combination [Red Clover Combination]. This tea is made up of red clover blossoms, chaparral, licorice root, poke root, peach bark, Oregon grape root, stillingia, prickly ash bark, burdock root, and buckthorn bark. Drink one cup of tea three times a day or take two or three capsules of the combined herbs if you wish. In each cup of tea take six to ten drops of black walnut tincture. Three fifteen-grain chaparral tablets should also be taken along with the tea and tincture. [NL 1-4]
4. Renew the Body and Add Years to Life: A good blood purifier in teamwork with a bowel

cleansing and rebuilding formula makes a wonderful combination. These two, with a good mucusless diet, can renew the body and add years to a healthy life. [HHH p.182]

5. Use with Dr. Christopher's Lower Bowel Tonic: [[Fen LB](#)] Perhaps our toxic condition begins with a poorly functioning bowel which should be taken care of with the Lower Bowel Formula. But suppose a person has a case of boils or acne. The Red Clover combination should be used about three times a day, six days a week for six weeks. Then you can switch to another blood purifier such as burdock or chaparral or Brigham tea. Then switch back to the Red Clover combination. [UW-Red Clover]

6. Question to Dr. Christopher on Arthritis: Can something be done besides just working on the effect of arthritis? Can't something be done to eliminate arthritis instead of just bringing temporary relief of pain?

Answer: Yes. Many people have had permanent relief from arthritis, not just temporary. When we speak of arthritis we speak of a general term. Actually there are over forty different forms of this disease. They all stem back to a toxic condition of the body. The treatment of this condition must be from the point of reversing the cause by rebuilding the entire body to a higher non-toxic condition, as mentioned in the article on rebuilding and cleaning the bowel. It is inevitable that when an arthritic is badly constipated, the stiffness and pain are worse. The procedure is: (1) clean the bowel, and (2) detoxify the body by clearing the blood stream of poor blood, and have a good powerful flow of healthy blood coursing through the body to deliver food to the area and carry off toxic waste. This is done by using a good blood purifying tea, high in organic copper, such as Burdock Root, [Ephedra](#) (Brigham Tea), Chaparral, our arthritis formula [[AR-1](#)] and our Blood Purifying formula [Red Clover Combination] ...The tea should be used in proportions of one cup three times in a day, six days a week, week after week as needed to get relief, then continue on until no traces of this condition are evident. (Very important: always make herbal teas with distilled water!) It is best to change the type of tea each six weeks to another kind, then come back to a former one. The effect of this change of type of tea, we have found with patients over the years, has speeded up the process. To each cup of tea it is beneficial to add six to ten drops of tincture of Lobelia.

[Cayenne](#) should be used six days a week, each week of program. This herb is, as are the others, a food and not a drug. Work up to a teaspoon of Cayenne three times a day.

Apple cider vinegar and blackstrap molasses are also beneficial. Use a tablespoon of each in a glass of distilled water three times each day. Take a tablespoon or more of wheat germ oil three times a day.

Remember to drink no less than one gallon of pure steam-distilled water for a person 130 lbs. or over, every day (less or more, one ounce of distilled water to each pound the person weighs).

For severe and painful joints or areas, the use of the [Comfrey](#) combination tea is good (the same as was recommended for problems in questions 2 and 3 of this issue). The reaction on arthritis is this: the Oak Bark is an astringent and tones up the area, and it is also high in Potassium Chloride to keep the fibrin in motion and not allow further deposit accumulations. The Mullein and Lobelia [[Mullein & Lobelia](#)] work on the glands and lymph system to keep the area clear and ready to carry off unwanted debris; Wormwood relieves pain; the Scullcap keeps the spinal cord alert and working smoothly to assist in body motion; Comfrey Root is a cell proliferant, causing the good cells to grow rapidly and push off the dead cells and unwanted accumulations; Walnut Bark is high in iodide and is one of the few plants specific in clearing fungus and is extremely high in Potassium Chloride for the blood and lymph, Potassium Sulfate for skin and mucous membrane, and Potassium Phosphate for the brain and nerve food. The Gravel Root is a solvent to leach off the inorganic calcification (from tap water and processed foods, etc.) and make place for the organic calcium derived from the Comfrey, Oak Bark, and some of the other herbs used in this combination.

We use this formula [[BF & C](#)] as a fomentation over the painful areas, and if the case is severe, follow the fomentation procedure as outlined in "The [Incurables](#)." Some of this tea, a cup or more daily, is taken internally with good results.

To make the fomentation stronger simmer the strained tea down to 1/2 its original amount (called 3 power) or simmer down to 1/4 its original amount (called 7 power). If you wish to drink some of the concentrated tea, dilute it with distilled water. Drink a cup or more of this tea each day.

There are many other aids to help, but space does not allow more to be given to this subject.

[CSK](#)[CSR](#)[Deep Heating Balm](#)[DRI](#)[Ephedratean](#)[False Unicorn & Lobelia](#)[Fen LB](#)[Garlic, Rosehips, and Parsley](#)[Hawthorn Berry Syrup](#)[Herbal Composition](#)[Herbal Cough](#)[Herbal Eyebright](#)[Herbal Tooth Powder](#)[Immucalm](#)[INF Combo](#)[Juni-Pars](#)[Jurassic Green](#)[Kelp-T-Comb](#)[Kid-E-Mune](#)[Kid-E-Soothe](#)[Master GL](#)[Mem](#)[MindTrac™](#)[Mullein & Lobelia](#)[Nose Ointment](#)[Nu Fem](#)

[Oil of Garlic](#)[Panc Tea](#)[Pre-Natal Tea](#)[PreTrac™](#)[Prospallate](#) **Red Clover Combination**[Relax-Eze](#)[Resp-Free](#)[Sen Sei Balm](#)[Sha Tea](#)[Smoke Out](#)[ULC](#)[V.B.](#)[VF Syrup](#)[Vitalerbs](#)[Wild Lettuce and Valerian](#)[X-Ceptic](#)[Yellow Dock Combination](#)

Never use dry heat for arthritis, always use moist heat such as a hot water bottle wrapped with a damp towel, fomentations, etc. Dry heat solidifies the inorganic minerals into place, while moist heat aids in dispersing them. [NL 1-1]

7. Prostate Cancer: Prostate blockage of the flow of urine because of infection or cancer can be very serious --- even to the point of causing uremic poisoning within the body. The cause of enlargement of the prostate gland is the collection of mucus and sediment in the gland. Often the male hormones produced by the body are not enough to keep the prostate gland functioning well. The nitrates and nitrites in processed meats, hot dogs, baloney, and other cold cuts have a particularly important role in the formation of cancer of the prostate in the male. Before (or instead of) arriving at the decision to submit to the knife and have the prostate gland surgically removed, may we offer the following suggestions: In any form of cell-deterioration, the Red Clover Combination should be used to clean up the blood stream. Of course the bowel must be cleared up first and foremost. Then, as a specific aid to the prostate area the [Prostate formula known as [Prospallate](#)] has aided in removing infection, sediment and the like...These capsules can be taken in the morning and at night, and they are best taken with parsley tea. Change the diet to the mucusless diet, and drink plenty of distilled water and fruit and vegetable juices. Cancerous tumors have a very difficult time growing when there is the presence of organic potassium in the body, so the tinctures of black walnut or elderberry or any other foods high in potassium can be helpful here, providing that the bowel is in good condition so that proper assimilation can take place. The hormone and estrogen formula [[Changease](#)] will help the body produce the necessary hormones for proper functioning of the glands...Don't worry if the formula contains estrogens as well as hormones. The body will select the substances it needs and will discard the rest in a natural formula such as this. [NL 3-6]

8. Herpes is a result of toxic filth in the system so the blood stream should be kept clean by using the Red Clover Combination along with the avoidance of reinfestation by careful personal hygiene. [NL 3-10]

9. Breast Cancer: When there is any problem with the breast, and this should be noticed early, we use the fomentation of 3 parts mullein and one part lobelia [[Mullein & Lobelia](#)] over the affected area. It may be taken internally as well. Many Indian tribes have used a fomentation of poke root externally to draw out the cancer. As with all cancers, they begin in the blood stream and radiate out to other parts of the body where they are manifested. The Red Clover Combination can be used to purify the bloodstream, the nutrient transport system of the body. Cysts and tumors will not grow in an atmosphere where there is enough potassium. Elderberry tincture can be taken for potassium increase along with foods that are high in potassium. [NL 4-2]

10. An infection in the inner ear will affect a person's balance. Symptoms may include vertigo, dizziness, nausea, vomiting, loss of balance, etc. Inner ear diseases may occur because of diseased germs in the adjoining tissues of the body. In this case, the blood stream needs purification. The red clover combination is recommended. It is also necessary for all the eliminative channels to be functioning properly. [B & B Tincture](#) and [Oil of Garlic](#) should be used for inner ear problems. A fomentation of Bone, Flesh and Cartilage [[BF & C](#)] should be placed over the ears at night to repair and rebuild the delicate structures within the ear. [NL 4-6]

#### Ingredients:

**Red clover blossoms**

**chaparral**

**licorice root**

**poke root**

**peach leaves**

**Oregon grape root**

**stillingia**

**prickly ash bark**

**burdock root**

**buckthorn bark**

### Testimonials:

1. Many Have Same Formula: To keep the blood vessels healthy we must follow [Dr. John R. Christophers "Mucusless Diet"](#), including [Dr. John R. Christophers "Three Day Cleansing Program"](#) once a month. We can also use blood cleansing teas. One of the best is Red Clover. Dr. Christopher made it into a combination which is a superior blood cleanser and purifier. Dr. Christopher thought for years that he had an exclusive formula in his Red Clover combination. People with malfunctions of all kinds, including cancer, got excellent results using this combination. Eventually, one of the people using his combination went to the Hoxy Clinic just to see how the cancer was coming along and they were informed that Christopher's formula was almost identical to the Hoxy formula! Neither one knew that the other had the formula! Chief Sundance from Idaho Falls would chat with Dr. Christopher exchanging formulas, and during one of these conversations they found that they had the same blood purifying formula. Dr. Christopher said that the good Lord put it into various people's hands because each had different kinds of people coming to them. In this formula is featured Red Clover which is an alterative. Most of the other herbs in the formula are also alteratives, concentrating on certain organs of the body. [UW-Red Clover]

2. Rh Factor: A woman came to Dr. Christopher asking if he could help her with an Rh factor problem. She had had three children and each of them had to have a blood transfusion at birth because of the Rh incompatibility. In addition the woman had had open heart surgery so she had a serious Rh problem herself. The Doctor put her on the mucusless diet, the three-day cleanse and the Red Clover Combination. He didn't hear from her for a while, but a couple of years later at a lecture she walked up to the podium with a darling little baby in her arms. She just wanted to show Dr. Christopher the miracle baby who hadn't had to have his blood drained out of him and, although she had had the open heart surgery, she bore the baby just fine thanks to blood purification. [UW-Red Clover]

3. Cancer: A man at eighty years old was diagnosed with cancer throughout his body. The family gave him carrot and celery juice along with the blood cleansing formula [Red Clover Combination] in capsule form. They would alternate the carrot and celery juice with grape juice. In four months' time the doctors could not find any cancer cells. They didn't believe it was the same man. [UW-Red Clover]

4. Meat Eater Nearly Dies of Undulant Fever: For example, many years ago, I had a housecall to the residence of a well-known veterinarian in the city of Olympia, Washington. This man was sickly for years, but now he was helpless and bedridden. He had to be rolled on a sheet to even be turned over. This man had contracted undulant fever (Bang's disease in animal life) while working at the slaughter house, where he was a meat inspector. All he had to do for the past fourteen years was to inspect the carcasses of cattle, sheep, pigs, etc., and if they past inspection, he would "stamp" the "U.S. Stamp of Approval" on the visible skin of the meat. This man had picked up the undulant fever from some of the infected animals he had to reject. After a few years, this veterinarian's illness had become so serious that the government brought in special doctors to try to help him. There were numerous tests, and examinations, medicines and therapies, yet he still became worse.

Then he was told he had only a day or two at the most left to live, as there was nothing else to be done to help him.

When he called me, he said that an unorthodox "health doctor" seemed to be his "last chance" to get help in clearing up the undulant fever, because no other "known" program was offered that promised any results. This patient agreed to follow instructions which was that he drink at least a gallon of steam distilled water each day, take his lower bowel capsules [[Fen LB](#)] faithfully, also

drink the Red Clover Combination blood purifying tea faithfully and stay with the mucusless diet. Before too long, he experienced the feeling of the peristaltic action operation again in the bowel and a new feeling of life returning. Within six weeks, this man was out mowing his lawn, surprising friends who thought he would never leave his sick bed.

This experience shows how one could discontinue the use of meats, which had been used in such an abundance, and watch the body throw off disease by following a proper diet, using herbs, fruits, vegetables, grains, nuts and seeds. [NL 2-6]

5. **Skin Disease Worse than Psoriasis:** After a lecture, a woman came to ask Dr. Christopher to help her daughter, about fourteen years old, who tried to commit suicide. This girl required constant adult supervision to prevent her from harming herself. She had a skin disease diagnosed as being worse than psoriasis or anything else the doctors had seen. Scales covered her arms from the elbows down, her legs from the knees down, and her neck and face, with secondary bleeding. Having suffered with this for so many years, the girl could not attend school any longer, and was isolated at home. She gained tremendous excess weight, because in order to pacify herself, she would eat all day. Her mother called her a fat blob! And because she was getting worse and worse, she tried to kill herself.

As usual when presented with a difficult problem, Dr. Christopher offered a quick prayer, asking for guidance. The formula for the bone, flesh and cartilage combination [[BF & C](#)] came to him, step by step, and he told the woman to write it down. She wrote down all the herbs he mentioned, as well as the directions on how to put them together. She was to make a tea of six parts oak bark, three parts marshmallow root, three parts mullein herb, two parts wormwood, one part lobelia, one part skullcap, six parts comfrey root, three parts walnut bark (or leaves), and three parts gravel root. After soaking one ounce of the combined herbs in a pint of distilled water for four to six hours, she would simmer the mixture for thirty minutes, strain, and then simmer the liquid down to half its original volume. This could be made in larger amounts, whatever was needed. The mother would dip cotton flannel in this tea, or white cotton or wool stockings to cover the legs, with other long stockings to cover the arms. After covering all affected parts with these soaked cloths, she should wrap the arms and legs with plastic bags. This should remain on the girl all night, every night, until the morning. After a period of fresh air each day, the process would be repeated.

The mother tried this, and her daughter was very cooperative. The program began on a Tuesday, and although this disease had been worsening for many years, by Friday of that week all the scales had dropped off, and the skin was pink, healing.

After six months, when Dr. Christopher lectured in that city again, he learned that this young lady was back in high school, participating as a cheerleader, being very active. She was on the three-day cleanse and mucusless diet, as well as the red clover combination tea, the blood cleansers. Staying with this, she went from a large fat blob into a slender, well-shaped girl, overcoming her weight problem as well as the skin infection. [EWH p.11]

6. **Young Woman is Able to get Married:** Dr. Christopher told story after story about sick women he helped with simple remedies, simple treatments. For example, a man and his wife brought their daughter to Dr. Christopher's office in Salt Lake. This young lady was the sickest, saddest-looking person he had seen in a long while. She had met a young man who came to love her very much, and he wanted to marry her. But she refused, saying it wasn't fair to him, being in her condition, so anemic and sickly. He told her that he loved her enough to marry her and take care of her under any circumstances.

She was in a very serious condition, so they put her on the three-day cleanse and mucusless diet. She took extra cups of red clover combination tea, and drank a minimum of one pint of grape juice a day, chewing each mouthful. When she could, she took even more. She also ate plenty of raisins and grapes in addition to the juice. She used the yellow dock as a tea, and soon she began to show improvement. She exercised adequately, being careful not to overdo it, and changed her diet from mucus-forming food to the mucusless diet, having lots of salads and fruits, emphasizing as much raw as possible. She used the female corrective [[Nu Fem](#)] and hormone-estrogen formulas [[Changease](#)], and she also used the vaginal bolus [[V.B.](#)] and yellow-dock combination in the slant board routine. She showed improvement from the very beginning.

The parents had brought her to Dr. Christopher in the spring, and by fall they sent him an invitation to her wedding, because she had cleaned up her system and was very happy to get married. She was menstruating regularly and had gotten over her case of anemia. She was living a

new life, healing it herself by following through on Dr. Christopher's instructions. [EWH p.111]

7. **Woman's Multitude of Problems Healed:** Dr. Christopher always checked his patients with iridology before advising them. A lady came to him, aged about 45, asking for a reading to help with her condition. He saw that she had a prolapsed transverse colon which had dropped to a point where it tipped her uterus and pinched her bladder, and she was having a very serious trouble there. She had problems with the ovaries, with infection in both of them, and she was troubled with vaginal drainage. In addition, she had one breast that was badly infected, which might necessitate having part of the breast removed if she had asked another doctor for treatment. After the reading, Dr. Christopher asked why she had come to him and what she wanted him to do. She said that she had just spent three days in a clinic, where they had verified everything he had read from her irises, but they wanted her to go to the hospital immediately and have the uterus removed and the bladder stitched up to the spinal cord area, and also have her breast removed. She was frightened of all this cutting, so she wanted to find help in some other way.

She promised that she would stay on the program that Dr. Christopher advised. She took the female corrective [[Nu Fem](#)] and hormone-balancing combinations [[Changease](#)], used the vaginal bolus [[V.B.](#)] six nights a week, flushing out each morning with the slant board routine, massaging 15 to 20 minutes a day on the abdominal and pelvic area while the tea was inside. She was also to use the [Three Oil Massage](#) over the abdominal area, and go on the three-day cleanse and mucusless diet. In addition, she was to drink a gallon of steam-distilled water a day, and plenty of red raspberry leaf tea. She kept her bowels clean with the lower bowel formula [[Fen LB](#)], and kept the bloodstream cleaned up with the red clover combination tea.

Dr. Christopher did not see her again for six months. When she came to see him this time, she bounced in, not dragging as she had before, a totally different woman, much happier and healthier. She had no operations, and yet her prolapsed transverse colon had gone back into place, and her uterus and bladder had gone back into position. She was feeling like a new woman, and she did indeed have a new system by following through with the entire herbal problem. [EWH p.112]

8. **Woman Gets Rid of Addictions:** In Evanston, Wyoming, a lady came to see Dr. Christopher for help. She was a registered nurse in the Evanston General Hospital, but she was about to give up. She came to Christopher's as a last resort.

She had started out drinking coffee, and then went on to cigarettes, smoking very heavily. Soon she started to drink. She had become an alcoholic, but alcohol didn't feed the craving she was feeling, so she began taking heavy drugs. She knew that she was fairly well saturated and that it would be hard for her to stop. She had no other way to turn, and was afraid she would lose her job at the hospital because of the bad effects of all these things she'd been taking.

Dr. Christopher told her that the program would not be easy, that it would take time and patience. When he asked her if she would follow it, she said she would do anything they asked her to do.

First, she was to clean her bowels with the lower bowel tonic [[Fen LB](#)], and she was very badly constipated. Step two was the red clover combination tea to cleanse her blood stream, to get some of the toxic poisons and wastes from them. Then she was to stick strictly with the three-day cleanse and mucusless diet, going on the three-day cleanse at the beginning of every two weeks. After three months, she reduced the three-day cleanse to once monthly. She was to drink a gallon of steam-distilled water every day, and to stop the use of coffee, tea, tobacco, alcohol, and drugs. The withdrawal period was very terrible, but she went through it, and at the end of less than a year, she had blossomed out into a different person entirely, a likeable and enjoyable person who could keep her job as long as she liked, because people loved her. [EWH p.130]

9. **Seborrhea on Scalp and Face:** Question to Dr. Christopher in his Newsletter. Is there a natural way to treat seborrhea on the scalp and face? Answer: This condition indicates that the body must be cleansed from the inside out. Follow a good mucusless diet. Avoid all dairy products, bread, eggs, sugar, red meats & refined foods. Stick with fresh fruits and vegetables, grains nuts and seeds. Along with these dietary changes, use the [Fen LB](#) and Red Clover combination. Also use a facial skin brush. Be sure to drink distilled water, using about one ounce for every pound of body weight. [NL 4-10]

10. **Colitis and Fungus:** It's been a long time since I have written you and I feel that I must tell you that I have gotten rid of the colitis I had for years and the doctors diagnosed as a nervous stomach and prescribed tranquilizers, which of course I didn't take. At that time I came across an article

written by you, entitled, "Does Your Colon Feed or Poison You." I immediately started to take Red Clover Combination plus [\[Fen LB\]](#) it took about six months but it finally went. The pain was very bad but all I heard from doctors was "you have a nervous stomach." but I knew it had to be more than that. I thank GOD and you Dr. Christopher for cure that I have had due to that wonderful pamphlet that came my way, just when I needed it most.

Then the fungus that my husband gets when he goes into or near the woods, the Red Clover Combination plus [\[Black Walnut Tincture\]](#) 6-10 drops taken orally and that has helped him a great deal. We live in the woods so it's difficult not to pick up a condition of the fungus. However, it's not as bad as it was and again we say "Thank-You. [NL 4-11]

**Also see:**

[Fen LB](#): Dr. Christopher's Lower Bowel (Colon) Formula

[Dr. John R. Christophers "Mucusless Diet"](#)

[Dr. John R. Christophers "Three Day Cleansing Program"](#)

See entire Newsletter "Blood Stream: River of Life" [NL 1-2]

**Useful in Treating:**

[Acne](#)

[Blood Poisoning](#)

[Constipation](#)

[Allergies](#)

[Cancer](#)

[Tumors](#)

[Arthritis](#)

[Cholesterol](#)

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[Adrenetone](#)[Ant-Plg](#)[Antsp](#)[AR-1](#)[AT-GS](#)[B & B Tincture](#)[Barberry LG](#)[Bee Power](#)[BF & C](#)[BF & C Ointment](#)[Black Ointment](#)[Black Walnut Tincture](#)[BPE](#)[Bugleweed Combination](#)[Calc Tea](#)[Catnip & Fennel](#)[Cayenne](#)[CC](#)[Changease](#)[Chickweed Ointment](#)[CMM](#)[Comfrey-Mullein-Garlic](#)

## Relax-Eze

Nerve Herbal Food Combination

### Usages:

Here is a formula we have used with great success for well over thirty years. It is used for relieving nervous tension and insomnia; it is mildly stimulating and yet lessens the irritability and excitement of the nervous system and also lessens or reduces pain. This formula contains herbs that feed and revitalize the motor nerve at the base of the skull (medulla area and upper cervicals), and also herbs that help rebuild or feed the spinal cord. This group of herbs will also rebuild the frayed nerve sheath, the nerve itself, and its capillaries. The herbs in this combination are food for your valuable--and in many cases, shattered-- nerves. [HHH p.187]

Dr. Christopher said that we usually bring on our nervous problems ourselves because the sheaths of the nerves have been worn or eaten away by the calcium having been leached off with the sugars that we take so much in beverages, candies, pastries and from the many breads that turn to sugar in the body. When the sheaths are thus worn off the nerves lose their energy and their power. It can be so bad that we wind up in the asylum. Dr. Christopher said that when we find ourselves becoming nervous wrecks, we wonder why the Lord has done this to us! The nerves become so frayed that they become like uninsulated electric wires, finally shorting out and that is what causes our nervous problems. When there is a stressful argument, our nerves cannot take the load and give out. Dr. Christopher said that we have to feed the nerves. They are usually robbed of the foods that they need. Dr. Christopher's *Relax-Eze* formula was a specific herbal food to rebuild the nerves. [UW-Valerian]

### Dosages:

The suggested amount for an adult's use would be one to three cups of the tea, or two or three capsules or tablets three times in a day, taken with a cup of celery juice or steam-distilled water. [HHH p.187]

### Ingredients:

 **Black cohosh** **capsicum** **hops flowers** **lobelia** **skullcap** **valerian** **wood betony**

## mistletoe

[CSK](#)[CSR](#)[Deep Heating Balm](#)[DRI](#)[Ephedratean](#)[False Unicorn & Lobelia](#)[Fen LB](#)[Garlic, Rosehips, and Parsley](#)[Hawthorn Berry Syrup](#)[Herbal Composition](#)[Herbal Cough](#)[Herbal Eyebright](#)[Herbal Tooth Powder](#)[Immucalm](#)[INF Combo](#)[Juni-Pars](#)[Jurassic Green](#)[Kelp-T-Comb](#)[Kid-E-Mune](#)[Kid-E-Soothe](#)[Master GL](#)[Mem](#)[MindTrac™](#)[Mullein & Lobelia](#)[Nose Ointment](#)[Nu Fem](#)**Testimonials:**

1. Woman Who Can't Sleep More than 30 Minutes at a Time Sleeps All Night: Dr. Christopher often told the story of the high school teacher who couldn't sleep more than twenty or thirty minutes at a time. The family was ready to commit her to an asylum and she was nearly ready to go. Her students couldn't put up with her explosions either. The husband called Dr. Christopher for help and he prepared his *Relax-Eze* Tea for her, which contains Skullcap in combination with other nervine herbs. She began to feel drowsy and went to bed. Dr. Christopher didn't wait at the home, but left. The next morning the man called Dr. Christopher, sure that he had doped his wife with narcotics, as she had slept the whole night through. The Doctor assured him that he had only given her herbs, mild enough to give a little baby. The Skullcap and other herbs works remarkably on a distraught system. [UW-Skullcap]

2. Epilepsy; A young boy with epilepsy was taken to Dr. Christopher, as his well-to-do parents had exhausted the medical profession's ability to treat the boy. With this formula he was made better and able to join his age mates in school without difficulty. [UW-Skullcap]

3. [Vertigo](#): From a question to Dr. Christopher in his Newsletter. Is there help for [Vertigo](#)? Answer: Yes, it can be helped.

This condition of vertigo is, to most people, a frightening condition....Vertigo is a sensation as if the external world were revolving around the patient (objective vertigo) or as if he himself were revolving in space (subjective vertigo). The term is sometimes erroneously used as a synonym for dizziness. Vertigo may result from disease of the middle ear (Menere's disease), from cardiac, gastric, or ocular disorders, from some peripheral irritations (as laryngeal vertigo) as a precursor on an epileptic fit, in hysteria, from toxemia (as [Bright's Disease](#)), from an organic brain disease, and from unrecognized causes (essential vertigo).

Use [B & B Tincture](#) as follows: place four to six drops of oil of garlic in the ear with our eyedropper and follow this with four to six drops of B & B in ear, then plug ear with cotton. Turn the other ear up and do the same as with first ear-plug this one also and leave in all night, or night and day if desired, and flush ears on the seventh day. This is done by using a small ear syringe and flush with warm apple cider vinegar and distilled water (half and half) then continue on. Apply garlic oil and [B & B Tincture](#) this same way week after week until desired effects are acquired.

Have the patient drink six to ten drops of the [B & B Tincture](#) three or more times a day. (This could be done each hour in severe cases.) Massage [B & B Tincture](#) on the cords back of the ears down the neck area and on the base of the skull (medulla area) several times a day.

The program as given above has aided many having problems with their equilibrium and locomotion. When more severe, in addition use the "bone, flesh and cartilage" [BF & C](#) formula over the skull area above eyes and ears area soaking and sponging out a cap made of flannel, cotton or wool and leave on the head area overnight, as before, six days a week, week after week until results are received. This fomentation should not only cover the skull area front and sides but also down the back to cover the medulla and down over the upper cervicals to cover the motor nerve area.

This type of a patient with vertigo should also use the nerve herbal food *Relax-Eze* combination. [NL 1-12]

**Useful in treating:**[Asthma](#)[Hysteria](#)[Paralysis](#)[Depression](#)[Insomnia](#)[Vertigo](#)[Dizziness](#)[Nerves](#)

[Relax-Eze](#)

[Oil of Garlic](#)

[Panc Tea](#)

[Pre-Natal Tea](#)

[PreTrac™](#)

[Prospallate](#)

[Red Clover Combination](#)

**Relax-Eze**

[Resp-Free](#)

[Sen Sei Balm](#)

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[Wild Lettuce and Valerian](#)

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[Yellow Dock Combination](#)

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## Resp-Free

Lungs & Respiratory Tract Formula

### Usages:

This combination of herbs in tea form or the powder in capsules or tablets is an aid to relieve irritation in the respiratory tract, lungs and bronchials. This is an aid in emphysema as well as other bronchial and lung congestions such as bronchitis, asthma, tuberculosis, etc. This formula is extremely valuable in strengthening and healing the entire respiratory tract. It promotes the discharge of mucus secretions from the broncho pulmonary passages. [HHH p.188]

Bronchitis: there are ways of clearing the condition up. This condition is the dilatation of bronchi due to an inflammatory or degeneration process; usually associated with chronic suppuration (the formation of pus). [NL 1-9]

### Dosages:

General: Suggested amount for an adult is a cup two or three times a day, or two or three capsules or tablets two or three times a day with a cup of comfrey tea. For additional help in the program, it is good to add three to six drops of tincture of lobelia to each cup of tea. [HHH p.188]

### Ingredients:

**comfrey leaves**

**mullein**

**chickweed**

**marshmallow root**

**lobelia**

### Testimonials:

I contracted T.B. at age 15 and now 30 years later, calcification has collapsed my left lung. I take dilation medication and need oxygen to sleep at night. I started Dr. Christopher's Lung Formula *Resp-Free* and it immediately started helping. It makes it so much easier to get out the mucus. P.S. It is also helping my brother-in-law who has emphysema. -O.R., San Antonio, TX [D. Christopher]

### Useful in Treating:

[Asthma](#)

[Bronchitis](#)

[Hay Fever](#)

[Tuberculosis](#)

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

[Ephedratean](#)

[False Unicorn & Lobelia](#)

[Fen LB](#)

[Garlic, Rosehips, and Parsley](#)

[Hawthorn Berry Syrup](#)

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[Herbal Cough](#)

[Herbal Eyebright](#)

[Herbal Tooth Powder](#)

[Immucalm](#)

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[Kid-E-Mune](#)

[Kid-E-Soothe](#)

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## Sen Sei Balm

Rubefacient Ointment

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### Usages:

As the name indicates, this balm brings blood circulation to the surface of the skin causing it to turn red. Used to relieve tension and pressure. Great for tension headache or sinus pressure.

### Dosages:

Use sparingly as this formula is strong.

### Ingredients:

olive oil and natural oils of cassia

eucalyptus

cajeput

pure menthol

camphor crystals

other fragrant natural oils

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

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## Sha Tea

Allergies, Sinus and Hayfever Formula

### Usages:

This is an aid for clearing up these malfunctions, a "natural and herbal help" working as a decongestant and natural antihistamine to dry up the sinuses and expel from the head and broncho-pulmonary tubes and passages the offending stoppage and mucus. [HHH p.185]

### Dosages:

To speed up this cleansing procedure, use the following combination in addition to the above: blend fresh, chopped-up horseradish roots mixed with apple cider vinegar into a thick pulp and chew thoroughly before swallowing. Take 1/3 teaspoon three times in a day. Each three days increase this amount from 1/3 teaspoon up to one teaspoon, increasing the amount 1/3 teaspoon each three days. [HHH p.185]

### Ingredients:

 Brigham tea marshmallow root golden seal root chaparral burdock root parsley root lobelia cayenne

### Testimonials:

J.V. of Lafayette, LA had hives for years and the doctors haven't been able to help her. She has used the *Sha Tea* formula for 5 days and it cleared up. *Sha Tea* has also helped her granddaughter with the same thing. [D. Christopher]

### Useful in Treating:

 [Allergies](#) [Asthma](#)

[Hay Fever](#)

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

[Ephedratean](#)

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## Smoke Out

Smoking Formula

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### Usages:

*Smoke Out* uses organic herbs, which have been shown in double blind studies, to reduce the desire to smoke tobacco.

### Dosages:

Take 8 drops orally instead of smoking. Use as often as needed.

### Ingredients:

**Fresh wild oats**

**lobelia**

**rose hips**

**capsicum**

**grain alcohol**

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

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[False Unicorn & Lobelia](#)

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## ULC

Ulcer Formula

### Usages:

This formula is designed to sooth the discomforts caused from stomach ulcers. [HHH p.197]

### Dosages:

It should be taken with hops or camomile tea. Please note, to cure an ulcer, take three teaspoons of cayenne pepper per day. This cayenne may be mixed in water or tomato juice. It is recommended that you start with only 1/8 teaspoon three times a day, and then gradually work up to the one teaspoon three times a day. [HHH p.197]

### Ingredients:

bayberry

chickweed

slippery elm

mullein

### Useful in Treating:

[Ulcers](#)

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

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## ULC

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V.B.

Herbal Bolus

**Usages:**

Here is another excellent aid for the woman (or rectal bolus for the man) who have problems in the reproductive areas. Boluses are made with healing herbs that (1) draw out the toxins and poisons, (2) aid (with herbal foods) in making the malfunctioning area healthy, so that cysts, tumors, and cancerous conditions will not have waste material to survive on or live in, because they are all scavengers. Herbalists have found that they will release and will be dispersed. Herbalists have found that some will come out through the orifices and others disperse into the blood stream and will be eliminated if the program is followed faithfully. (3) The bolus spreads its herbal influences widely from the vagina or bowel through the entire urinary and genital organs. [HHH p.191]

**Dosages:**

These herbs are all in powder form. Coconut butter should be melted down so that it will mix well with the herb powder. Mix a small quantity of this powder, and wet to pie dough consistency with coconut butter (which can be purchased from the drug store, health food store, or herb shop). Next, roll this mass between hands until you have a pencil-like bolus approximately the size of the middle finger and about inch-long pieces. Harden in a refrigerator. Then these are to be inserted into the vagina much the same as suppositories would be. It will be necessary to wear a sanitary napkin in order to hold the bolus up in the vagina (or rectum). Insert upon retiring and leave in all night, six nights a week. The coconut butter melts at body temperature, leaving only the herbs, and these are easy to douche out. The following morning use the Slant Board Combination and [Yellow Dock Combination](#). [HHH p.192]

**Ingredients:** squaw vine herbs slippery elm bark yellow dock root comfrey root marshmallow root chickweed herb golden seal root mullein leaves

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1. Cervical Cancer: A young Englishwoman named Claire suffered from multiple sclerosis so severely that she was confined to a wheelchair. She began to use the mucusless diet, and was miraculously healed and able to walk and work vigorously. Five women, each suffering from cervical cancer, diagnosed by doctors, came to Claire asking for help. Using nutrition and the *V.B.* therapy, four of the cases were completely cleared and one was in remission. [EWH p.16]

2. Spider Cancer: Sometimes it takes time and patience for these herbal aids to truly work. For example, a lady who had come to Dr. Christopher began the full routine as described above. A number of months later she began to think, "Look, I have been on that program for months now; I have taken the herbs orally; I've used the vaginal bolus *V.B.*, including the yellow dock combination, and I am getting sick of this!" She felt somewhat better but didn't notice much change, so she was going to quit that day. That very morning she made the decision, as she was at home, sitting on the toilet. When she got up, she happened to turn around and glance into the bowl, and there was something about the size of a half dollar, with legs on it, swimming around in the water. This something had dropped out of her! She screamed, and her husband came in. They put it in a bottle and took it right over to the family doctor. He examined it under the microscope, and said he had never seen one of these whole like this, because they have to cut them out of a person. This was a spider cancer. They never give up and leave by themselves; usually they must be cut out. The doctor was amazed that it had come out of her. It had done so because her body was now so healthy that the spider cancer didn't have any waste materials to work on. When she saw that cancer, she vowed to continue the program, even if it took six months or years. Dr. Christopher reminded us that some people heal quickly, but sometimes it takes a long time. If we know we are on the right track, we should just continue. [EWH p.16]

3. Young Woman Able to Get Married: Dr. Christopher told story after story about sick women he helped with simple remedies, simple treatments. For example, a man and his wife brought their daughter to Dr. Christopher's office in Salt Lake. This young lady was the sickest, saddest-looking person he had seen in a long while. She had met a young man who came to love her very much, and he wanted to marry her. But she refused, saying it wasn't fair to him, being in her condition, so anemic and sickly. He told her that he loved her enough to marry her and take care of her under any circumstances.

She was in a very serious condition, so they put her on the three-day cleanse and mucusless diet. She took extra cups of red clover combination tea, and drank a minimum of one pint of grape juice a day, chewing each mouthful. When she could, she took even more. She also ate plenty of raisins and grapes in addition to the juice. She used the yellow dock as a tea, and soon she began to show improvement. She exercised adequately, being careful not to overdo it, and changed her diet from mucus-forming food to the mucusless diet, having lots of salads and fruits, emphasizing as much raw as possible. She used the female corrective [Nu Fem](#) and hormone-estrogen formulas [Changease](#), and she also used the vaginal bolus *V.B.* and [Yellow Dock Combination](#) in the slant board routine. She showed improvement from the very beginning.

The parents had brought her to Dr. Christopher in the spring, and by fall they sent him an invitation to her wedding, because she had cleaned up her system and was very happy to get married. She was menstruating regularly and had gotten over her case of anemia. She was living a new life, healing it herself by following through on Dr. Christopher's instructions. [EWH p.111]

**See Also:**

[Yellow Dock Combination](#)

**Useful in Treating:**

[Cysts](#)

[Infertility](#)

[Tumors](#)

[Uterus](#)

V.B.

[Oil of Garlic](#)

[Panc Tea](#)

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## VF Syrup

Herbal Aid for Eliminating Intestinal Parasites (worms, etc.)

---

### Usages:

This combination is to act as a vermifuge (a combination that will cause expulsion of worms from the body) and/or a vermicide (herbal agent that destroys worms in the body). [HHH p.188]

### Dosages:

Recommended dosage is to take one teaspoon each morning and night for three days. On the fourth day drink one cup of senna and peppermint tea (1/2 and 1/2). Rest two days and repeat two more times. [HHH p.188]

### Ingredients:

**Wormwood**

**American wormseed**

**tame sage**

**fennel**

**male fern**

**papaya**

### Useful in Treating:

[Parasites and Worms](#)

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

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## Vitalerbs

Vitamin & Mineral Formula

Nature balanced, whole food vitamin and mineral supplement. This combination of Jurassic Green™, dandelion, kelp, purple dulce, spirulina, Irish moss, rose hips, beet, nutritional yeast, cayenne, blue violet, oatstraw, ginger barley and flash-dried wheat grass juices an organic source of vitamins and minerals that are easy to assimilate because they are whole foods.

### NATURE BALANCE VITAMINS & MINERALS

#### *Whole foods -vs- Vitamins*

Only whole foods can provide the energy needed to assist our bodies to reach optimum health.

Harvey and Marilyn Diamond, state in their book, Fit For Life, Far better than taking manufactured dolomite would be to sprinkle the mineral dolomite (like lime) in your garden, and then grow leafy green lettuce that will provide you with plenty of usable organic calcium!"<sup>1</sup>

According to Dr. Vicki G. Hufnagel, "We are just learning what harm they (vitamins) can do to a small embryo. Vitamins are drugs"<sup>2</sup>. Dr. Ralph C. Cinque, Ph.D says, "All vitamins and mineral supplements, because they are fractionated, are treated as toxic waste in the body."<sup>3</sup>

Vitalerbs is 100% whole foods, not fractionated.

Hundreds of studies have shown that our bodies need whole foods. Only whole foods can provide all the proper elements needed to assist in total health.

Since time began, herbs have been utilized for their nutritional value. We have combined some of earth's most beneficial, nutrient dense herbs into *Vitalerbs*.

To increase the potency of Vitalerbs, Jurassic Green™ (which consist of alfalfa, barley, and Kamut grass) has been added to the formula. These three ingredients are organically grown in nutrient dense soil, harvested at peak times, juiced, and instantly flash dried using a new process that keeps the temperature below 90 degrees, retaining live the vitamins, minerals, amino acids, and enzymes needed for good health.

So instead of taking a dead, fractionated vitamin that your body treats as waste - Take an all natural 100% whole vitamin and mineral food that will help you reach optimum health. Take *Vitalerbs*.

#### Ingredients:

**Organic, flash dried Alfalfa**

**Barley and Wheat Grass ([Jurassic Green™](#))**

**Organic Dandelion**

**Kelp**

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**Organic Purple Dulse**

**Spirulina**

**Irish Moss**

**Rose Hips**

**Beet root**

**Nutritional Yeast**

**Organic Cayenne fruit**

**Blue Violet**

**Oatstraw**

**Carrot juice**

**Organic Ginger**

**Dosages:**

Take 2-6 capsules 3 times daily.

**This combination provides the following vitamins and minerals in whole food quantities:**

Ascorbic Acid (Vit. C.), Bioflavonoids (Vit. P), Biotin (Vit. H), Calcium, Carotene (Vit A), Choline, Pantothenic acid, Chromium, Cobalamin (Vit. B6), Cobalt, Copper, Fiber, Flourine, Folic Acid, Inositol, Iodine, Iron, Linoleic Acid (Vit. F), Magnesium, Manganese, Niacin (Vit. B3), Paba, Pangamic Acid (Vit. B15), Pantothenic Acid (Vit. B5), Phosphorus, Potassuirn, Protein (RNA), Pyridoxine (Vit. B6), Riboflaavin (Vit. B2), Selenium, Silicon, Sodium, Sulfur, Thiamine (Vit. B1), Tin, Trace Minerals, Vitamins D and K, Zinc, and other vitamins and minerals that nature knows we need.

<sup>1</sup>Harvey and Marilyn Diamond, "Fit For Life." New York, N.Y. Wamer Books, Inc.

<sup>2</sup>Dr. Vicki G. Hufnagel, speaking at the fourteenth Annual Nutrition conference.

<sup>3</sup>Ralph C. Cinque, Ph.D. "Lesson 55, Prenatal Care for Better Infant and Maternal Health and Less Painful Childbirth." In *The Life Science Health System*, by T.C. Fry. Austin, Texas: Life Science, 1964

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## Wild Lettuce and Valerian

Minor Pain Formula

---

### Usages:

It is a natural sedative, quiet and soothing to the nerves. [HHH p.195]

The migraine-type headache that people often experience is due to the impaction of the transverse colon. Headache can often be alleviated by taking some tincture of *wild lettuce and valerian* or nervine herbs for pain. [NL 4-1]

The combination of *wild lettuce and valerian* root, used as a tincture, or capsules, can relieve headache, stress, neuralgia, etc. [NL 4-5]

### Dosages:

It is to be taken orally or massaged externally as relief of minor pain. [HHH p.195]

### Ingredients:

This is a tincture or tea consisting of *wild lettuce and valerian*. [HHH p.195]

### Useful in Treating:

[Nerves](#)

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

[Ephedratean](#)

[False Unicorn & Lobelia](#)

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## X-Ceptic

First Aid Formula

### Usages:

This tincture is good for infection, both externally or internally. [HHH p.196]

An excellent formula for pyorrhea is *X-ceptic*. [EWH p.140]

For wounds with the chance of infection, apply *X-ceptic*. [EWH p.159]

The herbal antiseptic tincture *X-Ceptic* is a certain cure for sore throat pain, but only very brave souls can tolerate the taste. [NL 4-5]

A toothache can be devastating. We have used ... a few drops of the herbal antiseptic tincture *X-Ceptic*. Of all the temporary treatments, the herbal antiseptic tincture works best...We have had cases where the toothache was dispelled after one application. [NL 4-5]

### Dosages:

Thrush: If your baby has thrush, which you can determine from white spots on the sides of the mouth, a white tongue, or soreness during nursing, you can try several remedies. Dip a Q-tip in *X-ceptic* and swab the area several times per day, then give raspberry tea in a bottle. [EWH p.94]

### Ingredients:

oak bark

golden seal root

garlic

comfrey

myrrh

capsicum

### Testimonials:

#### X-Ceptic Keeps Cold Germs at Bay

Brent came home one day with a sore throat and a cough after being around his brother who had a cold. He took one dropperful of X-Ceptic, and the next day he went to work feeling fine. Every time he would do something with his brother, he would start to feel sick, so he would come home and take another dose of X-Ceptic. After two weeks of this, his brother finally asked what was going on. "Every day your throat gets scratchy and you start to cough," he said, "but the next day you are perfectly fine. What is the deal?" Brent explained that he was taken an herbal formula called X-Ceptic to help combat infection. His brother had been taking over-the-counter medications, and had gone to see an allergist to get an antibiotic to take care of the sickness. He

was sick for almost a month! All Brent had to do was take a few dropperfuls of X-Ceptic, and he stayed perfectly healthy! His brother said that maybe he should go get a bottle of X-Ceptic to keep on hand.

### **Clear Skin an Unexpected Side Effect**

One morning I work up feeling absolutely horrible. I could tell I had some form of a cold/flu. As soon as I was able to manage getting up out of bed, I grabbed the bottle of X-Ceptic and started downing 1 dropperful every half an hour. The next morning I woke up feeling fine. I continued to take X-Ceptic for the next week, just for good measure. One day I realized that my skin had cleared up! I have been fighting with acne for years, using all kinds of different face washes and medications. And when I wasn't trying to do anything but get well enough to show up for work the next day, and I stumble into something that cleared my face up beautifully. Apparently, X-Ceptic works great to clear up bacterial infections causing acne. It's great to have something new to add to my acne fighting arsenal.

### **Useful in Treating:**

[Acne](#)

[Cuts](#)

[Colds, Catarrh, Coryza, Influenza](#)

[Gums](#)

[Thrush](#)

[CSK](#)

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[Deep Heating Balm](#)

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## Yellow Dock Combination

Prolapse Formula

### Usages:

1. As an aid in prolapsed uterus, bowel, or other organs, to assist in giving relief. [HHH p.192]
2. Pregnancy: If there is yeast infection and or Herpes Simplex before or during pregnancy, add to the [Nu Fem](#) and [Changease](#), the vaginal-rectal bolus combination [V.B.](#) and the slant board routine *Yellow Dock Combination* included herein. These are very beneficial and yet are harmless to the mother and child-to-be. [HHH p.7]
3. For the Father-To-Be: If his reproductive organs are in a good clean healthy condition the seed for conception will be an improvement over seed of questionable quality. The slant board routine *Yellow Dock Combination* following the rectal bolus [V.B.](#) at night will also, along with the prostate combination [Prospallate](#), proper mucusless diet and reproductive organ rebuilding will be an asset to the future family and another aid in preventing childhood diseases. [HHH p.8]
4. Fibroid Tumors: A question to Dr. Christopher in his newsletter. Is there a natural way to eliminate fibroid tumors?

Yes, there is. A tumor is a swelling, an abnormal formation of parasitic, non-inflammatory cells or tissue arising from the cells of the host, yet progressive and independent in their growth. Tumors can be malignant or non-malignant. They can be fast growing or slow growing and they can develop in many parts of the body such as the lymphatic glands or nodes, the urinary and genital areas or the abdominal structure. The cause of the tumors is an inability to eliminate unhealthy materials and this generally stems from a lack of organic potassium in the diet.

Begin by observing the procedure in [Dr. John R. Christophers "Three Day Cleansing Program"](#) and [Dr. John R. Christophers "Mucusless Diet"](#), keep the bowels free with the lower bowel tonic [Fen LB](#) and use the following procedure: drink one to three cups of potassium broth each day. Make the broth with potato peelings at least one half inch thick, comfrey leaves, celery leaves, cut-up celery stalks, a few carrot tops from the garden, not wild, beet greens, spinach greens, chopped onions and garlic and several whole, black peppercorns as a stimulant and digestant. Cover the mixture well with distilled water and slowly simmer. If possible, keep the temperature around 130 degrees for six to ten hours. Do not boil. After simmering, strain the preparation. Use this broth between meals as you might a tasty tea being sure to chew it well.

Besides using this broth we also suggest one cup or more per day of elderberry tea. If elder blossoms are being used for the tea in place of the berry add about a fourth part of peppermint leaves to avoid nausea.

Over the tumorous area use the comfrey combination also known as the [bone, flesh and cartilage combination](#). ...If the tumors are in the reproductive organs see the herbal combinations ...[Nu Fem](#), [Prospallate](#) and [Changease](#). Also, be aware of the rectal and vaginal bolus [V.B.](#) and the *yellow dock combination* tea also. Whenever possible use the castor oil fomentation which you will find in the cleanse program as well. [NL 1-3]

5. With severe gynecological problems involving infection, cysts, tumors, the herpes simplex, prolapsed transverse colon, tipped uterus, swollen glands under arms and on breast, yeast infection, etc., the vaginal and rectal bolus [V.B.](#) may be employed. We suggest using the slant board routine *Yellow Dock Combination*. [NL 1-3]
6. Pregnancy Anemia: Anemia may be caused by iron deficiency or other problems. Iron supplements are commonly given to expectant mothers, yet these are usually made of ferrous

[CSK](#)[CSR](#)[Deep Heating Balm](#)[DRI](#)[Ephedratean](#)[False Unicorn & Lobelia](#)[Fen LB](#)[Garlic, Rosehips, and Parsley](#)[Hawthorn Berry Syrup](#)[Herbal Composition](#)[Herbal Cough](#)[Herbal Eyebright](#)[Herbal Tooth Powder](#)[Immucalm](#)[INF Combo](#)[Juni-Pars](#)[Jurassic Green](#)[Kelp-T-Comb](#)[Kid-E-Mune](#)[Kid-E-Soothe](#)[Master GL](#)[Mem](#)[MindTrac™](#)[Mullein & Lobelia](#)[Nose Ointment](#)[Nu Fem](#)

sulphate and cannot be utilized by the body. Being inorganic, they are absorbed but not assimilated and can cause problems in the system. In addition, they destroy vitamin E that may be taken at the same time. You can build up the iron in your system by taking yellow dock or the *Yellow Dock Combination*. [EWH p.40]

### Dosages:

Make a concentrated tea (simmer finished tea down to half its amount) ... Then inject this tea with a syringe into the vagina while on a slant board (head down, of course), or use one cup or so into the rectum. This is to be used to flush out the vaginal/rectal bolus [V.B.](#) inserted the night before and to give nourishment to the cell structure within the area that can use this excellent herbal food for prolapses and/or hemorrhoid problems. Leave this liquid in the area as long as possible before voiding. Also, while lying on the slant board, knead and massage the pelvic and abdominal area to exercise the muscles, so the herbal tea (food) will be assimilated more readily.

The tea we have just given ... should be used orally as well. Drink one fourth of the concentrated tea in three-fourths cup of steam distilled water--three times a day. [NL 1-7]

### Ingredients:

white oak bark

comfrey leaves

yellow dock root

mullein herb

walnut leaves

marshmallow root

lobelia

### Testimonials:

1. Spider Cancer: Sometimes it takes time and patience for these herbal aids to truly work. For example, a lady who had come to Dr. Christopher began the full routine as described above. A number of months later she began to think, "Look, I have been on that program for months now; I have taken the herbs orally; I've used the vaginal bolus [V.B.](#), including the yellow dock combination, and I am getting sick of this!" She felt somewhat better but didn't notice much change, so she was going to quit that day. That very morning she made the decision, as she was at home, sitting on the toilet. When she got up, she happened to turn around and glance into the bowl, and there was something about the size of a half dollar, with legs on it, swimming around in the water. This something had dropped out of her! She screamed, and her husband came in. They put it in a bottle and took it right over to the family doctor. He examined it under the microscope, and said he had never seen one of these whole like this, because they have to cut them out of a person. This was a spider cancer. They never give up and leave by themselves; usually they must be cut out. The doctor was amazed that it had come out of her. It had done so because her body was now so healthy that the spider cancer didn't have any waste materials to work on. When she saw that cancer, she vowed to continue the program, even if it took six months or years. Dr. Christopher reminded us that some people heal quickly, but sometimes it takes a long time. If we know we are on the right track, we should just continue. [EWH p.16]
2. Young Woman is Able to Marry: Dr. Christopher told story after story about sick women he helped with simple remedies, simple treatments. For example, a man and his wife brought their daughter to Dr. Christopher's office in Salt Lake. This young lady was the sickest, saddest-looking person he had seen in a long while. She had met a young man who came to love

[Oil of Garlic](#)[Panc Tea](#)[Pre-Natal Tea](#)[PreTrac™](#)[Prospallate](#)[Red Clover Combination](#)[Relax-Eze](#)[Resp-Free](#)[Sen Sei Balm](#)[Sha Tea](#)[Smoke Out](#)[ULC](#)[V.B.](#)[VF Syrup](#)[Vitalerbs](#)[Wild Lettuce and Valerian](#)[X-Ceptic](#)[Yellow Dock Combination](#)

her very much, and he wanted to marry her. But she refused, saying it wasn't fair to him, being in her condition, so anemic and sickly. He told her that he loved her enough to marry her and take care of her under any circumstances.

She was in a very serious condition, so they put her on the three-day cleanse and mucusless diet. She took extra cups of [Red Clover Combination](#) tea, and drank a minimum of one pint of grape juice a day, chewing each mouthful. When she could, she took even more. She also ate plenty of raisins and grapes in addition to the juice. She used the *yellow dock* as a tea, and soon she began to show improvement. She exercised adequately, being careful not to overdo it, and changed her diet from mucus-forming food to the mucusless diet, having lots of salads and fruits, emphasizing as much raw as possible. She used the female corrective [Nu Fem](#) and hormone-estrogen formulas [Changease](#), and she also used the vaginal bolus [V.B.](#) and *yellow dock combination* in the slant board routine. She showed improvement from the very beginning.

The parents had brought her to Dr. Christopher in the spring, and by fall they sent him an invitation to her wedding, because she had cleaned up her system and was very happy to get married. She was menstruating regularly and had gotten over her case of anemia. She was living a new life, healing it herself by following through on Dr. Christopher's instructions. [EWH p.111]

3. Woman with Multiple Problems Healed: Dr. Christopher always checked his patients with iridology before advising them. A lady came to him, aged about 45, asking for a reading to help with her condition. He saw that she had a prolapsed transverse colon which had dropped to a point where it tipped her uterus and pinched her bladder, and she was having a very serious trouble there. She had problems with the ovaries, with infection in both of them, and she was troubled with vaginal drainage. In addition, she had one breast that was badly infected, which might necessitate having part of the breast removed if she had asked another doctor for treatment. After the reading, Dr. Christopher asked why she had come to him and what she wanted him to do. She said that she had just spent three days in a clinic, where they had verified everything he had read from her irises, but they wanted her to go to the hospital immediately and have the uterus removed and the bladder stitched up to the spinal cord area, and also have her breast removed. She was frightened of all this cutting, so she wanted to find help in some other way.

She promised that she would stay on the program that Dr. Christopher advised. She took the female corrective [Nu Fem](#) and hormone-balancing combinations [Changease](#), used the vaginal bolus [V.B.](#) six nights a week, flushing out each morning with the slant board routine *Yellow Dock Combination*, massaging 15 to 20 minutes a day on the abdominal and pelvic area while the tea was inside. She was also to use the [Three Oil Massage](#) over the abdominal area, and go on the three-day cleanse and mucusless diet. In addition, she was to drink a gallon of steam-distilled water a day, and plenty of red raspberry leaf tea. She kept her bowels clean with the lower bowel formula [Fen LB](#), and kept the bloodstream cleaned up with the [Red Clover Combination](#) tea.

Dr. Christopher did not see her again for six months. When she came to see him this time, she bounced in, not dragging as she had before, a totally different woman, much happier and healthier. She had no operations, and yet her prolapsed transverse colon had gone back into place, and her uterus and bladder had gone back into position. She was feeling like a new woman, and she did indeed have a new system by following through with the entire herbal problem. [EWH p.112]

#### See Also:

[Dr. John R. Christophers "Mucusless Diet"](#)

[Dr. John R. Christophers "Three Day Cleansing Program"](#)

#### Useful in Treating:

[Anemia](#)

[Infertility](#)

[Cancer](#)

[Tumors](#)

[Cysts](#)

[Uterus](#)



## 1. Blood Pressure / Circulation

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### **Definition:**

The pressure exerted by blood upon the walls of the arteries, depending upon the force of the heart beat, the elasticity of the vessel walls, the resistance of the capillary network and the volume and viscosity of the blood.

### **Herbal Combinations:**

[BPE](#), [Hawthorn Berry Syrup](#).

### **Recommendations:**

BPE; Take 2-3 capsules between meals. BPE Extract; 15 drops between meals. Hawthorn Berry Syrup; 1/2 teaspoon 3 times a day.

### **Single Herbs:**

Cayenne, Hawthorn Berries, Alfalfa, Garlic, Siberian Ginseng, Parsley.

### **Diet:**

Follow [Dr. John R. Christophers "Mucusless Diet"](#) and [Dr. John R. Christophers "Three Day Cleansing Program"](#). Drink carrot, beet and apple juice. Drink [Jurassic Green](#).

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## 2. Blood Purifier

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### **Herbal Combinations:**

Follow [Dr. John R. Christophers "Extended Herbal Cleanse" Routine](#).

### **Single Herbs:**

Red Clover Blossom, Chaparral Leaves, Burdock Root, Garlic, Echinacea Angustifolia Root, Devil's Claw.

### **Diet:**

Follow [Dr. John R. Christophers "Mucusless Diet"](#) and [Dr. John R. Christophers "Three Day Cleansing Program"](#). Drink [Jurassic Green](#).

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## 3. Bowel

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### **Herbal Combinations:**

[Fen LB](#), [Barberry LG](#), [CC](#).

### **Recommendations:**

Fen LB; Take 2 capsules 3 times a day or more until fecal matter becomes looser. Fen LB extract; Take 30 drops three times a day. Barberry LG; Take 1 -2 capsules 15 to 20 minutes before meals. Barberry LG extract; A dropperful 1/2 hour before meals. CC; Mix 1 teaspoon of this powder into a cup of distilled water as a tea and drink mornings and nights.

### **Single Herbs:**

Cascara Sagrada, Alfalfa Leaves, Kelp, Psyllium Seed, Turkey Rhubarb Root, Garlic.

### **Diet:**

Follow [Dr. John R. Christophers "Mucusless Diet"](#), [Dr. John R. Christophers "Herbal Home Colonic Program"](#) and [Dr. John R. Christophers "Extended Herbal Cleanse" Routine](#).

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## 4. Bruises / Sprains / Tendonitis

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### **Herbal Combinations:**

[BF & C](#), [BF & C Ointment](#), [Calc Tea](#), Deep Heating Balm.

### **Recommendations:**

BF&C; take 2 capsules three times a day. BF&C Fomentation; apply the fomentation to the effected area. BF&C Salve; apply salve to the effected area generously (use during the day instead of a fomentation). Calc Tea; take 2-3 capsules between meals. Calc Tea extract; take 15 drops between meals. Deep Heating Balm; rub in affected area as much as needed.

### **Single Herbs:**

Comfrey Root or Leaf, Dandelion Root, Alfalfa Leaves, Kelp, Cayenne, Horsetail Grass.

### **Diet:**

Take [Vitalerbs](#), eat carrots, apricots, spinach, drink rose hip tea. Avoid protein and starches

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## 5. Colds / Flu

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### **Definition:**

A disorder in the respiratory tract resulting from exposure with catarrh and invasion of microbial cleansers.

### **Symptoms:**

An inflammation of the upper respiratory tract, marked by an acute catarrhal condition of the nasal mucous membrane, a slight rise in the temperature, chilly sensations and general indisposition.

### **Herbal Combinations:**

[Garlic, Rosehips, and Parsley](#), [Herbal Composition](#), [Herbal Cough](#) (Cough Syrup), [Ant-Plg](#).

### **Recommendations:**

Garlic, Rosehips and Parsley; take 2 or more capsules 6 or more times a day.

### **Herbal Composition:**

Take 2-3 capsules between meals. Cough Syrup; take 1 teaspoon or more, as much as needed. Ant-Plg; as a tonic, 1 tablespoon a day; if there is infection, 1 tablespoon every hour. Ant-Plg extract; 15 drops or more as much as needed.

### **Single Herbs:**

Garlic, Red Raspberry Leaves, Parsley Leaves, White Willow Bark.

### **Diet:**

No food during the period or a juice fast using only apple juice or lemon and water. Drink Red Raspberry tea.

### **Also See:**

[X-Ceptic](#)



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## 6. Cough

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### **Definition and Symptoms:**

A sudden, violent expulsion of air from the lungs.

### **Herbal Combinations:**

[Resp-Free](#), [Herbal Cough](#) (Cough Syrup), [X-Ceptic](#).

### **Recommendations:**

Resp-Free; 2-3 capsules three or more times a day. Resp Free extract; 15 drops 3 or more times a day. Cough Syrup; take 1 teaspoon or more, as many times a day as needed. X-ceptic; a dropperfull as many times a day as needed.

### **Single Herbs:**

Garlic, Yarrow Flowers, Alfalfa Leaves, Chickweed Herb, Cayenne.

### **Diet:**

Raw fruit and distilled water or juice fast for few days. Brewer yeast.



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## 7. Depression

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### Symptoms:

Insomnia or sleeping frequently and for excessive periods of time, loss of appetite or ravenous appetite, headaches, backaches, colon disorders, and feelings of worthlessness and inadequacy.

### Herbal Combinations:

[MindTrac™](#), [Relax-Eze](#), [B & B Tincture](#), [Bugleweed Combination](#).

### Recommendations:

Relax Eze; take 2-3 capsules three times a day. Relax Eze extract; 15 drops three times a day. B&B; a dropperfull three times a day. Bugledock extract; 15 drops in hot water three times a day. MindTrac; 3 capsules 4-5 times a day.

### Diet:

Follow [Dr. John R. Christophers "Mucusless Diet"](#), [Dr. John R. Christophers "Three Day Cleansing Program"](#) and [Dr. John R. Christophers "Extended Herbal Cleanse" Routine](#).



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## 8. Digestion

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### **Herbal Combinations:**

[Herbal Composition](#), [Barberry LG](#), [AT-GS](#).

### **Recommendations:**

Herbal Composition; take 2-3 capsules between meals. Barberry LG; take 1 -2 capsules 15-20 minutes between meals. Barberry LG extract; a dropperfull 1/2 hour before meals.

### **Single Herbs:**

Papaya Leaves, Fennel, Catnip, Comfrey Leaves, Chamomile Flowers.

### **Diet:**

Eat slow and chew foods, relax at eating time. Follow [Dr. John R. Christophers "Mucusless Diet"](#).



## 9. Diuretic / Water Retention

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### **Symptoms:**

Abnormal and excessive accumulation of lymph fluid in the body tissues. Often accompanied by swelling, scanty urine, poor appetite, sluggishness, and debility. The swelling usually occurs in the feet and ankles and proceeds up the legs towards the abdomen.

### **Herbal Combinations:**

[Juni-Pars](#), [CSK](#).

### **Recommendations:**

Juni Pars; take 2 capsules mornings and nights. Juni Pars extract; 15 drops two times a day. CSK; take 2-3 capsules mornings and nights.

### **Single Herbs:**

Parsley, Juniper Berries, Marshmallow Root, Dandelion Root, Kelp, Garlic, Alfalfa Leaves.

### **Diet:**

Follow [Dr. John R. Christophers "Mucusless Diet"](#), eat watermelon juice and seeds. It is very important to avoid soft drinks.

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## 10. Earache

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### **Definition:**

Pain or aching in the ear.

### **Symptoms:**

Little babies rubbing and pulling on their ears.

### **Herbal Combinations:**

[Oil of Garlic](#), [B & B Tincture](#).

### **Recommendations:**

With an eardropper put 4-6 drops of Oil of Garlic and 4-6 drops of B&B into each ear, plug ear overnight with cotton, continue 6 days a week, or until condition clears up.

Drink orange or diluted lemon juice until infection and pain is gone.



## 11. Glands

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### **Herbal Combinations:**

[Barberry LG](#), [INF Combo](#), [Mullein & Lobelia](#), [Adrenetone](#).

### **Recommendations:**

Barberry LG; take 1 -2 capsules 15-20 minutes before meals. Barberry LG extract; a dropperfull 1/2 hour before meals. INF; take 2 capsules three times a day. Mullein and Lobelia; take 2 capsules three times a day. Adrenetone; take 2-3 capsules between meals.

### **Diet:**

Follow [Dr. John R. Christophers "Mucusless Diet"](#) and [Dr. John R. Christophers "Three Day Cleansing Program"](#).

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## 12. Gum Disease

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### **Herbal Combinations:**

[X-Ceptic](#), [BF & C](#), [Herbal Tooth Powder](#)

### **Recommendations:**

Make a paste mixing White Oak Bark or BF&C powder with X-ceptic and put it on gums. Hold on gums as long as possible.

Herbal Tooth Powder: Replace toothpaste with powder and brush teeth with it.

### **Single herbs:**

White Oak Bark.

### **Also See:**

[Gums](#)

[Teeth](#)

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## 13. Hay Fever / Allergies

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### **Definition:**

Affects the mucous membranes of the nose, eyes, and air passages. Dust, Pollen, feathers, and animal hair are often the cause.

### **Symptoms:**

Itchy watery eyes, watery discharge from the nose and eyes, sneezing, and nervous irritability.

### **Herbal Combinations:**

[Sha Tea](#), [Immucalm](#), [Sen Sei Balm](#), [Kid-E-Soothe](#) (for children).

### **Recommendations:**

Sha Tea; take 2 capsules three times a day. Sha Tea extract; take 20-40 drops three times a day. Imucalm; take 4 capsules 4-5 times a day. Sensei Balm; rub on sinus areas sparingly. Kit-e-Soothe; 40 drops 4-5 times a day (for children).

### **Single Herbs:**

Alfalfa Leaves, Brigham Tea, Chaparral Leaves, Burdock Root.

### **Diet:**

Follow [Dr. John R. Christophers "Mucusless Diet"](#), and [Dr. John R. Christophers "Three Day Cleansing Program"](#). Drink [Jurassic Green](#).

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## 14. Heart

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### **Herbal Combinations:**

[Hawthorn Berry Syrup](#), [BPE](#).

### **Recommendations:**

Hawthorn Berry Syrup; 1/2 tablespoon three times a day. BPE; take 2-3 capsules between meals. BPE extract; take 20-40 drops between meals.

### **Single Herbs:**

Cayenne, Garlic, Hawthorn Berry, Wild Sage, Yarrow.

### **Diet:**

Follow [Dr. John R. Christophers "Mucusless Diet"](#).

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## 15. Heavy Metal Poisoning

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### **Herbal Combinations:**

Bugledock Tincture, [Bugleweed Combination](#), [Red Clover Combination](#).

### **Recommendations:**

Bugledock; 20-30 drops daily.

bugleweed Combination; take 2 capsules daily together with 6 capsules of Red Clover Combination; Red Clover Combination extract; 5-15 drops 3 times daily.

### **Diet:**

Drink lots of distilled water and follow [Dr. John R. Christophers "Mucusless Diet"](#) and [Dr. John R. Christophers "Extended Herbal Cleanse" Routine](#).

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## 16. Infection

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### **Herbal Combinations:**

[INF Combo](#), [X-Ceptic](#), [Black Ointment](#).

### **Recommendations:**

INF; take 2 capsules three times a day. X-ceptic; as much as needed orally or topically. Black ointment; topically as much as needed.

### **Diet:**

Use [Dr. John R. Christophers "Three Day Cleansing Program"](#) with carrot juice. Follow [Dr. John R. Christophers "Mucusless Diet"](#).

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## 17. Insomnia

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### **Definition and Symptoms:**

Repeated sleeplessness night after night.

### **Herbal Combinations:**

[Relax-Eze](#), Nit-e-Nite.

### **Recommendations:**

Relax Eze; take 2-3 capsules three times a day. Relax-Eze extract; take 15-30 drops three times a day. Nit-e-Nite; in a cup of tea three times a day.

### **Single Herbs:**

Valerian Root, Hops Flowers, Passion Flowers.

### **Advice:**

Walk in the grass barefoot to induce sleep.



## 18. High / Low Blood Sugar

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### **Herbal Combinations:**

[Panc Tea](#), [Barberry LG](#), [Adrenetone](#).

### **Recommendations:**

Panc Tea; take 2-3 capsules three times a day. Panc tea extract; take 15-30 drops three times a day. Barberry LG; take 1-2 capsules 15 to 20 minutes before meals. Barberry LG extract; a dropperfull 1/2 hour before meals. Adrenetone; take 2-3 capsules between meals.

### **Single Herbs:**

Cedar Berries, Garlic, Siberian Ginseng Root, Cayenne, Licorice Root, Golden Seal Root, Dong Quai Root.

### **Diet:**

Follow the [Dr. John R. Christophers "Mucusless Diet"](#) and [Dr. John R. Christophers "Extended Herbal Cleanse" Routine](#).

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## 19. Memory

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### Herbal Combinations:

[Mem, B & B Tincture](#), [Relax-Eze](#).

### Recommendations:

Mem; take 2 capsules two times a day. B&B; take 10 drops to a teaspoon in a glass of water. Relax-Eze; take 2-3 capsules Three times a day. Relax-Eze extract; take 15-30 drops Three times a day.

### Single Herbs:

Ginkgo Leaves, Gotu Kola Herb, Siberian or Korean Ginseng Root, Blessed Thistle, Cayenne.



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## 20. Menopause

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### Herbal Combinations:

[Changease](#), [Nu Fem](#), Nu Fem extract, [Vitalerbs](#).

### Recommendations:

Changease; take 2-3 capsules between meals. Changease extract; 5-30 drops as needed. Nu Fem; take 2-3 capsules during meals. Nu Fem extract; take 30 drops three times a day. Vitalerbs; take 2-6 capsules three times a day.

### Single Herbs:

Dong Quai Root, Licorice Root, Cedar Berries, Black Cohosh, Damiana Leaves, Kelp Plant, Siberian Ginseng Root, Alfalfa Leaves.

### Diet:

Follow [Dr. John R. Christophers "Mucusless Diet"](#), avoid coffee, tea, alcohol, nicotine. Eat grain, sprouts, leafy greens, raw fruit and vegetable juice ([Jurassic Green](#)).



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## 21. Menstrual Irregularities

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### Herbal Combinations:

[Nu Fem](#), [Changease](#), Fematean, [Antsp](#).

### Recommendations:

Nu Fem; take 2-3 capsules during meals. Nu Fem extract; take 30 drops three times a day. Changease; take 2-3 capsules between meals. Changease extract; 5-30 drops as needed. ANTSP; 1/2 to one tea-spoon to a glass of steam water mornings and nights.

### Single Herbs:

Black Cohosh Root, Cayenne, Blessed Thistle Leaves, Red Raspberry Leaves, Squaw Vine Herb, Dong Quai Root.

### Diet:

Follow [Dr. John R. Christophers "Mucusless Diet"](#).



## 22. Muscle Cramps

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### **Herbal Combinations:**

[Calc Tea](#), Elderberry extract, Deep Heating Balm, [Antsp](#), [Vitalerbs](#).

### **Recommendations:**

Calc Tea: take 2-3 capsules between meals. Calc Tea extract; take 15 drops between meals.  
Elderberry extract: 3-6 drops in a cup of water. Deep Heating Balm: as much as needed topically.  
ANTSP: take 1 tablespoon in a cup of distilled water morning and night. Vitalerbs: take 2-6 capsules three times a day.

### **Single Herbs:**

Horsetail Grass, Oatstraw, Alfalfa Leaves, Kelp, Saffron, Dong Quai Root.

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## 23. Nerbous Tension

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### **Herbal Combinations:**

[Relax-Eze](#), [B & B Tincture](#), [Antsp](#), [Vitalerbs](#).

### **Recommendations:**

Relax Eze; take 2-3 capsules three times a day. Relax Eze extract; take 15-30 drops three times a day. B&B; take 3 drops to 1 teaspoon in a glass of water. ANTSP; take 1 tablespoon in a cup of distilled water morning and night. Vitalerbs; take 2-6 capsules three times a day.

### **Single Herbs:**

Licorice Root, Valerian Root, Catnip Herb, Scullcap Herb, Cayenne.

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## 24. Prostate

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### **Herbal Combination:**

[Prospallate](#).

### **Recommendation:**

Prospallate; Take 2 or more capsules mornings and nights.

### **Single herbs:**

Saw Palmetto, Gravel root, and Pygium.

### **Diet:**

Follow [Dr. John R. Christophers "Mucusless Diet"](#). Drink celery, carrot, beet and apple juice.

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## 25. Respiratory / Asthma

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### **Symptoms:**

Labored breathing, cough, wheezing, bronchial spasms, and a sense of chest constriction.

### **Herbal Combinations:**

[Comfrey-Mullein-Garlic](#) Syrup, [Resp-Free](#), [Antsp](#).

### **Recommendations:**

Comfrey, Mullein & Garlic syrup; a teaspoon or more as needed. Resp Free; take 2-3 capsules 3 or more times daily. Resp Free extract; 15 drops before meals. ANTSP; 1/2 to 1 teaspoon in a glass of distilled water.

### **Single Herbs:**

Lobelia, Mullein and Cayenne

### **Diet:**

Follow [Dr. John R. Christophers "Mucusless Diet"](#), [Dr. John R. Christophers "Three Day Cleansing Program"](#) and [Dr. John R. Christophers "Extended Herbal Cleanse" Routine](#).

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## 26. Sex Rejuvenation / Male & Female

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### **Herbal Combinations:**

[Barberry LG](#), [Changease](#), [Adrenetone](#), [Bee Power](#).

### **Recommendations:**

Barberry LG; take 1-2 capsules 15 to 20 minutes before meals. Barberry LG extract; a dropperfull 1/2 hour before meals. Changease; take 2-3 capsules between meals. Changease extract; 5-30 drops as much as needed. Adrenetone; take 2-3 capsules between meals. Bee Power; take 3 capsules three times a day during meals.

### **Single Herbs:**

Damiana Leaves, Licorice Root, Fenugreek Seed, Sarsaparilla Root, Korean Siberian or American Ginseng, Yohimbe.

### **Diet:**

Follow [Dr. John R. Christophers "Mucusless Diet"](#) and [Dr. John R. Christophers "Extended Herbal Cleanse" Routine](#).

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## 27. Skin Blemishes

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### Herbal Combinations:

ACN Tea, [BF & C](#), [Barberry LG](#), [Red Clover Combination](#), [Changease](#).

### Recommendations:

ACN; Simmer this tea on 16 oz of distilled water for 10 minutes. Pour onto chamomile flowers, cover and let it cool. Wash your face with this tea. The remaining tea add honey and drink. BF&C; take 1 -2 capsules between meals. Barberry LG; take 1 -2 capsules 15-20 minutes before meals. Barberry LG extract; one dropperfull 1/2 hour before meals. Red Clover Combination; take 2 capsules three times a day. Red Clover Combination extract; take 5-15 drops three times a day. Changease; take 2-3 capsules between meals. Changease extract; 5-30 drops between meals.

### Single Herbs:

Burdock Root, Dandelion Root, Echinacea Aug. Root, Kelp, Alfalfa Leaves.

### Diet:

Follow [Dr. John R. Christophers "Mucusless Diet"](#), [Dr. John R. Christophers "Three Day Cleansing Program"](#) and [Dr. John R. Christophers "Extended Herbal Cleanse" Routine](#).

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## 28. Stiffness / Aching Joints

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### **Herbal Combinations:**

[AR-1](#), [AR#2](#), [BF & C Ointment](#), Deep Heating Balm, Arthritic Liniment.

### **Recommendations:**

AR-1; take 3 capsules three times a day with a cup of Brigham Tea. AR#2; a teaspoon in a cup of hot distilled water. Take as much as needed. BF&C ointment; use as much as needed topically. Deep Heating Balm; apply after BF&C ointment for better penetration. Arthritic Liniment; apply externally on painfull area.

### **Single Herbs:**

Devil's Claw, Chaparral Leaves, Brigham Tea, Black Cohosh Root, Comfrey.

### **Diet:**

Follow [Dr. John R. Christophers "Mucusless Diet"](#), and [Dr. John R. Christophers "Three Day Cleansing Program"](#).



## 29. Tiredness / Lack of Energy

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### **Herbal Combinations:**

[Bee Power](#), [Adrenetone](#), [Barberry LG](#), [Vitalerbs](#), [Panc Tea](#). Follow [Dr. John R. Christophers](#) "[Extended Herbal Cleanse](#)" Routine.

### **Recommendations:**

Bee Power; take 3 capsules three times a day during meals. Adrenetone; take 2-3 capsules between meals. Barberry LG; take 1 -2 capsules 15 to 20 minutes before meals. Barberry LG extract; 1 dropperfull 1/2 hour before meals. Vitalerbs; take 2-6 capsules three times a day. Panc tea; take 2-3 capsules three times a day. Panc tea extract; take 15-30 drops three times a day.

### **Single Herbs:**

Cayenne, Yellow Dock Root, Siberian or Korean Ginseng Root, Licorice Root, Garlic.

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## 30. Ulcer

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### **Herbal Combinations:**

[ULC](#) (Ulcer Formula), [CC](#).

### **Recommendations:**

For these two formulas mix 1 teaspoon in a cup of hot distilled water as a tea and drink morning and night.

### **Single Herbs:**

Cayenne, Comfrey leaves. Myrrh Gum, Alfalfa leaves. Diet:

### **Diet:**

Avoid stress, coffee, and alcohol. Follow [Dr. John R. Christophers "Mucusless Diet"](#). A 1/4 teaspoon of cayenne in a cup of water will help in cauterization of the digestive wounds.

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## 31. Vision / Eyes

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### **Herbal Combinations:**

[Herbal Eyebright](#), [Sha Tea](#).

### **Recommendations:**

Herbal Eyebright; take 2 capsules or a cup of tea morning and night. Make a tea with this formula and wash eyes with the help of an eyecup. Repeat 3-6 times daily. Sha Tea; take 2 capsules three times a day. Sha Tea extract; take 20-40 drops three times a day.

### **Single Herbs:**

Eyebright Herb, Chamomile Flowers, Witch Hazel.

### **Diet:**

Follow [Dr. John R. Christophers "Mucusless Diet"](#) and [Dr. John R. Christophers "Extended Herbal Cleanse" Routine](#). Drink at least 32 oz. of distilled water a day.



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## 32. Warts

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### **Herbal Combinations:**

[Black Ointment](#), [Black Walnut Tincture](#).

### **Recommendations:**

Black ointment; Use externally as much as needed. Black Walnut extract; Use topically over the affected area. It can also be used internally; 5 to 20 drops in a cup of hot distilled water.



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## 33. Weight Loss

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### Herbal Combinations:

[Adrenetone](#), Metaburn and [Bee Power](#), [Kelp-T-Comb](#).

### Recommendations:

Adrenetone; take 2-3 capsules between meals. Metaburn; take 1 -2 capsules during main meals two times a day. Bee Power; take 3 capsules three times a day during meals. Kelp-T caps; take 2 capsules one or two times a day.

### Single Herbs:

Chickweed Herb, Kelp, Burdock Root, Parsley, Dandelion Root, Peppermint Leaves.

### Diet:

Follow [Dr. John R. Christophers "Mucusless Diet"](#), [Dr. John R. Christophers "Three Day Cleansing Program"](#) and [Dr. John R. Christophers "Extended Herbal Cleanse" Routine](#).



## 34. Worms / Parasites

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### **Herbal Combinations:**

[VF Syrup](#), Senna and Peppermint Tea.

### **Recommendations:**

Take one teaspoon of VF syrup every morning and night for three days. On the fourth day Drink one cup of senna and peppermint tea, using 1/2 Teaspoon of each in a cup of hot, distilled water. Rest two days and repeat the total program two more times.

### **Single Herbs:**

Orsa Clay, Black Walnut, Pumpkin Seeds.

### **Diet:**

Use this program with [Dr. John R. Christophers "Three Day Cleansing Program"](#).

### **Also See:**

[Parasites and Worms](#)

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## Literature

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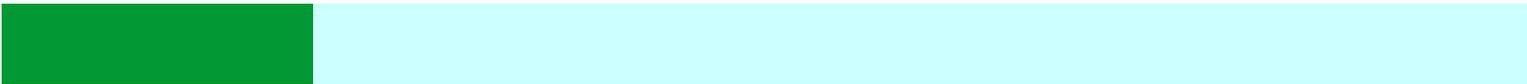
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## Dr. John R. Christophers "Anti-Plague Formula"

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Dr. John R. Christopher received the following formula while prayerfully seeking to answer a question posed to him during a lecture in Snowflake, AZ. The topic was on the plagues prophesied in the last days and the question was whether there was an herbal formula that could counter the plagues. Inspired with this formula, Dr. Christopher said to prepare gallons of it to assist family and neighbors. Three months after the lecture, Dr. Christopher received a phone call reporting that the Snowflake area was hit by a very hard flu that took the life of some children, but that this formula restored the health of all who used it.

### Instructions for the Anti-Plague Formula:

Make a coarse blend of garlic in apple cider vinegar and store it in a dark, cool place for four days. Filter the blend in cotton, muslin cloth and squeeze out as much garlic juice as possible.

Ultimately you will use **8 parts of apple cider vinegar** and **2 parts fresh garlic juice**, so use enough garlic to obtain your proportion and record the amount of vinegar used as part of its proportion and to calculate the amount of garlic juice expressed (2 to 3 pounds of garlic is a good range to use for one gallon of Anti-Plague). It takes approximately 1 pound of garlic to extract 8 oz. of juice.

Make a seventh power, distilled water decoction of each of the following herbs. Each herb should be prepared *separately*.

- 2 parts Comfrey root decoction**
- 1 part Wormwood herb decoction**
- 1 part Lobelia herb or seed decoction**
- 1 part Marshmallow root decoction**
- 1 part White Oak bark decoction**
- 1 part Black Walnut bark or husk decoction**
- 1 part Mullein leaf decoction**
- 1 part Skullcap leaf decoction**
- 1 part Uva-Ursi leaf, hydrangea, or gravel root decoction**

If you consider one part of the formula to equal 4 ounces of solution you will produce approximately three and  $\frac{3}{4}$  quarts of finished product. For one part herbs, according to this ratio, soak 4 ounces of the herb for four hours or more in enough distilled water to cover it completely.

After soaking, add enough distilled water to bring the amount of solution to 16 ounces. Simmer the herbal solution over very low heat in a covered pan for thirty minutes. Strain the liquid into a

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clean pan and reduce the amount of liquid to  $\frac{1}{4}$  (4 oz. for the one part herbs) by simmering uncovered over very low heat. Set each aside till all are prepared (refrigerate if not completed on the same day).

Warm to liquid state: **5 parts unfiltered, raw honey** and **5 parts U.S.P. grade vegetable glycerine** and the remainder of the vinegar and then add all your decoctions, mix well, let cool and store in dark bottles. Refrigerate for long term storage.

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## Dr. John R. Christophers "Carrot, Citrus & Grape Cleanse"

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### **Carrot Juice Therapy.**

Follow the same procedure as you would with the apple juice therapy.

### **Citrus Juice Therapy.**

This is best for those who live in a citrus belt region. Prepare the juice fresh in the following proportions; four to six grapefruit, two to three lemons, and enough oranges to complete a total mixture of two quarts. Dilute using two quarts of distilled water, making one gallon of citrus juice mixture. Proceed as in the apple juice therapy.

### **Grape Juice Therapy.**

Use only unsweetened grape juice containing no additives. Do not use frozen concentrate (it has been cooked). Use fresh grape juice, if possible. Proceed as in the apple juice therapy.

If nothing were done to replace something in volume equal to the quantity of matter eliminated in the body, then the body would naturally be dehydrated. Therefore, by drinking fruit juices, we replace the toxic or acrid material removed. This procedure should have an alkaline reaction on our system.

There are various types of juice therapies-apple, carrot, grape, citrus, tomato, etc.- but only use the one chosen juice for the three days, and swish each mouthful thoroughly, (called chewing), so the saliva will mix with it; therefore our bodies can get all the nutrition and healing value from it.

Do not eat anything during the three day cleanse, although if very hungry towards evening, you may take some celery. When using apple juice, an apple or two is acceptable. With carrot juice, use carrots, and so on and so forth.

Apples are one of the greatest herbs and blood purifiers known. This is why most prefer to use apple juice. Fresh apple juice is best, if obtainable, otherwise buy any bottled apple juice that has no preservatives or additives.

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## Dr. John R. Christophers "Cold Sheet Treatment"

Excerpt taken from [The Cold Sheet Treatment](#) by Dr. John R. Christopher

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To do this program properly, you should have at least two people. This treatment takes time, and is best to do in the evening so your patient can sleep through the night after the treatment. It is wise to make all your preparations before you proceed with the Cold Sheet Treatment.

### Cold Sheet Treatment Preparations:

#### Iced Sheet

Take a large double sheet and soak in ice water.

#### Diaphoretic Tea

Prepare a gallon of diaphoretic tea. This can be any good sweating herb, preferably yarrow. But it can also be blessed thistle, chamomile, pleurisy root, boneset, thyme, Hyssop, garden sage, catnip, spearmint, or any other good, diaphoretic herb.

For one gallon:

**1 cup of diaphoretic herb**

**1 gallon or 4 liters distilled water**

**Preparation:** Pour boiling water over herbs, cover, allow to steep (not boil) in a warm place 30 minutes. Strain and sweeten with honey if desired. Keep warm until used.

#### Garlic Paste

To prepare a garlic paste for an adult, use 1 part garlic and 1 part petroleum jelly. Reduce the amount of garlic for a child or small infant to 1 part garlic to 3 parts petroleum jelly. For an adult, you will want about 1 cup of paste.

Crush or finely grate peeled garlic cloves. Blend with an equal amount of petroleum jelly.

#### Hot Bath

Fill a hot tub of hot water. Add to the water, according to your tolerance, one or all of the following diaphoretic herbs, ginger being the most mild, then dry mustard, with cayenne as the most stimulant. Use 1 ounce of each herb.

#### Bed with Plastic

Prepare a bed by placing a rubber or plastic sheet over the mattress, with a cotton sheet over it. Have several natural blankets on hand, such as wool or cotton.

#### Enema

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**4 tablespoons catnip, sage, or red raspberry cut or powdered herb**

**1 quart distilled water**

**Preparation:** Bring distilled water to a boil and pour over cut herb. Steep for 30 minutes. Strain the herb and set in refrigerator until tea is cool. Pour tea into enema bucket or bag. Lubricate the end of the enema hose to be inserted into the rectum.

### **Garlic Injection**

**1 cup apple cider vinegar**

**1 cup distilled water**

**3 or more cloves of garlic**

**Preparation:** Combine vinegar and water. Grate, squeeze through garlic press, or puree in blender 3 cloves of garlic until finely crushed. Blend in water and vinegar mixture. Put mixture into syringe and check flow. If flow is loose, add additional crushed garlic. Continue adding as much garlic as you can, making sure the mixture flows from syringe without clogging.

## **Cold Sheet Treatment:**

### **Step One: Cleansing Enema**

Give the patient an enema using catnip, sage, red raspberry or some other herb, but preferably catnip. You will want to administer this enema cold.

**Important Note:** Do not use enemas except in the case of emergencies.

### **Step Two: Garlic Injection**

In herbology an injection is never a needle; it is a syringe type application into an already existing orifice of the body, i.e. the rectum, ears, or nose. Insert the prepared injection into the rectum with a syringe. Use the full pint for an adult and less for a child. Have your patient retain the injection for as long as possible before voiding.

### **Step Three: Hydrotherapy**

After the patient has voided the garlic injection, help him or her into a hot bath prepared with diaphoretic herbs. Have the water as hot as your patient can possibly tolerate. Cayenne, dry mustard, and ginger will increase the perspiring of the patient by opening the pores wide.

### **Step Four: Diaphoretic tea**

Do not give cold drinks. Instead, give them cups of hot diaphoretic tea, such as yarrow or another type. You will want to stay with only one type of tea. Have your patient drink as much as possible. This will keep the patient from a dry fever. You should give them a cup to drink about every 10 to 15 minutes.

Your patient may get lightheaded and feel like fainting. If so, place a cold towel or washcloth on their forehead. Leave the patient in the hot bath as long as possible, at least 45 minutes (may reduce for a small infant). You will know when to get a child out when perspiration starts to bead up on the face. At this point, give them 10 to 15 more minutes.

When your patient is ready to leave the tub, you will need to lift him or her out, as they will be unable to support themselves. Fainting can occur when you pull the patient out of the bath. Keep a cayenne tincture on hand in case your patient goes into shock.

### **Step Five: Cold Sheet Therapy**

After you have helped the patient out of the bath, wrap the large double cotton sheet, dripping wet from being soaked in ice-cold water, around the standing patient. With just the head and the feet protruding, pin the sheet down the side. Help your patient into the prepared bed that has been covered with plastic and with a cotton sheet. Then place dry cotton sheet covers over the patient while they are still wrapped in the cold sheet. Add additional natural fiber blankets over the top of the sheet for warmth and to continue the sweating routine.

### **Step Six: Garlic Paste**

With your patient lying down in bed, thoroughly massage their feet from the ankles down with olive oil. Allow as much of this oil to be absorbed into the skin as possible, covering the soles, sides, and entire foot area. After you have massaged each foot, prepare a strip of cotton that is wide enough to cover the bottom of the foot with ½ inch of the garlic paste. When this is done, place the strip of cotton with the paste on the sole of the foot, then take a roll of two-inch gauze and gently wrap the foot to secure the strip of garlic to the foot. With this in place, gently pull over the foot and gauze bandage a large white cotton wool sock to hold everything in place.

Do not allow the paste to get up on the sides or on top of the foot. Put it only on the sole.

Put the bandaged feet back under the cold, wet sheet and pin the bottom of the sheet together so that the patient will be in a wet sack. You will want to use a large double sheet instead of small because it will allow your patient to roll or turn around without being too closely confined.

### **Step Seven: Sound Sleep**

In most cases, your patient will sleep soundly all night in the cold sheet. You do not have to worry about them wanting to get up to urinate because of the large amount of tea they drank.

While the body is in the cold, wet sheet, the subconscious mind will build an artificial fever to warm the body. From this incubation process, the patient's body will use the fluid from the ingested teas and accumulated moisture from their bath to warm the outside of their wet body.

While this is being done the body breaks loose old toxins, drugs and medicines, mucus and poisons which have accumulated and carries them out of the body through the sweating process.

Your patient will lie all night in a deep sleep, sweating out the poisons of their body.

When your patient wakes in the morning, they will be refreshed and invigorated from having such a thorough cleanse. The large, white sheet, which was wrapped around your patient, will no longer be wet. In addition, it should no longer be white. It will often be stained with toxic residue secreted out of the body during the night.

### **Step Eight: Sponge Bath**

After your patient awakes out of the deep sleep, take them out of the bed and sponge them down thoroughly with a warm mixture of 1 part apple cider vinegar and 1 part distilled water. You will probably want 1 quart of solution, so use approximately 1 pint of each. This removes any remaining toxic residue from the outer layers of the skin. It is very important that you do not leave toxic residue on the skin.

Put fresh clothing on the patient and fresh bedding on the bed. Now you will want your patient to go back to bed and relax for a while to regain their strength.

### **Step Nine: Juice Therapy**

Your patient should by this time have a desire for something to drink or to eat. This is a critical moment for your patient; what they eat will either retain or cause them to lose their health. They may even have cravings from the past. They may desire a steak, a full meal, processed beverages, ice cream, or other junk food. Do not respond to these desires. Instead give your patient fresh fruit or vegetable juices (juices from Dr. N.W. Walker's Fresh Vegetable and Fruit Juices or Wheat Grass drink in School of Natural Healing, pp. 610-614), or bottled fresh grape juice, apple juice, etc, with no additives. Each mouthful of juice should be swished or chewed thoroughly to mix it with the saliva for good assimilation. In addition, chewing your juice will prevent an unpleasant sugar reaction if your patient is hypoglycemic or diabetic.

Do not mix the patients juices. If a different juice is desired, wait at least one half hour before

using a different one. After a few hours, if your patient is very hungry, let them have a little ripe fresh fruit, but it must be chewed to a liquid before swallowing. During the day it is good for your patient to have as much distilled water as desired and some good herb teas. It is best to keep your patient on juice therapy for one to two days to allow thorough cleansing of the digestive organs before going into the [Mucusless diet](#).

### **Step Ten: Teaching Your Patient**

After a bad siege of body malfunction, it is wise to instruct the patient why they were in this condition, and what to do from this point on to prevent a reoccurrence of the disease. Your patient may get immediate relief from the Cold Sheet Treatment, but if they do not change their health habits, they will not be able to retain their health.

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## Dr. John R. Christophers "Extended Herbal Cleanse" Routine

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When dealing with long-standing health problems we cannot expect to totally cleanse or cure the body with one or more three-day cleansing routines. Therefore, to rid the body of chronic conditions or to prevent their occurrence, an extended herbal cleanse is an excellent path to follow. This should be used in conjunction with the aforementioned mucusless diet.

Upon arising take one or two capsules (more if needed!) of the lower bowel formula [[Fen LB](#)]. This would then be repeated one hour before lunch, and prior to retiring for the night. Also, twenty minutes before eating, take two capsules of the liver-gall bladder formula [[Barberry LG](#)], which would be repeated prior to each meal. Next on the program take two of the kidney-bladder formula capsules [[Juni-Pars](#)] mid-morning and also mid-afternoon.

Follow this routine six days, resting on the seventh. Resume taking the three herbal formulas the second week, adding two capsules of the blood purifying formula [[Red Clover Combination](#)] one hour after each meal. The one-week delay in adding the blood purifying formula is absolutely essential because of the extreme effectiveness of this formula. In the first week you are opening the eliminative channels of the body, allowing a pathway of elimination for the ensuing toxins loosened by the blood cleansing formula.

This procedure would then continue every week for six weeks, followed by one week of rest. Repeat these intervals for six months, then rest for one entire month. At the end of this seven-month program assess your progress and determine if another seven-month program would be beneficial.

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## Dr. John R. Christophers "Herbal Home Colonic Program"

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A sluggish bowel can retain pounds of old, toxic and poisonous fecal matter. Many times the real cause behind sickness and disease is this retention and reabsorption of this toxic waste.

The first step in anyone's health program should be stimulating, cleaning and toning all the elimination organs.

The bowel is the best place to begin:

### **Day #1 (step1):**

Start with one capsule of Intestinal Corrective Formula #1 during or just after dinner. This formula works best when mixed with food.

### **Day #2:**

This morning you should notice an increase in your bowel action and in the amount of fecal matter that you eliminate. The consistency should also be softer. If you do not notice any difference in your bowel behavior or the difference wasn't dramatic, then tonight increase your dosage to two capsules. You can continue to increase your dosage every evening by one capsule until you notice a dramatic difference in the way your bowel works. It has taken most of us years to create a sluggish bowel so lets be patient and only increase by one capsule each day.

By the end of week #1 you should know what your dosage is. If not, then remain on this formula for an additional week to get regulated before you go on to the next step.

### **Week #2 (step 2):**

At the beginning of week #2 start on the Intestinal Corrective Formula #2. Take this formula three times each day. Beginning in the morning one hour after breakfast, mix 1 rounded teaspoon of Intestinal Corrective #2 powder with 4 to 6 ounces of juice. Do the same 1/2 hour before lunch and 1/2 hour before dinner so that you are consuming a total of 3 rounded teaspoons each day.

During or after dinner take your Intestinal Corrective Formula #1 as usual but increase the dosage you discovered the first week by 1 additional pill. If you feel a bit bound by the #2 formula you can increase your dosage of the #1 formula even more.

### **Helpful Hints:**

Drink plenty of distilled water, herb teas and diluted fruit and vegetable juices during this two-week cleanse. A good amount is between 64 and 128 ounces (8-16cups) of liquid each day. This makes the program more effective.

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## Dr. John R. Christophers "Incurables Program"

Excerpt taken from the booklet "Curing the Incurables" by Dr. John R. Christopher

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The following suggestions are for a persisting, chronic condition, not an acute one requiring emergency treatments.

### First Week:

#### Food:

For the first week, drink as much fresh carrot juice as possible. Some people are satisfied with a quart while others need a gallon or more. Drink by chewing an eight-ounce glass or more each hour during the day for six days the first week.

Drink one cup or more of slippery elm gruel each day. The liquid can be as thin or thick as desired. With this herb, you take the powder and carefully mix it with enough water (preferably distilled) to form a paste because it does not mix easily. Then thin it to desired consistency by adding more water. A little honey can be added if preferred. In addition, drink one cup or more of comfrey leaf or root tea each day. Twenty minutes before or after drinking the juice, tea or gruel, drink as much steam-distilled water as desired.

#### Herbal Formulas:

One cup or more of the cell-building tea should be used for the rebuilding of cells in flesh, cartilage, and bones. Also, take one cup three times a day of Blood Purifying Combination.

Take the following every day with some liquid:

- Two or more #0 capsules of Lower Bowel Tonic three times a day. This is for regularity, as solids are not now cleansing the bowels.
- Two or more #0 capsules of Nervine Tonic three times a day. This formula contains herbal nervines.
- Two or more #0 capsules of Pancreas Combination, three times a day. This assists the lower bowel tonic.
- Two or more #0 capsules of Calcium Combination three times a day. This formula is a good source of organic, assimilable calcium.

#### Breathing with Depth:

Learn to breathe deeply, as it taught in yoga, to get the breath of life into the upper lobes of the lungs.

#### Clothing:

We should use only natural fibers for the clothes we wear and also for our bed covers. Never use synthetic cloth for straining herbal drinks or for fomentation's and bandaging. Use only natural fibers such as cotton, wool, linen, or silk.

#### Releasing Static Electricity:

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Walk or jog barefoot on the lawn to get rid of the static electricity in the body and to allow new electrical vibration to come from the atmosphere.

### **Three Oil Massage:**

For the first two days, massage the patient with castor oil, using a clockwise circular motion from the top of the head to the bottom of the feet, always working towards the heart. The next two days use olive oil, and the last two days of the week massage with wheat germ oil.

On the seventh day, rest the patient, using no foods, herbs, or juice, only steam-distilled water as much as is desired.

### **Sunbathe:**

Immediately after the massage, have the patient take a sunbath each day in the nude, not through glass but in direct sun. Only allow two minutes on the front and two minutes on the back the first day. Add two minutes front and back each day but no more. In six days you will be up to twelve minutes front and twelve minutes back. Do not sunbathe between eleven in the morning and one o'clock in the afternoon, that is, not at high noon. If it is a cloudy or cold day, use a sun lamp, but do not allow a burn.

### **Baths:**

Each day the patient should have a hot bath followed by a cold shower or cold bath. No soap should be used for the bath unless it is a good biodegradable cleanser. Each day before the bath, give a dry skin brushing (always towards the heart), using a natural bristle brush (not nylon).

### **Herbal Fomentation's:**

We use an herbal fomentation each night of the six days of the week. It should cover the head area (hair line), down the spine, all the way down to the end of the tailbone. Make a cap fit down to the ears (or use a cotton or wool skull cap) and stitch a flannel strip four-to-five inches wide down the back over the spine area. After wetting the fomentation cloth with the B & B formula and lightly wringing it out, cover it with a plastic over the head (shower cap, etc.) and a strip down the spine.

To aid the motor nerve and spinal cord, use the B & B formula, inserting with an eye dropper four to six drops of oil of garlic and four to six drops of this herb tincture into each ear six nights a week. Plug the ears with cotton overnight, and on the seventh day flush out the ears with half and half warm apple cider vinegar and distilled water. Repeat this each week during the program.

### **Zonal Foot Massage (Reflexology):**

If possible, use zonal therapy on the feet three times a week, leaving one day in between. Zonal therapy will greatly speed up the program.

## **Second Week:**

The second week will be the same as the first except, instead of fresh carrot juice, substitute apple juice. During this second week use the [Three Oil Massage](#), sunbaths, zonal therapy, fomentations, etc. With the sunbaths add two minutes front and back onto the final total of the last week.

On the day of the fast there may be some physical reactions because you have reached a cleansing cycle. This same cyclical reaction can happen in any healing program in the third week, the seventh week, seventh month, and seventh year. If a cleansing crisis happens at this time, be happy with it, as it shows the program is working well.

## **Third Week:**

Repeat the full program, except instead of carrot or apple juice use grape juice.

## **Fourth Week and On:**

Continue to rotate the three juices each week as before. If the patient desires more solid food, just add one solid meal each day. See the Mucusless Diet for meal guidelines.

Use no salt, sugar, eggs, meats, bread, milk, or milk products.

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### **Case Histories:**

In Mesa, Arizona, a young man in his middle twenties was brought into our lecture hall in a wheel chair. He was badly crippled with a combination of polio and arthritis. He was lifted out of his chair and placed on a pile of pillows. Looking at him, you could see the severe pain he was suffering.

During the lecture we discussed the program we have just outlined. After the lecture, he said he would like to try it. A practical nurse from another town offered to take him into her home and help him get well.

They followed the routine accurately and one year later we saw him again. Just before the lecture started, in the same hall as the year before, this young man walked down the aisle to the front of the hall and asked to speak. We granted him permission. In his short talk he advised the people to listen to the lectures and put them to use. He described how just one year before he had listened to this lecture in the hall as he sat on pillows. He had gained the desire to start on this natural program. Prior to that night he had been told he would never be out of the wheelchair unless it was to be in a hospital bed the rest of his days.

With the help of the kind nurse, he was now able to walk so well that he was traveling on foot, house to house selling, to pay off his large hospital and doctors bills. As he walked back to his seat, he had tears of gratitude in his eyes.

A young man came to us with advanced curvature of the spine. He had been told that the case was so bad his back would have to be broken in several places to fuse it, but with no guarantees as to results. He tried our program, and in shortly over six months, he had a back that was straight and perfect. He had regained the three inches he had lost with the curvature and is now 6'6" as before his curvature. He could now go back to yoga and the sports, which he enjoyed.

### **Conclusion:**

There are many outstanding cases, but these two can give you a picture of what can be done by following the Incurables program. Use it carefully and accurately for complete, long-lasting health.

## Dr. John R. Christophers "Mucusless Diet"

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The second step to healing the body is for an individual to eliminate the mucus-forming foods from the diet. Using this procedure, not only are the sinuses, the bronchi, and the lungs cleared but also the constipating mucus (catarrh) in the tissues of the body from the top of the head to the bottom of the feet.

If this diet is followed as outlined, we guarantee that after a short time you will have much more satisfaction from the foods we recommend, for better health, than you ever had from the food of your former diet.

Now, what can you eat?

### **The Do's:**

Any whole, live, raw foods. Fruits, vegetables, whole grains, nuts, seeds, and a small amount of fresh fish or chemical free chicken.

### **The Dont's:**

Salt, eggs, all refined sugars, meat, all milk products, flours and flour products.

Do not be concerned because this diet omits meat and the commercial types of protein and don't worry about adding protein, as you will get all that you need in these foods. The gorilla is built on the same order as the human being, and he gets all the protein he needs from just fruits, nuts and seeds.

The best food to start the day is fresh fruit or a good low heated whole grain. This should be a cereal in its wholesome state (with life in it). It can be prepared in a thermos bottle: Take a thermos bottle, fill in the early afternoon or evening one-third full of grain, then finish filling the thermos bottle with boiling water. Turn the thermos over two or three times to mix the grain and water. The next morning the grain is ready for consumption.

Sprouted grains are another excellent and nutritious food source. Alternate the grains. Almost any live seed or grain can be sprouted, find the one you like and enjoy.

Fruit and vegetable juices along with dried fruits are another wonderful source for this diet.

There are also thousands of salad combinations available, with some investigation and experimentation, you will never run short of interesting combinations. This diet can be challenging as well as rewarding. The health and wellness that will result from following this diet is reward enough.

For additional information and recipes, see Dr. Christopher's book. [Regenerative Diet](#). "To your good health!"

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## Dr. John R. Christophers "Three Day Cleansing Program"

Excerpt taken from the [Three Day Cleanse and Mucusless Diet](#) by Dr. John R. Christopher

Supreme cleanliness is the first step toward a healthy body. Any accumulation or retention of morbid matter or waste of any kind within us will retard our progress towards recovery. The natural eliminative channels are the lungs, the pores of the skin, the kidneys, and the bowels.

The retention of body waste has an insidious effect on our health than is generally suspected, and its elimination is one of the first steps toward perceptible progress.

To begin the three day cleansing program, the individual is required to undergo three days of detoxification therapy, then proceed with the mucusless diet as is outlined hereafter:

First thing in the morning upon arising, drink 16 ounces or more of prune juice (unsweetened, if possible). The prune juice is not primarily to empty the bowels, which it will do, but rather to draw into the intestines from every part of the body such toxic matter or body waste as may be there, and eliminate it through the bowels.

After beginning with the sixteen ounces of prune juice, within one half hour take an eight ounce glass of undiluted apple juice. Swish each mouthful thoroughly (called chewing). Then, 30 minutes later drink a glass of plain water (preferably distilled), followed 30 minutes later with more apple juice. The general procedure is: 16 oz. of prune juice first thing in the morning, then, 8 oz. of apple juice 30 minutes later, and 8 oz. of distilled water after that; repeating the juice and distilled water each 30 minutes throughout the day. One gallon of apple juice is consumed each day for an average size adult, or one ounce per pound of body weight. (This of course is an approximate and suggested dosage, as age, ability to hold liquids, etc., determine the capacity for each specific case.)

Breaking up the mucus during the juice cleanse generally causes constipation throughout the three days. Use more prune juice or take [Dr. Christopher's Lower Bowel \(Colon\) Formula](#).

Repeat this detoxification for 3 consecutive days. Thus, approximately three gallons of mucus and catarrh will have been eliminated and will have been replaced by three gallons of juice. This has resulted in speeding up the re-alkalinizing of the system.

During the three-day cleanse, take one or two tablespoons of olive oil three times a day, to aid in lubricating bile and liver ducts, etc.

On the fourth and subsequent days, we begin taking vegetable and fruit juices, along with raw fruits and vegetables. Then follow the mucusless diet as close as possible.

Do not be concerned if you feel weak during or after this detoxification. Our bodies are using the energies for internal housecleaning, soon an increase of energy will occur as a result of a cleaner healthier body.

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## Dr. John R. Christophers "Three Oil Massage"

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For the first two days, massage the patient with castor oil, using a clockwise circular motion from the top of the head to the bottom of the feet, always working towards the heart. The next two days use olive oil, and the last two days of the week massage with wheat germ oil.

By using the skin as a filtering agent, the castor oil cleans and flushes the skin. It also goes into the blood stream, aiding in the removal of mucous and toxins from the inner body. The olive oil is a complete food itself and will penetrate into the body to feed and rebuild muscles, flesh, and the entire system. Wheat germ oil is a healing oil, high in vitamin E, valuable in rejuvenating the body.

On the seventh day, rest the patient, using no foods, herbs, or juice, only drinking steam-distilled water, as much as is desired.

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## Herbal Legacy of Courage

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These Newsletters were written by Dr. John Christopher to share his knowledge with the world.

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## Fluoridation of our Water Supply

Utah and other areas of the world are currently debating putting Fluoride into the public drinking water. HerbalLegacy.com is all about educating the public and helping people to live a healthy lifestyle. We **DO NOT** believe that fluoridation of the public drinking water is a good idea. We don't want you to just take our word that it is unhealthy, you should look into it for your self.

After looking through these pages feel free to use your favorite search engine and see what other information you can find on your own and you will see why we don't support fluoridation.

The following pages is just a little information that we have put together so you may learn for yourself.

### [Newspaper Articles](#)

This section includes a few Newspaper Articles on the topic of Fluoridation. One is from our own Master Herbalist, David Christopher.

### [Letters](#)

This section has a handful of letters from various organizations and people on Fluoridation.

### [Professional Contacts](#)

This page was prepared by the Citizens for Safe Drinking Water - Utah and provides the names and contact information for some knowledgeable professionals.

### [Silicofluorides and Lead](#)

Here, we have some information on what the affects are of Fluoride on people and our children.

### [Populations that are Unusually Susceptible](#)

The title says it all.

### [Rejection of Water Fluoridation](#)

A list of places that have retracted fluoridation since 1990.

### [Fluoridation in Europe](#)

What are other countries doing?

### [A Little USA Geography](#)

Take a look at which Cities and States Fluoridate their water.

### [Fluoridation Links and Quotes](#)

Don't take our word about fluoridation, check out what others have to say about it. There are both pro-fluoridation and anti-fluoridation sites listed. We also have a few quotes we feel you might like.

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Please take a moment to share your feelings with us and possibly, the world here on our site.

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## Submit Your Recipes

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This area is here for only one purpose, for **YOU** to submit your own favorite healthy recipes. We will review them and maybe even add them to the site for others to enjoy. We look forward to tasting your dishes.

**Note:** If you give us your name in the Recipe, you will get credit for it. We will not use your last Name.

*(ie... Lindsay from Spanish Fork, Utah.)*

Please use the following format:

Dish Name

Ingredients

Directions

Servings

Personal Comments about the recipe that you want to share. (Optional)

Your Name:

Email Address:

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Your Healthy Recipe:



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### Almonnaise

A Perfectly Mucusless blender Mayonnaise!

#### Ingredients:

**1/2 cup whole raw almonds soaked in distilled water for 24 hours**

**1/2 cup distilled water**

**1 tsp nutritional yeast**

**1/4 tsp garlic powder (optional)**

**1/2 tsp sea salt or salt-free seasoning, such as kelp or Vegit**

**1-1 1/4 cups 100% expeller pressed safflower oil**

**3 Tbs. fresh squeezed lemon juice**

**1/2 t apple cider vinegar**

#### Directions:

1. Peel almonds. After soaking for 24 hours, peels should be easy to remove.
2. Place almonds in blender with 1/2 of water, blend until smooth, adding more water as necessary.
3. Stop blender and add any remaining water, yeast, garlic powder and sea salt. Blend until smooth and creamy.
4. Remove insert from top of blender. With blender running on low, drizzle oil in a thin stream until it suddenly becomes thick, somewhere between 1 and 1 1/4 cups.
5. Add lemon juice and vinegar, blend 1 minute longer until it reaches desired consistency.
6. Refrigerate tightly sealed, up to 10 days.

#### Note:

Occasionally blender mayonnaise will not thicken as expected. I have been making it for 3 years and had about 5 batches fail. The many times it was successful, however, made it well worth it.

This recipe was adapted from Marilyn Diamond's "The American Vegetarian Cookbook"

This recipe was given to us by Traci from Thayne, Wy.



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### Apple Crisp

#### Ingredients:

- 4 large or 6 small apples, sliced into small chunks (peeling optional)**
- 1/3 c honey + 2T, divided**
- 2 T cinnamon, divided**
- 1 c raw almonds, soaked 8-12 hours**
- 1/2 c almond powder (see note)**
- 3 T safflower oil, divided**
- Dash sea salt**

#### Directions:

1. Preheat oven to 350.
2. Combine apples, 1/3 c honey and 1 T cinnamon, stir well and place in 9x13 baking dish. Drizzle with 1 T oil.
3. Dry soaked almonds with a kitchen towel and grind in a food processor until very fine.
4. Add remaining cinnamon, almond powder, 2 T oil, 2 T honey and salt to processor, pulse to mix, forming coarse crumbs.
5. Top apples with mixture.
6. Bake at 350 until topping begins to brown, about 10-15 minutes. Serve with Cashew Whipped Cream.

#### Note:

When I make almond milk, I strain off the pulp and dehydrate it until it is a powder and save it for baking.

This recipe was given to us by Traci from Thayne, Wy.



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### Asparagus Soup

#### Ingredients:

- 2 tablespoons unsalted butter**
- 1 Tablespoon canola oil**
- 3 cups chopped onions**
- 2 tablespoons finely minced garlic**
- 6 cups vegetable broth**
- 3 pounds fresh asparagus**
- 2 carrots, peeled and chopped**
- 1 cup chopped parsley**
- 1 tablespoon dries tarragon**
- Salt and pepper to taste**
- Pinch of cayenne pepper**
- ½ cup "Better Than Sour Cream" for garnish (optional)**
- 1 large tomato, seeded and cut into small dices, for garnish**

#### Directions:

1. Melt butter in the oil in a pot over medium heat. Add the onions and garlic; cook until tender, stirring occasionally, about 15 minutes. Add the broth; heat to boiling.
2. Trim woody ends off the asparagus. Reserve the tips, then cut the stalks into 1 inch pieces; add to broth. Add carrots, parsley, tarragon, salt and pepper and cayenne to broth. Simmer, partially covered, until the vegetables are tender, about 45 minutes.
3. Puree in batches in a blender or food processor, then put back in the pot.
4. Before serving, add the asparagus tips and simmer over medium low heat until tips are tender and soup is hot, about 10 minutes.
5. Serve with a dollop of sour cream, if desired, and a sprinkling of diced tomatoes.

Serves 6.

This recipe was placed on HerbalLegacy.com at the request of David Christopher, MH. This is one of David's favorite recipes, as asparagus is one of his favorite foods.

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### Berry Banana Breakfast Juice

#### Ingredients:

- 3/4 c. distilled water**
- 1 banana**
- 1/4 c. frozen red raspberries**
- 1/4 c. frozen blueberries**
- 1/4 c. frozen strawberries**
- 1/4 c. frozen blackberries**
- 1/4 c. frozen cherries**

#### Directions:

Put the all these organic ingredients into a VitaMix or a Blender. Blend well. Pour into a large glass and enjoy!

More or less of each frozen fruit may be used, depending on the taste desired. This juice is really refreshing!

Serves 1.

This recipe was given to us by Pam from Webster, NY.



Zucchini Cookies

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### Cashew Cheese

#### Ingredients:

- 1 cup Water**
- 1/3 cup plus 1 rounded TBSP of Emes unflavored gelatin (do not use Agar)**
- 1 1/4 cup boiling water**
- 2 cups raw cashews**
- 1/4 cup yeast flakes**
- 1 TBSP salt**
- 2 tsp onion powder**
- 1/4 tsp garlic powder**
- 1/4 cup fresh lemon juice**
- 1 pimento or 1 carrot grated or 2 tsp paprika**

#### Directions:

Soak gelatin in the 1 cup of water in blender while assembling the other ingredients. Pour the boiling water over soaked gelatin and whisk briefly to dissolve. Cool slightly. Add cashews and blend thoroughly while adding remaining ingredients. Blend until mixture is the consistency of a cream sauce, with no pimento or carrot seen. Pour into a quart mold, cool slightly. Cover before refrigerating. Refrigerate over night before serving. After this firming period, it can be frozen. This melts over hot dishes. Leave out the gelatin for a fondue type of cheese.

Makes one quart.



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### Cashew Whipped Cream

#### Ingredients:

**1/2 c raw cashews or cashew pieces**

**1/2 c distilled water**

**1/2 to 3/4 c safflower oil**

**2 T 100% pure maple syrup**

**1/2 t pure vanilla**

**Pinch of sea salt (optional)**

#### Directions:

1. Blend cashews in water to form a thick cream. Slowly add the oil in a fine stream until cream thickens, blend in maple syrup, vanilla and salt. Chill and serve. (Cream will thicken substantially when chilled.)

#### Note:

This is very rich and very good. Recipe can be doubled.

This recipe was given to us by Traci from Thayne, Wy.

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### Cranks Nut Roast

#### Ingredients:

- 1 Medium Sized Onion**
- 2 TBSP Olive Oil**
- 1 ½ Cups Mixed Nuts**
- 4 Slices Whole Wheat Bread**
- 1 Cup Water**
- 2 TBSP Nutri-Soup**
- 1 tsp Mixed Herbs (Summer Savory)**
- Salt & Pepper to taste**

#### Directions:

Chop onions and saute in oil until transparent. Grind nuts and bread in a blender or food processor until quite fine. Heat water and add Nutri-Soup. Combine all of the ingredients together and mix well. Turn into a greased shallow baking dish, level the surface, sprinkle with a few breadcrumbs, and bake at 350° for 30 minutes, or until golden brown.



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### Easy Breakfast

*Light and Natural CookBook*

#### Ingredients:

**1 Large unpeeled apple – Diced**

**3/4 Cup rolled oats**

**1/4 Cup maple syrup**

**1/2 Cup chopped walnuts**

**1 Cup soy yogurt**

**2 TBSP wheat germ**

**Ground cinnamon (optional)**

**Ground nutmeg (optional)**

#### Directions:

Stir the apples, oats, maple syrup and walnuts into the yogurt. Sprinkle with wheat germ. Top with cinnamon and nutmeg if desired. Garnish with fresh fruit.

Serves 2.

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## Empanadas

### Filling Ingredients:

- 2 pounds of ground turkey (optional)**
- 1 medium white onion, chopped**
- 2 bunches of green onions, chopped**
- 1 red pepper, seeded and finely chopped**
- 1 green pepper, seeded and finely chopped**
- 4-5 cloves of garlic, peeled and mashed**
- 3 carrots, peeled and grated**
- 2 tablespoons finely chopped parsley**
- 1/4 cup cilantro**
- 1 cup cooked peas**
- 1 cup cooked corn**
- 1 1/2 cups brown rice**
- 1 teaspoon cumin seeds**
- freshly ground pepper**
- sea salt to taste**

### Directions:

Saute turkey in a skillet with a little olive oil until cooked through, allowing some of it to become well browned. Season with 1/2 teaspoon cumin seeds, freshly ground pepper and salt to taste. In a separate skillet, saute onions and peppers in olive oil. Add carrots, garlic, 1/2 teaspoon cumin and salt to taste and saute a bit more. In a large bowl, mix cooked turkey, vegetable mixture, peas, corn and rice. Check seasonings.

Roll out pastry dough and cut into rounds, approximately 6 to 7 inches in diameter. Place several spoonfuls of filling off center, fold pastry rounds and pinch edges. Bake at 350 degrees until lightly browned. May be individually wrapped in foil or frozen. Remove foil before reheating.

**Yoghurt Dough Ingredients:**

**1 cup plain yoghurt**

**2 sticks butter, softened**

**3 ½ cups freshly ground spelt or wheat flour**

**2 teaspoons sea salt**

This excellent all-purpose dough recipe makes enough for two 10 inch French style tart shells. This dough cooks rather slowly. For a pre-baked tart shell, allow 20 to 30 minutes at 350 degrees.

Cream yoghurt with butter. Blend in flour and salt. Let stand, covered, overnight. Roll on a pastry cloth using unbleached white flour to prevent sticking.

Makes about 2 dozen

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### Festive Salad Dressing

#### Ingredients:

**1/3 c honey or 100% maple syrup**

**1/3 c raw apple cider vinegar**

**2 T fresh lemon juice**

**1/4 c chopped red onion**

**1/2 t sea salt**

**2/3 c extra virgin olive oil**

**2 T poppy seeds**

#### Directions:

1. In blender, combine first 5 ingredients and blend until smooth.
2. With blender running on low, drizzle in olive oil and then add poppy seeds.

Yields about 1 1/2 cups.

#### Note:

This is a blender dressing I make for special occasions, although the ingredients are great for everyday use. It is a big hit with kids because it is sweet and it comes out pink; how pink will depend on the red onion you select. The smaller and closer the rings of the onion are, the darker pink the dressing will be. I've had it come out hot pink!

This recipe was given to us by Traci from Thayne, Wy.



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## Fruit Shaker

### Ingredients:

- 3-4 lg. bananas**
- 1/4 piece of cantalope**
- 1/4 piece of rock melon**
- 5 oranges, juiced**
- 2 lemons, juiced**
- 3 mandarines or tangerines, juiced**
- 1 or 2 grapefruits, juiced**
- 2 apples**
- 2 pears**
- 1 or 2 kiwis**
- 2. Tbs. flaxseed oil**
- 2. Tbs. Pure oleo europaea olive oil**
- Whatever other seasonal fruits that can be had**

### Directions:

In a blender, add the the bananas, the melons and citrus juice, blend on high speed for a few moments. Add the apples and pears blend on high for a few more seconds, then put the kiwis in and the oils and mix till blended, gently with the oils so as not to damage the properties.

### Note:

Serve with a side plate of L.S.A. (linseed sunflowers and Almonds). I've found this to be a wonderful drink and it tastes wildly wonderful!! Have fun and enjoy.

Gypsy

This recipe was given to us by Gypsy from LA, Ca.



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### Hummus

#### Ingredients:

- 1 can (15 oz) garbanzo beans**
- 1/4 cup tahini (sesame paste), or 1/4 cup toasted sesame seeds and 2 tablespoons olive oil**
- 3 tablespoons lemon juice**
- 1 clove garlic minced**
- 1/4 tsp cumin**
- Salt and pepper to taste**

#### Directions:

Drain garbanzo beans, reserving liquid. Put beans into a blender or food processor. Add tahini or sesame seed and oil mixture, lemon juice, garlic, cumin, and 1/4 cup of the garbanzo liquid. Blend together until mixture is the consistency of heavy batter (adding more garbanzo liquid if needed). Season to taste with salt and pepper. Garnish with olive oil or chopped parsley. Makes 12 servings, 2 tablespoons per serving.



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### Milk (Almond 1)

#### Ingredients:

**1 ½ Cups of Almonds**

**5 Cups of Water**

**1 TBSP Honey**

**1/4 Cup Hot Water**

**1 tsp Vanilla**

#### Directions:

Put almonds and 5 cups of water in blender. Blend well. Pour through strainer. Mash with spoon. Add more water and blend again. Strain again. Melt honey in hot water and add vanilla to honey. Add to almond mixture. Chill.

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### Milk (Almond 2)

#### Ingredients:

- 1/2 cup raw almonds**
- 1 Tbsp flaxseeds**
- 1 tsp lecithin granules**
- 2 Tbsp honey**
- 1/8 almond extract**
- 3 cups warm water**

#### Directions:

Heat water in a sauce pan. Just before the water boils, one cup of it in a blender and add the almonds, flax seeds, and lecithin granules. Blend until liquified. Add the rest of the water slowly. After the mixture is smooth, pour it back into the sauce pan simmer on low heat for 10 minutes stirring constantly. Take off the heat and strain the liquid out. Save the solid portion for breads and desert crusts. Add the honey and almond extract to the liquid. If the liquid (now almond milk) is too thick add more water.

Pour this almond milk on cereal, mix with more honey and cocoa to make a chocolate drink, or use it in any recipe that calls for milk. Almond milk has much more usable calcium and protein than dairy milk and it is not mucus forming.

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### Milk (Rice)

#### Ingredients:

**4 cups hot/warm water**

**1 cup cooked rice (I've used white or brown)**

**1 tsp vanilla**

#### Directions:

Place all ingredients in a blender until smooth. Let the milk set for about 30 minutes, then without shaking, pour the milk into another container ( I use an old honey jar) leaving most of the sediment in the first container. This makes about 4 - 4 1/2 cups.

#### Notes:

When I used cold water and rice, taken straight out of the refrigerator, the milk didn't turn out very well. I don't know why, but it's best to use warm water and warm rice. You can heat it, if you are using leftovers, but freshly made is best. I have even let it set longer than 30 minutes (overnight) without it making a difference.

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### Norwegian Prune Pudding

#### Ingredients:

- 1/2 lb. Prunes**
- 2 C. hot water**
- 1/3 C. honey**
- 1/8 Tsp. Salt**
- 1/2 Tsp. Cinnamon**
- 1/2 C. boiling water**
- 1/3 C. cornstarch or arrow root**
- 1/4 C. cold water**
- 1 Tbl. Lemon Juice**

#### Directions:

Place prunes in a saucepan, cover with hot water and let stand for 1 hour. Place over low heat and simmer until soft. Remove pits, then return prunes to cooking water. Add honey, salt, cinnamon, and boiling water. Simmer 10 minutes.

Mix cornstarch or arrow root with cold water to make a smooth paste. Add to prune mixture and cook for 5 minutes, stirring constantly. Add lemon juice.

Pour into a large serving dish and chill. Can be served with light cream on the side. (We use Vanilla Better Than Milk)

Yields 6 Servings

#### Note:

This is one of the top requested recipes we have. David and Fawn often mention this recipe on their radio program, A Healthier You, as a tasty way to deal with constipation. This recipe works especially well for children.

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### Tahini Cookies (2 ways)

#### Ingredients:

**6 Tbls tahini (sesame butter)**

**1/2 cup honey or molasses**

**1/2 chopped nuts**

**1/2 tsp cinnamon**

**1 1/2 cups rolled oats**

**OR**

**1/2 cups wheat bran**

**1/2 cups flax seeds**

**1/2 cups coconut**

#### Directions:

Blend the tahini, honey, nuts and cinnamon together and then mix in either the rolled oats or the wheat bran, flax seeds and coconut. Drop by teaspoonful onto cookie sheet. Bake at 350% F for about 10 minutes until edges are brown. Be careful not to over bake!

If desired you can also add chopped dried fruits, raisins, dates, prunes etc.

This recipe was given to us by Eliyafa Seror from Safed, Israel.



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### Twice Baked Potatoes

#### Ingredients:

- 4 large russet baking potatoes, baked and cooled slightly**
- 4 c cubed winter squash (ie. Butternut, Hubbard or Banana)**
- 1/2 c finely grated onion**
- 1 garlic clove, pressed (or more according to taste)**
- 1 T cumin**
- 2 T parsley**
- 1/3 c olive oil**
- 2 T Braggs Liquid Aminos or Tamari**
- Paprika**

#### Directions:

1. Steam squash cubes in steamer basket until very soft.
2. Cut potatoes in half lengthwise and gently scrape pulp from skin, being careful not to tear skin, reserve skins.
3. Combine squash, potato pulp, onion, garlic, cumin, parsley, olive oil and Liquid Aminos. Mash thoroughly and whip with electric mixer until no lumps are left.
4. Fill reserved skins with mixture. Brush tops with additional olive oil and dust with paprika. If potatoes have cooled significantly, reheat under broiler for 7-10 minutes, otherwise serve immediately.

Yield: 4 large stuffed potatoes

#### Note:

I like to scrape a fork over the tops of the potatoes to make them look pretty.  
This recipe was given to us by Traci from Thayne, Wy.



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**Whole Wheat Bread  
Crumbs**

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## Whole Wheat Bread Crumbs

(the mucusless way!)

### Ingredients:

**1 Cup whole wheat**

**Distilled water to soak**

**2 T olive oil**

**1/4 c distilled water**

**1 t honey**

**Pinch sea salt**

### Directions:

1. Rinse wheat and soak overnight. Drain water and rinse daily until sprouted.
2. Combine sprouted wheat, and all other ingredients in blender. Blend until smooth, adding extra water if necessary.
3. Pour puree onto the flexible fruit leather sheet of a food dehydrator, dehydrate until crisp, crumble and store in an airtight container. OR Pour puree on a lightly oiled cookie sheet and place in oven on lowest setting for 5-6 hours, Turning it off and on to maintain lowest heat possible.

### Note:

A lot of recipes, (even in the Mucusless Diet) call for bread crumbs. I am gluten intolerant and cannot handle flours ground from dry grain in any amount, but properly sprouted grains I do fine with. This is my sneaky way of getting around using flour even occasionally.

This recipe was given to us by Traci from Thayne, Wy.



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### Zucchini Nut Bread

#### Ingredients:

- 3 Eggs or 1/2 cup to 3/4 cup Applesauce**
- 1 cup Canola oil**
- 1 cup Sucanut**
- 1 cup Honey**
- 2 cups grated Zucchini**
- 3 tsp. Vanilla**
- 3 cup Flour**
- 1 tsp. Salt**
- 1 tsp. Soda**
- 3 tsp. Cinnamon**
- 1/2 tsp. Cloves**
- 1/2 tsp. Nutmeg**
- 1/4 tsp. Baking Powder**
- 1 cup Chopped Walnuts**

#### Directions:

In large mixing bowl combine eggs (or applesauce),oil, sugar, honey, zucchini, & vanilla. Beat until well blended. Add dry ingredients to creamed mixture. Mix until smooth. Stir in nuts.

Pour into greased loaf pans & bake at 325 for 1 hour or until done.

Makes 2 loaves

**Zucchini Nut Bread**



Zucchini Cookies

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### Zucchini Cookies

#### Ingredients:

**5 Eggs (or Egg Replacer Equivalent)**

**3 Cups zucchini, grated**

**3 teaspoons baking soda**

**1 ½ cup of honey**

**1 ½ cup sucanut**

**1 ½ c canola oil**

Beat the above ingredients together.

**6 cups whole wheat flour**

**1 ½ teaspoons cloves**

**1 ½ teaspoons nutmeg**

**1 ½ teaspoons cinnamon**

**1 ½ teaspoons salt**

#### Directions:

Mix the ingredients with the zucchini mixture. If desired, add 1 cup nuts, 2 cups raisins, 2 cups oatmeal, 1 cup carob chips. Drop on greased baking sheet. Back 375 degrees 12 to 15 minutes. Also good with pumpkin, winter squash, applesauce or grated carrots in place of zucchini.

Zucchini Cookies

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Cayenne Information from the 100 Herb Syllabus

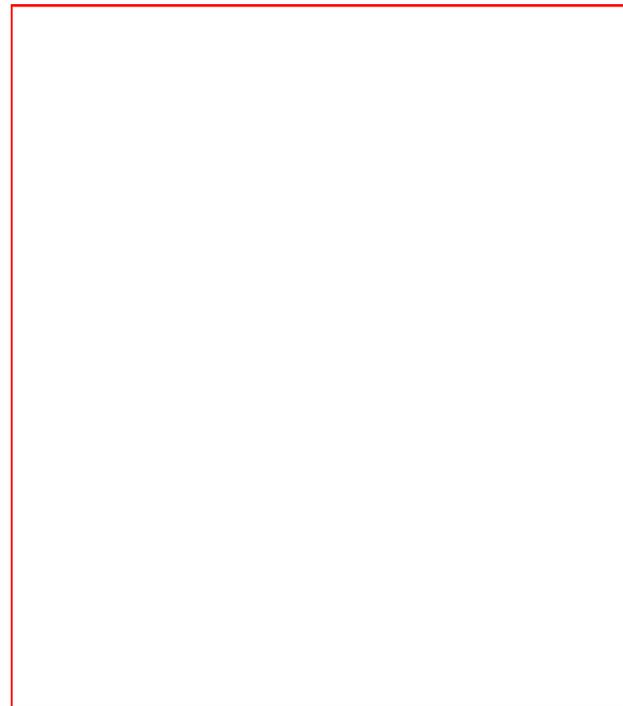
The following information is from

**The School of Natural Healing's**

## **100 Herb Syllabus**

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### **CAYENNE:**



*Capsicum annuum*

**Solanaceae**

A farmer used to give Cayenne to his chickens and cows when they were ailing, but never to the

**Herbs**

**Cayenne**

[Comfrey](#)

children when they were sick. One of the sons said, "We were worth more to him than those animals! He should have given it to us, too." Dr. Christopher assured us that Cayenne is one of the greatest herbs of all time-though it is also one of the most misunderstood and ridiculed. He said that every home should have a good supply of Cayenne pepper.

When only a young man in his thirties, Dr. Christopher was told by the medical doctors that he could not live past his fortieth year because of arthritis, hardening of arteries, stomach ulcers, and some automobile accidents that had damaged him rather badly. He was so concerned that he started using Cayenne, working up to a teaspoon taken three times a day. By the time he was forty-five years old, he was working in a business wherein the group wanted him to have a \$100,000 insurance policy because of the importance of the business deal.

Because it was such a large policy, the company required the examination to be given by two medical doctors, each to examine twice. At the end of one of these physicals, one of the doctors said, "This is astounding! You have the venous structure of a teenage boy, at forty-five years of age!"

The other doctor kept pumping up his blood pressure equipment over and over again, repeating the blood pressure check. Dr. Christopher began to be perturbed, and asked him if the equipment was broken. "It always has worked up till now, but I keep looking at your chart, which says you are forty-five years old, and yet your systolic over your diastolic is absolutely perfect. I cannot comprehend it." Dr. Christopher assured him that it was indeed perfect, and he attributed this clean bill of health to Cayenne.

However, Dr. Christopher needed to be converted to the use of Cayenne. When he was attending the Herbal College in Canada, the teacher announced that they were going to study Cayenne. "Why Cayenne?" asked Dr. Christopher. "It will burn the lining out of the stomach."

"Where did you get your information," asked the teacher, Dr. Nowell. "Oh, my mother told me," answered Dr. Christopher.

Everybody in the class laughed-except the teacher and Dr. Christopher. Dr. Nowell took Dr. Christopher around Vancouver and introduced him to over a dozen people whose lives had been saved with Cayenne: people with heart troubles, ulcers, asthma, and many other ailments. Wherever they went, the people were full of gratitude for being taught about Cayenne, and from then on Dr. Christopher was sold on it.

While Dr. Christopher was working in the business world, he was taking Cayenne, and on one business trip, he was traveling with an athlete, a man who had a black belt in karate and who was, in Dr. Christopher's words, "a husky little guy." Yet he came from a family with a history of high blood pressure, and his uncle had died of varicosity. He was under the care of a doctor at the time. Every morning, Dr. Christopher would take a spoonful of Cayenne in a glassful of water, followed by a few tablespoons of wheat germ oil. The young man wanted to know what Dr. Christopher was taking and wanted to try some. "You're probably too chicken," Dr. Christopher told him! This reverse psychology worked; Dr. Christopher noticed that his Cayenne was disappearing gradually. When they returned from the trip, the man continued taking Cayenne, one teaspoonful three times a day. The doctor was astonished at the young man's next checkup - after a lifetime of high blood pressure, he now had a clean bill of health.

Once a child was shot in the abdomen; a bullet hit the spine, ricocheted, and made a second

wound leaving the body. One of Dr. Christopher's herbal students, living next door, heard the shot and raced over, as she knew that the parents were not home and that the children, ages eight and four, would not be shooting guns. There was the eight-year-old gushing blood out both sides. She ran to the cabinet and mixed a tablespoonful of cayenne in a glass of water; she poured it down the boy and immediately called the ambulance, which was eighteen miles away. The emergency room attendant said that the boy would probably bleed to death, being that the distance was so great. The ambulance arrived and rushed the child (who had been playing "Cops and Robbers" with his father's pistol, which he had found under the pillow of the bed, to the Primary Children's Hospital eighteen miles away. When he arrived, he was the center of attraction, not because his case was so dangerous, but because he was chatting a mile a minute - and there was not bleeding. The bleeding had stopped by the time they arrived at the hospital. The chief doctor said to the parents, "I have seen many accident victims in my life, but this is the first time in such an emergency operation that I have opened an abdomen to find no blood, except for a small amount that was there before the bleeding stopped so quickly. This has saved your boy's life."

In that same year, Dr. Christopher treated four other gunshot victims, and each case responded the same, although sometimes the blood coagulates and comes out in clumps before it stops completely. By the time you count to ten, however, the heavy bleeding should stop completely after administering Cayenne. The Doctor even used tincture of Cayenne on open wounds and, as he put it, "There may be a bit of muttering about it," referring to the burning feeling of the Cayenne, but the bleeding stops.

Dr. Christopher related the humorous story of a very fine student of his who had begun teaching herb classes on his own. This young man happened to precede Dr. Christopher's lecture one evening in Arizona. The young man said, "You know, ladies and gentlemen, that Dr. Christopher has always made me gasp. I've seen him drink two or three tablespoons of Cayenne in water - and I'd just shudder. But tonight I'm going to do something that he may have never done himself." With that, he reached down into a container of Cayenne and threw a pinch right into his eye. Dr. Christopher thought that the man must have gone crazy and he was concerned that one of his students would do such a thing in public, although he knew that Cayenne can never hurt the cell structure, no matter how delicate it is. The tears ran down the man's cheek as he continued talking, and when he was finished, he opened his eye and invited everyone to look. The eye just sparkled; it was by far the brighter of the two, although Dr. Christopher said that he never had seen this antic performed again - and that he never dared to try it himself.

A lady who had been attending Dr. Christopher's lectures over the years told the story of her husband who had a severe case of stomach ulcers. The doctor recommended that part of the stomach be removed, but the man preferred to suffer the pain rather than risk such an operation. But he also ridiculed his wife's recommendations to use Cayenne and other herbs. Whenever he would see Dr. Christopher in town, he'd bellow, "Hello, Doe! Killed anybody with Cayenne today?" Naturally, Dr. Christopher tried to avoid him, but one day he came directly to the Doctor—but this time without any sarcasm, instead being very apologetic, telling this story.

He had come home from work one night, so sick he wanted to die, with stomach ulcers. His wife was not home, but he was in such pain that he decided to commit suicide. When he looked into the medicine cabinet to find some kind of medicine poisonous enough to kill him, he discovered that his wife had discarded all the old bottles of pharmaceutical medicines. All he could find were some bottles of herbs and a large container of Cayenne pepper. He figured that a large dose of that would kill him, so he took a heaping tablespoon in a glass of hot water, gulped it down, rushed into the bedroom, and covered his head with a pillow so that the neighbors couldn't hear his dying screams.

The next thing he knew, his wife was shaking him awake the next morning. He had slept all night,

the first time in years, instead of waking every half hour or so for anti-acid tablets. To his amazement, all his pain was gone. He continued using the Cayenne faithfully, three times a day, and never had any more trouble with ulcers.

Once, when traveling with a business partner, Dr. Christopher recommended Cayenne to him, as the man had extremely high blood pressure and such bad hemorrhoids that he had to wear a belt. Dr. Christopher used the same reverse psychology on this man - "I don't think you are brave enough"—and pretty soon the man was taking the Cayenne and the wheat germ oil, too. In a few months, he did not have to wear a belt any longer, and his systolic and diastolic at his blood pressure examination were nearly perfect. He no longer had to go to the doctor—and he lived many long years, for he kept taking his Cayenne.

Early in Dr. Christopher's practice, he was called in the middle of the night by a woman whose husband had just passed out from a heart attack. The Doctor told the woman to heat some water, and he arrived at the house and mixed a teaspoon of Cayenne into the water, propped up the man, and gave him just a little. When he came to, he finished the cup, and within a few minutes felt much stronger. Soon he was well, and became converted to the use of herbs, even buying and running one of the health food stores in Salt Lake City for many years.

One young man had cut his hand deeply, fingers as well as the palm. The blood spurted out in streams. He poured a large amount of Cayenne into the wound, and within seconds the blood flow slowed down, congealed, and stopped. He wrapped with wound, covering it first with a goodly amount of Cayenne. He was so excited about these results that he could hardly wait to attend the next herb lecture to tell about it. But when he unwrapped the bandage to show the audience, instead of a deep, ugly scar, the area was healed and there was no scar at all!

Cayenne can be used on any part of the body and for anybody, Dr. Christopher claimed. He even saved the life of a six-week-old baby who was born with chronic asthma by giving Cayenne tea, from an eyedropper, until the baby was able to breathe again. He said that Cayenne could even be given by enema for chronic constipation (if you are brave!).

At the age of seventy, a few years before he died, Dr. Christopher was asked by a premed student if he could take his blood pressure. The lecture group saw the blood pressure reading of a healthy young man, not the average reading of a seventy-year-old. In addition to a healthy life-style and the mucusless diet, Dr. Christopher attributed this good reading to his thrice-daily dose of Cayenne.

To show what a miracle worker Cayenne really is, Dr. Christopher related the experiment performed by medical doctors in the eastern United States—and printed in the medical journals. They put some live heart tissue in a beaker filled with distilled water, and fed it nothing but Cayenne pepper, cleaning off sediments periodically and adding nothing else but distilled water to replace that which was lost from evaporation. During the experiment, they would have to trim the tissue every few days, because it would grow so rapidly! Having no control glands (pituitary and pineal), the tissue just continued to grow rapidly. They kept this tissue alive for fifteen years. After the doctor doing the experiment died, his associates kept it alive for two more years before destroying it for analysis. This shows the tremendous regenerative and healing power of Cayenne, especially upon the heart.

Take the Tour by [Clicking here](#) to learn about the herb Cayenne, beginning with [A History of the Healing Chili](#) or jump in anywhere you would like by clicking on any of the following:

[History](#) · [Medical & Findings](#) · [Cultivation & Usage](#) · [Composition](#) · [Formulas](#) · [Bibliography](#)

## Herbs

[Cayenne](#)[Comfrey](#)

### Comfrey

Dr. Christopher used Comfrey in many of his formulas. He recognized the benefits, and powerful healing agents of Comfrey. A good majority of his formulas contained Comfrey. However, recently the FDA and the FTC decided that Comfrey was a dangerous herb, because when it is a young plant it has a high Pyrrolizidine alkaloid content. This has led the FTC and the FDA to believe that Comfrey is dangerous. Dr. Christopher never had a problem with Comfrey, and we have yet to hear of someone who has been damaged by it. Nevertheless, the Dr. Christopher Company had to remove Comfrey from the internal formulas. Comfrey is still used in the external formulas.

During this time, we put the following information together to submit to the FTC, in support of Comfrey. This information does get very technical at times.

[Contentions with the Comfrey Studies](#) · [Response to #1](#) · [Response to #2](#) · [Response to #3](#)  
· [Response to #4](#) · [Response to #5](#) · [Response to #6](#) · [Response to #7](#) · [Response to #8](#)  
· [Response to #9](#) · [Response to #10](#) · [Response to #11](#) · [#12](#) · [References](#) · [Comfrey Testimonials](#)

[Comfrey Thesis](#): Stacy Brittain, Master Herbalist Graduate of The School of Natural Healing Thesis titled "The Benefits Of The Use Of Comfrey (Symphytum Officinale) In Herbal Preparations".

# Welcome to Herbal Legacy.com

HerbalLegacy.com is sponsored by [Christopher Publications](#).

HerbalLegacy.com is **not** sponsored nor endorsed by Dr. Christopher's Original Formulas. We are an **educational** site only.

HerbalLegacy.com was created as a way for people to find out more information on the formulas created by Dr. John R. Christopher, and how they were originally intended for use.

One of Dr. John R. Christopher's goals was to have an Herbalist\* in every home, and a Master Herbalist\* in every community. Through HerbalLegacy.com, we hope to further the knowledge of Dr. Christopher by offering detailed information on his formulas, and natural healing programs.

We also detail other information that people might find useful, including various healing programs put together by Dr. Christopher.

The name HerbalLegacy was chosen because of the rich legacy passed on by Dr. Christopher. Please see the biography, An [Herbal Legacy of Courage](#), written by his son [David Christopher BA MH AHG](#), to find out more about his legacy.

At HerbalLegacy.com you will find a great deal of information on all of Dr. Christopher's Formulas, Cleansing Programs, Recipes to ensure your good health, and various writings by him. In addition there are testimonials from people who have used these methods successfully. You **will not** be able to purchase any herbal supplements from this site. This site is intended to **educate** people in the correct usage of herbs and nutrition.

**New!!** Sign up for our *free* newsletter! Each month we will be sending out a newsletter with new information on ailments, Dr. Christopher's Formulas, or other health topics. [Sign up now!](#)

Towards the bottom of this page, you will find a section titled "[New Additions](#)". This section contains a list of everything recently added to HerbalLegacy.com. Be sure to [Bookmark Us Now](#) so you can easily return for these new additions.

If there is an ailment you do not find on HerbalLegacy.com, or a section that you feel needs clarification, please e-mail [requests@herballegacy.com](mailto:requests@herballegacy.com). We are **unable to respond to individual questions**, but will continue to add useful information to the site.

\* Want to know how to become an Herbalist or Master Herbalist? Check out [The School of Natural Healing](#).



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[Herbal Education](#): Your source for a Complete Herbal Education. The School of Natural Healing

was established by Dr. John Christopher in 1953 and has been dedicated to providing quality herbal education ever since. Learn more today.

[Book Store](#): Visit our book store to find various books written by Dr. Christopher and many others that compliment his teachings.

[Ailments](#): This portion of the site lists many different health Conditions, Definitions, Symptoms, Causes, and Herbal Aids.

[Formulas](#): This section describes the different Formulas created by Dr. Christopher. It covers Usage, Dosage, Ingredients, and Testimonials.

[Programs](#): This area outlines the processes Dr. Christopher recommended for over 30 different ailments.

[Recipes](#): We have put together a number of tasty items that you can make at home to enjoy. Not only are they good, but they are good for you. We hope that you enjoy these as much as we do.

[Herbs](#): Learn more about Cayenne and Comfrey in our new Single Herbs section.

[Links](#): These are some sites that we feel are worth a look.

[Literature](#): Here you can read selected writings by Dr. John Christopher, a biography of Dr. Christopher written by his son David, and other interesting topics.

[History](#): Contains the biography of David Christopher, Master Herbalist and son of Dr. John Christopher who continues the work of his father.

[Testimonials](#): We love to learn what herbs and natural healing methods have done for you and your loved ones. This area is for just that. These stories are some GREAT examples of what herbs are doing for people everyday.

[Feedback](#): In this portion of the site you can send us your herbal success stories that can be used to help educate others in similar situations.

## Health Alert Topics:

[Anthrax](#): Due to the recent terrorist activities and focus on Anthrax, we decided to add valuable information about this bacteria, including information on what to do to combat it.

[Smallpox](#): Due to some debate over whether or not Smallpox could be used as a weapon as a result of recent events, we wanted to help you stay informed.

[Fluoridation of our Water Supply](#): Utah and other areas of the world are currently debating putting Fluoride into the public drinking water. This area discusses the health problems with water Fluoridation. -- Contact your [Utah county House of Representatives](#).

<b>New Additions to the Site:</b>	<b>Date Added:</b>
<u><a href="#">Comfrey Thesis</a></u> added to <u><a href="#">Single Herbs</a></u> Section.	January 17, 2003
<u><a href="#">Comfrey</a></u> information added to <u><a href="#">Single Herbs</a></u> Section.	January 6, 2003
<u><a href="#">Herbs</a></u> section added to site. <u><a href="#">Cayenne</a></u> information moved to Herbs section.	January 6, 2003
<u><a href="#">Tahini Cookies (2 ways)</a></u> in the <u><a href="#">Recipes</a></u> area. ( <i>Thanks Eliyafa</i> )	Nov. 24 2002
<u><a href="#">Fruit Shaker</a></u> in the <u><a href="#">Recipes</a></u> area. ( <i>Thanks Gypsy</i> )	June 10, 2002
<u><a href="#">Hundreds of Children Poisoned by Tap Water</a></u> in the <u><a href="#">Fluoridation of our Water Supply</a></u> area under <u><a href="#">Literature</a></u> .	Dec. 7, 2001
<u><a href="#">Milk (Almond 2)</a></u> and <u><a href="#">Milk (Rice)</a></u> in the <u><a href="#">Recipes</a></u> area. ( <i>Thanks Nathan</i> )	Nov. 9, 2001
<u><a href="#">Smallpox</a></u> in the <u><a href="#">Dr. Christopher Ailments</a></u> area.	Oct. 29, 2001
<u><a href="#">Berry Banana Breakfast Juice</a></u> - Located under <u><a href="#">Recipes</a></u> ( <i>Thanks Pam</i> )	Oct. 29, 2001
<u><a href="#">Dentists to sue over continued fluoridation of drinking water</a></u> located under <u><a href="#">Fluoridation of our Water Supply</a></u> in <u><a href="#">Newspaper Articles</a></u>	Oct. 26, 2001
<u><a href="#">Anthrax</a></u> and <u><a href="#">Corns</a></u> in the <u><a href="#">Dr. Christopher Ailments</a></u> area. <u><a href="#">2-9: Garlic: Man's Best Friend in a Toxic World</a></u> in the <u><a href="#">Literature</a></u> area.	Oct. 17, 2001

<a href="#">Dr. John R. Christophers "Three Oil Massage"</a> and <a href="#">Dr. John R. Christophers "Cold Sheet Treatment"</a> in the <a href="#">Literature</a> area. <a href="#">Immucalm</a> and <a href="#">Deep Heating Balm</a> in the <a href="#">Dr. Christopher Formulas</a> area.	Sept. 4, 2001
<a href="#">Dr. John R. Christophers "Incurables Program"</a> , in the <a href="#">Literature</a> area.	Aug. 29, 2001
<a href="#">Dr. John R. Christophers "Anti-Plague Formula"</a> in the <a href="#">Literature</a> area.	Aug. 28, 2001
<a href="#">Apple Crisp</a> , <a href="#">Cashew Whipped Cream</a> , <a href="#">Festive Salad Dressing</a> , <a href="#">Twice Baked Potatoes</a> , <a href="#">Whole Wheat Bread Crumbs</a> - Located under <a href="#">Recipes (Thanks Traci)</a>	Aug. 22, 2001
<a href="#">El Programa de los Tres Días de Limpieza y la Dieta sin Mucosidad</a> - Spanish Translation of An <a href="#">Dr. John R. Christophers "Three Day  Cleansing Program"</a> .	Aug. 20, 2001

En Espanol

[El Programa de los Tres Días de Limpieza y la Dieta sin Mucosidad](#)

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Herbal Legacy is the NEW home of the Live Streaming Radio Program of David & Fawn Christopher's "A Healthier You." Come here every **Saturday** morning to listen to the world renowned Master Herbalists talk about today's health issues using Natural Healing methods. You can also call and ask them your own questions.

# "A Healthier You"

Unfortunately, A Healthier You is not being streamed over the Internet at this time. Check back often, as we plan to resume streaming soon.

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## Disclaimer

This information here is not intended for the use of diagnosing any disease, condition or prescribing any treatment whatsoever. It is offered for informational use only, and for use in maintaining and promoting good health in cooperation with a licensed medical practitioner. No responsibility is assumed by the distributors, author or publisher of this information should the information be used in place of a licensed medical practitioner's services. There is no guarantee of any kind made for the performance or effectiveness of the preparations or methods mentioned on this web-site.

This information is to be used for educational purposes only and has been solely based on the historic and traditional use of herbs. This information has not been evaluated by the US Food and Drug Administration, nor has it gone through studies required before a particular product can be deemed truly beneficial or potentially dangerous.

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## History

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### Dr. John R. Christopher, M.H., N.D.

Once in a great while the earth is blessed with an enlightened soul who is able to raise the consciousness of his fellow man by his love, wisdom and honor. Our founder, Dr. John R. Christopher, M.H., N.D., intended for everyone to have the knowledge to properly care for their own body.

In his youth, Dr. Christopher became interested in natural healing when he saw the results of naturopathic healing in his mother. His enthusiasm increased when he found he was able to cure himself of cancer using natural methods. Throughout extensive legal persecution, personal counseling and rigid lecture schedule, he began formulating what would become his world renowned herbal combinations in 1945. Hailed as America's foremost herbalists, Dr. Christopher developed a training program for herbalists and organized [The School of Natural Healing](#) in 1953.



### David Christopher, BA, MH, AHG



For the last 20 years David Christopher has been a popular world wide speaker. He has generated new ideas on the management of high blood pressure, diabetes and auto-immune diseases, and was one of the first to discourage the use of Prozac in favor of natural methods. Alarmed by the growing use of Ritalin, David developed an alternative program for ADD and ADHD.

In 1974 David Christopher, M.H., took his place by his father's side at [The School of Natural Healing](#). David's book entitled [An Herbal Legacy of Courage](#) is a loving tribute to his father. Today, thousands of individuals practice the art of natural healing thanks to David's continued directorship and teaching. Many more receive herbal instruction from David and his wife, Fawn, through their weekly radio program "[A Healthier You](#)". David lectures internationally and has offered educational counseling by phone for over 16 years. He continues formulating herbal combinations, such as the Herbal Traditions line, the Kid-e-Line, [Vitalerbs](#), and the INSTEAD line including [PreTrac](#) & [MindTrac](#); to assist the natural healing process.

David is a prominent herbalist in the United States and is a founding member of the American Herbalist Guild. He received his Bachelor of Arts from Brigham Young University, and his Master's degree from The School of Natural Healing. David's herbal studies began at the foot of America's foremost herbalist, his father, Dr. John R. Christopher, MH, ND. As the director of The School of Natural Healing he ensures that the School offers the best herbal education in the field. David is also a popular radio talk show host, and his program, [A Healthier You](#), and is

now in its twelfth year. An [\*Herbal Legacy of Courage\*](#), a biography on his father's life, is David's most recent publication.

David's characteristic teaching methods have reached thousands of students through residential classes and home study programs. He has helped countless people through his unique nationwide, toll-free herbal education service. David's 23 years of experience in the field of Natural Healing and his personal approach pervades all lectures and classes, and gives those in attendance the knowledge and confidence to continue in a journey toward wellness.

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## Fluoridation

### Articles

This section includes a few Newspaper Articles on the topic of Fluoridation. One is from our own Master Herbalist, David Christopher.

### Letters

This section has a handful of letters from various organizations and people on Fluoridation.

### Professionals

This page was prepared by the Citizens for Safe Drinking Water - Utah and provides the names and contact information for some knowledgeable professionals.

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Here, we have some information on what the affects are of Fluoride on people and our children.

### Unusually Susceptible

The title says it all.

### Rejection ???

A list of places that have retracted fluoridation since 1990.

### In Europe

What are other countries doing?

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Take a look at which Cities and States Fluoridate their water.

### Links

Don't take our word about fluoridation, check out what others have to say about it. There are both pro-fluoridation and anti-fluoridation sites listed. We also have a few quotes we feel you might like.

### Fluoridation Survey

Please take a moment to share your feelings with us and possibly, the world here on our site.

## Professional Contacts

This page was prepared by the Citizens for Safe Drinking Water - Utah and provides the names and contact information for some knowledgeable professionals.

**J. William Hirzy, Ph.D.** is Senior Vice-President of the National Treasury Employees Union. Chapter 280. This union is comprised of and represents the approximately 1500 scientists, lawyers, engineers and Other professional employees at the Environmental Protection Agency Headquarters in Washington D.C. He holds the official position with EPA as senior scientist chemist in the Risk Ph.D. (1962) degrees in chemistry from the University of Missouri. He is currently Professor of Chemistry at the American University in Washington. D.C.

**Office:** 202-260-4683

**David Kennedy, DDS** for over 20 years has been a member of the American Dental Association (ADA), the California Dental Association (CDA) and the San Diego County Dental Society (SDCDS). For three years he was elected to the SDCDS Board of Directors, participating in numerous committees - including Senior Care, Speakers Bureau, Political Action Committee, and the Council on Dental Care. In 1974, Dr. Kennedy planned and built the Chicano Children's Dental Health Clinic in San Diego. He is a Past President of International Academy of Oral Medicine and Toxicology, the author of a book on preventive dental health entitled *How to Save Your Teeth*, and a nationally and internationally recognized lecturer on toxicology and restorative dentistry.

**Office:** 619-231-1624 (Monday -Wednesday)

**Home:** 619-222-8177

**Joseph Lynn Lyon, MD** has been a professor of Family and Preventive Medicine at the University of Utah since 1971. Dr. Lyon received his B.S. and M.S. Degrees from the University of Utah and in 1969 graduated from Harvard University.

**Office:** 801-581-7234

**Hardy Limeback, B. Sc., Ph.D.** in Biochemistry, DDS started his career as a basic scientist (MRC Scholar) studying tooth development and pig enamel protein biochemistry. His clinical interests in practice and research have been in geriatric dentistry (Chief of Dental Services for the Metropolitan Homes for the Aged) and preventive dentistry (University clinic and private practice). He currently holds an MRC grant to study the effects of fluoride on tooth and bone development. Dr. Limeback has only recently started to publish in the area of dental and skeletal fluorosis. He is the fluoride-biochemistry expert serving as a member of the Canadian Dental Association's Consumer Products Recognition Committee. Dr. Limeback is currently the head of the Preventive Dentistry department and own his own dental office.

**Office:** 416-979-4929 ext 4461

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## Comfrey Thesis

### The Benefits Of The Use Of Comfrey (Symphytum Officinale) In Herbal Preparations

by Stacy Brittain, Master Herbalist Graduate of The School of Natural Healing

[History of Comfrey](#): The History of Comfrey

[Location of Comfrey](#): The Location of Comfrey

[Chemical Constituents](#): Chemical Constituents And Their Medicinal Qualities In Comfrey

[Contra-Indications](#): Contra-Indications Of Comfrey

[Formulas and Dosages](#): Known Herbal Formulas Of Comfrey And Their Recommended Dosages And Applications

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[Fluoridation Gets Flushed on Election Day](#)

[Dentists to sue over continued flouridation of drinking water](#)

[Utah a national leader by not fluoridating](#)

[Prominent researcher apologizes for pushing fluoride](#)

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This is a recent article that clearly explains why the Salt Lake and Davis County officials in Utah want to rid themselves of any and all liability.

## Hundreds of Children Poisoned by Tap Water

By Saidou Arji

14/01/2001

Inter Press Service

NIAMEY, Jan 14 (IPS) - The Societe Nigerienne des Eaux (SNE), Niger's water company, is being sued because hundreds of children in Tibiri, 720 kilometres from Niger's capital, Niamey, were poisoned by grossly elevated rates of fluoride in the town's water.

The children, ranging in age from 15 months to 14 years, contracted skeletal fluorosis, a disease which causes deformities of the bones, according to medical sources.

The children suffer symptoms ranging from stiffness of the joints, arthritic-like symptoms and chronic joint pain, to calcification of the vertebral column, crippling spine and joint deformities, muscle wasting, and neurological defects. Mottling of the teeth is a less serious form of the disease that comes from ingesting lower levels of fluoride (dental fluorosis).

According to Dr. Moussa Koini, who has written a medical dissertation on the topic, the disease is caused by drinking water containing too much fluoride.

Water samples taken in Tibiri from SNE facilities show that the water contains 4.77 to 6.6 milligrams per litre, instead of the maximum 1.5 milligrams recommended by the World Health Organisation (WHO).

Out of the 425 recorded cases of children with fluorosis in Tibiri, there are 262 boys and 162 girls, a proportion of 61.79 to 38.21 percent. The age bracket most affected is the three to

seven-year-old group. There are 62 three-year-olds and 55 six year olds affected. Sixty-eight percent of the victims are five-year-olds.

According to Dr. Koini, crippling skeletal fluorosis affects mostly children. There have been no reported cases of adults in Tibiri contracting the disease. This is due, he said, to the fact that growing children absorb more fluoride than do adults. Adults can become ill with the disease, but they would need to have drunk heavily fluoridated water for more than 20 years.

Skeletal fluorosis is a very disabling disease. Hadjia Kande, a mother whose two youngest children are paralysed, says life is a daily burden.

"Look at my children. Neither one of them can even go to the toilet by himself. I need to provide them with constant attention, so I can't regularly get to my job at the cotton mill."

One of the children, 13-year-old Salissou, expressed how sad he is. "I'm afraid to drink water from any source, even well water. Look at the state I'm in, it's really a shame," he said. Although it disables both boys and girls, the disease is even worse for girls as it can have grave consequences for childbearing.

Dr. Koini explained that "if there are outgrowths around the pelvic area, girls can have difficulty giving birth and may have to have Caesarian sections because of an inability to deliver vaginally," he stated.

The origins of the Tibiri tragedy date back to 1983, when the first waterworks was built. The first cases of the illness appeared 10 years later, when many children fell ill.

The Tibiri children's tragedy has produced a hue and cry from the public, especially human rights groups who specialise in these types of issues.

The Nigerien Association for Human Rights (ANDDH) has recruited a panel of lawyers to defend the victim's interests. During a recent press conference, the ANDDH chairperson, Khalid Ikhiri, who is also a chemist at the University of Niamey, emphasised the importance of pursuing this matter through the courts so that the children can receive monetary compensation for the damages they have suffered.

"Fluoride poisoning is fatal. Those children will be disabled for the rest of their lives. Every movement they make is painful, and as a result, they cannot engage in the normal play and other activities of children their age," he added.

Ikhiri's intention in filing suit against the SNE is also to end the impunity that the company has always enjoyed. "The SNE needs to answer for this tragedy since it's their mission to provide the public with pure drinking water," he said.

Confronted by the indignation the Tibiri affair has aroused and by press condemnations, the director of the SNE, Seyni Salou, declared that the elevated fluoride rate uncovered in Tibiri's water cannot be pinned on his operation. He said that the standard tests for water purity are regularly performed on all samples.

However, Salou did acknowledge that fluoride is not normally tested for in the standard tests generally performed on drinking water. "There is rarely a high rate of fluoride in naturally occurring sources. The case of Tibiri is an exception."

Salou recalls that drilling for water in Tibiri's substratum took place in 1983 by the Water Office. The SNE did not yet exist at that time.

"At the time this operation was turned over to us, nowhere was it ever mentioned in the technical documents that there was fluoride in the water."

"Naturally, we continued to distribute water until the health services advised us in 1988 that there was an outbreak of bony lesions among Tibiri's children. We did every possible analysis of the water, even the most farfetched, and finally figured out that the tap water contained a great deal of naturally occurring fluoride," Salou stated.

The SNE director believes that more studies still need to be done to be sure that the only cause of the problem is the fluoride. He thinks that the evidence is not yet conclusive. Nevertheless, he acknowledged that the ANDDH is in its rights to pursue a suit since the laws of Niger allow for it.

More than compensation for the victims, the provision of healthy water for Tibiri's citizens is today's priority. The SNE has confirmed that they have taken steps to bring down the fluoride level to 1.6 milligrams per litre.

Salou indicated that there are permanent changes to be made. Among them is a new water project in the neighbouring town of Maradi. The technical studies have already taken place with help from the Chinese, and work on the new supply project is expected to begin in February 2001.

"Bringing in water from Maradi is the only possible solution because there is fluoride even in Tibiri's groundwater," Salou added.

The government has asked Niger's development partners, most notably UNICEF, to provide assistance to the victims. UNICEF says that a Finnish organisation is ready to finance a community assistance project for Tibiri's children.

The goal of this project, which should begin in the first quarter of 2001, is to provide therapeutic assistance to the sick children, which will be based on nutritional remedies, physical rehabilitation, and orthopaedic correction.

Salmeye Bebert, the director of child welfare, added that the project will help research the exact scope of the disease and will determine the source of pollution of Tibiri's water.

Niger's infant mortality rate of 274 per 1,000 in 1998 was one of the highest in the world.

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## Fluoridation Gets Flushed on Election Day

NEW YORK

Nov. 12, 2001

PRNewswire

*The following press release was issued today by the New York State Coalition Opposed to Fluoridation:*

Voters on November 6, 2001, rejected fluoridation in several U.S. cities despite hundreds of thousands of dollars spent by fluoridation proponents in public relations campaigns. This adds to a growing list of cities that rallied against adding the claimed cavity-fighting fluoride to their water supplies.

According to newspaper accounts:

\* On election day, Worcester, Massachusetts, residents renounced fluoridation for the fifth time since the 1950's. Fluoridation proponents refused to debate but spent \$400,000 trying to win this

referendum. The victorious opposition spent only \$5,196.

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"People who study the issue, themselves, find out fluoridation's health risks far exceed any possible benefits and deprives individuals of their choice to be medicated," says Paul Connert, Ph.D., Coordinator, Fluoride Action Network and Professor of Chemistry, St. Lawrence University, N.Y. "If your community fluoridates and you want it stopped, call us. We can help you."

Some other places defeating fluoridation this year:

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SOURCE New York State Coalition Opposed to Fluoridation

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ST: New York

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## Dentists to sue over continued flouridation of drinking water

By Fionnuala Quinlan

October 22, 2001

[\*The Irish Examiner\*](#)

A GROUP of Irish dentists are to sue the Minister for Health, Micheál Martin, for continuing to fluoridate drinking water.

The dentists, who are breaking ranks with the Irish Dental Association, plan to lodge papers with the High Court after handing a letter of protest into the Dáil on Friday.

The move comes as the Forum on Fluoridation — set up by the minister to examine both sides of the fluoride argument — completes its report, due to be published by the end of the month. The forum was branded a “rubber-stamping exercise” by the dentists planning to sue the Government.

The group of 20 — Irish Dentists Opposing Fluoridation — maintain that health authorities have not fulfilled their obligation under the 1960 Health Act to carry out regular surveys into the health effects of fluoridation.

Spokesman Dr Don MacCauley said the department had never carried out a comprehensive survey, although international research has linked fluoridation to cancer, irritable bowel syndrome, hip fractures and thyroid disorders. A study published in American medical journal *NeuroToxicity* found that fluoride exposure could produce lower IQ levels in children.

Up to 50% of Dr MacCauley’s teenage patients have dental fluorosis — which has been linked to fluoridation — which creates white spots or lines on teeth and causes tooth enamel to chip, he said.

The agent used, hydrofluosilic acid, is a waste component of the fertiliser industry and contains traces of chromium, mercury, arsenic and lead, according to Dr MacCauley.

Ireland is now the only country in Europe to insist that drinking water be fluoridated, although nine county councils, two corporations and seven urban district councils have voted to end fluoridation.

Dr MacCauley said the group opposed fluoridation because medication is being administered

without consent, the public has not been fully informed of the risks and side effects and fluoridation causes dental fluorosis.

Kildare-based GP Andrew Rynne is taking a separate case against the Government and the Irish Medicines Board (IMB) on the grounds that, although fluoride is a medicine, it is not licensed by the IMB.

A Health Department spokeswoman said all the issues raised by Dr MacCauley had been covered by the Forum on Water Fluoridation. However, she declined to comment on the contents of the report in advance of its publication.

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## Utah a national leader by not fluoridating

Written by **David W. Christopher M.H.**

*[The Daily Herald](#), Provo, Ut.*

**Sunday, June 4, 2000**

Utahns consistently reject fluoride because we cut through the enormous endorsements and weigh the facts. We are not behind the times, but ahead of the 60 cities that bucked the system and rejected fluoride in the 1990's. We're unique because we vote. Most cities are fluoridated by executive order.

The task of unmasking this fluoride farce is monumental. Utah being the least fluoridated state is pivotal. If we can withstand the onslaught of federal, state, industrial, and of course medical pressure, Utah can send a clear message to Washington that like Europe and the majority of the world we will not be a part of the biggest hoax perpetrated on America since its inception. One lemming bucking the crowd will be noticed by other States who then might finally call for congressional hearings ferreting out the perpetrators of this insidious practice of dumping toxic waste into our drinking water under an EPA loophole.

Is fluoride toxic? Science shows fluoride is more toxic than lead (Clinical Toxicology of Commercial Products-1984) The majority of fluoride is captured into ponds from EPA required smokestack scrubbers and sold untreated to municipalities. The technical name is fluorosilicic acid, and yes it is a toxic waste that can totally dissolve any cement barriers.

Is fluoride a cumulative toxin? Of course it is; that's how it's supposed to work. It attaches to the calcium in bones. That is why dentists apply it to your teeth. However, when you drink it in water it enters the blood stream and attaches to the first bones it comes in contact with. Does fluoride cause hip fractures? Yes. Hip fractures were caused inadvertently in a study designed to prove fluoride prevented osteoporosis. In the trials elderly women were given 75 mg. per day of

sodium fluoride and compared to a control group. The study ended abruptly with the horrifying discovery that fluoride caused these fractures. In light of this study another study looked at low levels of fluoride in drinking water at the optimal level of 1 ppm. Hip fractures were 27% higher in women and 41% higher in men living in Brigham City, the largest fluoridated community in Utah, compared to non-fluoridated Logan and Cedar City. These studies were verified in five additional studies including the French study (JAMA 1995; 273:775) that showed an 86% increase in hip fractures in fluoridated communities. Additionally, Toronto which has been fluoridated for 35 years has twice the hip fractures as Quebec which has never been fluoridated.

Is fluoride absolutely safe? Of course not! There are more than 500 peer reviewed studies documenting adverse effects of fluoride ranging from cancer to brain damage. Tragically all of these studies will be dismissed as non conclusive by a medical system which has a predetermined mind set that fluoride is safe and effective.

Should we vote on it? By the initiative process, yes. If they can't get enough signatures? Then no, and quit wasting our time. How many times? I guess until they join our side!

David Christopher

Spanish Fork, Utah

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## Prominent researcher apologizes for pushing fluoride

By Barry Forbes,

*The Tribune*, Mesa, AZ

Sunday, December 5, 1999

Reproduced with permission

"Why'd you do it, Doe? Why'd you toss the fluoride folks overboard?"

I had just tracked down Dr. Hardy Limeback B.SC., Ph.D. m Biochemistry, D.D.S., head of the Department of **Preventive Dentistry** for the University of Toronto, and president of the **Canadian Association for Dental Research**. (Whew.)

**Dr. Limeback is Canada's** leading fluoride authority and, until recently, the country's primary **promoter** of the controversial additive. In a surprising newsmaker interview this past April; Dr. Limeback announced a dramatic change of heart. "Children **under three** should **never use fluoridated toothpaste**," he counseled. "Or drink fluoridated water. And baby formula must never be made up using Toronto tap water. Never."

Why, I wondered? What could have caused such a powerful paradigm shift?

"It's been building up for a couple of years," Limeback told me during a recent telephone interview. "But certainly the crowning blow was the realization that we have been dumping contaminated fluoride into water reservoirs for half a century. The vast majority of all fluoride additives come from Tampa Bay, Florida smokestack scrubbers. The additives are a toxic byproduct of the super-phosphate fertilizer industry."

"Tragically," he continued, "that means we're **not just dumping toxic fluoride into our drinking water. We're also exposing innocent, unsuspecting people to deadly elements of lead, arsenic and radium, all of them carcinogenic. Because of the cumulative properties of toxins, the detrimental effects on human health are catastrophic.**" A recent study at the University of Toronto confirmed Dr. Limeback's worst fears. "Residents of cities that fluoridate have double the fluoride in the hip bones vis-à-vis the balance of the Population. Worse, we discovered that fluoride is actually altering the basic architecture of human bones."

Skeletal flourish is a debilitating condition that occurs when fluoride accumulates in bones, making them extremely weak and brittle. The earliest symptoms?

"Mottled and brittle teeth," Dr. Limeback told me. "In Canada we are **now spending** more money treating dental fluorosis than we do treating cavities. That includes my own practice."

One of the most obvious living experiments today, Dr. Limeback believes, is a proof-positive comparison between any two Canadian cities. "Here in Toronto we've been fluoridating for 36 years. Yet Vancouver-which has never fluoridated-has a cavity rate lower than Toronto's." And, he pointed out, "cavity rates are low all across the industrialized world including Europe, which is 98% fluoride free. Low because of improved standards of living, less refined sugar, regular dental checkups, flossing and frequent brushing. Now less than 2 cavities per child Canada-wide," he said.

"I don't get it, Doc. Last month, the Centers for Disease Control (CDC) ran a puff piece all across America saying the stuff was better than sliced bread. What's the story?"

"Unfortunately," he replied, "the CDC is basing its position on data **that is 50 years old, and questionable at best. Absolutely no one has done research on fluorosilicates, which is the junk they're dumping into the drinking water.**"

"On the other hand," he added, "the evidence against systemic fluoride intake continues to pour in."

"But Doc, the dentists"

"... have absolutely no training in toxicity," he stated firmly. "Your well-intentioned dentist is simply following **50 years of misinformation from public health and the dental association. Me, too. Unfortunately, we were wrong.**"

Last week, Dr. Hardy Limeback addressed his faculty and students at the University of Toronto, Department of Dentistry. In a poignant, memorable meeting, he apologized to those gathered before him.

"Speaking as the head of preventive dentistry, I told them that I had unintentionally mislead my colleagues and my students. For the past 15 years, I had refused **to study the toxicology information that is readily available to anyone. Poisoning our children was the furthest thing from my mind.**"

"The truth," he confessed to me, "was a bitter pill to swallow. But swallow it I did."

South of the border, the paradigm shift has yet to dawn. After half a century of delusion, the CDC, American Dental Association and Public Health stubbornly and skillfully continue to manipulate public opinion in favor of fluoridation.

Meantime, study after study is delivering **the death knell of the deadly toxin.** Sure, fluoridation will be around for a long time yet, but ultimately its supporters need to ready the life rafts. The poisonous waters of doubt and confusion are bound to get choppy.

"Are lawsuits inevitable?" I asked the good doctor. "Remember tobacco," was his short, succinct reply.

Welcome, Dr. Hardy Limeback to the far side of the fluoride equation.

It's lonely over here, but in our society loneliness and truth frequently travel hand in hand.

Thank you for the undeniable courage of your convictions.

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## Fluoridation

### Articles

This section includes a few Newspaper Articles on the topic of Fluoridation. One is from our own Master Herbalist, David Christopher.

### Letters

This section has a handful of letters from various organizations and people on Fluoridation.

### Professionals

This page was prepared by the Citizens for Safe Drinking Water - Utah and provides the names and contact information for some knowledgeable professionals.

### Silicofluorides & Lead

Here, we have some information on what the affects are of Fluoride on people and our children.

### Unusually Susceptible

The title says it all.

### Rejection ???

A list of places that have retracted fluoridation since 1990.

### In Europe

What are other countries doing?

### Geography

Take a look at which Cities and States Fluoridate their water.

### Links

Don't take our word about fluoridation, check out what others have to say about it. There are both pro-fluoridation and anti-fluoridation sites listed. We also have a few quotes we feel you might like.

### Fluoridation Survey

Please take a moment to share your feelings with us and possibly, the world here on our site.

## Newspaper Articles

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This is a recent article that clearly explains why the Salt Lake and Davis County officials in Utah want to rid themselves of any and all liability.

## Hundreds of Children Poisoned by Tap Water

By Saidou Arji

14/01/2001

Inter Press Service

NIAMEY, Jan 14 (IPS) - The Societe Nigerienne des Eaux (SNE), Niger's water company, is being sued because hundreds of children in Tibiri, 720 kilometres from Niger's capital, Niamey, were poisoned by grossly elevated rates of fluoride in the town's water.

The children, ranging in age from 15 months to 14 years, contracted skeletal fluorosis, a disease which causes deformities of the bones, according to medical sources.

The children suffer symptoms ranging from stiffness of the joints, arthritic-like symptoms and chronic joint pain, to calcification of the vertebral column, crippling spine and joint deformities, muscle wasting, and neurological defects. Mottling of the teeth is a less serious form of the disease that comes from ingesting lower levels of fluoride (dental fluorosis).

According to Dr. Moussa Koini, who has written a medical dissertation on the topic, the disease is caused by drinking water containing too much fluoride.

Water samples taken in Tibiri from SNE facilities show that the water contains 4.77 to 6.6 milligrams per litre, instead of the maximum 1.5 milligrams recommended by the World Health Organisation (WHO).

Out of the 425 recorded cases of children with fluorosis in Tibiri, there are 262 boys and 162 girls, a proportion of 61.79 to 38.21 percent. The age bracket most affected is the three to

seven-year-old group. There are 62 three-year-olds and 55 six year olds affected. Sixty-eight percent of the victims are five-year-olds.

According to Dr. Koini, crippling skeletal fluorosis affects mostly children. There have been no reported cases of adults in Tibiri contracting the disease. This is due, he said, to the fact that growing children absorb more fluoride than do adults. Adults can become ill with the disease, but they would need to have drunk heavily fluoridated water for more than 20 years.

Skeletal fluorosis is a very disabling disease. Hadjia Kande, a mother whose two youngest children are paralysed, says life is a daily burden.

"Look at my children. Neither one of them can even go to the toilet by himself. I need to provide them with constant attention, so I can't regularly get to my job at the cotton mill."

One of the children, 13-year-old Salissou, expressed how sad he is. "I'm afraid to drink water from any source, even well water. Look at the state I'm in, it's really a shame," he said. Although it disables both boys and girls, the disease is even worse for girls as it can have grave consequences for childbearing.

Dr. Koini explained that "if there are outgrowths around the pelvic area, girls can have difficulty giving birth and may have to have Caesarian sections because of an inability to deliver vaginally," he stated.

The origins of the Tibiri tragedy date back to 1983, when the first waterworks was built. The first cases of the illness appeared 10 years later, when many children fell ill.

The Tibiri children's tragedy has produced a hue and cry from the public, especially human rights groups who specialise in these types of issues.

The Nigerien Association for Human Rights (ANDDH) has recruited a panel of lawyers to defend the victim's interests. During a recent press conference, the ANDDH chairperson, Khalid Ikhiri, who is also a chemist at the University of Niamey, emphasised the importance of pursuing this matter through the courts so that the children can receive monetary compensation for the damages they have suffered.

"Fluoride poisoning is fatal. Those children will be disabled for the rest of their lives. Every movement they make is painful, and as a result, they cannot engage in the normal play and other activities of children their age," he added.

Ikhiri's intention in filing suit against the SNE is also to end the impunity that the company has always enjoyed. "The SNE needs to answer for this tragedy since it's their mission to provide the public with pure drinking water," he said.

Confronted by the indignation the Tibiri affair has aroused and by press condemnations, the director of the SNE, Seyni Salou, declared that the elevated fluoride rate uncovered in Tibiri's water cannot be pinned on his operation. He said that the standard tests for water purity are regularly performed on all samples.

However, Salou did acknowledge that fluoride is not normally tested for in the standard tests generally performed on drinking water. "There is rarely a high rate of fluoride in naturally occurring sources. The case of Tibiri is an exception."

Salou recalls that drilling for water in Tibiri's substratum took place in 1983 by the Water Office. The SNE did not yet exist at that time.

"At the time this operation was turned over to us, nowhere was it ever mentioned in the technical documents that there was fluoride in the water."

"Naturally, we continued to distribute water until the health services advised us in 1988 that there was an outbreak of bony lesions among Tibiri's children. We did every possible analysis of the water, even the most farfetched, and finally figured out that the tap water contained a great deal of naturally occurring fluoride," Salou stated.

The SNE director believes that more studies still need to be done to be sure that the only cause of the problem is the fluoride. He thinks that the evidence is not yet conclusive. Nevertheless, he acknowledged that the ANDDH is in its rights to pursue a suit since the laws of Niger allow for it.

More than compensation for the victims, the provision of healthy water for Tibiri's citizens is today's priority. The SNE has confirmed that they have taken steps to bring down the fluoride level to 1.6 milligrams per litre.

Salou indicated that there are permanent changes to be made. Among them is a new water project in the neighbouring town of Maradi. The technical studies have already taken place with help from the Chinese, and work on the new supply project is expected to begin in February 2001.

"Bringing in water from Maradi is the only possible solution because there is fluoride even in Tibiri's groundwater," Salou added.

The government has asked Niger's development partners, most notably UNICEF, to provide assistance to the victims. UNICEF says that a Finnish organisation is ready to finance a community assistance project for Tibiri's children.

The goal of this project, which should begin in the first quarter of 2001, is to provide therapeutic assistance to the sick children, which will be based on nutritional remedies, physical rehabilitation, and orthopaedic correction.

Salmeye Bebert, the director of child welfare, added that the project will help research the exact scope of the disease and will determine the source of pollution of Tibiri's water.

Niger's infant mortality rate of 274 per 1,000 in 1998 was one of the highest in the world.

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## Fluoridation Gets Flushed on Election Day

NEW YORK

Nov. 12, 2001

PRNewswire

*The following press release was issued today by the New York State Coalition Opposed to Fluoridation:*

Voters on November 6, 2001, rejected fluoridation in several U.S. cities despite hundreds of thousands of dollars spent by fluoridation proponents in public relations campaigns. This adds to a growing list of cities that rallied against adding the claimed cavity-fighting fluoride to their water supplies.

According to newspaper accounts:

\* On election day, Worcester, Massachusetts, residents renounced fluoridation for the fifth time since the 1950's. Fluoridation proponents refused to debate but spent \$400,000 trying to win this

referendum. The victorious opposition spent only \$5,196.

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**Dr. Limeback is Canada's** leading fluoride authority and, until recently, the country's primary **promoter** of the controversial additive. In a surprising newsmaker interview this past April; Dr. Limeback announced a dramatic change of heart. "Children **under three** should **never use fluoridated toothpaste**," he counseled. "Or drink fluoridated water. And baby formula must never be made up using Toronto tap water. Never."

Why, I wondered? What could have caused such a powerful paradigm shift?

"It's been building up for a couple of years," Limeback told me during a recent telephone interview. "But certainly the crowning blow was the realization that we have been dumping contaminated fluoride into water reservoirs for half a century. The vast majority of all fluoride additives come from Tampa Bay, Florida smokestack scrubbers. The additives are a toxic byproduct of the super-phosphate fertilizer industry."

"Tragically," he continued, "that means we're **not just dumping toxic fluoride into our drinking water. We're also exposing innocent, unsuspecting people to deadly elements of lead, arsenic and radium, all of them carcinogenic. Because of the cumulative properties of toxins**, the detrimental effects **on human health are catastrophic.**" A recent study at the University of Toronto confirmed Dr. Limeback's worst fears. "Residents of cities that fluoridate have double the fluoride in the hip bones vis-à-vis the balance of the Population. Worse, we discovered that fluoride is actually altering the basic architecture of human bones."

Skeletal flourish is a debilitating condition that occurs when fluoride accumulates in bones, making them extremely weak and brittle. The earliest symptoms?

"Mottled and brittle teeth," Dr. Limeback told me. "In Canada we are **now spending** more money treating dental fluorosis than we do treating cavities. That includes my own practice."

One of the most obvious living experiments today, Dr. Limeback believes, is a proof-positive comparison between any two Canadian cities. "Here in Toronto we've been fluoridating for 36 years. Yet Vancouver-which has never fluoridated-has a cavity rate lower than Toronto's." And, he pointed out, "cavity rates are low all across the industrialized world including Europe, which is 98% fluoride free. Low because of improved standards of living, less refined sugar, regular dental checkups, flossing and frequent brushing. Now less than 2 cavities per child Canada-wide," he said.

"I don't get it, Doc. Last month, the Centers for Disease Control (CDC) ran a puff piece all across America saying the stuff was better than sliced bread. What's the story?"

"Unfortunately," he replied, "the CDC is basing its position on data **that is 50 years old, and** questionable at best. Absolutely no one **has done research on fluorosilicates, which is the junk they're dumping into the drinking water.**"

"On the other hand," he added, "the evidence against systemic fluoride intake continues to pour in."

"But Doc, the dentists"

"... have absolutely no training in toxicity," he stated firmly. "Your well-intentioned dentist is simply following **50 years of misinformation from public health and the dental association. Me, too. Unfortunately, we were wrong.**"

Last week, Dr. Hardy Limeback addressed his faculty and students at the University of Toronto, Department of Dentistry. In a poignant, memorable meeting, he apologized to those gathered before him.

"Speaking as the head of preventive dentistry, I told them that I had unintentionally mislead my colleagues and my students. For the past 15 years, I had refused **to study the toxicology information that is readily available to anyone. Poisoning our children was the furthest thing from my mind.**"

"The truth," he confessed to me, "was a bitter pill to swallow. But swallow it I did."

South of the border, the paradigm shift has yet to dawn. After half a century of delusion, the CDC, American Dental Association and Public Health stubbornly and skillfully continue to manipulate public opinion in favor of fluoridation.

Meantime, study after study is delivering **the death knell of the** deadly toxin. Sure, fluoridation will be around for a long time yet, but ultimately its supporters need to ready the life rafts. The poisonous waters of doubt and confusion are bound to get choppy.

"Are lawsuits inevitable?" I asked the good doctor. "Remember tobacco," was his short, succinct reply.

Welcome, Dr. Hardy Limeback to the far side of the fluoride equation.

It's lonely over here, but in our society loneliness and truth frequently travel hand in hand.

Thank you for the undeniable courage of your convictions.

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## Fluoridation

### Articles

This section includes a few Newspaper Articles on the topic of Fluoridation. One is from our own Master Herbalist, David Christopher.

### Letters

This section has a handful of letters from various organizations and people on Fluoridation.

### Professionals

This page was prepared by the Citizens for Safe Drinking Water - Utah and provides the names and contact information for some knowledgeable professionals.

### Silicofluorides & Lead

Here, we have some information on what the affects are of Fluoride on people and our children.

### Unusually Susceptible

The title says it all.

### Rejection ???

A list of places that have retracted fluoridation since 1990.

### In Europe

What are other countries doing?

### Geography

Take a look at which Cities and States Fluoridate their water.

### Links

Don't take our word about fluoridation, check out what others have to say about it. There are both pro-fluoridation and anti-fluoridation sites listed. We also have a few quotes we feel you might like.

### Fluoridation Survey

Please take a moment to share your feelings with us and possibly, the world here on our site.

## Newspaper Articles

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This is a recent article that clearly explains why the Salt Lake and Davis County officials in Utah want to rid themselves of any and all liability.

## Hundreds of Children Poisoned by Tap Water

By Saidou Arji

14/01/2001

Inter Press Service

NIAMEY, Jan 14 (IPS) - The Societe Nigerienne des Eaux (SNE), Niger's water company, is being sued because hundreds of children in Tibiri, 720 kilometres from Niger's capital, Niamey, were poisoned by grossly elevated rates of fluoride in the town's water.

The children, ranging in age from 15 months to 14 years, contracted skeletal fluorosis, a disease which causes deformities of the bones, according to medical sources.

The children suffer symptoms ranging from stiffness of the joints, arthritic-like symptoms and chronic joint pain, to calcification of the vertebral column, crippling spine and joint deformities, muscle wasting, and neurological defects. Mottling of the teeth is a less serious form of the disease that comes from ingesting lower levels of fluoride (dental fluorosis).

According to Dr. Moussa Koini, who has written a medical dissertation on the topic, the disease is caused by drinking water containing too much fluoride.

Water samples taken in Tibiri from SNE facilities show that the water contains 4.77 to 6.6 milligrams per litre, instead of the maximum 1.5 milligrams recommended by the World Health Organisation (WHO).

Out of the 425 recorded cases of children with fluorosis in Tibiri, there are 262 boys and 162 girls, a proportion of 61.79 to 38.21 percent. The age bracket most affected is the three to

seven-year-old group. There are 62 three-year-olds and 55 six year olds affected. Sixty-eight percent of the victims are five-year-olds.

According to Dr. Koini, crippling skeletal fluorosis affects mostly children. There have been no reported cases of adults in Tibiri contracting the disease. This is due, he said, to the fact that growing children absorb more fluoride than do adults. Adults can become ill with the disease, but they would need to have drunk heavily fluoridated water for more than 20 years.

Skeletal fluorosis is a very disabling disease. Hadjia Kande, a mother whose two youngest children are paralysed, says life is a daily burden.

"Look at my children. Neither one of them can even go to the toilet by himself. I need to provide them with constant attention, so I can't regularly get to my job at the cotton mill."

One of the children, 13-year-old Salissou, expressed how sad he is. "I'm afraid to drink water from any source, even well water. Look at the state I'm in, it's really a shame," he said. Although it disables both boys and girls, the disease is even worse for girls as it can have grave consequences for childbearing.

Dr. Koini explained that "if there are outgrowths around the pelvic area, girls can have difficulty giving birth and may have to have Caesarian sections because of an inability to deliver vaginally," he stated.

The origins of the Tibiri tragedy date back to 1983, when the first waterworks was built. The first cases of the illness appeared 10 years later, when many children fell ill.

The Tibiri children's tragedy has produced a hue and cry from the public, especially human rights groups who specialise in these types of issues.

The Nigerien Association for Human Rights (ANDDH) has recruited a panel of lawyers to defend the victim's interests. During a recent press conference, the ANDDH chairperson, Khalid Ikhiri, who is also a chemist at the University of Niamey, emphasised the importance of pursuing this matter through the courts so that the children can receive monetary compensation for the damages they have suffered.

"Fluoride poisoning is fatal. Those children will be disabled for the rest of their lives. Every movement they make is painful, and as a result, they cannot engage in the normal play and other activities of children their age," he added.

Ikhiri's intention in filing suit against the SNE is also to end the impunity that the company has always enjoyed. "The SNE needs to answer for this tragedy since it's their mission to provide the public with pure drinking water," he said.

Confronted by the indignation the Tibiri affair has aroused and by press condemnations, the director of the SNE, Seyni Salou, declared that the elevated fluoride rate uncovered in Tibiri's water cannot be pinned on his operation. He said that the standard tests for water purity are regularly performed on all samples.

However, Salou did acknowledge that fluoride is not normally tested for in the standard tests generally performed on drinking water. "There is rarely a high rate of fluoride in naturally occurring sources. The case of Tibiri is an exception."

Salou recalls that drilling for water in Tibiri's substratum took place in 1983 by the Water Office. The SNE did not yet exist at that time.

"At the time this operation was turned over to us, nowhere was it ever mentioned in the technical documents that there was fluoride in the water."

"Naturally, we continued to distribute water until the health services advised us in 1988 that there was an outbreak of bony lesions among Tibiri's children. We did every possible analysis of the water, even the most farfetched, and finally figured out that the tap water contained a great deal of naturally occurring fluoride," Salou stated.

The SNE director believes that more studies still need to be done to be sure that the only cause of the problem is the fluoride. He thinks that the evidence is not yet conclusive. Nevertheless, he acknowledged that the ANDDH is in its rights to pursue a suit since the laws of Niger allow for it.

More than compensation for the victims, the provision of healthy water for Tibiri's citizens is today's priority. The SNE has confirmed that they have taken steps to bring down the fluoride level to 1.6 milligrams per litre.

Salou indicated that there are permanent changes to be made. Among them is a new water project in the neighbouring town of Maradi. The technical studies have already taken place with help from the Chinese, and work on the new supply project is expected to begin in February 2001.

"Bringing in water from Maradi is the only possible solution because there is fluoride even in Tibiri's groundwater," Salou added.

The government has asked Niger's development partners, most notably UNICEF, to provide assistance to the victims. UNICEF says that a Finnish organisation is ready to finance a community assistance project for Tibiri's children.

The goal of this project, which should begin in the first quarter of 2001, is to provide therapeutic assistance to the sick children, which will be based on nutritional remedies, physical rehabilitation, and orthopaedic correction.

Salmeye Bebert, the director of child welfare, added that the project will help research the exact scope of the disease and will determine the source of pollution of Tibiri's water.

Niger's infant mortality rate of 274 per 1,000 in 1998 was one of the highest in the world.

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## Fluoridation Gets Flushed on Election Day

NEW YORK

Nov. 12, 2001

PRNewswire

*The following press release was issued today by the New York State Coalition Opposed to Fluoridation:*

Voters on November 6, 2001, rejected fluoridation in several U.S. cities despite hundreds of thousands of dollars spent by fluoridation proponents in public relations campaigns. This adds to a growing list of cities that rallied against adding the claimed cavity-fighting fluoride to their water supplies.

According to newspaper accounts:

\* On election day, Worcester, Massachusetts, residents renounced fluoridation for the fifth time since the 1950's. Fluoridation proponents refused to debate but spent \$400,000 trying to win this

referendum. The victorious opposition spent only \$5,196.

\* Modesto, California, citizens rejected fluoridation for the second time, shunning a \$1 million grant offered by Fluoridation 2000, a statewide group, to cover the cost of fluoridation equipment. Fluoridation proponents outspent opponents by over 10 to 1.

\* Flagstaff's, Arizona, electorate decisively turned down fluoridation for the third time via mail-in ballots.

\* Sixty two percent of Sutherlin, Oregon, voted against fluoridation on election day.

\* In Gilbert, Arizona, opponents of fluoridation, inspired by these victories, plan to attack fluoridation again, which is slated to start in Gilbert at the end of the month.

"People who study the issue, themselves, find out fluoridation's health risks far exceed any possible benefits and deprives individuals of their choice to be medicated," says Paul Connert, Ph.D., Coordinator, Fluoride Action Network and Professor of Chemistry, St. Lawrence University, N.Y. "If your community fluoridates and you want it stopped, call us. We can help you."

Some other places defeating fluoridation this year:

\* January 2001 -- Willamina, Oregon, City Council says "no" to fluoride.

\* March 2001 -- Norridgewock, Maine, votes down fluoridation.

\* April 2001 -- City residents of McPherson, Kansas, rejected a fluoridation proposal by a nearly 5-to-1 ratio. It was their third vote against fluoridation.

\* May 2001 -- Brewster, Massachusetts, said no thanks to fluoride in the town's water systems.

\* May 2001 -- Harper, Kansas, citizens successfully petitioned against fluoridation.

\* June 2001 -- Eureka Springs, Arkansas, city officials followed water customers' advice and rejected fluoridation.

\* August 2001 -- Woods Cross, Utah, City Council said no thanks to fluoridation after a citizens' group presented them with a petition to opt out of a countywide fluoridation plan.

\* September 2001 -- Goldendale, Washington, council members unanimously rejected any proposal to add fluoride to the city's water supply.

\* October 2001 -- Centerville, Utah, City Council decided against fluoridation.

\* October 2001 -- White Salmon, Washington, City Council rejected fluoridation.

In other countries:

\* March 2001 -- Japan's Assembly of Kanra-machi, Gunma Prefecture, rejected a fluoridation proposal.

\* April 2001, Onehunga, New Zealand, voted two to one against fluoridation.

\* October 2001 -- Voters in Kamloops, British Columbia, Canada, ended 40 years of fluoridation.

On election day, 2000, 14 communities voted down fluoridation.

SOURCE New York State Coalition Opposed to Fluoridation

CO: New York State Coalition Opposed to Fluoridation

ST: New York

IN: HEA

SU: LEG

11/12/2001 08:59 EST <http://www.prnewswire.com>

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## Dentists to sue over continued flouridation of drinking water

By Fionnuala Quinlan

October 22, 2001

[\*The Irish Examiner\*](#)

A GROUP of Irish dentists are to sue the Minister for Health, Micheál Martin, for continuing to fluoridate drinking water.

The dentists, who are breaking ranks with the Irish Dental Association, plan to lodge papers with the High Court after handing a letter of protest into the Dáil on Friday.

The move comes as the Forum on Fluoridation — set up by the minister to examine both sides of the fluoride argument — completes its report, due to be published by the end of the month. The forum was branded a “rubber-stamping exercise” by the dentists planning to sue the Government.

The group of 20 — Irish Dentists Opposing Fluoridation — maintain that health authorities have not fulfilled their obligation under the 1960 Health Act to carry out regular surveys into the health effects of fluoridation.

Spokesman Dr Don MacCauley said the department had never carried out a comprehensive survey, although international research has linked fluoridation to cancer, irritable bowel syndrome, hip fractures and thyroid disorders. A study published in American medical journal *NeuroToxicity* found that fluoride exposure could produce lower IQ levels in children.

Up to 50% of Dr MacCauley’s teenage patients have dental fluorosis — which has been linked to fluoridation — which creates white spots or lines on teeth and causes tooth enamel to chip, he said.

The agent used, hydrofluosilic acid, is a waste component of the fertiliser industry and contains traces of chromium, mercury, arsenic and lead, according to Dr MacCauley.

Ireland is now the only country in Europe to insist that drinking water be fluoridated, although nine county councils, two corporations and seven urban district councils have voted to end fluoridation.

Dr MacCauley said the group opposed fluoridation because medication is being administered

without consent, the public has not been fully informed of the risks and side effects and fluoridation causes dental fluorosis.

Kildare-based GP Andrew Rynne is taking a separate case against the Government and the Irish Medicines Board (IMB) on the grounds that, although fluoride is a medicine, it is not licensed by the IMB.

A Health Department spokeswoman said all the issues raised by Dr MacCauley had been covered by the Forum on Water Fluoridation. However, she declined to comment on the contents of the report in advance of its publication.

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## Utah a national leader by not fluoridating

Written by **David W. Christopher M.H.**

*[The Daily Herald](#), Provo, Ut.*

**Sunday, June 4, 2000**

Utahns consistently reject fluoride because we cut through the enormous endorsements and weigh the facts. We are not behind the times, but ahead of the 60 cities that bucked the system and rejected fluoride in the 1990's. We're unique because we vote. Most cities are fluoridated by executive order.

The task of unmasking this fluoride farce is monumental. Utah being the least fluoridated state is pivotal. If we can withstand the onslaught of federal, state, industrial, and of course medical pressure, Utah can send a clear message to Washington that like Europe and the majority of the world we will not be a part of the biggest hoax perpetrated on America since its inception. One lemming bucking the crowd will be noticed by other States who then might finally call for congressional hearings ferreting out the perpetrators of this insidious practice of dumping toxic waste into our drinking water under an EPA loophole.

Is fluoride toxic? Science shows fluoride is more toxic than lead (Clinical Toxicology of Commercial Products-1984) The majority of fluoride is captured into ponds from EPA required smokestack scrubbers and sold untreated to municipalities. The technical name is fluorosilicic acid, and yes it is a toxic waste that can totally dissolve any cement barriers.

Is fluoride a cumulative toxin? Of course it is; that's how it's supposed to work. It attaches to the calcium in bones. That is why dentists apply it to your teeth. However, when you drink it in water it enters the blood stream and attaches to the first bones it comes in contact with. Does fluoride cause hip fractures? Yes. Hip fractures were caused inadvertently in a study designed to prove fluoride prevented osteoporosis. In the trials elderly women were given 75 mg. per day of

sodium fluoride and compared to a control group. The study ended abruptly with the horrifying discovery that fluoride caused these fractures. In light of this study another study looked at low levels of fluoride in drinking water at the optimal level of 1 ppm. Hip fractures were 27% higher in women and 41% higher in men living in Brigham City, the largest fluoridated community in Utah, compared to non-fluoridated Logan and Cedar City. These studies were verified in five additional studies including the French study (JAMA 1995; 273:775) that showed an 86% increase in hip fractures in fluoridated communities. Additionally, Toronto which has been fluoridated for 35 years has twice the hip fractures as Quebec which has never been fluoridated.

Is fluoride absolutely safe? Of course not! There are more than 500 peer reviewed studies documenting adverse effects of fluoride ranging from cancer to brain damage. Tragically all of these studies will be dismissed as non conclusive by a medical system which has a predetermined mind set that fluoride is safe and effective.

Should we vote on it? By the initiative process, yes. If they can't get enough signatures? Then no, and quit wasting our time. How many times? I guess until they join our side!

David Christopher

Spanish Fork, Utah

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## Prominent researcher apologizes for pushing fluoride

By Barry Forbes,

*The Tribune*, Mesa, AZ

Sunday, December 5, 1999

Reproduced with permission

"Why'd you do it, Doe? Why'd you toss the fluoride folks overboard?"

I had just tracked down Dr. Hardy Limeback B.SC., Ph.D. m Biochemistry, D.D.S., head of the Department of **Preventive Dentistry** for the University of Toronto, and president of the **Canadian Association for Dental Research.** (Whew.)

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"Tragically," he continued, "that means we're **not just dumping toxic fluoride into our drinking water. We're also exposing innocent, unsuspecting people to deadly elements of lead, arsenic and radium, all of them carcinogenic. Because of the cumulative properties of toxins**, the detrimental effects **on human health are catastrophic.**" A recent study at the University of Toronto confirmed Dr. Limeback's worst fears. "Residents of cities that fluoridate have double the fluoride in the hip bones vis-à-vis the balance of the Population. Worse, we discovered that fluoride is actually altering the basic architecture of human bones."

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## Garlic: Man's Best Friend in a Toxic World

Garlic has been known for centuries to function as a natural antibiotic. It destroys the unnecessary and harmful bacteria throughout the human system. It emulsifies cholesterol and loosens it from arterial walls. It is effective in arresting intestinal putrefaction; it is used against contagious diseases, high blood pressure, fevers, parasites, worms, nicotine poisoning, colic, and yeast infections. (Concern, April 1977, p. 7)

The brilliant Dr. Edward Shook, herbalist, pharmacist and one of our illustrious teachers, began his lectures on garlic with the phrase of the Gentle Shepherd, "Consider the Lilies. . ." Garlic is a member of the Liliaceae family which also includes the onion. This is Dr. Shook's botanical description of garlic:

Allium Sativum. Natural order. Liliaceae.

Common Names Garlic, poor man's treacle.

Part used. Bulb.

Description. The leaves are long, narrow, and much like grass.

The bulb (the only part used) is compound, consisting of numerous bulblets, commonly called "cloves," grouped together between the membrane scales, and enclosed within a whitish skin which holds them as in a sac. The whitish flowers are located at the end of stalks growing directly out of the bulb. They are grouped together in globular umbels with spathes surrounding them.

It will pay us handsomely to consider this lily because it is one of nature's great masterpieces as a safe and certain remedy for many of man's serious and devastating diseases.

This wonderful herb has been used from very ancient times both as food and medicine.

Theophrastus, the Greek philosopher (born 372 BC) relates that garlic was placed by the ancient Greeks on piles of stone at the crossroads as a feast for Hecate (literally a feast for the gods.)

Virgil, the Roman poet (70 BC) in his eclogues states that garlic was part of the entertainment served by Nestor to his guest Machaon. He also tells us that it was owing to the virtues of garlic that Ulysses owed his escape from being changed by Circe into a pig like each of his companions.

Galen speaks very highly of it, eulogizing it as the "theriac" or "heal all."

Chaucer calls it "theriac" as do several old English botanists and herbalists.

Pliny gives an exceedingly long list of complaints in which it was considered beneficial.

The name garlic is of very ancient Anglo-Saxon origin being derived from gar (a spear) and lac (a plant) in reference to the shape of its leaves. It is one of the oldest medicinal remedies known to man, which has been cultivated and used from time immemorial in the treatment of many diseases. Both its romantic history and its very remarkable curative virtues are vastly interesting and educational to all earnest and honest physicians, and it is notable that it stands out today as one of our greatest and most important therapeutic agents.

It is alterative, diaphoretic, diuretic, expectorant, antispasmodic, antiasthmatic, stimulant, antiseptic, disinfectant, tonic, nervine, antiphthisic, germicide, and vermicide. Chemical Constituents: Volatile oil (25 percent), mucilage (35 percent), albumen, sugar, starch, fibrin, and 50 percent water. The oil is a rather complex substance, of a strong, intensely penetrating odor and consists of allyl compounds of sulfur. It will be seen that this remarkable herb is heavily laden with organic sulfur, but no oxygen is found in the oil. Yet, it is the action of oxygen when the skin is taken off the cloves that releases the sulfur by combining with an allyl group to form allyloxide, which is also a pungent liquid having a sulfur odor.

Many marvelous effects and healing powers have been claimed for garlic. It is probable that none

## Newsletters

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Garlic: Man's Best Friend in a Toxic  
World

of them were exaggerated. I, myself, have seen it cure tuberculosis, asthma, bronchitis, several skin diseases, stomach ulcers, leg ulcers, athlete's foot, furunculosis, abscesses, epilepsy, and special affinity for the respiratory tract, lungs, bronchi, and so forth, though it diffuses itself through the whole system and wherever there is pus, it is a certain and safe remedy. The use of garlic in the World War as an antiseptic was most sensational. In 1916, the British government asked for tons of the bulbs offering one shilling a pound for as much as could be produced. A great quantity of it was used for the control of suppuration in wounds. The raw juice was expressed, diluted with water, and put on swabs of sterilized sphagnum moss which was applied to the wounds. Where this treatment was given, it has been proved that there has never been one single case of sepsis or septic results. Consequently, the lives of tens of thousands have been saved by this one miraculous herb. That was nearly many years ago, and still we do not find garlic as an official remedy in the United States Pharmacopeia. This is one of the most disgraceful facts connected with the so-called regular practice of medicine, and proves beyond all doubt that their practice is neither ethical, moral, or even humane; otherwise, such a miracle of healing power would never have been discarded as it was.

In olden days, garlic was employed as a specific for leprosy, psoriasis and several forms of exanthematous skin diseases. It was also believed to have most beneficial results in smallpox applied to the soles of the feet in a linen cloth renewed daily.

Those unacquainted with garlic might think this was merely superstition; but, as a matter of fact, it is quite true. If chopped or minced fresh garlic is placed on the soles of the feet and allowed to remain there for some time, it will not be long before the odor of garlic can be detected on the breath; and cases of purulent disease in different parts of the body have been reported completely cured by simply keeping an application of garlic to the soles of the feet, and renewing it once or twice a day.

We positively know that organic sulfur is a universal antiseptic, whether taken internally or applied outwardly to any part of the body. It has been authoritatively reported that tuberculosis has been successfully treated by inhalation of the freshly expressed juice of garlic, diluted with equal quantities of water.

Garlic was the principal ingredient in the famous Four Thieves Vinegar which was adapted so successfully at Marseilles for protection against the plague when it prevailed there in 1772. This originated, it is said, with four thieves who confessed that, while protected by the liberal use of aromatic garlic vinegar during the plague, they plundered the dead bodies of the victims with complete safety. It is stated that during an outbreak of infectious fever in certain poor quarters of London early in the last century, the French priests who constantly used garlic in all their dishes visited the very worst cases with impunity, while the English clergy caught the infection, and in many instances, fell victims to the disease. Another instance of the remarkable penetrating power of garlic is the fact that the expressed juice of fresh garlic mixed with olive oil and rubbed on the chest, throat, and between the shoulder blades gives great relief in whooping cough, asthma, bronchitis and dyspnea, according to an English physician who has used it with success for many years. It also has a reputation for safely reducing high blood pressure, and in this relation we have an exceedingly valuable formula.

Boiling garlic reduces its active virtues considerably. Vinegar and water both extract its curative principles, though vinegar alone seems to be more effective for that purpose. Expressed fresh juice of garlic contains all of its many virtues. The following priceless formulas will cover its therapeutic applications completely for asthma, bronchitis, catarrhal conditions of the mucous membranes, phthisis, tuberculosis, coughs, dyspnea, heart weakness, internal ulcerations, and so forth.

## Garlic Syrup

Peel 1 pound of fresh garlic, then chop or mince. Put into a wide mouthed jar and add equal parts of vinegar and distilled water to just cover the garlic. Close tightly, shake well, then let stand in a cool place for four days, thoroughly shaking once or twice a day. Now, add one pint of glycerine, shake well, and let stand another day. Strain with pressure, then filter liquid through a muslin or linen cloth. Add three pounds of pure honey, and stir till thoroughly blended. Put into jars, seal tightly, and store in a cool place.

In order to cover the pungent odor of the garlic, in case it is objectionable, do the following:

In place of macerating the garlic in equal parts of vinegar and distilled water, as directed above, use 1 quart of vinegar in which 3 ounces of powdered caraway seed and 3 ounces of sweet fennel seed have been slowly boiled for 15 minutes, while closely covered. Strain and when cold, add 1 pint of glycerine. Use this in the above formula instead of the vinegar and distilled water mixture.

This is much more acceptable to those who have an antipathy to the smell and taste of garlic. Of course, the 3 pounds of honey are also added after the filtering process. The deviation in no way affects the curative properties of the garlic, while it helps materially to disperse gas and flatus. We use aromatic vinegar in our own preparation of this formula, which is one of the most meritorious and useful remedies to have on hand. It is harmless, and very effective in the above mentioned cases, and will please and astonish both you and the patient.

Dose: For asthma and coughs: 1 teaspoonful with or without water every 15 minutes until spasm is controlled; then 1 teaspoonful every 2 or 3 hours for the rest of the day. After that, 1 teaspoonful 3 or 4 times a day is usually sufficient.

For tuberculosis, cardiac asthma and dyspnea: 1 dessertspoonful to a tablespoonful 3 or 4 times a day between meals.

Children: (8 to 15 years) one half of the above dose; (5 to 8 years) one quarter dose; (1 to 4 years) one eighth in a little water or honey

Garlic has also been used successfully in dropsy. The above formula may be used with benefit, but the following will be found to be much more prompt and effective, especially where the heart is much involved.

### **Dropsy with Heart Involvement.**

Boil 8 ounces lily of the valley root (cut) (*Convallaria majalis*) in 3 pints of distilled water for 20 minutes. Strain then boil slowly till reduced to 1 pint. Set aside to cool, and while still warm, add 8 ounces of expressed garlic juice, 8 ounces of brown cane sugar, and 1 pint of glycerine. When cold, bottle and keep in a cool place.

This is one of the most potent remedies for dropsy and heart disease ever devised.

Dose: 1 teaspoonful to a dessertspoonful in water, as required. The dose should be regulated and given every 3 hours to bring about diuresis. Also, a slowing of the heart action, and an increase in the tone of its contraction. After this effect has been produced, administer 1 teaspoonful in water 3 or 4 times a day.

Garlic for outward application: For eczema, pityriasis, psoriasis, ulcers, cancers, swollen glands, tubercular joints, necrosis and all purulent conditions that are accessible, we recommend the following formula:

These garlic formulas we have given you are priceless. It will pay you to study them, and utilize them with confidence whenever occasion arises."

--(Shook, 1978; reprint. pp. 69-73)

Dioscorides, a second century physician and herbalist who traveled with the army of Alexander the Great, has the following to say on the subject of garlic. Dioscorides was translated into middle English by a scholar of the middle ages:

SKORODON *Allium Sativum*

LEUKOSKORODON *Allium Ampeloprasum*

OPHIOSKORODON *Allium Scorodoprasum*

ELAPHOSKORODON *Allium subhirsutum*

### **Garlic**

Garluk (some call it Gebosome againe Elaphoboscum, the Latins *Allium*) some of it is *Sativum* & growes in gardens & this in Egypt, being only but of one head as the teeke, sweet, inclining to a purple colour. But elsewhere, it is compacted of many white cloues, the cloues that therein (the Greeks) call *Aglithai*. But there is another wilde kinde, called *Ophioscorodon*. (that is Serpent's

Garlick). It hath a sharp, warning biting quantie, expelling of flatulencies, and disturbing of the belly, and drying of the stomach causing of thirst & puffing vp, breeding of boyies in ye outsyde of the body, dulling the sight of the eyes. And the same thinges don also, (as we should say, Hart's garlick). Being eaten, it driues out the broade wormes, and drawes away the vrine. It is good, as none other thing, for such as are bitten of vipers, or of the Haemorrhous, who being taken presently after, or else that being beaten small in wine & soe dranek. It is applyed also by ye way of Cataplasme both for the same purposes profitably, as also layd on upon such as are bitten of mad dogge. Being eaten, it is good against the change of waters (fauces expediende, easdeings asperas leniendo.) It doth cleare the arteries & being eaten either raw or sod, it doth assuage old coughes. Being dranck with decoction of Origanum, it cloth kill lice and nitts. But being burnt, and tempered with bony it cloth cure the sugillationes oculorum, and Alopeciae being anointed on, but for the Alopeciae (it must be applyed) with vnguentum Nardinum. And with salt & oyle it cloth heale ye eruptiones papularum. It doth take away also the Vitilignes, & the Lichenes, & the Lentigenes, and the running ulcers of the head, and the Furfures & ye Lepras, with hony. Being sod with Taeda and Franckincense, & kept in the mouth it doth assuage the paine of ye teeth. And with figge leaues & Cummin it is a Cataplasme for such as are bitten of the Mygale. But the leafes decoction is an insession that brings downe the Menstrua & the Secundas. It is also taken by way of suffumigation for ye same purpose. But the stamping that is made of it and ye black olive together, called Myrton, cloth moue the vrine & open ye mouths of ye veins & it is good also for the Hydropicall."

(Dioscorides, Book 11, pp. 188-91, under the heading of "Sharp Herbs.")

Let's go into some interesting historical facts on garlic, a most revered patriarchal herb:

"Garlic, a cousin of the lily originated in Central Asia or India, where the early peoples enjoyed eating raw garlic as an enhancement to their meals. They also enjoyed longevity, and the lowest incidence of cancer on the planet." (Messegue, 1979, p. 132)

The builders of the pyramids of Egypt were paid in the coin of the realm; onions and garlic, a valuable commodity.

These builders of the pyramids of Cheops, a Fourth Dynasty Pharaoh, consumed great quantities of garlic. It was during these times that garlic was elevated to the rank of a deity.

The Ebers Papyrus, 1500 BC, one of the earliest herbal pharmacological documents we know, mentions garlic used in external applications for wounds.

Here is a quotation from the Bible:

*"We remember the fish which we did eat in Egypt for Nought, the cucumbers, and the melons, and the leeks, and the onions, and the garlic." (Numbers 11:5)*

According to Helen Noyes Webster, who interpreted the above quotation in her book, *Herbs, How to Grow Them and How to Use Them*, the Israelites traveling with Moses obviously missed the garlic when they went toward the Promised Land. If Moses had carried garlic, the Israelites may have been able to avoid intestinal putrefaction from eating the desert's available lizards and snakes.

Homer mentions garlic in his famous *Odyssey*. The deity Mercury, or Hermes, gave garlic to Odysseus as a protection against the goddess Circe's evil sorcery in which she turned men to swine. The athletes of the original Olympic games in ancient Greece traditionally chewed a clove of garlic before participating in the games. Galen, an early Greek doctor, spoke of garlic as the panacea of the common man. Hippocrates prescribed the eating of garlic for uterine tumors. The Vikings and the Phoenicians always carried garlic on their ocean voyages.

The crusaders brought garlic back to France. (In those days, it was a common law that two men's lives could be sacrificed in order to save a 100 lb. sack of peppercorns.)

A French herbalist, Messegue, born in Gascony, France, states that all the children born in that province are baptized with a clove of garlic on the lips. The emperor Charlemagne recommended that his subjects cultivate garlic. King Henry IV of France was baptized with a clove of garlic on his lips, and although he was said to have chewed a clove of raw garlic every morning upon arising, he was still very popular with the ladies.

The National Cancer Institute central files show that the incidence of cancer is extremely low in France where garlic consumption is the greatest and that garlic eaters in Bulgaria do not have cancer. It is reported in a textbook on pharmacognosy that a physician in British Columbia has successfully treated malignant situations by prescribing the eating of garlic.

The prophet Mohammed recommend that garlic be applied externally on the sting of the scorpion or the bite of the viper in the 7th century.

"The herb becomes the teacher. Men stray after false goals while the herb he treads (or in these days, stomps upon) knows much much more."

The above quote was written by Henry Vaughn, the early 17th century poet and mystic, as well as Hermetic philosopher during the days when the Doctrine of Signatures was popular. The Doctrine of Signatures was the method by which the ancients recognized the usage of a plant. According to Nicholas Culpeper, the 17th century English Physician and Herbalist, "and by the icon or image of every herb, man first found out their virtues. Modern writers laugh at them for it, but I wonder in my heart how the virtues of herbs first came to be known, if not by their signatures. The moderns have then from the writings of the ancients--the ancients had no writings to have them from."

The 17th century "moderns" felt that garlic, with its hollow stalk, helps afflictions of the windpipe. We know this to be a truth; that garlic is an antihistamine, and has been successfully used in bronchial and pulmonary disorders. As we examine some of the virtues of garlic, we find that the claims of the old Doctrine of Signatures will be far surpassed.

The National Dispensatory of 1887 gives us a fine description of the constituents of garlic at a period in our medical history when Syrupus Alli was an official U.S. preparation.

Constituents.--Besides the cellular tissue, garlic contains between 50 and 60 percent of water, 35 percent of mucilage some albumen, sugar, starch, and about 1 percent of volatile oil, to which its odor and taste are due. In its crude state, oil of garlic is of a dark brown-yellow color, heavier than water, of a very interesting taste, and consists of oxide and sulphides of allyl. The rectified oil consists mainly of the sulphide, (C<sub>3</sub>H<sub>5</sub>)<sub>2</sub>S, is colorless, lighter than water and may be obtained artificially by treating an alcoholic solution of potassium sulphide with allyl iodide. It dissolves easily in alcohol and ether, and sparingly in water ... Garlic, macerated in water or vinegar, yields its virtues to these liquids.--(p. 154)

They also describe its physiological action and medicinal uses:

Physiological action and Medical Uses--Garlic as well as leek and onion, is a stimulant to the part to which it is directly applied and to be the whole system. Its odorous element may be perceived on the breath and its taste in the mouth when the bruised bulb has been applied to the skin. When eaten raw, its odor "hales from many parts of the body, and, given to nursing women, it taints their milk, so that their infants refuse the breast. It reddens the skin, and may even vesicate it. Internally, it stimulates the digestive organs, and is everywhere used, but principally in southern countries, as a condiment for various kinds of food. The odor of garlic is popularly employed to revive persons from a swoon or from hysterical insensibility. It is a vermifuge not to be neglected in the treatment of lumbricoid worms when given by the mouth, and for destroying ascarides when administered by the rectum. Many cases of dropsy, particularly of anasarca produced by cold, have been cured by a diet of bread and raw onions. This regimen will sometimes produce copious diuresis. Onions boiled in milk have been used successfully for a like purpose. Bruised cloves of garlic and poultices of boiled onion are admirable remedies for [chronic bronchitis](#) in children. They should be applied over the whole front of the chest. Internally, garlic is a very useful agent in the same affection. It is also a domestic remedy for [whooping cough](#). Onion poultices are particularly applicable to abscesses; the core of a roasted onion relieves [earache](#) when introduced into the auditory canal. Onion and garlic cataplasms applied to the perineum relieve strangury. The dose of bruised or chopped garlic or of the expressed juice is about 30 grains (Gm 2). (p.154-155)

Frances Ward published this summary of garlic in her post-World War II book, *British Herbs*:

"GARLIC *Allium Sativum*, Amaryllidaceae

Anyone who travels in Italian buses might be forgiven for deciding never to grow this unpleasant smelling plant, and one can quite appreciate the decision of the old Greeks that people who ate Garlic should not be allowed in the temples of Cybele.

But from early times it has been considered a very useful medicine, and in the Middle Ages in Britain it was believed to be, either by itself by itself, as a 'simple', or mixed with other herbs, one of the cures for leprosy. Lepers were often called 'pilgarlics', as they were made to peel their own garlic, certainly a mark of identity and a means of segregation!

Throughout the ages it was held to have antiseptic properties, and during the 1914-18 War, sterilized Sphagnum Moss soaked in Garlic juice was used for suppurating wounds, a reminder of the old method of treating leprosy sores. From time to time, even in modern days, Garlic has been claimed to have marvelous properties; now, in addition to its stimulating powers, it is held to be beneficial in digestive complaints and for [coughs](#), [colds](#) and [asthma](#).

Cultivation of Garlic is a fairly easy matter, though it needs a finely sifted soil similar to that of an onion-bed. The cloves should be set about 2 in. in the ground about February or March, and lightly covered with soil. The bulbs may usually be lifted during August. There is generally a demand for Garlic from druggists, and good prices have been paid for it." (Ward, 1949, p. 159).

It in the medical literature we find several references to garlic as a therapeutic agent.

Phytocides of garlic suppress the proteinases (cathepsin) in malignant tumors of humans (postoperative material) and of experimental animals. These phytocides also inhibit cathepsin in the liver of cancerous animals, the activity of which increases during malignant growth. This action was detected by adding garlic extract to inoculated Ehrlich carcinoma. The results may be useful in further studies on garlic in the diet of cancer patients." (p. 140)

Joseph A. Di Paolo and Christopher Carruthers of the Roswell Park Memorial Institute of Buffalo, New York, wrote an article in Cancer Research, 1960. The title is, "The effect of Allicin From Garlic on Tumor Growth." By the way, Allicin is responsible for the odor in garlic, so the new odorless garlic isn't quite as effective as regular garlic. For those fortunate souls who can ingest raw garlic; the garlic breath can be obliterated by chewing on a raw clove (not a garlic clove, but the spice clove), or putting a drop of peppermint or spearmint oil on the tongue.

Chester J. Cavallito and John Hays Bailey writing in the Journal of the Chemical Society, Volume 66, November, 1944, discuss the antibacterial principle of garlic, allicin. They isolated allicin, a colorless oil, from garlic cloves and found it to be effective against the following bacteria strains both gram positive and gram negative:

#### **Organism**

- STAPHYLOCOCCUS AUREUS
- STREPTOCOCCUS HEMOLYTICUS
- STREPTOCOCCUS VIRIDANS
- B. SUBTILIS
- B. TYPHOSUS
- B. PARATHYPHOSUS A
- B. PARATHYPHOSUS B
- B. PARATYPHOSUS KUNZENDORF
- B. MORGANI
- B. ENTERIDITIS
- B. TYPHI-MURIUM
- B. DYSENTERIAE SHIGA
- B. DYSENTERIAE FLEXNER
- B. DYSENTERIAE SONNE
- V. CHOLERAE

(P. 1951)

H. Dold and A. Knapp, German Researchers writing in Chemotherapy section of Biological Abstracts in the 1950's discovered that garlic was effective against Streptococci, Escherichia coli, Bacillus prodigiosus, B. proteus, B. Subtilis, Shigella paradysenteriae Flexner, Eberthelia typhosa, Salmonella enteritidis and Vibrio cholerae. It was more effective when crushed than sliced. In addition, garlic exhibited some bacterial action even through the air. Bacteria could not be made resistant to the garlic either. The antibacterial action of garlic juice became somewhat weaker after having been stored in the ice box for 8 days and after boiling for 10 minutes. Remember, too, that when garlic is cooked above 130 degrees F., the enzymes in it are destroyed, and the organic sulphur in the garlic now becomes a harmful form of inorganic sulphur.

A most unique article appeared in the Chinese Medical Journal in May of 1977;

"GARLIC SLICE IT IN REPAIRING EAR DRUM PERFORATION"

by Hsu Wei-cheng

Teaching Research Group of Ear, Nose and Throat Department, Inner Mongolia Medical College, Huhehot

"Clinical use of fresh garlic was satisfactory in repairing eardrum perforations in 18 cases (1 having perforation in both ears) except 1 with irreversible chronic otitis media. The time required for healing by this method was 16 days in 12 cases with perforations smaller than half of the eardrum pars tensa and 28 days in 6 cases with perforations larger than half of it. 10-19 db hearing was gained after treatment.

Of the 18 cases, 6 had increased exudate in the middle ear during the latter part of the garlic treatment. Exudation stopped quickly after treatment was discontinued and anti-inflammatory measures were taken. It in 4 of these, healing took place soon after exudation was checked and in 2 it was necessary to repeat garlic application before the wound healed completely...

This method is indicated in adult's traumatic eardrum perforations within 3 weeks of injury provided there is no infection, perforation is not larger than half of the pars tensa and there is sufficient eardrum left around the perforation edges. It in cases where the duration of perforation is over one month and its edges have already become cicatrized, repairing with fresh garlic slice can only be started after 50% trichloro-acetic-acid has been used to cauterize the edge (repeat the cauterization every few days, if necessary), until the formation of whitish ring (0.1-0.2 mm width) and reddish granulation.

Prepare a fresh clove of garlic carefully, peel it but leave the transparent epithelium-layer tightly attached. The external auditory canal is sterilized routinely. Slice off a very thin piece of the garlic clove (about 0.2 mm thick) shaping it just large enough to cover the perforation. Keep the epithelium-layer attached to the garlic slice and insert it into the ear canal and carefully push it against the eardrum so that its cut surface hugs the perforation while the epithelial layer covered surface faces the external auditory meatus. Pack the external auditory meatus with an alcohol moistened cotton ball. Forceful blowing of the nose is prohibited and water should not be allowed into the ear canal in order to prevent infection. Usually the garlic slice should be replaced once or twice a week until healing is complete. Stop treatment when the middle ear becomes inflamed with excessive exudate and start anti-inflammatory treatment.

Garlic is a strong stimulant which hastens growth of new granulation, contains allin (C<sub>6</sub>H<sub>11</sub>O<sub>3</sub>NS) which rapidly breaks down to yield the antibiotic allicin (C<sub>6</sub>H<sub>10</sub>O<sub>2</sub>S<sub>2</sub>) in the presence of enzyme allinase and water." (Chinese Med. Journal, 3 (3); pp. 204-205).

"With garlic, the patient himself is doctor, pharmacologist, nurse, and pharmaceutical manufacturer all in one."

--Yoshio Kato

Yoshio Kato of the Oyama Garlic Laboratory in Japan has written a very comprehensive booklet entitled, *Garlic, The Unknown Miracle Worker*. In it he describes a unique process of garlic juice therapy known as FLOW-LEBEN. in his own words:

"FLOW-LEBEN is a total therapy system of medical application, particularly the external application of garlic. Application for the patents has been made in ten countries. Already the patents have been granted in four countries. (The Republic of China, Italy, France, Germany and the United Kingdom.)

It is very well known that garlic contains all the elements except Vitamin D. It is also known that garlic essence warms the body and promotes better circulation of the blood .... Aillin, an oily substance contained in garlic, diluted as much as 200 times can kill typhoid germs.

Another study reported that garlic juice diluted 30-40 times stops the growth of certain types of bacteria in a nutrient media--garlic has strong germicidal properties which are not found in other plants. When aneurinase bacteria grow in the body, the majority of the internally produced vitamin B1 is spoiled by this bacteria--garlic shows antipyretic effects when it, diluted with water, is applied externally to a person's body at times of high fever.

FLOW-LEBEN is the only system in the world by which we can obtain the maximum effects from garlic. The first unit was completed in 1970. It in this clinic, various concentrations of garlic-water solution are sprayed on the bodies of patients by means of atmospheric pressure compressed air (2 to 7 lbs.) shot through atomizing nozzles. Hydraulic pressure is employed in the newer models. This process stimulates the body's metabolism and removes cholesterol from the blood. Various functional disorders are eliminated and skin diseases are also cured by the germicidal effect of garlic."(Kato, 1973, pp. 173-175)

The unique and very deluxe treatment has been effective in treatment of ringworm, skin cancer,

frostbite, and other skin disorders using a 100% solution of garlic juice.

Richard Lucas in *Nature's Medicines*, published in 1966, presents the history of the Four Thieves Vinegar:

"It in Marseilles, a garlic-vinegar preparation known as the Four Thieves was credited with protecting many of the people when a plague struck that city (1722). Some say that the preparation originated with four thieves who confessed that they used it with complete protection against the plague while they robbed the bodies of the dead. Others claim that a man named Richard Forthave developed and sold the preparation, and that the "medicine" was originally referred to as Forthave's. However, with the passing of time, his surname became corrupted to Four Thieves." (Lucas, 1966, p. 38)

We now have the modern version of the formula. It is known as the anti-plague formula. It consists of fresh garlic, apple cider vinegar, pure vegetable glycerine, U.S.P., honey, garlic juice, fresh comfrey root, wormwood, lobelia, marshmallow root, oak bark, black walnut bark, mullein, skullcap, and uva-ursi. We recommend that you have several gallons of the preparation on hand in storage and hope that you will not need it. But, at the time of writing this article, a radio broadcast informed us of a case of Bubonic Plague with ensuing death in Lake Tahoe, U.S.A. The medical authorities were trying to locate all of the persons with whom the late subject came in contact in hopes of isolating the infection so the general public would not become exposed to this disease. The plague, related to the Black Plague in Europe during the 1300's, left people dead in their tracks and hanging out of windows waving goodbye to their friends. According to Herman Hesse, a German Writer, Goldmund was a young man who left a 14th century monastery and became a vagabond. He enjoyed the merriment of the wanderer as he traveled through Europe tasting the pleasures of love and life. All this was to change as Hesse describes the character's feeling of powerlessness and horror as he wanders throughout plague-stricken towns, cities, and rural areas observing the Hand of Death had reached everywhere; striking people regardless of their social standing or age. He describes a grotesque scene in a farm cottage where an entire family lay frozen after the throes of death.

### [Anti-Plague Formula](#)

The best insurance in the world against the "predicted coming plagues" and "killing diseases" is to have the body in a good healthy condition. Disease germs are merely scavengers and can only live on toxins, mucus and residue from junk foods. They cannot and will not be damage healthy cell structure. Therein lies the key! Have a healthy, clean body and disease germs will by-pass you--wanting nothing to do with your body, because it would be "obnoxiously clean" (in their language) and no filth for them to live on.

If the plague, or some other epidemic hits before you are in a good healthy condition, it is good to have an aid for a fast cleaning.

While lecturing in Snowflake, Arizona one night, one of the group asked if we had an anti-plague formula, and I was prompted to give them a "certain combination" of herbs to use.

The people there were very impressed to go right to work and prepare this liquid, having it read for use. We had told them that plagues come at unexpected times and it could be tomorrow or maybe even years away, but expect the unexpected and be ready now. If the formula was still unused, from "no need" years later, we could all be happy but "TIS BETTER SAFE THAN SORRY".

These good people made it up in gallon lots and had it on hand. Months later while speaking in Tucson, Arizona, someone asked for the "anti-plague remedy." I was surprised and asked where they had heard of it, as we had only given it out once. We were informed that a plague-like condition or [flu](#) had hit the Snowflake area and when other aids failed, this combination of herbs in liquid form performed its job with amazing speed.

At our next series of lectures in Snowflake, some time later, we heard one testimony after another about the many different types of ailments that were given quick relief by using this formula. The formula has now spread in many areas from coast to coast and is being used with good results. A man picked us up at an airport on the west coast a short time ago, and on the floor of his car was a bottle with liquid in it. When asked what it was he said, "oh, that's your anti-plague remedy, we never travel without it as it works good on about any sickness that comes up while we are

traveling. We are also never without a bottle of it at home."

[Anti-Plague Formula](#) is available in [The Cold Sheet Treatment](#) book.

Because of the wonders we have told you about in this article of the greatness of garlic, it is easy to see how it fits in this formula. Drop a culture of almost any known disease germ into "apple juice" or "apple cider vinegar" and it will die immediately. The ingredients found in "black walnut" are one of the few-known herbal-destroyers of fungus. Marshmallow is the enemy of gangrene and peritonitis. It is a "softening emollient" that will aid in removal of the inorganic deposits broken up by the "solvent" gravel root. Wormwood relieves pain and kills pin-worms and other unwanted parasites, etc. Oak bark tones and firms up the cells in the muscles, cartilage, and flesh. It is also an aid in rebuilding the circulatory system and feeding it. Scullcap is one of the finest nerve repairing and rebuilding aids. It works especially well on the spinal cord--the trunkline for health to the entire body. Comfrey is the cell-proliferant that causes the good cells to multiply rapidly and push out the waste and dead-cell structure, being supplied with the wonderful allantoin. Lobelia is the Lord's great catalyst to combine the herbal entities to a "smoothly-operating whole."

Garlic is a handy herb that will grow right in your own yard, taking very little space, but which should be in everybody's yard. Any time of the year it is needed, one can go out and dig up the bulb. This can be done in spring, summer, or fall, in an emergency, but the best harvest time is autumn, when the leaves have died down. After shaking off the dirt, the bulbs can be put into a mesh bag and hung in the shade where the cool air can circulate through the bulbs.

The single buttons or cloves, that make up the bulb, can be planted in the fall and by going through the winter will come up the following year in the form of a bulb, with a number of cloves or buttons. When planted in the spring, they will generally be just a larger button by fall and not become a bulb. Some people will put the garlic buttons into the refrigerator (not freezer) and keep cold for a few weeks, bring them out into room temperature for several weeks, and repeat this process several times. Thus, the garlic now believes it has gone through several winters and it mature enough to develop from a clove into a bulb. Rather sneaky we would say, but if it works, fine!

Garlic can be planted around rose bushes and other aphid infested plants and the aphids will disappear. Gardeners have reported to us that they plant garlic between the rows of cauliflower, tomatoes, etc., and the garlic will discourage plant-destroying bugs, cut worms, etc. Here "you can have your cake and eat it too" for you can get the value of garden-assistance from this herb during the growing season, and then thin them out in the fall to use as a food and a healing herb during the winter.

The reason for garlic's miraculous type of healing is in its creation, and this will be explained in more detail further along in this article. Briefly now, this is what happens: The garlic clove contains a very high amount of sulphur; sulphur is one of the best minerals to be used as an oxygen carrier. Oxygen is the breath of life and sulphur will carry the oxygen in the body directly to the infected area. Germs cannot live in a good supply of oxygen, therefore, the infection is cleared quickly. This is an organic wonder, so garlic may be termed 'a wonder herb'.

Medical science discovered that sulphur caused this rapid healing, so in World War II, flowers of sulphur (an inorganic mined-mineral) was substituted for the garlic. The army used sulfa for practically every ailment from "falling hair to fallen arches." Wonderful results were reported to us and we were told to use it in ever increasing amounts.

The difference in the healings of the garlic and the inorganic, manmade remedies is that garlic does its job and the excess of the organic materials not being used in healing the infection is easily passed as harmless vegetable fiber from the body. No harm and certainly nothing but good could result from using this powerful, yet harmless, herb. But, with the man-made sulfa drug we used, (this 'wonder drug' healing or the infection), the inorganic flowers of sulphur remained in the body. This inorganic mineral eventually combined with the urine and formed a substance that cut up the urinary tract, causing bed wetters. Many soldiers and other servicemen were given medical discharges, because of "[bed wetting](#)". This habit was acquired while in the service after the use of sulfa drugs. It is a well-known fact that too much sulfa drug has also caused other problems. The sulphur in the garlic will assist in healing the urinary tract after its infection-clearing job, instead of damaging it.

Following are various other uses of garlic. Many people have been helped in ridding the body of [worms](#) by inserting a peeled button of garlic as high as possible into the rectum. Do this just before retiring at night and it will come out with the first bowel movement in the morning. (This is also a

fine aid in adjusting [high blood pressure and low blood pressure](#)). Many mothers find it easier to insert the peeled button of garlic (into the child's rectum) after the child is asleep at night.

Here is a very successful routine for removal of these unwanted growths called [moles, or warts](#). Take a button of garlic, slice or cut in two, and placed the cup area over a wart of mole. Tape it on, and as it dries out put a fresh piece. Many users have reported good results.

Massage painful joints and areas with Oil of Garlic, massage it thoroughly. Massage in thoroughly oil of garlic a number of times a day for rough hands.

To make oil of garlic place chopped or grated garlic in a bottle, glass servicing dish or baking dish, (an inch or more of the garlic), and cover with olive oil so that the oil is a half inch or so above the garlic. Keep in a warm place or in the sun two to three days. Strain with muslin or any good cotton material (no synthetics) and bottle the oil. Keep in a cool place.

I remember one time we were called out to a house in the wee hours of the morning. This call was to see a little boy, under the age of two years, that had double [pneumonia](#). The physician on the case had informed the parents that nothing more could be done and he would come back in the morning to sign the child's death certificate. Seeing as it was well under forty degrees below zero and nearly fifty miles from ambulance service, the parents were told that the boy, if taken by car to a hospital, would surely die. These parents tried to get other doctors, but at that time of night, and in such a remote area, no one would offer help. A friend told them about us, then living in Evanston, Wyoming, and to try to call us. Having been told of the boy's condition we went expecting to give him the [cold-sheet treatment](#). Upon arriving there we found that the plumbing was frozen and there was not running water in the house. We found enough in the toilet tank above the bowl to give the little chap an enema. We were not able to give the cold sheet treatment (no water) so only the garlic paste was made up and applied. This was done after a complete massage of the body and the feet. After oiling the feet up to the ankles, thoroughly, and massaging the olive oil in well, a half-inch thickness of the garlic paste was applied to the soles of his feet. (This is put on only the soles and not up onto the sides). Then gauze was placed over to cover the paste, bandages to hold it into place, and a loose white cotton sock was pulled over the bandages to hold them securely.

Garlic paste is made by taking freshly peeled buttons of garlic and garlic about half and half with Vaseline. This amount can vary, according to the toughness of the feet, more Vaseline for tender feet, less for thicker skin. Many of the health minded readers will be shocked by our using a low-vibration ointment like Vaseline instead of using anhydrous lanolin or some lighter more organic type. The reasoning for this is that the lighter type ointments will penetrate more quickly into the skin, but the Vaseline will hold the garlic on the ointment form. This will also keep the garlic from blistering as easily. (A garlic blister looks bad, but does not hurt and heals back quickly.) The little boy was running an extremely high fever and was delirious when he was covered and put back into bed. (This was well after 2:00 a.m.). We assured the parents the child would be all right and would get well. A few days later we were called again by these parents.

They told us that the doctor came back to sign the death certificate that next morning, but the little boy was sitting in his high chair, drinking some juice and breathing normally as if nothing had happened the night before. The doctor became so angry and demanded to know the name of the other doctor who had taken over the case before it had been released by him. He wanted a hearing by "the board" to have the other doctor thrown out of practice for going "against procedure" by taking over a case without written release. The parents asked if his "release" was the death of their child? He probably changed his mind because we were not brought before a hearing.

I had forgotten this case until nearly twenty years had passed. One evening, after a lecture in another state, a fine-looking young fellow in his early twenties came up to the podium and shook my hand vigorously, saying he had always wanted to meet me. His mother had told him of our long trip in sub-zero weather at night to their house, of using the natural methods on, and saving his life. He stated that he enjoyed living so much he had been looking forward to meeting me.

That paid off for a cold night out on a house call by far more than the small fee that was charged.

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## Formulas

[Adrenetone](#)
[Ant-Plg](#)
[Antsp](#)
[AR-1](#)
[AT-GS](#)
[B & B Tincture](#)
[Barberry LG](#)
[Bee Power](#)
[BF & C](#)
[BF & C Ointment](#)
[Black Ointment](#)
[Black Walnut Tincture](#)
[BPE](#)
[Bugleweed Combination](#)
[Calc Tea](#)
[Catnip & Fennel](#)
[Cayenne](#)
[CC](#)
[Changease](#)
[Chickweed Ointment](#)
[CMM](#)
[Comfrey-Mullein-Garlic](#)

## Immucalm

Relaxing formula

---

### Usages:

Immucalm is designed to calm yet strengthen the body's immune responses. Many times we believe that we are allergic to certain foods, plants or animals, but in reality our immune system may just be overacting. This simple combination of marshmallow root and astragalus has made life easier for those who suffer from allergies, hayfever, asthma, rheumatoid arthritis or any hyperactive immune response.

### Dosages:

Capsules or tea may be taken daily: either two or three capsules three times daily or three cups of the tea.

### Ingredients:

**Marshmallow root**

**Astragalus**

### Useful in treating:

[Allergies](#)

[Arthritis](#)

[Asthma](#)

[Hay Fever](#)

[Rheumatism](#)

[Hyperactive Immune Response](#)

[CSK](#)

[CSR](#)

[Deep Heating Balm](#)

[DRI](#)

[Ephedratean](#)

[False Unicorn & Lobelia](#)

[Fen LB](#)

[Garlic, Rosehips, and Parsley](#)

[Hawthorn Berry Syrup](#)

[Herbal Composition](#)

[Herbal Cough](#)

[Herbal Eyebright](#)

[Herbal Tooth Powder](#)

[!\[\]\(ba2201155b1560f9aae5b8f0a8f3df87\_img.jpg\) \*\*Immucalm\*\*](#)

[INF Combo](#)

[Juni-Pars](#)

[Jurassic Green](#)

[Kelp-T-Comb](#)

[Kid-E-Mune](#)

[Kid-E-Soothe](#)

[Master GL](#)

[Mem](#)

[MindTrac™](#)

[Mullein & Lobelia](#)

[Nose Ointment](#)

[Nu Fem](#)

[Oil of Garlic](#)

[Panc Tea](#)

[Pre-Natal Tea](#)

[PreTrac™](#)

[Prospallate](#)

[Red Clover Combination](#)

[Relax-Eze](#)

[Resp-Free](#)

[Sen Sei Balm](#)

[Sha Tea](#)

[Smoke Out](#)

[ULC](#)

[V.B.](#)

[VF Syrup](#)

[Vitalerbs](#)

[Wild Lettuce and Valerian](#)

[X-Ceptic](#)

[Yellow Dock Combination](#)

## El Programa de los Tres Días de Limpieza y la Dieta sin Mucosidad

**del Dr. Christopher**

[I. Los Tres Días De Limpieza](#) | [Rápida Referencia Para los Tres Días de Limpieza](#) | [II. Dieta Sin Mucosidad](#) | [Algunas Recetas](#) | [III. Ayuda Correctiva](#) | [IV. El Circuito Vital](#) | [V. Extension De La Limpieza](#) | [VI. Unas Cuantas Combinaciones De Planta](#)

Introducion:

El programa de limpieza interior se hace con el propósito de purificar el cuerpo preparándolo para su curación. Si está subido de peso, este programa le hará bajar a su peso normal; y si está bajo de peso, le hará subir hasta su peso óptimo. El propósito del programa es eliminar la mucosidad del cuerpo, con lo cual se obtiene una cura natural en una forma muy simplificada, con las menores molestias para el paciente.

Recuerde, no hay enfermedades incurables, solamente personas incurables. Este programa de limpieza interior lo bendecirá in cinco formas:

1. Eliminará el exceso de mucosidad del cuerpo, que es lo que origina el desarrollo de pólipos, tumores, quistes, etc; los cuales hacen que el cuerpo envejezca rápidamente. (Vease "Procedimiento de Purificación-Detoxificación del Cuerpo").
2. Le dará alimentos que son de las más alta calidad vibratoria (que son vivos, nutritivos y saludables), los cuales vigorizarán las partes vitales del cuerpo de tal forma que ellos no pierdan la salud sin aviso. La mucosidad es la causa de alergias, enfermedades, dolores y muerte, y por esta razón le estamos dando esta dieta anti-mucosa que mantendrá el cuerpo limpio de esas sustancias que causan el pronto envejecimiento de la persona.
3. Le proveerá de la ayuda correctiva para facilitar la cura y la regeneración del cuerpo humano. (Véase Ayudas Correctivas).
4. Disipará la electricidad estática del cuerpo, y de esta manera eliminará su resultado, que es la confusión y la frustración.
5. Le proveerá de fórmulas de plantas que le ayudarán a encontrar mejor salud y felicidad.

## I. LOS TRES DIAS DE LIMPIEZA

Para empezar este programa de limpieza se requiere que el paciente este bajo una terapia de 3 días de detoxificación (purificación de cuerpo), para entonces proceder con la dieta como se indicará después. El procedimiento de la eliminación de la mucosidad y el catarro y la detoxificación que recomendamos es tomado en parte del libro del Dr. N. W. Walker, "Raw Vegetables Juices": To Detoxicate,,: Phoenix, Arizona: Norwalk Press, Publisher, pp 58-71.

La limpieza suprema es el primer paso para la obtención de la salud. Cualquier acumulación o retención de materia residual de cualquier clase dentro de nuestro cuerpo retardará el proceso de recuperación. Los canales naturales de eliminación son los pulmones, los poros de la piel, los riñones y los intestinos.

La transpiración es la acción de las glándulas sudoríparas de eliminar del cuerpo las toxinas, las cuales podrían ser perjudiciales para nosotros si son retenidas en él. Los riñones excretan los productos finales de la comida y del metabolismo que vienen del hígado. Los intestinos eliminan no sólo los residuos de la comida, sino también materia residual en forma de células y tejidos muertos, que son resultado de nuestras actividades físicas y mentales; las cuales si no son eliminadas, causan putrefacción de las proteínas resultando en toxemia o acidosis.

La retención de estas materias residuales tiene un efecto mucho más perjudicial en nuestro cuerpo que lo que es generalmente sospechado, y su eliminación es uno de los primeros pasos hacia la obtención de progresos notorios.

Un método eficiente para efectuar dicha eliminación rápidamente, particularmente en el caso de adultos, ha sido encontrado a través del siguiente procedimiento: Lo primero que hay que hacer por la mañana, al levantarse, es tomar 16 onzas (1/2 litro) o más de jugo de ciruela seca. El propósito del jugo de ciruela seca no es sólo el de vaciar los intestinos (el cual se realizará de todas maneras), sino también el de atraer los despojos de todo el cuerpo, donde sea que éstos se encuentren, hacia los intestinos y eliminarlos a través de ellos.

Durante los tres días de limpieza, tome 1 o 2 cucharadas de aceite de olivo tres veces al día, para ayudar a lubricar los conductos del hígado y la bilis, etc.

Si la cantidad de volumen de materia eliminada no fuese reemplazada, en igual volumen por algo, entonces el cuerpo se deshidrataría en ese volumen. Por eso, tomando jugo de frutas reemplazamos las materias tóxicas o ácidas removidas o eliminadas. Este procedimiento traerá como resultado una reacción alcalina en nuestro sistema. Hay varios tipos de terapia por jugos - manzana, zanahoria, uvas, cítricos, tomate, etc., pero escoja sólo uno para los tres días, y "chupe" completamente cada bocanada que tome. La elección del líquido para el cuerpo debe ser hecha por experimentación individual y por preferencia.

No se debe comer nada sólido durante los tres días de limpieza, sin embargo, si llega a la noche con mucho hambre, puede comer apio.

**Terapia del Jugo de Manzana.** Como una de las más grandes plantas purificadoras de la sangre conocidas, tenemos la más común de las frutas: la manzana (orden natural: Pomaceae) con más de 2,000 variedades. El Dr. Edward E. Shook dice:

"No hay otro agente curativo o planta en el rango total de agentes terapéuticos conocidos, que puede compararse con el árbol de la manzana, y aunque sería difícil decir cual de sus muchas virtudes es la mejor, suponemos que su abundancia en compuestos de oxígeno naciente es probablemente la razón principal por la cual es una fruta tan apreciada, purificadora de la sangre e infalible remedio para muchas enfermedades." (Traducción)

El análisis químico de la manzana muestra el porqué de su gran valor curativo. Jugo de manzana fresca es lo mejor, si se puede conseguir; sino, se puede comprar cualquier jugo de

manzana embotellada que no tenga preservantes ni aditivos.

Empezar tomando 1/2 litro (16oz) de jugo de ciruela seca (prune juice), como la primera cosa en la mañana, y después de media hora 1/4 de litro (8 oz) de jugo de manzana sin diluir.

Revuelva cada bocanada en la boca completamente (llamado "chupar") de tal forma que la saliva se mezcle con ella; de esta manera podemos obtener todo el valor nutritivo y curativo.

(Nota: Esta es la razón por la cual todos los alimentos deben ser comidos sin tomar líquidos, así la comida es masticada y "chupada" lo suficiente para ser convertida en líquido al ser mezclada totalmente con la saliva. Esta es la llave que abre la puerta de la digestión. El jugo no debe ser tragado. De esta manera todo su valor nutritivo será obtenido, y no habrá peligro de regurgitación o de que actúe como un emético para un estómago débil. Este procedimiento ayudará también al páncreas en casos de alto o bajo nivel de azúcar. Usando la saliva es esta forma, el programa curativo de limpieza interior es grandemente acelerado, ya que el resto de los jugos gástricos funcionarán apropiadamente en lugar de fortuitamente).

Entonces, media hora después, tomar un vaso de agua de preferencia destilada, seguido en otra media hora más tarde con más jugo de manzana. Aproximadamente 1 galón (4 litros) de jugo será consumido en un día, por un adulto de tamaño promedio, o una onza (una cucharada) por cada kg de peso de alguien si éste es más pequeño o más grande que el promedio. (Esto, por supuesto, es la dosis sugerida; la edad, la habilidad para asimilar líquidos, etc. determinará la capacidad para cada caso específico). Este procedimiento se recomienda como una "regla de dedo" y no como una ley específica; sin embargo, el procedimiento que estamos explicando ha demostrado ser el mejor.

El disolver la mucosidad durante la terapia de jugo, generalmente causa estreñimiento. Use nuestra fórmula para el intestino grueso (**Fen LB**, que se encuentra en la última sección de este libro), 2 o más cápsulas 3 ó más veces al día.

Repita este método de detoxificación por tres días consecutivos. De este modo aproximadamente 3 galones (12 litros) de toxinas linfáticas serán eliminadas del cuerpo y serán reemplazadas por tres galones de jugo. Esto traerá como resultado una acelerada realcalinización del sistema. Si aparece alguna condición de ictericia (resultado de la alteración del funcionamiento del hígado, que causa color amarillo en los ojos y en la piel) o dolor en la zona hígado-vesícula biliar usar la fórmula No. 3 (**Barberry LG**).

En el cuarto y siguiente días, empiece a tomar jugo de vegetales, y a comer verduras y frutas, preferiblemente crudas (ensaladas). Para el desayuno por ejemplo se podría comer frutas de la estación en rodajas, rayado o cortado, algo de miel para endulzar, y una o dos cucharadas de almendras finamente rayadas y sin echarle sal. Se podría tomar también uno o dos vasos de jugo de fruta fresca o de verduras 30 minutos antes o después de comer las frutas.

Para el almuerzo se podría comer más frutas y 1/2 litro de jugo de verduras frescas y alguna clase de ensalada de verduras.

No debemos alarmarnos si nos sentimos de alguna manera débiles durante o después de este programa de detoxificación. La naturaleza usa nuestras energías para efectuar la limpieza general de nuestro organismo. Pronto obtendremos mayor energía y vitalidad como resultado de este programa, además de obtener un cuerpo mas limpio y saludable. Es bueno hacer los tres días de limpieza mensualmente o varias veces al año.

(NOTA: Si existe la más ligera tendencia hacia apendicitis, podemos hacer uso de enemas con infusión de nebeda (catnip) o de una infusión hecha de tres partes de las hojas de la frambuesa roja (red raspberry) y una parte de las hojas de lobelia, 2, 3 ó más enemas al día por una semana o más, si es necesario. Creemos en el uso de enemas en casos de emergencia solamente, y no como apoyo para unos intestinos inactivos o "flojos").

**Terapia del Jugo de Zanahoria.** El mismo procedimiento que se usa con el jugo de manzana se usa con el jugo de zanahoria. Este puede ser usado directamente sin diluir, tomando un vaso de 1/4 de litro (8 oz) cada media hora, si desea, como con el jugo de manzana.

**Terapia del Jugo de Cítricos.** La mejor terapia de jugos usando cítricos es una combinación. Estos son preparados frescos y en las siguientes proporciones: 4 a 6 toronjas o pomelos (de acuerdo con el tamaño), 2 o 3 limones y suficiente naranja para completar una mezcla total de 2 litros. Diluir con dos litros de agua para hacer un galón de este surtido. Luego proceda como en la terapia del jugo de manzana.

**Terapia del Jugo de Uva.** Aún si se vive en una zona de cítricos, es permisible substituir este surtido por el jugo de uva sin azúcar y sin aditivos. (Es mejor usar el tipo de frutas que crece naturalmente en la zona que vive de cada persona). Jugo de uva congelada no es recomendable porque son combinados con muchos aditivos inaceptables, en casi la mayoría de los casos. Las marcas de jugos vendidas en las tiendas naturistas que son obtenidas en suelos orgánicos y sin pesticidas son definitivamente superiores que los otros que son vendidos en tiendas regulares.

Diluir 2 litros de jugo de uva con dos litros de agua (de preferencia agua destilada). Se toma un vaso de 1/4 de litro (8 oz) empezando media hora después de haber tomado el jugo de ciruela seca en la mañana. Se sigue con 1/2 litro de jugo de uva diluido cada 20 ó 30 minutos de allí en adelante hasta que todos los 4 litros de jugo se termine. Entonces siga el procedimiento como en la terapia del jugo de manzana.

**Continuación del Ayuno.** Después de los tres días de limpieza, si la persona tiene el deseo y la habilidad de hacerlo, es siempre provechoso ayunar de 1 a 3 días, usando sólo agua destilada, y entonces un día de jugos antes de retornar a las ensaladas y otras comidas regulares. No coma ninguna comida pesada inmediatamente después del período de limpieza o después de un ayuno, sino que adicione éstos a su dieta gradualmente. Este es el mejor camino para retornar a las comidas sólidas.

**Síntomas de la Limpieza.** El inicio del proceso de la limpieza interior de nuestro cuerpo puede venir acompañado por dolores periódicos en las áreas donde la acción de limpieza es más aguda y los desperdicios están saturando el sistema de eliminación de nuestro cuerpo. Habrá momentos en que Usted se sentirá muy indispuerto. No se asuste. De hecho, la acción de limpieza puede producir todos los síntomas y efectos de una enfermedad severa, pero la persona deberá actuar aquí con conocimiento y no quejarse del problema temporal creado por la limpieza que se está realizando; se requerirá mucha paciencia, y gran alivio resultará por el hecho de que el proceso de curación esta bien encaminado; y es mejor cuanto más pronto esas molestias vengán y se sientan.

Recomendamos el inicio de baños en tina con aceite de ricino (como se explicará después en este programa) durante los tres días de limpieza con jugos.

Esta eliminación y limpieza no será realizada instantáneamente, y uno no debería esperar que esas acumulaciones, que han sido "empaquetadas" en nuestro sistema durante toda nuestra vida, sean milagrosamente forzadas a salir fuera de los tejidos y órganos de un día para otro. Todo esto tomará tiempo: Llamado Tiempo Cíclico (trabajando con el funcionamiento cíclico normal del cuerpo). Por lo tanto, en el programa del Dr. Christopher usted tendrá días buenos y malos, y esto ocurrirá en ciclos. Estas "enfermedades por la limpieza" vienen en ciclos de 7 días, 7 semanas, 7 meses, y 7 años en la mayoría de los casos (puede variar dependiendo de la persona) y en cada uno de estos períodos cíclicos habrá lo que llamamos la Crisis de Limpieza y Curamiento.

Cuando las toxinas venenosas se desprenden y descargan dentro de la corriente sanguínea para ser eliminadas, usted puede sentirse muy indispuerto, y frecuentemente durante una crisis usted puede sentirse peor de lo que pude haberse sentido antes de empezar el programa. Pero, nuevamente, no se asuste. Estas crisis son solamente toxinas venenosas tratando de salir del cuerpo (cargando pesadamente los intestinos) y le estan haciendo el favor de abandonarlo lo más rápido posible (causando dolor y molestia en el proceso de eliminación). Pero los malos días irán disminuyendo mientras que los buenos irán aumentando cada vez más, si usted tiene fé y sigue cuidadosamente el program.

[Regresar al Empieza](#)

## Rápida Referencia Para los Tres Días de Limpieza

### **Cosas ha necesitar:**

54 onzas o 2 cuartos de jugo de Ciruela Seca (Prune Juice)

9 onzas de aceite de olivo

3 galones de el jugo seleccionado (manzana, zanahoria, cítrico o uva)

3 galones de agua (de preferncia destilada)

### **Pasos para la Limpieza:**

Paso 1: Jugo de Ciruela Seca

16 oz o más al levantarse en la mañana

Paso 2: Aceite de Olivo

Una o dos cucharadas tres veces al día

Paso 3: Jugo y Agua

8 onzas de fluído cada 30 minutos, alternando 8 onzas de jugo elegido con 8 onzas de agua destilada.

### **Tiempo Sugerido:**

7:00 a.m. .... 16 oz de jugo de ciruela seca y 1-2 cucharadas de aceite de olivo.

8:00 a.m. .... 8 oz o más de jugo elegido

8:30 a.m. .... 8 oz o más de agua destilada

9:00 a.m. .... 8 oz o más de jugo

9:30 a.m. .... 8 oz o más de agua destilada

Continúe alternando agua y jugo cada media hora hasta el mediodía.

12:00 p.m. .... 8 oz o más de jugo elegido y 1-2 cucharadas de aceite de olivo.

Continúe alternando agua y jugo cada media hora hasta las 5:00 p.m.

5:00 p.m. .... 8 oz o más de jugo elegido y 1-2 cucharadas de aceite de olivo.

Continúe alternando agua y jugo cada media hora hasta las 8:00 p.m.

8:00 p.m. .... 8 oz de agua cada hora hasta acostarse.

### **Recuerde:**

**Un tipo de jugo por tres días.** Seleccione cualquier jugo (manzana, zanahoria, cítrico, tomate, uva, etc.) Y úselo por los tres días completos.

**Solamente jugo.** No coma nada durante los tres días de limpieza, con excepción de la fruta o

vegetal que se está usando con la limpieza.

**Chupe el jugo.** Asegúrese “chupar” totalmente cada bocanada.

**Estreñimiento.** Use más jugo de ciruela seca o tomar Fen LB si se desarrolla estreñimiento durante la limpieza.

**3 días de limpieza.** Repita esta detoxificación por tres días consecutivos.

**Cuarto día en adelante.** Después de 3 días de limpieza empieza a tomar jugo de vegetales y frutas, preferible crudas.

**Sintiéndose débil.** Usted probablemente se va a sentir un poco débil durante o después de la detoxificación ya que su cuerpo usará muchas energías para limpiarse.

**Enema.** Si existe la más mínima tendencia hacia apendicitis, use enema alta, pero sólo úselo en casos de emergencia y no como una “muleta” para unos intestinos flojos.

**Continúe el ayuno.** Una vez que a completa varios programas de limpieza, Usted puede ayunar 3 días más usando solamente agua destilada.

**Síntomas de la Limpieza.** Mientras su cuerpo se empieza a limpiar, Usted probablemente experimentará dolores periódicos en todo su cuerpo debido a la eliminación de toxinas, pero ésto brinda una limpieza y un curamiento más rápido.

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## II. DIETA SIN MUCOSIDAD

El segundo paso para el curamiento del cuerpo es eliminar de la dieta las comidas que forman mucosa (dieta es definida como la comida diaria de cada persona). No debemos ingerir mucosa en nuestro cuerpo más rápido que lo que éste toma para eliminarlo.

Con este procedimiento preventivo no sólo los sinusoides, los bronquios y los pulmones son despejados sinó también la mucosa que produce el estreñimiento. El programa de comidas que dará este maravilloso resultado es conocido como la "dieta sin mucosidad".

**Comidas Peligrosas que Forman Mucosa.** Sustancias artificiales o inorgánicas en la comida deben ser eliminadas de la dieta del paciente:

1. **Sal.** Para aquellas personas que están acostumbradas a usar mucha sal, ésto podría sonar difícil pero, si usted lo sustituye con pimienta molida y condimentos de hierbas, adicionando kelp en polvo, encontrará que el deseo por la sal irá desapareciendo rápidamente. La pimienta es una planta muy nutritiva que ayuda a regenerar el cuerpo cuando es usado en su estado natural. Pero cuando la pimienta es cocinada, su estructura molecular cambia, y se convierte en un irritante inorgánico, y es éste el único momento en que tiene resultados dañinos. El uso de sales que están hechos a base de potasio o de vegetales son buenos, teniendo cuidado de no exagerar.

2. **Huevos.** No deben ser comidos en ninguna forma.

3. **Azúcar y todos los productos derivados.** Usted puede usar miel de abeja, melaza de zahina, pero no azúcar, ni sus aplicaciones.

4. **Carne.** Eliminar todas las carnes rojas de la dieta. Un poco de pescado de carne blanca una vez por semana, o un poco de pollo (que no ha sido alimentado con fines comerciales o inoculados con formaldehído o suero para evitar la descomposición) podría estar

bien (ya que éstas son las mejores formas de carne comestible) pero no los use muy seguido.

5. **Leche.** Eliminar la leche y todos sus derivados, los cuales incluye mantequilla, queso, queso cortado, yogurt, etc. Todas éstas son sustancias que forman mucosidad y en la gran mayoría son de alto contenido de colesterol (especialmente la mantequilla). Como un sustituto para la mantequilla o la margarina usted puede entrenar su gusto y gozar de un buen, fresco y suave aceite de olivo en las ensaladas y verduras, y descubrirá que éste es uno de los mejores alimentos que existen.

6. **Harinas.** La razón para eliminar la harina es que cuando es calentada y horneada a altas temperatura cambia a ser una sustancia formadora de mucosidad. Ya no es una comida, lo que significa que no hay "vida" en élla. Toda comida saludable es orgánica, mientras que la comida que no es saludable, o "comida muerta" es inorgánica. Esta es la clave de todo nuestro programa de eliminación de mucosa.

**Suplementos: Rehabilitación y Ayudas Curativas.** Nuestras recomendaciones suplementarias aumentarán la fortaleza de nuestro cuerpo, empezarán a eliminar la mucosidad de los tejidos y removerán el catarro fuera del sistema.

1. **Cayenne.** Tome una cucharadita de cayenne 3 veces al día. Empieze gradualmente con 1/4 de cucharita en un poco de agua fría (agua destilada preferible). Aumente 1/4 de cucharadita más a la dosis cada 3 días (1er día 1/4 de cucharita. 4to día 1/2 cucharita, etc.) hasta lograr una cucharadita 3 veces al día (el aumento gradual de la dosis acostumbrará a su sistema a lo picante de la planta).

2. **Miel y Vinagre de Cidra de Manzana.** Ponga una cucharada de miel y una cucharada de vinagre en agua tibia, tal que la miel se derrita. Tome esta cantidad 3 veces al día. Este debe ser Vinagre de Cidra de Manzana. No use malta u otro tipo de vinagre ya que éstos son dañinos para el cuerpo. El Vinagre de Cidra de Manzana es medicinal y muy beneficioso.

3. **Kelp (Alga Marina).** Cada paciente debería tomar entre 10 a 15 cápsulas diarias, si es que hay alguna indicación de problemas con la tiroides; de otra forma, 2 ó más mantendrán al cuerpo en buena condición como nutrición preventiva. Este se puede tomar en lugar de la sal y ayudar a reconstruir una nueva glándula tiroides. Kelp en polvo puede ser usado en ensaladas o en otras formas.

4. **Miel de caña (Melaza).** Tome una cucharada de melaza de zahina 3 veces al día.

5. **Aceite de germen de trigo.** Tome una cucharada de este aceite 3 veces al día.

**Sugerencias para la Dieta: Alimentos Regenerativos.** Si la dieta es seguida al pie de la letra, le aseguramos que después de un tiempo muy corto usted tendrá una mayor satisfacción de las

comidas que recomendamos (debido a la mejor salud que usted alcanzará) que con su dieta anterior. Usted inclusive llegará a su peso normal. Si está con kilos de más, los perderá con esta dieta, y si esta bajo de peso, usted ganará peso después de haber pasado por su "nuevo bajo peso", debido a la mucosidad expelida fuera del cuerpo, antes que "carne buena" sea restaurada.

No se preocupe de que esta dieta omita carnes y los tipos de proteínas comerciales, y no se preocupe de adicionarlas a su dieta, ya que usted obtendrá todo lo que su cuerpo necesita de estas comidas. El cuerpo del gorila esta formado en el mismo orden biológico que el cuerpo humano, y él consigue todas las proteínas que necesita de las frutas, nueces y semillas (y para el hombre, las verduras y hortalizas reúnen todo lo que el cuerpo requiere.) Usted puede probar la efectividad de este programa por si mismo.

### **En las mañanas**

Es mejor no "romper el ayuno" (desayuno) hasta por lo menos al mediodía, excepto en casos de personas jóvenes o muy activas. Usted encontrará que esto no será difícil hacerlo si usted usa las plantas que le recomendamos (como el cayenne, aceite de trigo, etc.). Estos le disminuirán el apetito, y le proveerá de la nutrición necesitada, tal que usted se sentirá satisfecho y habrá tomado estas plantas por la segunda vez durante la mañana antes del tiempo de la comida del mediodía.

Pero si después de tomar los tónicos para el intestino grueso (aceite de germen de trigo, cayenne, vinagre de cidra de manzana, miel de abeja, melaza, te de hierbas, etc.) usted está aún con hambre y quiere comer, la mejor comida para empezar el día es un buen y saludable cereal calentado a baja temperatura. Este debe ser cereal en su estado saludable (con "vida"). O se puede comer frutas frescas.

El cereal es preparado primero remojando en agua el grano sin partir de 8 a 20 horas, y entonces calentando al baño maría (en doble olla de acero inoxidable) a muy baja temperatura de 130 grados F o menos (55 grados C o menos) el que puede ser hecho echando agua caliente sobre el grano y entonces aplicando baja temperatura. Como un sustituto, esto puede también ser preparado en botellas termos para una o dos personas, como sigue: Tome un thermo (una pinta, un cuarto o el tamaño que necesite para su familia o sólo para usted), llene 1/3 de ella en la tarde o en la noche, con trigo rojo turco, que es de alta calidad proteínica, entonces termine llenando el thermo con agua hirviendo, (ponga la botella boca abajo una o dos veces, tal que durante la noche el agua circule completamente por la base y no deje nada del trigo sin tratar). Cuando usted abra el thermo en la mañana, después del calentamiento a baja temperatura durante toda la noche, el trigo estará listo para su consumo. El trigo se ha reventado, esta suave y delicioso (ya que nada de su sabor se ha perdido al cocinarse); este proceso se puede mejorar si se remoja el trigo anteriormente. Con un poco de mantequilla fresca y miel de abeja añadida, ésta es una comida deliciosa. Algunas personas les gusta agregar canela, pimienta de jamaica (allspice), etc.

El Trigo contiene todo el potencial de los valores nutritivos que necesita el cuerpo humano. La planta del trigo o hierba del trigo, especialmente, es una comida completa ya que le provee de proteínas, calcio, y todas las enzimas necesarias, vitaminas, minerales, etc., para reconstruir y regenerar la estructura celular de su cuerpo. El grano permanece "vivo" hasta que es "matado" en algún procedimiento de almacenaje químico o por la aplicación de altas temperaturas. La prueba para saber si el germen de trigo tiene "vida" es plantarlo y ver si todavía crece. Este procedimiento es válido inclusive para trigo cocinado y cuando es calentado a baja temperatura en olla de acero inoxidable; retendrá su poder vital y crecerá. Las comidas preparadas en esta manera son orgánicas; por lo tanto, ésta es la manera en que los granos deben ser preparados para su uso. Se nos ha dicho en las Santas Escrituras que "todos los granos 'saludables' y plantas son para el hombre, y el grano es la vara de vida", pero esto no quiere decir que es permitido molerlos a una apariencia de polvo sin finesa, o calentarlos a temperaturas mayores de 100 grados C y cambiar su estructura molecular de orgánico a inorgánico y por lo tanto hacerlo un formativo de mucosidad. El resultado de las invenciones del hombre indica lo contrario. Haga germinar los granos si usted desea, de preferencia remójelos, y reviéntelos con calor húmedo (baño maría).

Los granos de trigo germinados son excelentes y nutritivos, pero si usted le dá un plato de éstos a un niño en crecimiento para el desayuno, el estará con hambre al poco tiempo; por lo tanto, un buen plato de granos de trigo, enjuagado y calentado a baja temperatura "le llenará el estómago" por horas. Alternar el trigo con cebada, mijo, trigo macho, centeno, avena de sémola

(entero).

Usted puede preparar deliciosas casseroles con cebada, centeno, mijo trigo remojado, como se explicó anteriormente y mientras se está calentando a baja temperatura se puede agregar frutas o legumbres, plantas de buen sabor, etc. Todas las lentejas, frijoles, soya, preparados de esta manera son "vivos" y buenas para comer. La soya y la mayoría de los frijoles pueden ser remojados por dos o tres días y entonces cocinados a baja temperatura por 12 a 20 horas, agregando cebolla, ajos, pimienta, etc. durante el calentamiento.

La mejor manera de ver si su comida esta viva y saludable, es hacer un pequeño surco en su jardín y sembrar algunos granos que sobraron del desayuno, alguna casserola del almuerzo y lentejas de alguna otra comida; y en una segunda fila sembrar alguna wheaties, granola (tipos de cereales comerciales) y un pedazo de pan. Cúbralos y eche agua a cada fila y vea en cual de ellas hay crecimiento.

### **Al mediodía**

Si usted prefiere sólo un almuerzo ligero, entonces prepare una buena ensalada mixta de legumbres en la cantidad que usted desee, usando salsa de aceite de olivo hecho en casa:

1 taza de aceite de olivo

2 cucharadas de vinagre de cidra de manzana

1 pizca de hierbas, pimienta, etc.

(Haga esta salsa o aderezo a su gusto, ya que hay muchas variedades que usted puede hacer: de palta, cebolla, ajos, etc. pero no use las salsas procesadas de las tiendas comerciales.

Jugos pueden ser tomados durante la tarde: de zanahoria, de uvas, de manzana, etc. Frutas secas y un poco de nueces son muy nutritivos y beneficiosos, y los últimos son mejores como proteínas saludables cuando es usado en combinación con las verduras. Si una persona tiene cáncer o inclinación al cáncer no se debe exceder en comer proteínas como las nueces, almendras, etc. Esto es algo que daña el páncreas si se come en exceso, y en estos casos, coma las nueces sólo en las mañanas. Pero permanezca alejado del maní o cacahuete y concéntrese en las almendras. Una persona con cáncer deberá comer entre 8 a 10 almendras en la mañana y la misma cantidad en el mediodía. Pero no debe tomar ninguna proteína desde la tarde hasta la mañana del siguiente día, permitiendo 16 a 18 horas al páncreas para limpiarse y empezar a trabajar en las enzimas otra vez. Toda proteína debe ser tomada temprano en la mañana, y por supuesto, en casos de cáncer, ninguna clase de proteína secundaria como la carne.

Proteínas son una moda y son altamente sobre-publicados. Todas las frutas, vegetales (verduras), granos nueces y semillas tienen proteínas en ellas. Si usted esta comiendo una buena dieta sin mucosidad y se pregunta por comidas con proteínas, entonces "Pregunte a cualquier gorila". Los órganos de su cuerpo son semejantes a los del hombre, y ellos viven mas años que el hombre. Ellos son unos de los animales más fuertes, por su peso, en la faz de la tierra. Ellos se alimentan de frutas, y comen todo lo que crece sobre la tierra: frutas, granos, nueces semillas. Nosotros podemos gozar de las raíces y tuberculos que crecen debajo de la tierra, pero ellos no cavan como nosotros lo hacemos; por lo tanto, con zanahorias, papas, betarragas, etc. agregados a las plantas "arriba de la tierra", nosotros deberíamos ser más fuertes que los gorilas.

Nosotros matamos la vaca para comer la carne por las proteínas que ella consigue por comer pasto. Consigamos nuestras proteínas frescas y naturales y no de "segunda mano" a través de la carne del animal. No usemos algo preparado y mezclado por el hombre en su estado muerto. Las proteínas "comerciales" trabajarán en el efecto y darán rápido alivio para ciertas dolencias, pero el uso exagerado de estos tipos harán trabajar mucho al páncreas y otras glándulas, causando la hipoglucemia (bajo nivel de azúcar en la sangre) o diabetes (alto nivel de azúcar en la sangre).

Las proteínas naturales vivas de la comida en el programa de la dieta sin mucosidad, serán usados así como se necesiten y el exceso sera descargado fuera del cuerpo en una forma natural cuando sea necesario. Las proteínas de tipo comercial son de baja vibración y las sedimentaciones permanecerán en las glándulas del cuerpo causando problemas posteriores.

La comida natural es muy importante. El trigo es un grano específicamente para el uso del hombre y si es usado regularmente, éste reconstruirá dentro del cuerpo todos los básicos e importantes elementos requeridos para su salud, además de todas las variedades de vitamina B.

Las comidas regulares pueden empezar con una buena taza o tazón de caldo de verduras. Las verduras deshidratadas en la forma de potasio en polvo (broth), puede ser preparado por usted mismo.

Hay miles de combinaciones para hacer ensaladas, con la cual puede empezar las comidas regulares, y con cierta investigación y experimentación, a usted nunca le faltará algunas ensaladas interesantes. Después de eso, sirva los vegetales cocinados a baja temperatura (muchos tipos pueden ser preparados con varias hierbas sazonadoras, sacados del calor bajo justamente antes de servir). Estos siempre seran deliciosos y beneficiosos siempre y cuando se mantengan a baja temperatura y en su estado saludable. (Por lo menos, 5 a 6 verduras se debería comer por día, de los cuales 2 deberían ser las hojas de las verduras). Una pequeña cantidad de aceite blando (como el aceite de olivo) adicionado a las papas al horno, zapallo al horno, etc. es muy bueno. Con un poco de intrepidez e imaginación, usando alimentos saludables, usted puede preparar algunos platos muy interesantes y deliciosos. No necesita preocuparse por comer bastante para sentirse satisfecho y tendrá toda la nutrición necesaria para obtener suficiente fortaleza física; haga casseroles con granos enteros, etc. No tome líquidos durante las comidas, mezcle la comida completamente con la saliva. Espere 1/2 hora después de la comida para tomar líquidos.

### **En las noches**

Esta es generalmente la comida principal del día, pero usted puede cambiarlo como lo desee; la comida principal puede ser al mediodía, y la comida ligera con una ensalada, en las noches. Si usted prefiere una comida caliente, empiece con una taza de caldo de verduras. El caldo deberá ser seguido con una ensalada de verduras cocidas que han sido preparadas a fuego lento (baja temperatura). Asegúrese siempre de cocinar en acero inoxidable, pyrex o algún recipiente apropiado, pero nunca en aluminio, NUNCA!

Jugos o nueces, frutas secas o frescas son todas excelentes. Cada vez que use fruta fresca, úsela sola (monodieta). Cuando usted quiere comer otro tipo de fruta, espere 1/2 hora o más, por lo menos, antes de hacerlo (y ésta será asimilada mucho más fácil por su sistema digestivo). La monodieta es para personas en una rutina de curamiento. Si usted se siente bien y saludable, una ensalada mixta de frutas de vez en cuando es permitido.

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### **Algunas Recetas The Granos Cocinados a Baja Temperatura**

2 ½ tasas avena o trigo integral remojados en agua destilada suficiente para cubrirlos hasta una pulgada encima de ellos..

3 1/4 tasas agua destilada para cocinar.

1/4 cucharita sal marina.

Preparación:

**Remojarlo:** Lavar la avena dos veces. Cubra los granos lavados con agua hasta una pulgada por encima de ellos. Remojarlo por aproximadamente 5 a 6 horas en un lugar frío (la refrigeradora) para prevenir la fermentación.

**Método del FOOD WARMER:** Calentar el agua para cocinar en la cocina hasta casi hervir (160a 180 grados F). Bote el agua que estaba remojando los granos y eche los granos en el FOOD WARMER. Agregue el agua para cocinar calentada y sal marina a los granos. Esto debería bajar la temperatura de la olla a 120-130 grados F. Cocinarlo toda la noche (de 8 a 10 horas) a bajo calor de tal forma que la temperatura no suba más de 130 grados F. Si desea más o menos jugo en los granos, simplemente ajuste la cantidad de agua usado durante el cocinado.

**Método del Horno:** Siga las instrucciones de arriba y ponga los granos toda la noche en el horno con la luz del piloto prendido, o calentando el horno de 150 a 180 grados F de tal forma que la temperatura de la olla se mantenga cerca de 120 a 130 grados F. Este método es más difícil para regular la temperatura que el método del FOOD WARMER.

**Método del Thermo:** Llene la tercera parte del thermo con grano entero. Agregue una pizca de sal marina. Llene lo que sobra con agua hirviendo. Selle el thermo y déjele asentarse toda la noche. Los granos estarán listos para consumirlos la mañana siguiente. Este método tampoco es tan seguro como el método del FOOD WARMER.

**Secretos:** Los tiempos para remojar y cocinar variarán dependiendo en que lugar y altura se encuentra viviendo.

**Para servir:** En la mañana, todo lo que tiene que hacer es servir los granos directamente en los platos, o puede colarlo ligeramente hasta que obtenga una consistencia de harina de avena. Los granos son fáciles de digerir una vez que son licuados y tienen mejor sabor. Trigo licuado tiene un sabor rico en germen de trigo. Para comer en la mañana agregue manzana cortada, pasas, grocellas o bayas, y miel o jarabe de arce (Maple Syrup) para endulzar. Si usa una licuadora, usted puede encontrar los granos más sabrosos sin fruta, sólo con miel y un poquito de canela.

**Trigo:** El procedimiento para el trigo es el mismo que cuando preparamos la avena excepto por el tiempo de remojado y cocinado. Para el tener el trigo listo a las 7:00 a.m. hay que empezar a remojarlo el día anterior como a las 8:00 de la mañana y empezar el cocinado lento a partir de las 7:00 de la noche. Puede también substituir el trigo por centeno o cebada.

**Food Warmer cooker:** Este es un tipo de calentador de comida que usan los restaurantes que puede mantener la temperatura a valores de hasta 120 a 130 grados Fahrenheit. Puede comprarlo en tiendas que venden equipos para restaurantes. Asegúrese en comprar uno que la temperatura de calentamiento no exceda los 120 a 130 grados Fahrenheit.

### Caserola de grano vivo

2 tazas	cebada	½	green pepper
	remojar en agua (una pulgada	2 dientes	ajo
	sobre el nivel del grano)	2 cucharadas	aceite de ajo
2 ½ tazas	agua cocida	1 onza	salsa de tamari
1/4 cucharita	sal marina	½ cucharita	savory (ajedrea)
6	zanahorias medianas	¾ cucharita	marjoran (mejorana)
¾ to 1 tasa	arverjas	½ cucharita	Vege-Sal
½	Cebolla	1/8 cucharita	cayenne

Para caserola de cebada con zanahoria y tallito de brocoli, reemplace las arevrjas con: 1 tasa de tallitos de brocoli y reemplaze el savory and majoram por 2 hojas de bay (laurel) y ¾ de cucharita de sweet basil (albahaca dulce) y ¾ de cucharita de thyme (tomillo).

### Preparación

Enjuague la cebada dos veces en agua y dejelo remojar por 3 a 5 horas. Mientras la cebada se está remojando, manténgalo en un lugar frío, preferiblemente en el refrigerador para prevenir fermentación. Lave y prepare los vegetales. Pele y rebane las zanahorias, corte apio en rebanadas de 1/4 a 1/2 pulgada. Adalgace los tallitos de brocoli. Corte pimienta verde (green pepper) y desmenuze el ajo. Antes de empezar a cocinar los granos, algunos de los vegetales duros (como zanahorias, cebollas, los tallitos de brocoli y el apio) necesitan ser cocinados. Si usa hojas de laurel (bay leaves) pongalo en la cocina con los vegetales cocidos. Arverjas, green pepper, ajo y otros sasonadores van en la caserola sin pre cocinarlos. Aproximadamente 12 horas antes de servir, caliente el agua para cocinar hasta casi hervir (160 a 180 grados). Vaciar el agua de enjuage del grano y coloque el grano en un warmer-cooker. Agregue el agua caliente y sal al grano. La temperatura del grano debe ser aproximadamente de 110 a 126 grados. Agregue todos los vegetales y los sasonadores. Cúbralo y cocínelo a fuego lento. Antes de servir la caserola, pruebe la sazón a grege cayenne, Vege-Sal, u otros sasonadores. Usted puede substituir el trigo.

Los granos requieren muy poca atención mientras se cocinan, pero la preparación empieza el día anterior para dar el tiempo necesario para el enjuage y el calentamiento a fuego lento. Por ejemplo, empezar a enjuagar la cebada a las 3:00 p.m., empezar a cocinarlo y agregar los vegetales y los sasonadores entre las 6 a 8 p.m. La proporción de grano con vegetales es aproximadamente 50/50. Esta listo para la mañana siguiente.

### Caserola de grano vivo

2 tasas	centeno	2 dientes	ajo
	remojar en agua (una pulgada	2 cucharadas	aceite de ajo
	sobre el nivel del grano)	1 onza	salsa de tamari
2 tasas	agua (destilada)	2 cucharitas	perejil cortado (fresh parsley)
1/4 cucharita	sal marina	1/2 cucharita	salvia (sage)
5 a 6	zanahorias	3/4 cucharita	tomillo (thyme)
1 tasa	arverjas	1/2 cucharita	Vege-Sal
1/2	Cebolla	1/8 cucharita	cayenne
1/2	pimienta verde (green pepper)		

### Preparación

Use el mismo procedimiento usado para preparar la caserola de cebada con la diferencia que el centeno necesita más tiempo de enjuage y un poquito más de tiempo de cocinado.

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## III. AYUDA CORRECTIVAS

**Fomentación con aceite de ricino.** Para deshacernos de la mucosidad endurecida en nuestro cuerpo, la que puede generar quistes, tumores o pólipos, la siguiente fomentación es

recomendada:

Remoje un pedazo de franela o pañal de bebe en aceite de ricino, exprímalo un poco de tal manera que no gotee mucho y aplíquelo sobre el dorso frontal del cuerpo (desde el cuello hasta la ingle, y de lado a lado). Coloque una bolsa de agua caliente sobre la aplicación del aceite de ricino en el área del hígado (el hígado se encuentra en el lado derecho, bajo la cintura). Nótese que parches calientes no son altamente recomendados aquí, a no ser que una toalla mojada sea colocada entre éste y la franela con el aceite de ricino; aún así, calor húmedo como el que provee la bolsa de agua caliente es lo mejor. Mantenga esta fomentación en las zonas por 1/2 o 1 hora. La bolsa de agua caliente debe ser llenada varias veces ya que el agua en ella se enfría rápidamente.

Los siguientes tres días y sobre la misma zona cubierta por fomentación, masajee con aceite de olivo, en forma circular y dirigido hacia el corazón, durante 5 a 10 minutos.

El séptimo día es de descanso, no sólo para la aplicación de la fomentación, sino para cada parte del programa, tomando sólo agua durante todo el día (cada séptimo día de allí en adelante se realizará lo mismo). En el octavo día, empezar nuevamente con el aceite de ricino por tres días y repetir nuevamente el proceso, juntamente con la dieta sin mucosidad, las hierbas, etc. hasta que el curamiento sea obtenido.

En el uso de la fomentación, el aceite de ricino va a través de la piel hasta el área del hígado y las glándulas linfáticas y empieza a captar las sustancias venenosas y las elimina a través de los poros; mientras que el aceite de olivo penetra en la piel y cura reconstruyendo nuevos tejidos.

Este procedimiento puede durar entre 6 a 8 semanas para limpiar propiamente el sistema, dependiendo, por supuesto, de cada caso.

**Ejercicios.** Es necesario que todos los pacientes hagan algo de trote lento ("jogging"). Esto ayudará a mejorar la circulación, entonar los órganos, y eliminar con mayor rapidez la acumulación de células muertas. Cada persona debería hacer 1 1/2 Km de jogging diario, pero debería empezar con 400 metros o menos. Nunca corra hasta el punto de quedar exhausto porque lo bueno que ha hecho en un día será inútil como resultado del sobre-ejercicio. Si por alguna razón el jogging no puede ser hecho afuera, hágalo en casa frente a una ventana abierta o en su jardín interior. Esto, especialmente, hará vibrar los músculos peristálticos del colon dándole tono, regenerando el útero en un estado prolapsado en las mujeres, y ayudando a curar la próstata en los hombres.

**Respiración profunda.** Para no ser complicados, no le daremos aquí el procedimiento científico de respiramiento yoga o algo semejante. La idea principal es el inhalamiento profundo de aire fresco por la nariz y el exhalamiento a través de la boca. Inhalar lo suficientemente profundo que realmente duela cuando se lo hace. Hágalo cada mañana y cada noche, no menos de 5 o 10 minutos, y usted empezará y terminará el día con vigor y energía; y hacerlo antes de acostarse le ayudará a dormir como nunca antes lo ha hecho. La respiración profunda es el "soplo de vida", y la única forma que usted puede conseguir suficiente elemento de este "dador de vida" es a través de la inhalación del oxígeno del aire por la nariz. Este principio es muy importante pero aún muy subestimado. Una persona puede vivir 110 días sin comida y 16 días sin agua, pero sólo unos cuantos minutos sin respirar. Esto es algo al que prestamos muy poca atención y la respiración superficial, poco profunda es de lo más normal en estos días, y ésto es porque ignoramos completamente que la respiración profunda es el "soplo de vida".

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## IV. EL CIRCUITO VITAL

Otro punto importante para vigorizar la salud de cada paciente en el programa del Dr. Christopher es el descargo de la electricidad estática del cuerpo mediante el caminar sin zapatos y

medias en el jardín o césped durante 10 o 15 minutos cada día. Concerniente a la creación de esta electricidad estática en nuestro cuerpo, lo que sucede es lo siguiente: en el proceso de dar vida al cuerpo físico, los cabellos actúan como antena y absorben energía eléctrica de la atmósfera. Esta fuerza eléctrica penetra a través de la parte superior de la cabeza y distribuye muchos amperios y/o ohmios a cada célula, órgano, glándula, etc., y entonces el resto de la electricidad se supone que pasa y sale fuera del cuerpo hacia la tierra a través de los pies; pero cuando usamos zapatos con planta de jébe o sintética y usamos medias, esa electricidad no puede "hacer tierra" apropiadamente, entonces ésta se acumula como electricidad estática en el cuerpo y como resultado nos convertimos en personas mentalmente confusas y frustradas.

Lo mas importante, piense positivamente, piense en SALUD! Sepa que usted tiene un grado de salud en este momento; agradezca a Dios por esta salud, y agradézcale en este momento con una oración positiva, agradézcale por la perfecta salud que usted tiene ahora. Recuerde que Jesus dijo: "El campo es blanco, listo para la cosecha." La buena salud es suya ahora si usted piensa positivamente en esta forma.

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## V. EXTENSION DE LA LIMPIEZA

Cuando trabajamos con problemas crónicos de salud no podemos esperar limpiar o curar el cuerpo completamente con una o dos rutinas de limpieza. Por lo tanto para eliminar las condiciones crónicas del cuerpo o prevenir que ocurran, se recomienda una extensión en la limpieza como un buen camino a seguir. Esto se debe realizar siguiendo la ya mencionada dieta sin mucosidad.

Al levantarse se toma 1 ó 2 cápsulas (o más si es necesario) de nuestra fórmula para los intestinos (Fen LB). Esto será repetido 1 hora antes del almuerzo, y antes de retirarse a dormir en las noches.

Entonces, 20 minutos antes del desayuno tomar 2 cápsulas de nuestra fórmula para el hígado y la vesícula (Barberry LG), lo cual se repetirá antes de cada comida.

Lo siguiente que se toma es 2 cápsulas de la fórmula para los riñones y la vejiga (Juni Pars) a la mitad de la mañana y a la mitad de la tarde.

Se seguirá esta rutina por 6 días, descansando en el séptimo. Volveremos a tomar estas fórmulas en la segunda semana, agregando 2 cápsulas de nuestra fórmula para purificar la sangre (Red Clover Combination) 1 hora antes de cada comida. Seguiremos nuevamente esta rutina por 6 días descansando en el séptimo. Este procedimiento continuará cada semana por el lapso de 6 semanas, después del cual se descansará una semana. Se repetirá estos intervalos por 6 meses descansando el séptimo mes. Al final de este programa de 7 meses, evaluaremos nuestro progreso y determinaremos si sería beneficioso repetir otro programa de siete meses.

La demora de una semana para agregar la fórmula purificadora de la sangre a este programa es absolutamente esencial por la eficiencia extrema de esta fórmula. En la primera semana estamos abriendo los canales de eliminación del cuerpo, permitiendo así un camino para eliminar las toxinas que serán desprendidas de la sangre por la fórmula purificadora.

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## VI. UNAS CUANTAS COMBINACIONES DE PLANTAS

En todas las formulas básicas de limpieza y rehabilitamiento provistas aquí (a menos que exista una condición particular de enfermedad y se necesite una específica combinación de plantas), el programa y procedimiento que sigue son para el promedio de personas y reúne casi todos los requerimientos para resolver problemas generales; esto es a menos, como decimos, que haya una necesidad de prescribir ayuda específica con fórmulas para un tipo de problema específico.

**1. Fórmula para tonificar el intestino grueso.** Tome la cantidad de cápsulas que usted necesite.

Como no hay dos personas iguales en año, talla o estructura física ( y los intestinos mismos difieren en personas así como las huellas digitales lo hacen), en la mayoría de los casos se empezará con 2 cápsulas 3 veces al día y regular la dosis desde allí; pero si es difícil conseguir movimiento en los intestinos y el excremento es duro y toma mucho tiempo para eliminar, entonces incremente la dosis hasta que la deposición se vuelva suave y bien formada (y aquí, en algunos casos difíciles, usted podría tomar hasta 40 cápsulas por día, ya que las plantas que forman estas cápsulas son solamente comida que no pueden hacerle daño). Entonces, después que el material duro se ha aflojado y eliminado, disminuya la dosis gradualmente (éstas son duras incrustaciones de materia fecal que han sido acumuladas en los intestinos por mucho años que se estan aflojando y refregando con los liquidos intestinales), pero no disminuya la dosis de este tónico intestinal demasiado hasta el punto de perder la ventaja de "momentum" y continuidad en la eliminación. En muchos casos, la inapropiada alimentación ha causado que los músculos peristálticos de la mayoría de las personas dejen de trabajar, y tomará de 6 a 9 meses, con la ayuda de este tónico (**Fen LB**), para que una persona promedio, pueda eliminar la materia fecal incrustada y reconstituir la estructura intestinal lo suficiente para tener a los músculos peristálticos trabajando por si mismos. Esta combinacion es hecha con berberis, cascara sagrada, jenjibre, cayenne, etc.

La mayoría de las personas tiene kilos de vieja materia fecal almacenada en el colon, el cual toxifica el sistema y no permite que la comida sea asimilada correctamente, y es por la causa de esta condición de putrefacción, que muchas personas comen mucho más de lo que su cuerpo requiere. En este proceso, ellos fatigan sus cuerpos tratando de nutrirse suficiente y aún así están siempre con hambre y comiendo; mientras que, después que el intestino es limpiado, la comida es fácilmente asimilada y una persona puede sostenerse con aproximadamente una tercera parte de la cantidad de comida que actualmente consume con 4 o 5 veces más fortaleza, vitalidad y vida.

En este momento, el cuerpo limpio esta apto para asimilar normalmente los simples valores nutritivos a través de la estructura celular del colon en lugar de ser atrapado en una masa de desperdicio e inhibido por la dura capa fecal formada en las paredes del intestino, donde la mayor parte de las sustancias nutritivas son empujadas y eliminadas antes que pueda absorvida. Cuando el cuerpo está absolutamente limpio, estas ayudas no serán necesarias, entonces "su comida será su medicina y su medicina será su comida". Nombre: **Fen LB**

**2. Formula purificadora de la sangre.** La corriente sanguínea es la "vida misma", y es nuestra misión mantenerla limpia y pura de tal forma que podamos tener un buen sistema circulatorio que lleve la comida (los nutrientes) a todo el cuerpo y que transporte las materias residuales para su futura eliminación.

Una buena purificación de la sangre junto con la limpieza del colon, forman una maravillosa combinación. Estos dos, con una buena dieta sin mucosidad, puede revitalizar el cuerpo y agregar muchos años de vida saludable.

Este reconstituyente de la sangre es hecho a base de trebol rojo, gobernadora, regaliz, la corteza de durazno, etc., algunas son hierbas que limpian y dan astringencia, otras que remueven el colesterol, matan infecciones, o edifican elasticidad en las venas y fortalecen las paredes de las venas y las arterias. Use dos cápsulas 3 veces al día, 6 días a la semana, semana tras semana hasta que la corriente sanguínea fluya como debe, brindando salud y energía. Nombre: **Red Clover Combination**.

**3. Fórmula para el mal funcionamiento del hígado y la vesícula.** Para acelerar el proceso de

purificación de la sangre, es bueno tener el hígado y el área de la vesícula bien limpios. Cuando el hígado no funciona apropiadamente, la bilis no es escretada libremente en la región intestinal, y ésta circula dentro del torrente sanguíneo y a través del resto del sistema, causando una condición tóxica llamada "Colemia", que causa indigestión, inactividad, fatiga, estreñimiento, escalofríos, vómitos y fiebre. Por qué esperar hasta estar en esta condición? Esta combinación es a base de berberis, camote silvestre, jengibre, menta, etc. Dosis sugerida: 1-2 cápsulas 15 a 20 minutos antes de las comidas. Nombre: **Barberry LG**

**4. Fórmula para el mal funcionamiento de los riñones.** Aproximadamente 80% de nuestro cuerpo es líquido, y mucho de este fluido debe ser bombeado, filtrado, etc. a través del sistema urinario de la persona. Generalmente no tomamos el mejor cuidado de esta delicada parte de nuestro cuerpo. A través de este sistema circula materias irritantes y del tipo de materias que obstruyen la circulación como el té, el café, las bebidas gaseosas, el agua dura, el alcohol, etc.

Por años hemos usado esta fórmula de plantas con personas que tenían miedo estar en público, por causa de la falta de control del sistema urinario y que les hacia orinar sin su conocimiento.

Después de usar esta fórmula, muchas personas han encontrado alivio y están viviendo vidas normales nuevamente. Esta compuesta por perejil, nebrina, malvavisco, entre otros. Dosis sugerida: 2 cápsulas en la mañana y en la noche con una taza de té de perejil (preferiblemente). Nombre: **Juni-Pars**

**5. Para más severos casos de incontinencia.** Esta fórmula es específicamente para la incontinencia y para fortalecer el entero canal de la uretra, los riñones, la vejiga, etc. Dosis sugerida: 2 cápsulas en la mañana y en la noche con una taza de té de perejil (Preferiblemente).

Al retirarse a dormir ajuste una bola de 6 a 8 pulgadas de pita o tela en su ropa de dormir en el medio de la espalda. Esto es con el propósito de evitar que la persona duerma recostado en la espalda (boca arriba), ya que es así cuando se abren las válvulas que permiten el orinar. Nombre: **DRI, Kid-e-Dry.**

**6. Fórmula para el corazón.** El corazón es el motor que nos dá la vida, que cuando no está propiamente alimentado (con alimentos naturales) sufre de mal funcionamiento (debilidad y ataques cardíacos) causando fallas en el corazón, que es uno de los mas grandes "asesinos" en el mundo. La dieta sin mucosidad usado por un buen período de tiempo rehabilitará el corazón recuperando su fortaleza, pero si éste, sus válvulas y otras partes se encuentran en una condición débil y necesita una ayuda rápida, use el fantástico "tónico para el corazón" para ayudar a su restablecimiento. Esta comida es la fruta del espinillo blanco (*Crataegus oxycantha*, linn.).

Tomando como referencia el libro "Potter's Cyclopaedia of Botanical Drugs and Preparations," una de las antiguas impresiones hechas en Inglaterra (publicado por Potter and Clarke, Ltd., 60 Artillery Lane, London), encontramos que ésta lista a la fruta del espinillo blanco como un tónico "cardíaco". Esta planta es aclamada como un remedio muy curativo para los desórdenes orgánicos y funcionales del corazón, como la arritmia, el rápido o débil trabajo del corazón, la hipertrofia (insuficiencia valvular) y opresión en el corazón.

El jarabe de la fruta del espinillo blanco es hecho con esta fruta concentrada usando brandy de uva y glicerina como ayuda y preservante. La dosis recomendada es 1/2 cucharita 3 veces al día. Si sufre repentinamente de todos los síntomas del inicio de un ataque cardíaco o, durante éste, una cucharita de cayenne en una tasa de agua caliente y tomado rápidamente, ha salvado muchas vidas. Nombre: **Hawthorne Berry Syrup.**

**7. Ayuda para el páncreas.** Esta fórmula ayuda al páncreas y otras glándulas afiliadas que a través de su mal funcionamiento causa el alto o bajo nivel de azúcar en la sangre (diabetes o hipoglucemia). Esta combinación ha ayudado a muchos que han tenido hipoglucemia, después de 6 ó más meses de tomar 2 ó 3 cápsulas 3 veces al día, 6 días a la semana. (Todas las plantas medicinales dan resultados más rápidos en 6 días a la semana en lugar de siete, usando el mismo

día de la semana para descansar). Aquellos que han usado esta fórmula han tenido un test de tolerancia de la glucosa obteniendo un claro reporte de salud del páncreas.

Hay reportes de personas que usaban alta dosis de insulina, que aunque continúan usándola, la dosis ha decrecido considerablemente, y muchos, después de usar la fórmula por un año, siguiendo la dosis sugerida anteriormente, han conseguido una cura completa. Por supuesto, cuanto más cerca se permanezca de la dieta sin mucosidad y se elimine de las comidas el azúcar refinado, bebidas gaseosas, caramelos, pasteles, etc., los resultados se notarán más rápidamente.

Name: **Panc Tea**.

#### 8. **Fórmula de Calcio.** Maravillosa cápsula de calcio natural a base de horsetail (cola de caballo).

Como se explica en el libro "Transmutación Biológica", la sílica en la cola de caballo se convierte en calcio y las otras plantas de la fórmula trabajan en combinación con ésta que es "master" en calcio. Necesitamos calcio para la capa que cubre los nervios, para las paredes de las venas y las arterias, huesos, dientes, etc. esta combinación es de puras plantas naturales. Niños con dientes torcidos y apiñados que más tarde tienen que sacarle la muela del juicio por tener la mandíbula muy angosta, están necesitando calcio en el cuerpo. La mujer embarazada aumenta su capacidad de captar la cantidad de calcio necesaria, ahora para dos personas, así como para edificar en el bebe una buena mandíbula y un buen material para los dientes. Azúcar, pasteles, gaseosas y bebidas alcohólicas, caramelos, etc. roban el calcio del cuerpo, causando varices, calambres, dientes flojos, nerviosismo, etc. Nombre: **Calc Tea, Kid-e-Calc**.

9. **Fórmula para la alergia, sinusitis, alergias al polen y fiebre del heno.** Esta fórmula es una gran ayuda para el aclaramiento de estas enfermedades, una "natural ayuda herbolaria" que trabaja como un descogestionante y antihistamínico que limpia la zona sinusoidal, eliminando de la cabeza, los tubos y pasajes broncopulmonares los molestos obstáculos y mucosa. Esta fórmula consiste de té mormón, malvavisco, gobernadora, perejil, etc.

Para acelerar el proceso de limpieza, use la siguiente combinación en adición a la anterior,: corte la raíz de un rabano picante fresco en pequeños pedazos y licúelo con vinagre de cidra de manzana formando una pulpa espesa, y "chúpelo" completamente antes de pasarlo. Tome 1/3 de cucharita 3 veces al día. Cada 3 días aumente esta cantidad desde 1/3 hasta 1 cucharita, incrementando la cantidad 1/3 de cucharita cada 3 días. Nombre: **SHA Tea**

10. **Fórmula para la circulación de la sangre.** Esta fórmula es dada para ayudar a los purificadores de la sangre a trabajar más eficientemente y también para ayudar a curar alergias, etc. Este grupo de plantas alimentan el sistema circulatorio con cayenne y jengibre (estimulantes) donde el cayenne trabaja en el torrente sanguíneo desde el corazón y las arterias saliendo hacia las venas. Las otras plantas de la fórmula ayudan a estas dos a trabajar juntas para normalizar la presión de la sangre (si es alta o baja) y para obtener una buena lectura del sístole sobre el diástole. La corriente sanguínea es vida misma. Nombre: **BPE**.

11. **Fórmula contra la obesidad.** Combine esta fórmula con la dieta sin mucosidad y usted será un triunfador seguro. Este no es un programa espectacular de rápida pérdida de peso, sino, que sus resultados serán graduales y precisos, sin robar al cuerpo las sustancias nutritivas que necesita, como muchas de otras dietas de moda en estos días lo hacen. Esta fórmula actúa como un purificador de la sangre que ayuda a los riñones a aliviar el exceso de líquido, alimenta al cuerpo para el alivio de las tensiones nerviosas generalmente causadas por las dietas, apacigua el excesivo apetito, alimenta la tiroides y otras glándulas que no están funcionando bien y, además, logra una condición más saludable del cuerpo por el hecho de mantener un buen control del peso. Tome 2 a 3 cápsulas en las mañanas y en las noches con una tasa de té de morgalina (chickweed). Esta fórmula esta compuesta de morgalina, bardana, regaliz, perejil, kelp, etc. Nombre: **CSK**.

12. **Fórmula para el mal funcionamiento de los ganglios.** Debido a la acumulación de residuos

tóxicos en el cuerpo por la impropia alimentación, al pobre torrente sanguíneo y a la lenta circulación de la sangre, los ganglios se congestionan y llegan a inflamarse e infectarse causando mucho dolor. (Hay ganglios en el cuello, pecho, ingle, axilas, etc. que pueden llegar a inflamarse). Esta fórmula puede ser usada para curar mastitis, mal funcionamiento de la tiroides, etc. Dosis sugerida: 2 cápsulas con una tasa de agua destilada. Nombre: **Mullein and Lobelia**.

**13. Fórmula para los nervios.** Esta es una fórmula que hemos usado con mucho éxito por cerca de 30 años y es recomendada para curar la tensión nerviosa e insomnio. Es un estimulante suave que reduce la irritabilidad y el excitamiento del sistema nervioso, y también reduce o elimina dolores. Esta fórmula contiene plantas que alimenta y revitalizan el nervio motor en la base del cerebro (área medular y cervicales superiores) y también contiene plantas que ayudan a reedificar y alimentar la espina dorsal. Esta fórmula reedificará también las capas protectoras de los nervios que se encuentran desgastadas, el nervio mismo y sus capilares. Hecha en base de valeriana, lupulo, etc. Dosis sugerida: 2-3 cápsulas 3 veces al día en una tasa de jugo de apio o de agua destilada. Nombre: **Relax-Eze**.

**14. Fórmula para el dolor y la pérdida del oído.** Cuando esta fórmula es usada como se explica aquí, puede ser una gran ayuda para curar la falta de equilibrio, problemas para oír, para ayudar al nervio motor, etc. Usando un gotero, por las noches, echarse de 4 a 6 gotas de aceite de ajo y 4 a 6 gotas de B&B a cada oído y taparlos con algodón. Hacer esto 6 días a la semana, de 4 a 6 meses o cuanto se necesite. En el séptimo día lavar los oídos con una pequeña jeringa usando vinagre de manzana tibia y agua en proporciones iguales. Esta fórmula es hecha a base de lobelia y escutellaria entre otras plantas. Nombre: **B&B extracto y Oil of Garlic**.

**15. Fórmula para los pulmones y el sistema respiratorio.** Esta combinación es usada como una ayuda para curar la irritación en el sistema respiratorio, pulmones y bronquios. Es una ayuda para curar enfisemas, así como para otras congestiones de los bronquios y pulmones como bronquitis, asma, tuberculosis, etc. Esta fórmula es muy valiosa para el fortalecimiento y curación del sistema respiratorio completo. Ayuda a la descarga de las secreciones mucosas de los pasajes bronco-pulmonares. La dosis sugerida para adultos: 2 a 3 cápsulas 2 ó 3 veces al día con una tasa de consuelda (comfrey). Esta fórmula es a base de consuelda, verbasco, lobelia, etc. Nombre: **Resp-Free**.

**16. Fórmula para los resfríos e infecciones.** Esta fórmula es una combinación de ajo, perejil, berro, etc. que actúa como una ayuda para los tiempos de resfrío o para cada vez el ajo sea necesitado para detener cualquier infección. La dosis para un adulto varía de 2 ó más cápsulas 6 ó más veces por día tomado con una tasa de agua destilada. Nombre: **Garlic, Rosehips & Parsley**.

**17. Fórmula para ayudar a la eliminación los parásitos intestinales.** Esta combinación es a base de ajeno, hinojo, y papaya entre otras plantas. Actúa como un vermífugo (combinación que causará la expulsión de gusanos y parásitos del cuerpo) y/o como vermífugo (agente que destruye los gusanos y parásitos dentro del cuerpo). La dosis sugerida es tomar una cucharadita cada mañana y cada noche por 3 días. En el cuarto día tomar una tasa de té de sena y menta. Descansar dos días y repetir el proceso dos veces más. Nombre: **VF syrup**.

**18. Fórmula para ayudar a las encías.** Esta combinación consiste de encina blanca, consuelda, cola de caballo, lobelia, etc., y es usada para fortalecer las encías (encías sangrantes y el tipo de infecciones causadas por piorrea), y ayuda al fortalecimiento de dientes flojos. Este tipo de polvo dará más brillo a los dientes promoviendo una boca más saludable. Para casos severos coloque esta combinación en polvo entre los labios y las encías (superior e inferior) en el área de los dientes y déjelo allí cada noche durante 6 días a la semana (así como el cepillado regular de los dientes) hasta que el mejoramiento sea evidente. Entonces continúe con el cepillado regular de

los dientes usando esta combinación. Nombre: **Herbal Tooth Powder**.

**19. Composición de plantas en polvo.** Consiste de arrayán, clavo de olor, pino blanco, etc. Como es mencionado por el Dr. Nowell, nuestro instructor en Dominion Herbal College, Ltd of Vancouver, British Columbia, en nuestro libro de texto:

"Nosotros hemos hecho y usado esta composición de plantas en polvo por más de 40 años.

Cuando decimos que regularmente mezclabamos estas plantas en lotes de 60 libras (aprox. 28 kilos) los alumnos rápidamente verán que, al menos hemos tenido cierta experiencia en ésto. Es un remedio para resfríos, principios de fiebre, gripe, ronquera, circulación lenta, cólicos, retorcijones, etc. Creemos que esta fórmula ha hecho más bien al género humano que cualquier otra preparación conocida de plantas individuales.

"Si esta combinación se tuviera en cada hogar, y se usara cada vez que la ocasión se presentara, habrían mucho menos personas enfermas en este mundo. Ofrezca esta composición libremente y sus pacientes le bendecirán. Observe los ingredientes y considere como éstos limpiarán las llagas ulcerosas y grangenosas, relajará los retorcijones y calambres y dolores de estomago e intestinos, subirá el calor del cuerpo equalizando la circulación, y removiendo congestiones. Esto es seguro.

Este es efectivo. Nosotros, en innumerables ocasiones, hemos dado una tasa de esta composición cada hora, tan caliente como el paciente puede tomar, hasta que ha empezado a transpirar libremente, y después de 4 a 5 dosis hemos visto a nuestros pacientes con una libre transpiración y, de este modo, removiendo gripes, resfríos y problemas de fiebre." (Traducción). Nombre: **Herbal Composition**.

**20. Combinación para el enjuague de los ojos.** Esta fórmula es excelente para mejorar el brillo y curar los ojos, y es conocida porque remueve las cataratas y gruesas capas de carnosidad. Está compuesto por arrayán, cayenne, eufrasia, etc. Haga esto en forma de té y póngalo en una pequeña tasa de vidrio para enjuagar los ojos. Habrá una ligera sensación de ardor al principio, debido al cayenne, pero no hay nada porque temer. Tire su cabeza hacia atrás y aplíquelo en el ojo. Abra el ojo cuando haga ésto, como si estuviera bajo el agua. Hágalo 3 a 6 veces al día. Tome 1/2 tasa de este té en la mañana y en la noche. Puede tomar también 2 cápsulas 3 veces al día para un resultado más rápido. Nombre: **Herbal Eyebright**.

**21. Combinación para ayudar al órgano reproductivo femenino.** Esta es una asombrosa combinación que ayudará a reconstituir a un sistema reproductivo que no esté trabajando apropiadamente (útero, ovario, trompas del falopio, etc.). A través de los años de herbalistas y los pacientes han sido testigos de dolorosas menstruaciones, pesado fluido, retorcijones, espasmos, irregularidad, etc. que han sido curados. El paciente tiene ahora una menstruación sin dolor, regular y una nueva perspectiva de la vida, gracias a la ayuda de esta combinación que reajusta las áreas que no funcionan debidamente. Esta ayuda correctiva para las mujeres es hecha a base de sello dorado, cardo bendito, jengibre, unicornio falso, etc. El uso sugerido es: 2 cápsulas en las mañanas y en las noches ó 3 veces al día si se desea, 6 días a la semana, por el tiempo necesario para obtener el resultado requerido. Nosotros hemos visto muchos casos severos con muchos años de sufrimiento, aliviarse en 90 a 120 días. Algunos se curan mas rápido, otros mas lento. Nunca se encontraran dos casos iguales. Nombre: **Nu-Fem**.

**22. Combinación para ayudar a la próstata.** En casos de mal funcionamiento, sugerimos esta combinación de cayenne, jengibre, ginseng, nebrina, entre, otros. Esta ayudará a disolver las piedras en los riñones, así como limpiará otras sedimentaciones e infecciones en la próstata.

Tome dos o más cápsulas en las mañanas y las noches, con té de perejil si es posible. Nombre: **Prospallate**.

**23. Combinación para ayudar a las hormonas masculinas y femeninas.** Estas son comidas de hierbas naturales que son necesitadas por hombres y mujeres de todas las edades. Siendo hierbas

"naturales" el cuerpo puede aceptar, asimilar y usar estos materiales que son necesitados para producir estrógenos y otras hormonas en una forma natural. Esta fórmula ayudará a reconstruir las áreas débiles de mal funcionamiento y ayudará a mantener los órganos saludables de tal forma que puedan abastecer la apropiada cantidad de hormonas y estrógenos por ellos mismos. Los tiempos críticos cuando esta fórmula es necesaria son en los tiempos del inicio de la pubertad, durante el embarazo, durante las semanas y a veces meses después de dar a luz, y durante la menopausia. Las plantas son alimentos naturales, por lo tanto ellos no crean "efectos secundarios" ni "efectos retardados" como evidentemente sucede en los casos de las drogas sintéticas hechas por el hombre. Esta fórmula contiene entre otros el cohosh negro, ginseng, sarsaparilla, unicornio falso, etc.

Cada vez que un mal funcionamiento se presenta tanto en la mujer como el hombre, es bueno usar las siguientes fórmulas juntas, No.21 y No.23 para las mujeres y No.22 y No.23 para los hombres. Nombre: **Changease**.

**24. El bolo vaginal o rectal.** Esta es otra excelente ayuda para la mujer (o bolo rectal para el hombre) que tienen problemas en las áreas reproductivas. Los bolos son hechos con plantas curativas que (1) eliminan las toxinas y venenos del cuerpo, (2) ayudan a convertir las áreas de mal funcionamiento en áreas saludables, de tal manera que quistes, tumores y condiciones cancerosas no tendrán despojos o materia decadente en los cuales puedan vivir, ya que todos ellos son "animales de carroña." Herbalistas que usan esta fórmula han encontrado que estas "rapiñas" serán descargados dentro del sistema sanguíneo para ser luego eliminados, si el programa es seguido con fé. (3) Los bolos extienden la influencia de estas plantas ampliamente desde la vagina o intestinos a través de todo el sistema urinario y órganos genitales. La fórmula consiste entre otros de consuelda, squawvine, barbana amarilla, malvavisco, etc. Todas estas plantas son en forma de polvo. Mantequilla de cocoa deberá ser derretida de tal forma que sea mezclada con nuestra combinación en polvo. Mezcle una pequeña cantidad de este polvo con la mantequilla de cocoa derretida hasta darle consistencia. Entonces amase la masa entre sus manos hasta darle la forma de un lápiz de un grosor aproximado del de un dedo medio y de 2.5 cm. largo. Endúrelo en el refrigerador. Entonces esto debe ser introducido en la vagina o en el recto en la misma forma que los supositorios. Será necesario usar una toalla o papel sanitario para mantener el bolo en la vagina o el recto. Inserte el bolo al retirarse a dormir y déjelo allí toda la noche, 6 noches a la semana. La mantequilla de cocoa se derretirá a la temperatura del cuerpo, dejando las plantas solas, la cual será fácil de lavarse. La siguiente mañana use la rutina de la fórmula No. 25. Nombre: **VB**.

**25. Combinación de la tabla inclinada.** Para dar alivio en casos de úteros prolapsados, intestinos y otros órganos, haga un té concentrado (caliente la combinación hasta que se obtenga la mitad de la cantidad inicial) de esta fórmula a base de pino blanco, consuelda, malvavisco, lobelia entre otros. Inyéctelo con una jeringa (mientras se está con la cabeza hacia abajo en una tabla inclinada) dentro de la vagina, 1/4 ó 1/2 de tasa o más; o una tasa o más en el recto, para problemas de prolapso o hemorroides, manteniéndolo dentro todo el tiempo que sea posible antes de evacuarlo. La dosis sugerida es 1/4 a 1 tasa una o más veces al día, y tome 1/4 de tasa de la combinación en tres cuartos de agua destilada 3 veces al día. Cuando el té es inyectado dentro del área abdominal y mientras se encuentre en la tabla inclinada, sobar y masajear la pelvis y el abdomen para ejercitar los músculos, de tal forma que el té sea asimilado por los órganos. Nombre: **Yellow Dock Combination**.

**26. Combinación para evitar la pérdida en el embarazo.** Esta consiste de dos hierbas (Unicornio falso y lobelia). A menos que se indique de otra forma, el té son siempre preparados con una cucharadita de hierba en una tasa de agua destilada. Si se presenta hemorragia durante el embarazo entonces use 1/2 tasa de este té cada media hora hasta que la hemorragia desaparezca, entonces use 1/2 tasa cada hora de vigilia durante todo el día, tratando de permanecer en cama lo máximo posible; y luego 3 veces al día durante tres semanas. Si la hemorragia continúa en lugar de decrecer, vea a un doctor. Nombre: **False Unicorn & Lobelia**.

**27. Fórmula pre-natal.** El uso de 2 ó 3 cápsulas en las mañanas y en las noches ayudará a dar elasticidad a la pelvis y el area vaginal, y fortalecerá los órganos reproductivos para un más fácil alumbramiento. Esta fórmula debe ser usada solamente en las últimas 6 semanas del embarazo. Las plantas usadas son entre otras, squawvine, cardo santo, unicornio falso, lobelia, etc. Nombre: **Pre-Natal Tea.**

**28. Combinación para los huesos, piel y los cartílagos.** Esta es una ayuda para el mal funcionamiento de los huesos, la carne y los cartílagos, y es excelente para venas varicosas, torceduras, curvatura de la espina dorsal, erupciones en la piel, coágulos de sangre, protuberancias producidas por calcio, etc. Haga un té de esta combinación hecha de pino blanco, malvavisco, consuelda, ajeno, etc. Ponga la combinación en una olla con agua destilada (a la proporción de 1 oz de la combinación por cada 16 oz de agua destilada) y déjelo remojar por 4 a 6 horas, caliéntelo a fuego lento por 30 minutos, cuélelo y entonces caliéntelo nuevamente, también a fuego lento, hasta que obtenga la mitad de la cantidad inicial del líquido y agregue 1/4 de glicerina vegetal (si desea).

Remoje una tela de algodón o franela en la mezcla (nunca use material sintético) y aplique la fomentación alrededor de la zona en problema y cúbralo con plástico para evitar que se seque rápidamente. Déjelo allí cada noche 6 veces a la semana, semana tras semana, hasta que se obtenga el alivio deseado.

Para casos severos: Tome 1/4 de tasa de este té concentrado con 3/4 de tasa de agua destilada tres veces al día. También puede tomar 2 cápsulas tres veces al día o usar en forma de unguento. Nombre: **BF&C.**

**29. Fórmula para el acondicionamiento del cabello.** Cada día como una ayuda para reestimar el crecimiento del cabello y durante 2 días, masajee el cuero cabelludo profundamente con aceite de ricino tibio, aplicando sobre la cabeza una toalla mojada con agua caliente por el espacio de 30 ó más minutos. Permanezca con el aceite durante toda la noche. Al día siguiente lávese la cabeza con un buen jabon bio-degradable y enjuégese. Repita el lavado y enjuégese nuevamente con esta combinación (que contiene entre otros gobernadora, salvia, etc.). No se enjuague esta vez, sino déjelo en el cabello y el cuero cabelludo (y masajee bien). Las siguientes dos noches use aceite de germen de trigo. Descanse una noche y repita el proceso por 6 días a la semana cuantas veces necesite. Tome 1 ó 2 cucharadas de aceite de germen de trigo en las mananas y en las noches, y ademas tome 1/4 de tasa de té de esta combinación hecha con agua destilada, 2 veces al día. Nombre: **Desert Herb Combination.**

**30. Combinación para artritis y reumatismo.** Esta fórmula consiste de hortencia, té mormón, yuca, gobernadora, entre otras plantas, y es una combinación que desintoxica; actúa como un solvente para los aceptados, pero no asimilados depósitos de calcio, plantas que alivian el dolor, ricas en nuevo y aceptable calcio orgánico que puede ser asimilado y usado útilmente; plantas que matan los hongos y la infección y que tiene la habilidad de dar un maravilloso alivio. Este alivio no es inmediato porque aquí se requiere un largo trabajo de reconstitución; el alivio vendrá gradualmente hasta lograr una total curación, pero sólo si usted sigue el programa con fé: 2 cápsulas con una tasa de té mormón 2 o 3 veces al día. Use como una fomentación caliente sobre las zonas tullidas y de extremo dolor (además de esta fórmula) la fórmula No. 28 llamada BF&C. O usarla en forma de unguento. También tome 2 o 4 tasas de la cascara del frejo, diariamente. Además, para un alivio del dolor mas rápido, recomendamos la aplicación externa de la fórmula #44 (Profeso Cayenne). Sin embargo, si Usted continúa con una dieta inapropiada, estas ayudas no darán efecto en la misma forma que si usted sigue las recomendaciones dadas en este libro. Recuerde que las enseñanzas que hemos recibido por años han sido "No hay cura para este caso..." Nosotros estamos dándole esperanzas, pero sólo si Usted sigue con la dieta sin mucosidad y usa estas combinaciones de plantas. Nombre: **AR-1.**

**31. Fórmula para las infecciones.** Esta fórmula es hecha con llantén, malvavisco, lobelia, nogal

negro, etc. Esta maravillosa fórmula mata la infección, elimina las toxinas del sistema linfático, y es un agente natural contra las infecciones. Nombre: **INF**.

**32. Combinación de kelp (alga marina).** Este es una ayuda para las tiroides y los ganglios. Este grupo de plantas ayuda a controlar el metabolismo y alimenta a la glándula tiroides para hacer su trabajo más eficiente. Es una ayuda glandular muy fina y eficiente. Está compuesta entre otros por perejil, berro, kelp o alga marina, etc. Uselo con la fórmula No. 11. Nombre: **Kelp-T Comb.**

**33. Extracto Antiespasmódico.** Consiste de escutelaria, lobelia, cayenne, valeriana, mirra, entre otros. Es para ser usado en casos de convulsiones, desvanecimientos, calambres y retortijones, temblores por delirio, histerias, etc. Es también bueno para diarrea, llagas en la boca, infecciones a la garganta, amigdalitis, etc. La dosis es 1/2 a 1 cucharita en un vaso de agua destilada para hacer gárgaras hasta que el dolor en la garganta desaparezca, también tome una cucharita en agua destilada hervida en las mañanas y en las noches. Nombre: **ANTSP.**

**34. Extract hecho de escutelaria, verbena azul, cohosh negro, entre otros.** Esto es usado en condiciones de nervios alterados, dolor de garganta, hipo y es una gran ayuda para restaurar el mal funcionamiento del nervio motor y asistir en el arreglo de pobre equilibrio y capacidad de oír, y además es una gran bendición para los epilépticos. Masajee este extracto en la médula (la base del cráneo) y en las cervicales superiores, siga las instrucciones en la formula 14, y tome de 6 a 10 gotas en un poco de agua o jugo 2 a 3 veces al día. Nombre: **B&B.**

**35. Fórmula para el alivio de dolores menores.** Esta es una fórmula que consiste de lechuga silvestre y valeriana. Es para ser tomado oralmente o masajeadó externamente para aliviar el dolor. Este es un sedante natural, suave y calmo para los nervios. Nombre: **Wild lettuce & Valerian.**

**36. Fórmula para el asma.** Puede ser usado para dolores de garganta y mucosidad. Excelente para luchar contra las toxinas. Es hecha de verbasco y ajo en base de glicerina vegetal. El uso recomendado es una cucharita o más, tantas veces como se necesite. Nombre: **CMG Syrup.**

**37. Antigua combinación para la tos.** Hecho con cebolla fresca, miel y glicerina vegetal. Uso sugerido: una cucharita o más, tantas veces como se necesite. Nombre: **Cough Syrup.**

**38. Unguento "Negro".** Un excelente unguento que saca el problema hacia la superficie. Para el uso externo en llagas antiguas, tumores, erupciones, verrugas, cáncer a la piel, hemorroides, excelente para quemaduras y como agente curativo. Es hecho con gobernadora, consuelda, trébol rojo, raíz del carmín, etc. Nombre: **Black Ointment.**

**39. Unguento curativo.** Hecho de consuelda, malavisco y aceites, es antiséptico que se usa en lesiones, eczema, hiedra venenosa, para aliviar superficies inflamadas, raspaduras, quemaduras, hemorroides, torceduras e inflamaciones. Bueno para tenerlo a la mano todo el tiempo. Nombre: **CMM Ointment.**

**40. Unguento de morgelina.** Esta hecho a base de morgelina y aceites. Excelente para eczema y/u otras infecciones en la piel, llagas, quemaduras, picazón en la piel o en los genitales, testículos inflamados, acné, urticaria, y también para ulceraciones en la boca y la garganta. Este es un maravilloso y curativo unguento. Nombre: **Chickweed Ointment.**

41. **Unguento para la nariz.** Hecho con yerba buena, menta y baselina, es un antihistamínico natural. Aplicar en la parte interna de la nariz cuando ésta esté congestionada, seca, sensitiva o rajada. Nombre: **Nose Ointment**.

42. **Extracto de nebeda e hinojo.** Una bendición para los niños. Una fina combinación para cólicos, biliosidad, flatulencia, espasmos, etc. Use unas cuantas gotas, o cuanto se necesite, cuando lo desee. Nombre: **Catnip & Fennel Extract, Kid-e-Col**.

43. **Extracto de nogal negro.** Este es uno de los mejores remedios para hongos. Use externamente y frecuentemente. Nombre: **Black Walnut Extract**.

44. **Unguento del Profesor Cayenne.** Este penetrante unguento contiene aceite de olivio, cayenne, aceites, menthol, etc. Es excelente para torticolis, músculos doloridos, dolores de cabeza, dolor en las coyunturas, artritis, etc. Nombre: **Deep Heating Balm**.

45. **Extracto antiséptico.** Este extracto es bueno para infecciones externas e internas. Es a base de roble blanco, mirra, sello dorado, consuelda entre otros en base de alcohol. Nombre: **X-ceptic**.

46. **Combinación para eliminar minerales pesados.** Contiene lobelia y bardana amarilla. Esta es una fórmula para combatir contaminación, externas e internas. Esto ayuda a eliminar minerales pesados, drogas, y otros contaminantes atrapados en nuestro sistema. La dosis es tomar 2 cápsulas diarias juntamente con cápsulas de gobernadora, 3 veces al día. Nombres: **Bugleweed Combination, Bugle Dock**.

47. **Fórmula para las suprarrenales.** Contiene verbasco, lobelia, ginseng, jengibre, etc. Esta fórmula corrige cualquier desbalance en las glándulas suprarrenales y también compensa cualquier presión ubicada en el corazón. Nombre: **Adrenetone**.

48. **Fórmula para la colitis.** Contiene malvavisco, consuelda, lobelia, jengibre, etc. Esta fórmula es para elivio de la colitis, y puede ser usado juntamente con la fórmula para el intestino grueso (Fen LB) y la dieta sin mucosidad. Nombre: **CC**.

49. **Fórmula para las úlceras.** Contiene arrayán, morgelina o pamplina, verbasco, etc. Esta fórmula es usada para aliviar las disconformidades causadas por las úlceras en el estómago y debería ser tomada con té de lúpulo o manzanilla. Tome nota de lo siguiente: para curar las úlceras, tome 3 cucharitas de cayenne al día. Este cayenne puede ser mezclado con agua o jugo de tomate. Es recomendado empezar con 1/8 de cucharita 3 veces al día, y entonces aumentar hasta lograr una cucharita 3 veces al día. Nombre: **ULC**.

50. **Fórmula para los gases.** Contiene hinojo, camote silvestre, jengibre, menta, etc. Esta fórmula es designada para aliviar la flatulencia. Nombre: **AT-GS**.

51. **Unguento de BF&C.** Esta es la fórmula No.28 en forma de unguento. Es hecho usando aceite de olivio en una base de cera de abeja. Nombre: **BF&C Ointment**.

52. **Anti-Plaga.** El mejor remedio para resfríos, gripe o cualquier enfermedad contagiosa. Esta fórmula fortalece y estimula el sistema inmunológico y puede ser usado como tónico preventivo usando 1 cucharita de este jarabe por día. Si existe infección cambiar la dosis a una cucharada cada hora. Este jarabe contiene ajo fresco, raíz de consueta fresca, berro, malavisco, escutelarias, entre otros. Nombre: **Anti-Plague.**

53. **Fórmula para aliviar llagas en la boca.** Esta fórmula en extracto es tomado oralmente en la cantidad de 2 goteros llenos 3 veces al día, aplicado localmente. Contiene ajo, escutelaria y sello dorado en base de alcohol. Nombre: **CSR.**

54. **Formula para estimular el sistema inmunológico.** Esta fórmula está diseñada para incrementar la habilidad del cuerpo de prevenir la propagación de bacterias y virus. Consiste de Echinacea, calendula y la flor del trebol rojo (obtenible en base de alcohol o glicerina para niños). Nombres: **Imunacea extract, Kid-e-Mune.**

55. **Formula para calmar el sistema inmunológico.** Está diseñada para calmar y fortalecer las respuestas inmunológicas del cuerpo. Muchas veces creemos que somos alérgicos a ciertos alimentos, plantas o animales, pero en realidad, es nuestro sistema inmunológico que está sobreactuando. Esta simple combinación de la raíces del malvavisco y el astrágalo ha ayudado a muchos que sufren de alergias, fiebre del heno, asma, artritis reumática o cualquier enfermedad que muestre una hiperactividad en la respuesta del sistema inmunológico. Nombres: **Immucalm, Kid-e-Soothe.**

56. **Fórmula para la Memoria.** Una gran combinación de yerbas muy reconocidas, usadas para limpiar, edificar e incrementar la circulación en el cerebro. Consiste de: Vervena azul, Gotu kola, Te Mormón, el cardo bendito, la cayena, el jengibre y la lobelia. Nombre: **Mem.**

57. **Fórmula fuente de vitaminas y minerales.** Balanceado por la naturaleza, suplemento alimenticio integral y altamente nutritivo. Esta combinación de diente de león, kelpo, purple dulce, espirulina, irish moss, bulbo de la rosa, remolacha, cayena, entre otros, está suplementada con el jugo deshidratado y pulverizado de la alfalfa, la cebada y kamut (trigo no híbrido) bajo el proceso llamado "Quick Dried" para concentrar las vitaminas y minerales de estos tres super alimentos. Al final tenemos una fuente de vitaminas y minerales fácilmente asimilable, ya que esta compuesto de elementos orgánicos científicamente balanceados por nuestra madre naturaleza. Nombre: **Vitalerbs, Kid-e-Mins.**

58. **Fórmula para sinusoides congestionados.** Esta poderosa fórmula consiste de Te Mormón, rábano picante y cayena. Para un alivio inmediato de presión senovial debido a resfríos o alergias, usar 20 gotas (1/4 de cucharita) en 1/4 de tasa con agua caliente. Debe tomarse cada media hora. Nombre: **Ephedratean.**

59. **Unguento rubefaciente.** Como lo indica su nombre, este unguento produce circulación en la superficie de la piel causando un color rojo en éste. Usado para aliviar tensión y presión. Excelente para dolor de cabeza por tensión o presión senovial. Uselo poco a poco ya que esta fórmula es muy potente. Contiene: Aceite de Olivo y aceites naturales de canela, eucalipto, cajeput y cristales de mentol puro y alcanfor y otros aceites de fragancias naturales. Nombre: **Sen Sei Balm.**

60. **Combinación verde:** Una mezcla de Alfalfa, paja de cebada y de Kamut (trigo no híbrido) que

han crecido orgánicamente en un terreno virgen separados de los agentes contaminantes urbanos y agrícolas por las mismas montañas que proveen su fuente de agua. Estas yerbas reducen acidez, proveen de la necesitada clorofila, así como de los nutrientes integrales que el cuerpo necesita.

Nombre: **Jurassic Green**.

61. **Combinación para Energía.** En lugar de ser una fórmula que provoca un súbito y no natural golpe de energía, esta combinación de Ginsén Siberiano, pólen de abeja, la raíz del regaliz, gotu kola, yerba mate y la raíz del jengibre, provee energía y vitalidad a través de nutrición integral. La energía adquirida será más constante y duradera. Nombre: **Bee Power**.

62. **Fórmula para Claridad Emocional.** Esta combinación de escutelaria, extracto de valeriana, Uva de Oregon, Jurassic Green (Alfalfa, Cebada y Kamut), extracto de Hiperico (St. John's Wort), Verbasco, Lobelia, Gotu Kola, Sarsaparilla y Diente de León, provee de los nutrientes necesarios para ayudar al cuerpo y a la mente a reaccionar equilibrada y saludablemente en momentos de tensión emocional como depresión, ansiedad y trauma. Nombre: **MindTrac, Kid-e-Trac**.

63. **Fórmula para la Glándula Pituitaria.** Esta fórmula es para el mal funcionamiento de la glándula pituitaria. Consiste de las hojas de la zanahoria para la estimulación de la glándula, gotu kola para nutrir, ginkgo para incrementar la circulación, el verbasco para purificar, oregon grape para influenciar tanto en la pituitaria como en el hígado, y lobelia como un catalítico general. Nombre: **Master GL**.

64. **Fórmula para la circulación en el ojo.** Esta fórmula promueve circulación de sangre en el ojo ayudando a reparar vasos capilares dañados, mejorando la visión nocturna, limpiando los tejidos y brindando antioxidantes a los ojos. Contiene: Bilberry, Eufrasia, Ginkgo y cayenne. Nombre: **Bilbrite**.

65. **Ayuda para la próstata.** Esta combinación asiste al cuerpo en reducir la inflamación de la próstata. Ayuda también a fortalecer y tonificar la próstata mientras lo limpia con antioxidantes nutritivos. Esta fórmula contiene: Saw Palmetto, Mullein y Ginkgo. Nombre: **Prospalmetto**.

66. **Fórmula para fortalecer el Sistema Inmunológico.** Estas plantas han sido usadas por miles de años como tónicos y como elementos preventivos para la salud. Usando este tónico diariamente ayudará a fortalecer el sistema inmunológico y proteger contra los agentes invasores. Los tónicos trabajan mejor en cantidades pequeñas por largos períodos de tiempo. La echinacea en esta fórmula también actúa como un tónico. Contiene: Astragalus, Ginseng Siberiano, Echinacea purpurea (planta y raíz) y el hongo Reishi. Nombre: **Immutone**.

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## Introduction

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## Introduction

Snow drifted high along the drive, the icy spindles of bare branches seemed to scrape against the winter sky on the stark morning of February 11, 1983, when we gathered to memorialize my father. Five days earlier we had stood around his bedside-my mother, who had come to tuck the hand-stitched quilts around his shoulders, his children, who stroked his magnificent mane of white hair with gentle care, and his grandchildren, who scampered at our feet.

We held him in our arms, warm against the chill of winter, as he slipped peacefully through death into the presence of the One who had guided him through life.

My father, John Raymond Christopher, did not die before the age of thirty-five, as the squadrons of physicians had predicted. His gentle practice of natural healing helped him overcome the chronic conditions he was born with, as well as the life-threatening injuries he sustained as a young adult. He succumbed instead at the age of seventy-three due to complications of a severe head injury. He had slipped on the treacherous ice outside his beloved Covered Bridge Canyon home, nestled in the mountains outside Spanish Fork, Utah.

Hundreds of mourners packed the church where we held his funeral, the same building where, a year earlier, he had stood for the last time to conduct his choir. The performance had been electrifying. There had not been a dry eye in the house that Sunday afternoon. There was not a dry eye now among those who crowded into the chapel for a chance to bid him farewell. Family members spoke to the congregation that gathered there. Friends shared their fondest memories. A profusion of little ones named Ray, John, and Christopher abounded, whose parents let us know that they were named after my father, without whose herbs they would never have been conceived. A church leader remembered my father's uncommon dignity, painting for us the reflection of dad mowing the lawn in his pinstriped suit. He shared the podium with the then vice-president of the prestigious National Health Federation.

How had such acclaim been earned by a man who had started out his life abandoned in an orphanage, a man who had been ridiculed in the courts and had been jailed? The acclaim was just. My father was considered the nation's number-one authority on herbal medicine, and tens of thousands of people owed their health and even their lives to his work.

If I were pressed to remember anything in particular about my father, it would be his extraordinary happiness. He hid his physical suffering with good cheer, making countless journeys into the blackness of night on his famed "house calls" I often wondered where he found such happiness. I know now it was from the people whose lives he touched. It was from the six-month-old blind baby whose sight was restored, and from the elderly asthmatic who was able to sleep in a bed for the first time in four decades.

My father's abiding happiness seems even more exceptional when I reflect on all the reasons he had to be unhappy. His life's work was dedicated to helping others, yet he was slandered by the judicial system that should have protected him. He was incarcerated on a number of occasions, left to grovel in the meanest of circumstances while those of us who loved him waited patiently for his release. Once, in what I am convinced was an effort to harass, a judge levied \$50,000 bail for a licensing infraction yet I cannot erase from my mind's eye the gentle kindness of my father's perpetual smile.

He never retaliated against those who did him harm. He was counseled early in his life to love his enemies, and to pray for those who cursed him and persecuted him. That counsel became his clarion cry, and I have never seen greater love emanate from any man. We as his children were fiercely loyal to him, but he never coaxed any of us to follow in his footsteps as herbalists. He loved us deeply, and he knew only too well of the abuses and persecutions we might endure. I quietly came into the practice on my own, partly, I guess, out of my love for him, and because I watched first-hand the way his teachings changed people's lives.

He is gone from among us, but he leaves behind a legacy that will never be forgotten. He created more than fifty herbal formulas that have exacted almost miraculous healings. He spearheaded the School of Natural Healing, which found its way overseas to the highly touted Cambridge

University. He authored many works on herbs, some of which are considered to be classics in their field.

I struggle daily to live a life that would make him proud. I cherish my memories of him, and I hold dear the hundreds of letters that still pour in, almost a decade after his death, thanking him for life itself. They come from every state in the union, and some from remote areas of the world, a poignant reminder of his powerful influence. Yes, he is gone...but he will never be far away.

As his son, I share his love and concern with all of those he so cared for-people he had never seen, but whose lives he prayed fervently for. I hope that this brief biography will stand as a fitting tribute to him.

*David Christopher*

## Chapter 1

### I'm Going to Be a Doctor

The fiery golds and scarlet of autumn had reluctantly given way to winter, which had crept almost unnoticed that year into the serene Salt Lake Valley, pocketed among the rugged peaks of the Rocky Mountains. It was fitting that John Raymond Christopher, a pioneer in the art of natural healing, should be born in this valley, which had been settled first by a courageous band of humble pioneers more than half a century earlier.

He was born November 25, 1909, in Salt Lake City, Utah, to Jean Ramone and Lorena Roth Raymond, whose homes were listed on the birth certificate as Loraine, Switzerland, and Paris, France, respectively. For reasons that only these European travelers could have known, they left their infant son and his older sister at the Salt Lake City Orphanage. Shortly after his birth, they left the shelter of the magnificent Rockies and moved on.

It was the custom at the orphanage when prospective parents called, to arrange available children in a line. From that line of hopeful faces, the couple could make their choice. One early summer afternoon, Leander and Melissa Ann Craig Christopher assumed their anxious station in front of such a line. Their fervent hope was to adopt a child, and they prayed they could find a son.

Suddenly, and without invitation, a baby clad only in a diaper and a thin undershirt toddled out of line, crawled onto Melissa's lap, and settled comfortably into her shoulder with a hug. Melissa's misty eyes met those of her husband as she exclaimed, "This is our son!"

The Christophers left the orphanage that day with not only the son they had prayed for, but with his sister Ruby, too, as the blood parents had stipulated.

The little family settled into the home Leander had built in Salt Lake City's historic avenues district, a house still listed with the Utah Historical Society. Later the family moved to a comfortable home on Highland Drive, now a teeming metropolitan area, but then a "country" neighborhood characterized by fields of hollyhocks in the summer and lanes of deep snowdrifts in the winter.

The first glimpse the Christophers had of Raymond's extraordinary future came one wintry night in that house on Highland Drive. Young Ray lay critically ill with croup. His anxious parents paced the floor, cradling his fevered body in their arms and praying with all their might that he would have the strength to catch another breath. Suddenly, a knock came at the door. Leander, startled because of the late hour, answered.

Standing on the porch was a bearded man in shirtsleeves, with no coat to protect himself against the bitter cold. He announced to Leander that a young child was ill, but was not to die, that he had an important mission to perform. With a sense of awe, Leander listened as the stranger gave explicit instructions on how to cut the phlegm and stop the croup.

Anxious to save the life of his choking child, Leander turned to do the stranger's bidding. When he turned back to thank the man and invite him in to warm himself against the winter cold, the man was gone without a trace. There were no footprints in the deep snow to mark his passing.

With the instructions left by the bearded stranger, and the loving faith of his parents, Ray recovered. It was an experience the Christophers would not soon forget, and Ray always remembered that his life somehow held great purpose.

It is ironic that Ray's "mission" involved healing, as the wintry croup crisis and his ensuing brush with death were far from the only health problems he suffered. Born with advanced rheumatoid arthritis, he endured excruciating pain. Even as a child, he sometimes walked with a cane or was confined to a wheelchair. That's not all. He also developed hardening of the arteries. Doctors of his day proclaimed that he would never reach the age of thirty.

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Most children suffering this kind of pain would become depressed or gloomy, but not John Raymond Christopher. He radiated good cheer. Early in life, he developed a great love for the music that lifted his spirits throughout years of trying adversity.

His love for music grew as he traveled every Tuesday night on an old streetcar with his beloved mother to her practices with the famed Mormon Tabernacle Choir. Each Tuesday night, he sat with rapt attention on the step next to his mother's seat in the alto section. His presence became such a trademark that at the age of fourteen he became the youngest person ever invited to become a member of the choir. He sang with the choir for another eleven years.

Ray's "mission" of healing was all the more appropriate in light of his mother's condition. Melissa Craig Christopher, the woman upon whose lap he had snuggled that afternoon in the orphanage, endured the quiet desperation of diabetes and dropsy. Her's was a chronic and debilitating condition. At first it confused the little boy, who suffered himself with crippled feet and the wheelchair that had become his prison. Later, it tore at his heart as he sat, helpless against the diseases that ravaged her and unable to ease her agony.

Once as he was playing among the fragrant blooms of the garden on Highland Drive, his mother watched him with unusual interest. At last she knelt beside the spot where he worked the imaginations of youth and asked, "Raymond, what are you going to be when you grow up?" "I'm going to be a doctor!" he announced, without hesitation.

"Oh, Raymond!" she laughed. "How can you be a doctor? You can't stand the sight of blood. You've never been able to slay the rabbits you raise for food, and you run from the kitchen whenever I raise the old butcher knife to a chicken. What kind of a doctor would that be?"

There was a moment's pause before he answered this time, and a look of intent unusual in a child his age. "Mother, I will be able to heal people without cutting them up," Raymond replied. "There will be natural ways of doing it" His musings in the garden that day became a prophetic statement that would describe his life's passion.

With the hope of becoming a doctor, young Raymond watched with interest as various practitioners treated his mother. One visit from a health practitioner proved to be especially noteworthy to the sixteen-year-old. One day his mother drew him aside with quiet determination and told him, "Son, a doctor's coming to visit me today, but he's a new type of doctor, different from any of the others who have treated me. I thought you might like to see him."

At the appointed hour, Ray eagerly answered the door, and the young man noticed that the doctor glanced nervously up and down the peaceful neighborhood street before stepping across the threshold. As he introduced himself to Melissa, she offered, "Let me tell you what is wrong with me."

"No," the doctor urged emphatically. "I will tell you what is wrong with you." Fascinated, Ray watched as the man looked into his mother's eyes and recited with pinpoint accuracy the conditions for which she had sought medical help over the span of many years, and the conditions for which she had taken countless prescriptions of orthodox medications.

Ray listened to every pronouncement the doctor made, absorbed with curiosity about his gentle efficiency. He took mental notes as the doctor prescribed wholesome changes in diet and as he pressed a collection of herbal remedies into Melissa's hand. As they bid the doctor goodbye and watched him travel down Highland Drive, Ray told his mother, "That's the kind of doctor I'm going to be when I grow up."

Several months later when Ray tried to locate the man, he had his first glimpse of what would prove to be a foreshadowing of his own future-the doctor had been arrested for practicing medicine without a license, and had been jailed. Ray tucked his ambition away temporarily and worked to finish his high school studies.

After graduation, news accounts and magazine articles about a Canadian practitioner caught Ray's eye. This man, the accounts said, massaged people's feet and effected remarkable healings. His treatments were in such demand, in fact, that people stood in long lines, even pitching tents for weeks at a time, in order to see him. Ray knew that this man could ease his rheumatoid arthritis, but, even more important, he yearned to study under him, to learn his natural way of healing. Cautiously, he approached his parents with his plan.

They could feel his excitement for his plan, but did their best to discourage him: The Depression had tightened its grip on most of the families living along Highland Drive, and there was no extra money to finance a trip to Canada. Ray pleaded, "I'll find a way," he promised. "I'll thumb rides. I'll do whatever I have to. Somehow, I'll make the trip." Just as he was completing his

preparations, his enthusiasm was crushed-news filtered from Canada to Utah that the practitioner had been arrested. It was a devastating blow, and Ray temporarily abandoned his ambition to study medicine.

Following graduation, Ray worked during the days at his father's lumber mill, and at night, he played with a dance band so he could tuck away enough extra to pay his way through college. With the dogged determination necessary to overcome his health problems, he graduated as an A student from Henager Business College in Salt Lake City. He decided to put his photographic memory and his famed "gift of gab" to work as a career; he enrolled and was accepted at the University of Utah School of Law.

The day before law school classes began in the fall, Ray underwent a twist of fate that would change the course of his life forever. As a passenger in a fatal automobile accident, Ray was pronounced dead at the scene. Police officers took his body to the morgue, and his parents were summoned to identify his remains.

Seized with grief, his parents were led into the room where he lay. As his mother looked upon her sweet son for what she believed to be the last time, she suddenly screamed! She had seen the faintest flicker of an eyelash.

The mortician bent over Ray and studied him intently. "My word, I think there was the slightest motion of life in him!" he exclaimed. Medics rushed Ray to the hospital, where he began weeks of painful recovery.

He remained in a coma for several days, when he at last drifted into consciousness. He was completely paralyzed, a condition that persisted for more than six weeks. He could speak, but could do nothing more for himself. Nurses had to feed him, shave him, and carry him to the bathroom.

One afternoon a driver from the lumber company came to Ray's room and pulled a chair up next to his bed. "You know, Ray, it's a waste of time, you sitting around like this," he scolded. "We need you back at work. C'mon, let's get goin'."

Ray laughed at his friend. "I can't even move my hand," he cried, "let alone go down to the office to work. Let's face it. I'm helpless." "Then," replied Jim, "you'd better go see a chiropractor."

When the four renowned physicians who were treating him made their rounds that day, Ray mentioned the possibility of a chiropractor. Their responses were immediate and choked with derision, and Ray was embarrassed that he had made such a foolish suggestion. Behind the scenes, Jim had left the hospital and made a stop on Highland Drive, convincing Leander and Melissa to take Ray to the chiropractor's home that night.

As the three entered Ray's hospital room and began to lift him from the bed, he protested with all the strength he had left. "Put me down!" he screamed. "Don't touch me! The doctors told me I'm paralyzed for life! Don't try to take me to a chiropractor. ..I will not go to a chiropractor!" As his loved ones carried him to the car, his protests were loud, but he was helpless to resist.

Several days after his chiropractic treatment, Ray was working again at his office. His head was still swathed in bandages as a potent reminder of his injuries, but he moved freely and was able to resume all his duties at the lumber mill.

As he recovered, Ray yearned to start his study of law, but he couldn't. His photographic memory had been obliterated in the accident. The injuries he sustained caused intermittent but lingering amnesia. As a precaution, he had his name and address sewn inside his coat. On one blustery afternoon he took the company funds to the bank, made the deposit, and stepped back outside, and his mind went completely blank. He approached a police officer and opened his coat. By the time two officers drove him to the office in a truck and located his car, his memory had returned.

It was a period of almost unremitting pain, both physical and emotional, for Ray. Periodic pain from the head and back injuries he sustained in the accident caused his rheumatoid arthritis to flare up.

At times the pain was so severe that he couldn't sleep. He was also filled with a pain that he described as "helpless rage" as he watched his mother die from complications of diabetes and Bright's Disease.

For a young man who had a firm conviction regarding natural healing, it was almost unbearable to witness her suffering. The complications of diabetes stopped responding to even the highest doses of insulin, and her arms were purple from repeated needle stabbing. Bloating from the effects of edema, she was swollen to several times her normal size. At last, she succumbed slowly and

painfully to gangrene poisoning. Kneeling at her bedside, Ray petitioned the Lord for help, help that someday he would be able to save someone else from the agony his mother had endured.

During the sleepless nights that peppered his convalescence, Ray resorted to reading. He chose good books that authenticated the values he cherished. He also studied the scriptures, gaining strength and optimism from the messages scattered across their pages.

One morning, confined to a chair with the pain of arthritis, he picked up *The Doctrine and Covenants*, a volume of scripture published by The Church of Jesus Christ of Latter-day Saints. It fell open to the eighty-ninth section. More commonly known as the faith's "Word of Wisdom," it spells out the church's health code in a few brief paragraphs.

Ray had read the passage many times before, but this time several words jumped out at him as if lighted with neon. The words sparingly (in regard to meats) and wholesome (in regard to grains and vegetables) struck him so hard they seemed to have power enough to knock him out of the chair. He vowed to follow the health code strictly, and developed for himself a diet of fruits, vegetables, grains, nuts, and seeds.

The improvement in his health was staggering! Within a few months, he gained weight, began sleeping soundly at night, and started enjoying enough energy to allow for a full day's work. In 1939, he authored "Just What Is the Word of Wisdom?", a thought provoking booklet that described his experience and articulated his thoughts about diet and health.

Ray may have left it at that, tucking the booklets away on a darkened library shelf, but a simple phone call dictated otherwise. It came from Dr. John A. Widtsoe, a leading authority in the Mormon Church, a renowned educator, and an author who had written extensively about the Word of Wisdom. He had seen Ray's booklet, and he praised it as a treatise well "ahead of its time" He urged Ray to distribute it to as many people as he could, and Ray gained the confidence he needed to determine that he was on the right track.

He began doing as he had been instructed—talking to as many people as he could about the relationship between diet and health. He was a man well ahead of his time, all right, and as a result was also the subject of derision and ridicule. Years later, he still remembered a few good-natured jokes directed at his wholesome eating habits.

One in particular happened at the lumber mill. It was almost lunchtime, and one of the workers told him to report back after his delivery. As he walked into his office, a sumptuous spread lay before him. The truck drivers, the yard foreman, and the bookkeeper had smoothed a tablecloth over his desk. In the center was a spirited arrangement of edible greens dotted with bright splashes of wild flowers. A fine china dish was heaped with fresh green alfalfa, "common cow hay" as he later described it, and others were filled with dried wheat and rolled oats. An elegant decanter held apple juice.

With a wave of the arm, the yard foreman surveyed the scene and said, "We wanted to honor you today, Ray, so we fixed you a special lunch" The others stood next to him, fairly quivering with anticipation.

With his characteristic good grace, Ray pulled out his office chair and plucked up the fancy cloth napkin. "How nice of you!" he smiled. "This is really wonderful! Thank you" He draped the napkin carefully over his lap, brushing the sawdust shavings from his trousers, and picked up the fine silver fork. The men stood watching, astounded, as Ray ate every bite. They never kidded him about his diet again, but he continued to feel like a loner among his contemporaries. Ray had married Irene Short in 1935, and even she had great difficulty accepting his eating habits.

They had two daughters, Sandra Joy and Carol Ann, and tried diligently to work out their differences, but finally divorced in 1943. Ray felt alone and discouraged, but was more determined than ever to share his beliefs with others. He began giving lectures to small groups of people who were interested in making the dietary changes that could improve their health.

A year after his divorce, he was lecturing one evening when a beautiful young woman came into the room with a mutual friend. She captured his attention immediately, and, as he told his children and grandchildren many years later, "all of a sudden the bells rang. I knew that this was the one!"

John Raymond Christopher and Wendella Walker were married on August 19, 1944, in the Salt Lake Temple of The Church of Jesus Christ of Latter-day Saints. An avid supporter of his ideas about health and a loyal companion throughout their marriage, she became the mother of their five children: John Rulon, Ruth Ellen, David Wendell, Janet Lorene, and Steven Craig.

## Chapter 2

### "I Don't Care If He Puts Horse Manure on My Head" A Prescription For the Mess Sergeant

It was the middle of a tumultuous decade, and the world was at war. In the most far-flung regions of the globe American soldiers waged a defense of democracy on the land, in the air, and on the seas. And at home in Salt Lake City, Ray settled into the happy routine of getting acquainted with his bride.

One afternoon a few months after he was married, the war invaded Salt Lake City. It came in the form of a draft notice on the Christophers' doorstep, and it reflected wartime's dire circumstances—they had drafted a nearly thirty-five-year-old man who had divorced and remarried, and who had two families to support.

When he reported for service, Ray requested the status of conscientious objector. With a life's ambition of preserving life instead of taking it, he had included a section about the taking of life in his Word of Wisdom booklet. He carried it with him to the examiners, presenting it as evidence of his unwavering beliefs.

"I'll serve my country with pride on the front lines," Ray told the examining officer. "I'll carry stretchers that can save people, but I will not carry a gun. I cannot kill another human being." Reluctantly, the examining officer assigned him the status of conscientious objector, along with a permanent rank. As long as he served in the army as an objector, he could never achieve a rank higher than that of private. Ray's commitment to principles proved to be one of the trademarks of his military service. Once during his brief stint in basic training an officer ordered that he carry a gun on night watch. "I do not carry guns," Ray replied, "As you can see from my papers. I'm a conscientious objector. I will not handle guns that kill." The commanding officer shrugged his shoulders and thrust a nightstick at the young private.

Ray slowly shook his head, "I refuse to carry a night stick, too, because you could kill a man with a night stick"

The commanding officer reacted with anger and ridicule, confining Ray in quarters under guard until the next morning, when he was tried for his stubborn rebellion. The officer hearing the case slapped his palm sharply on the table and shouted, "This is one of the most ridiculous things I've ever heard! A conscientious objector who won't carry a night stick? What if everybody in the world felt as you do?"

"Then," replied Ray, with words that flooded suddenly into his mind, "there would be no war"

The examiner quietly sized up the young father and husband who sat before him. "That's the answer I needed," he said, scratching his signature across a small card. "You are a conscientious objector, and this card shows that you have my approval. Carry it with you always, and no one will challenge you again"

From Fort Douglas, Utah, Ray traveled to North Fort at Washington's Fort Lewis, where he was assigned to supervise a medical dispensary. It seemed to be a comedy of errors. John Raymond Christopher, a lowly buck private, issued orders to master sergeants who were pharmacists and staff sergeants who were therapists. Even the cleaning boy outranked him—he was a corporal! Under Major Shumate's direction, they all took commands from the private at the dispensary.

At first, Ray felt frustrated and angry. He had been plucked from a situation in which he taught hundreds of people the benefits of a wholesome diet and natural healing methods, yet here he was allowed to use only orthodox medicines for people he knew he could help much better in other ways. His knowledge of holistic healing had become extensive by the time he was drafted, and he desperately wanted to use that knowledge to help the soldiers he served with. Each time he tried to approach Major Shumate about herbal healing, however, he was firmly denied.

As frustrated as Ray was, he began to see some purpose behind his time at the dispensary.

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First, he was able to see first-hand the effects of orthodox medications, and the futility of treating symptoms instead of causes. But most important, he had the chance to treat a soldier for a supposedly incurable condition, and it was a treatment that literally changed the course of Ray's life.

It happened one Monday morning, when the supervisors of the eight dispensaries were holding their regular meeting. They gathered that morning at Ray's dispensary, and settled down with note pads to discuss the various cases they were faced with.

"I want all of you to see one man before we release him from the army," Major Shumate told the dispensary heads. "I worked as a private dermatologist in New York for years, and I've never seen a case of impetigo contagiosa as severe as this one." Shumate explained the man's history. He had been hospitalized nine times with the condition. Each time it ran its course of thirty to thirty-six days, gradually clearing up, only to flare up again within days. Specialists from the eastern United State's most prestigious hospitals had treated the man with every known remedy, but nothing had worked.

With that, Shumate opened the door and gestured for the soldier, who was ushered in under guard. The other dispensary heads gasped with horror when they saw the soldier, whose head had been shaved as much as possible. Wherever the stubble of hair grew, the man's scalp was covered with a crusty scab nearly an inch thick.

Ray had treated quite a few cases of impetigo, but never one this bad. As he visually examined the man, he muttered, quietly, "What a beautiful case of impetigo!"

Shumate, who overheard his remark, slapped him on the shoulder good-naturedly. "You must be a natural doctor," he told Ray. "That's just how I see it, as one of the most amazing things I've ever seen. But, unfortunately, we have to release this man from the army ."

At that the soldier, who had maintained a demeanor of embarrassed silence, spoke up with passion. "I object to that!" he cried. "I came into this army a clean man. I caught this thing while I was here," he said, pointing at his blackened, crusty scalp. "Now you're asking me to take this filth home to my wife and children. I won't do it!"

"I'm sorry, but there's nothing more we can do," Shumate responded, quietly.

"We've done everything possible. We've used every cure medical science has to offer, and nothing has worked. We have to give you a release, but we'll make it an honorable discharge." "Wait," Ray interjected. "That man can be healed." Shumate whirled to face Ray. "Not some of your blasted herbs!" he spewed, and the other dispensary heads rolled their eyes and started to laugh.

"I should have something to say about this," the soldier cried. "I don't care if he puts horse manure on my head, as long as he heals me!"

Shumate paused, studied the man's scalp again, and agreed that Ray could try his treatment if the soldier agreed to sign legal papers releasing the government and the army from any liability. With papers signed, the soldier was checked into Ray's dispensary and placed under twenty-four-hour military police surveillance to guard against escape. As the meeting broke up, the other dispensary heads were curious.

"When will the big unveiling be?" one of them jeered. "Monday morning!" Ray snapped back, without even thinking. Then reality settled in—he had a week. Just one week. He was far from home, impossibly removed from the herbs he usually used. And in that week far from home, he had to heal the worst case of impetigo he'd ever seen.

Immediately he called a friend in Salt Lake City, a professor at the University of Utah whose backyard was sheltered by the spreading branches of a majestic black walnut tree. Ray explained his dilemma, and, even though the ground was covered with a blanket of snow, the professor agreed to gather the husks, take them to the army air depot, and have them transported overnight to Fort Lewis.

The next morning Ray cradled the walnut husks as if they were pure gold. They were sopping wet when they arrived—not the best situation. That wasn't the only handicap Ray faced. He had to put them in a base of 70 percent rubbing alcohol, because grain alcohol was not available through the army medical system. And that's not all. Instead of allowing the tincture to age for fourteen days, as he had been taught, he figured he only had about forty-eight hours.

He made the best of it, shaking the tincture vigorously every time he walked past it during those two days.

At last, he strained the tincture and made a compress that fit over the soldier's head like a football helmet. He secured the compress with adhesive tape. Then he instructed his aides that the compress had to be kept wet with the black walnut tincture twenty-four hours a day for the rest of the week. He wrote out a prescription, this time to the mess sergeant, that prescribed wholesome foods for the soldier to eat.

Monday morning arrived all too quickly, and with it one of the most harrowing times of Ray's life. The commanding officers and the dispensary heads met, and they sat on the edges of their seats, ready to ridicule the failure they knew would meet their eyes.

"Everybody ready?" Shumate asked in a mocking tone. He turned to Ray and asked, "Are you ready to show us your miracle?"

"I'm ready," Ray responded with quiet determination. "I haven't seen him yet, but we'll take a look."

The soldier was ushered in again by the guards, and Ray worked quickly but carefully to cut away the adhesive tape. As he lifted the compress off, the scab came off with it, and the soldier's scalp was as clean and pure as a baby's. The impetigo was gone, and had left no scarring.

The men gasped loudly. Major Shumate struggled to catch his breath. "I've never seen anything like this in all my days of practicing medicine," he cried. As the soldiers crowded around to get a better look, he took Ray aside.

"I've misjudged you. Private Christopher," he admitted. "From this day on, you have my permission to use herbs. In fact, you can set up a laboratory here. You're free to do anything you want with herbs as long as you are under my jurisdiction at Fort Lewis." With that proclamation, Ray became the only practicing herbalist in the United States Army during World War II.

Ray's black walnut tincture gained a widespread reputation, and he continued to use it to treat impetigo. He also used it in the treatment of two other stubborn conditions—fungus infection and jungle rot.

When word spread that Private Christopher knew how to cure jungle rot, his patient load multiplied tenfold. Ray eventually found that the black walnut hulls exacted an almost miraculous cure against a variety of other stubborn conditions, including scrofula, eczema, ringworm, shingles, and chronic boils.

From those experiences he created one of the most miraculous of his formulas, BF&C. In it, he combined comfrey leaves with white oak bark, black walnut hulls, gravel root, marshmallow root, mullein leaves, wormwood, lobelia, and skullcap. He formulated it in both capsule and ointment form so that healing could take place both internally and externally.

And the healing did occur. Besides the black walnut hulls, which he had already proven, Dr. Christopher used herbs in the formula that dissolve calcium buildup, reverse the process of gangrene, and promote healing. Other herbs in the formula provide an excellent source of protein for tissue repair and other herbal "foods" for the entire system. Still others relieve pain and prevent infection, and skullcap helps tone and rebuild the nerves and spinal cord. The comfrey Dr. Christopher used in the formula causes rapid cell growth and repair of injured tissues.

Enthusiasts who began using the formula found that it was excellent for a variety of minor problems. It relieves and heals minor burns, prevents infection and heals cuts and abrasions, heals bruises and rebuilds hemorrhaging areas, relieves sore gums, and takes the pain out of bunions and corns.

A number of people, including Dr. Christopher himself, who have tried the formula on more serious conditions have found it remarkably effective against problems that traditionally resist treatment. It removes calcium deposits from around joints, relieving arthritis. A nurse in California used it to dissolve a bone spur on her heel, avoiding surgery. It heals skin cancers. It heals eczema, psoriasis, and other chronic skin conditions. It was such a case that led Dr. Christopher to initially create the formula.

Ray spoke of it often: a woman seized with panic came to his office early one morning. Hours earlier, she had thwarted her fourteen-year-old daughter's suicide attempt. In desperation, she had left the girl at home under the supervision of several neighbors while she came to Dr. Christopher for help.

The case she described was baffling. Almost three years earlier, the girl had developed a severe dermatitis characterized by thick, heavy scales that covered her face and neck, her arms and hands, and her legs and feet. The battalion of physicians, dermatologists, and allergy specialists

who had reviewed her case were stumped—none had been able to even find a name for the condition, let alone a treatment. In her despair, the young girl began gorging herself with food. Her weight skyrocketed, and she believed that her only option was to end her own life.

Ray listened intently to the mother's story. As happened so often in his service to others, he found himself faced with an emergency. This mother, and her distraught child, did not have weeks to spare while he experimented on herbal combinations in a laboratory. He offered a quick, silent prayer for help, and, as he related it, "a formula came immediately to my mind." He hastily penned out the ingredients and sent the mother to an herb shop with instructions to combine them into both fomentations and a tea. As she left, clutching the written formula in her hand, he felt confident enough to promise good results.

Those results came. Four days after the frantic mother first came to his office, Ray received the first report— the scabs and scales were gone, and the girl's skin had what the mother described as a "healing glow." Six months later, she was a cheerleader at school and was enjoying all the social activities typical of girls her age.

Perhaps the most valuable aspect of BF&C is its ability to heal wounds, even surgical incisions that have failed to heal. One middle-aged California woman took the capsules and applied the ointment to an abdominal surgical wound that had been draining for more than three years, and within seven days, it healed.

Not only does it heal, but BF&C has been shown to actually rebuild and regenerate tissue. One of the first demonstrations Ray witnessed involved his own nephew. The five-year-old boy was a passenger in a car accident, and diligent relatives were able to hold onto him and keep him from falling completely out of the car. As the car skidded to a halt, however, he was dragged along the hot asphalt, and his small fingers were scraped to stubs as far as his first knuckles.

Ray gave the child capsules of BF&C, and instructed his parents to make the herbals prepared with honey and wheat germ oil and apply generously to the fingers. Within two months, the fingers had healed; perfectly formed fingernails graced the tips of each one. When Ray next saw the little boy, he ran toward him and threw his arms around Ray's legs in a tight hug. "Look, Uncle Ray!" he shouted, spreading his hands out in front of him. "My fingers grew back!"

His was not an isolated incident. As Ray manned a booth at a convention in the northwest, a beautiful young woman approached him and said, "How do you like my fingers?" Ray admired her soft hands with their well-manicured nails. "Can you tell which finger was cut off?" she asked him.

Even with close scrutiny, he could see no difference, nothing that made one finger stand out over the rest. As she pointed it out, she told her story. Her finger had been amputated below the knuckle. She had used BF&C, and the knuckle had regenerated. Gradually, all the bone and flesh filled in, and even the fingernail grew back, perfectly formed.

One of the most dramatic cases in Ray's career involved the main herbs in BF&C and their unparalleled healing power. Two ten-year-old boys were playing with matches and gasoline when the innocent-looking puddle at their feet ignited and roared into flame. Both boys were severely burned. The surgeon who examined the boys at the hospital gave each set of parents the identical prognosis: the hands would either have to be amputated at the wrist and iron claws attached to both arms, or the boys could endure several years of painful skin graft surgeries. The surgeon was not encouraging, and even with years of skin graft surgery, he pronounced, they boys would have nothing better than mummified claws. While the iron claws could simulate finger movement, the mummified skin claws could never move like fingers.

One set of parents told the surgeon to keep the boy and begin operating; they wanted him to have at least a chance at "normal" hands, even if it took years.

The other set of parents shook their heads, told the surgeon they wanted to seek a second opinion, and left the hospital with their son.

They sought out Dr. Christopher. As he removed the gauze bandages that swathed the bums, he cringed at the sight of the badly charred skin, tendons, muscles, and nerves. Instead of concurring with the surgeon's opinion, however, he gave the anxious parents a thick herbal salve based on one of the primary herbs found in BF&C— comfrey. He instructed the parents to keep a thick layer of salve, which also contained wheat germ oil and honey, spread over the burned area.

Within a week, the parents took their son to see the surgeon. He was dumbfounded as he examined the boy's hands. Less than a week earlier, they had been virtually destroyed by third-degree burns; now the surgeon classified the bums as first degree.

"What on earth have you been using on this boy's burns?" the surgeon queried. When the parents quietly told him that they had used an "old-fashioned remedy," he was emphatic. "I don't care what you've been using," he told them, "keep on using it. I don't think there's any need for surgery or skin grafting. I can't believe it, but I'm pretty certain that the hands will heal very well without any residual scar tissue."

The eventual outcome of the two cases confirmed Ray's belief in the power of herbal treatment. A year after the fiery flames of gasoline had licked at his hands, the first boy remained in the hospital. His parents had invested hundreds of thousands of dollars on extensive surgeries and skin graftings, and as the surgeon had predicted, he bore two mummified, unbending claws that were so unsightly he wore gloves to hide them.

The boy whose parents patiently spread the herbal salve over his burned hands had healed completely. The tendons, nerves, muscles, and flesh had been renewed, without any scar tissue. Even the fingernails had been restored. And their total investment was less than twenty dollars for the herbal salve that had promoted the healing.

There were other lessons that Ray learned as he served his country in the crowded dispensary at Fort Lewis. One was the love of his fellow man and the deep compassion that became an earmark of his later practice.

In particular, he felt tremendous sorrow at the way black soldiers were treated at the dispensaries. Hatred ran so rampant that these men often suffered physical agony in silence rather than endure the emotional pain of visiting the dispensary. Ray hadn't been at Fort Lewis long before word started to spread—he loved all people, and he treated blacks with the same tender compassion he showed to every soldier who passed through the dispensary. Within months he was seeing dozens of black soldiers every day, men who were blessed with relief for conditions that had plagued them for months.

Still other lessons were learned in the laboratory. With an endless supply of patients and the blessings of Major Shumate, Ray was able to discover first-hand the healing properties of many of the herbs he had until then only read about. It was at Fort Lewis, too, where he began combining various herbs into "formulas"—powerful mixtures that could be used to heal specific conditions. His formulas eventually became part of the singular legacy that he left mankind.

It was at the dispensary that he was able to spend quiet hours in the laboratory experimenting, and it was there where he began to discover the herbal combinations that could relieve his own serious health problems. One of the most dire was his high blood pressure and hardening of the arteries, conditions he had developed during adolescence that would normally have shaved years from his life.

From Ray's intent studies at the dispensary, he knew that his body was laced with thousands of miles of capillaries that branched from just more than a thousand miles of arteries and veins. With that knowledge, he started his search for an herbal food that could best nourish and rebuild his circulatory system.

That herb was cayenne. High in calcium and vitamin C, cayenne is one of the best foods for the heart. It helps restore and retain the elasticity of blood vessels, correcting or preventing hardening of the arteries and preserving the health of the circulatory system. Cayenne also works to equalize blood circulation and adjust blood pressure to normal.

Ray found that cayenne was even powerful enough to stop a heart attack in progress. In the more than thirty-five years that he toted his herb-filled black bag on house calls, he never lost a patient to a heart attack.

He remembered one woman who had suffered from an eighteen-year heart problem that had required powerful heart medication for more than seven years. She agreed to take the pungent cayenne that Ray offered her, and within months she was able to stop all medications. Even her stubborn varicose veins completely cleared.

Cayenne became the base for BPE, a formula that equalizes blood pressure and builds the health of the circulatory system. To cayenne, Ray added ginger, a second powerful stimulant. To these, he brought a combination of herbs that normalize blood pressure—parsley, golden seal, garlic, and Siberian ginseng root.

Ray himself provided one of the most dramatic examples of the effectiveness of BPE.

As mentioned, he was diagnosed early in life with hardening of the arteries and dangerously high blood pressure. Several doctors who examined him rendered the bleak prognosis that he would

not survive beyond his early thirties. But he used BPE faithfully, as he did many of his formulas, and continued to eat the healthy diet he had prescribed for himself.

At the age of forty-five, a full decade beyond his predicted life expectancy, he was required to undergo a physical examination in order to enhance his life insurance coverage. The doctors who conducted the physical were astounded. Despite his early history, he had the blood pressure of a healthy teenager. Almost three decades later, just a few years before his death, a physician who examined him proclaimed that at seventy years of age he had the blood pressure and circulatory system of a vibrant young man in his twenties.

At last Ray's military obligation was over and, despite an invitation from Major Shumate to spend another tour of duty in the dispensary and to let the Army pay for his medical education, he declined and eagerly headed home to Olympia, Washington, to join his wife. John Raymond Christopher took with him a distinguished service record and the proud knowledge that he had helped countless soldiers who had been failed by the orthodox medical community. He also brought home with him the determination to learn all he could about herbs, and to make the practice of herbology his life's profession.

## Chapter 3

### After the War; There Were Weeds: Harvesting Herbs at Dawn

His military service behind him, Ray was at last free to pursue the dream of his childhood—he wanted to become a doctor, the kind of gentle practitioner who crossed his mother's threshold the year he was sixteen. He had used natural methods of healing in the dispensary at Fort Lewis. He knew they worked. He had seen their healing power in the faces of countless soldiers who had come to him for help after word of his treatments filtered through the rank and file of the army. He wanted more than anything to learn all he could about herbs, and to use his knowledge to bless others.

With the full support of his young wife, he stuffed a few possessions into a canvas bag and traveled to Canada, where he studied under the renowned herbalist Dr. H. Nowell at Dominion Herbal College. After earning his Master Herbalist Degree, he returned to Olympia and set up practice in the midst of Washington's verdant orchard country.

The war eventually came to its explosive halt with the terrifying detonation at Hiroshima, and a battered world struggled to begin the lengthy process of rebuilding. During those final war years and the agonizing time of recovery, Ray found that it was more than a simple challenge to practice as an herbalist.

First, there was the unrelenting demand of providing a living for his small family. Jobs were scarce, and many who provided employment lacked the cash to pay wages, and plenty of men traded labor for goods. Then there was the task of getting the herbs themselves. It was virtually impossible to order the herbs through wholesale houses. The influence of the war was felt in all of the nation's communities, and thousands of once-thriving businesses had closed their doors as a result.

But John Raymond Christopher was never one to take defeat gracefully. He met his challenge head-on. He secured a job weeding gardens each morning that provided cash, however meager. Each morning as the sun first touched the branches of the apple trees in the surrounding orchards, Ray moved deftly from one garden to another, pulling the tender young weeds from the fertile soil. Each day, just as other workers were first buttoning up their shirts against the misty Washington morning, Ray was collecting his pay and hauling the weeds away in large burlap bags.

At home, Ray would spread his morning's harvest across the tidy counter tops in their small kitchen. Then he would begin the painstaking process of washing each weed, rinsing the clumps of soil from each lobed leaf and each maze of roots. Fingering the clean weeds, he would sort them into careful categories and would prepare to use them that afternoon for the group of patients who pressed into his waiting room. It was a two-fold blessing—Ray had enough cash to sustain his family, and he also had the freshest herbs he could ever desire.

It was in Olympia, surrounded by the heady fragrance of apple blossoms and sustained by the "weeds" he harvested each morning, that Ray set up a thriving practice and began to see the astounding healings that were possible through herbal medicine.

It was in Olympia, too, that Ray proved he was practicing because he loved mankind, and not because he wanted to line his wallet. He taught his patients how to harvest their own herbs and treat themselves from the bounties in their own backyards.

One of the most powerful healing agents was, fortunately, one of the most abundant in the humid, fertile valleys of Washington. Ray knew that plantain, which had been used from the days of Galen and Pliny, was a powerful blood purifier with the ability to kill infection rapidly. He also knew that it immediately relieves the blood poisoning that can follow cuts, slivers, bites, and stings. In some of the most dramatic cases he treated in Olympia he used plantain, the herb later

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became the base for INF, his infection-fighting formula. In one astonishing case, a man had slipped while at work and driven a chisel deep into his palm.

He couldn't afford to take any time off, nor could he afford a doctor's bill, so he had grabbed a dirty rag and wrapped it around his hand to stop the bleeding. With the help of his crude bandage, he had finished his day's work and had even worked for a few additional days.

By the time he arrived at Ray's office, his hand was swollen and feverish, a red streak ran from the badly infected hand up his arm. A painful lump the size of a baseball in his armpit prevented him from dropping his arm to his side. The man was seized with pain and obviously frightened at the severity of his condition.

As Ray examined the wound, he asked the man why he had not seen his doctor more promptly when the signs of blood poisoning began to develop. "I just couldn't!" he cried. "This same thing happened to a friend of mine, and the infection was so bad that the doctor amputated his arm. I want to keep my arm! I heard about you. Isn't there something that can be done?"

Ray led the man out to the front yard of his office and pointed out a stand of plantain. "Oh, that!" the man laughed. "It's all over my yard. We've all been digging it up, trying to keep it from taking over!"

"Well, keep digging it up," Ray admonished him, "but this time rinse it off well and crush it." Ray then told him to put the crushed plantain directly over the wound and to bandage it in place, adding fresh bruised herb to the poultice each time it began to dry out. He also instructed his patient to brew some of the "weeds" into a tea and to drink at least three cups a day. The man offered to come back the next day, but Ray refused him. "I've given you a do-it-yourself method of healing your hand" he explained. "Just follow the directions, and you'll have no need for a follow up call."

A few days later the man did return-this time to pay for his office call and report what happened. He himself described the chain of events as "miraculous." Within thirty minutes after he applied the poultice, the excruciating pain and throbbing were relieved. Within a few hours, the red streak started to fade and the swelling in his armpit began to reduce. By evening, evidence of healing was strong. And now, as he stood in Ray's office, the hand was healed without heavy scarring. He had full use of his hand and arm, and was able to continue making a living to support his family.

In a similar case, a young girl had cut her foot on the jagged edge of a shell while clam hunting at the beach. Oblivious to the pain or the wound, she had continued to run in the sand for the rest of the afternoon, wading with friends in the shallow pools that lingered as the tide ebbed out to sea. By morning, the foot and leg were swollen and feverish, and an angry red streak crept toward her groin.

When her anxious mother phoned Ray, he repeated the same instructions regarding the plantain poultice. The next day, the child skipped into Ray's office and pressed several bills into his palm. Examining the money, he protested, "This is too much. Your mother has sent the full amount of a house call. You didn't even come to the office. I can't accept this much." "Yes, it's the right amount," the girl told him. "Mama told me to bring you this much because my foot healed so quickly." As it turned out, Ray was paid many times over for the help he offered by phone. The girl's family owned a smorgasbord in Spokane, and were some of the few people in the area who were able to get butter and other fresh produce because of wartime rationing. Throughout the remainder of the war, they always saw to it that the Christophers had a little butter and some fresh fruits and vegetables as a token of their appreciation.

Plantain flourishes during the growing season, but dies along with other vegetation during the chill of winter. As soon as he recognized the value of plantain for his patients, Ray began to concoct concentrates, tinctures, and ointments that he could keep on hand year-round. He remembered one situation in which the ointment proved valuable. A mother called in the spring, before the plantain in Ray's yard had leafed out. Her ten-year-old son had been stung by a wasp. His hand was severely swollen, she said, and he had passed out as a result of the pain.

Ray tucked ajar of plantain ointment into his bag and left on one of his legendary house calls. When he arrived, the child was still unconscious and his hand was swollen to twice its normal size. Ray quickly spread a thick layer of plantain ointment over the sting in a circle about the size of a silver dollar, covered the ointment with a gauze patch, and then used a gauze bandage to hold the patch in place.

"Is that all you're going to do?" asked the alarmed mother. "That's all that needs to be done" Ray smiled, explaining that the ointment would draw the poison from the sting and relieve the pain

and swelling. As they stood and briefly talked, the boy regained consciousness and sat up. Within half an hour, the pain was significantly relieved. By the next afternoon, his hand was back to normal and he was out at the street's edge, playing baseball with his friends.

Plantain's value prompted Ray to develop INF, a formula designed to kill infection and to capitalize on the benefits of plantain, no matter what the season. He began with a base of plantain. Next, he added black walnut hulls, which he knew could kill infection, destroy worms and parasites, and relieve the infection of poisonous snakebite or rabid animal bites. He completed the formula with calendula flowers, marshmallow root, golden seal root, and bugleweed, herbs that help to kill infection and clear toxins from the lymph system.

Because infection thrives on toxins and wastes, and because impure blood fosters disease and infection, Ray hoped to team INF with a formula that could purify the bloodstream and remove any infection that circulated throughout the body. The result of his quest was his Red Clover Combination, a purifying formula of red clover blossoms, chaparral, licorice root, peach bark, Oregon grape or barberry root bark, poke and stillingia or echinacea, cascara sagrada bark, sarsapa-rilla root, prickly ash bark, burdock root, and buckthorn bark.

As with all of his formulas, Ray chose each ingredient with care and with keen insight into the properties of each herb. He began with red clover blossoms, an herb that gradually alters and corrects deficiencies or infections in the bloodstream. Besides purifying and cleansing the bloodstream, red clover blossoms remove any obstructions in the bloodstream, nourish and build the tissues of the circulatory system, and reduce any spasms or irritability in the blood vessels.

He chose chaparral for its ability to clear even stubborn infections. He had seen it heal boils, abscesses, carbuncles, and other severe infections by purifying the bloodstream. Ray had used it to completely clear up several severe cases of acne within six weeks because of its power to purify the bloodstream.

Echinacea was added to the formula because Ray knew it was the herb of choice for clearing blood poisoning. He had used it with success in clearing up the infection associated with gangrene, ulcers, and cancers. Echinacea has also been proven in scientific studies to kill both the staph and strop bacteria through stimulation of the immune system, and by adding it to the Red Clover Combination, Ray knew the formula could be used to clear up staph infection of the bloodstream.

To this he added two of the most powerful purifiers in nature-burdock root and buckthorn bark.

Ray's successes with the Red Clover Combination came quickly, and many were profound. One of the most dramatic cases involved a forty-five-year-old man who had developed severe sepsis, a system-wide infection. He had been ravaged; he had lost his hair and his fingernails. His eyes were ulcerated. He had even developed the signs and symptoms of leprosy. The infection had so debilitated him that he had suffered extreme weight loss; he looked more like a skeleton than a man. Ray gave him the Red Clover Combination along with some sound nutritional guidelines, and within six weeks, he had gained back his weight and there was no sign of infection.

Used together with a proper diet, the Red Clover Combination can even be used to clear cancer. A middle-aged woman Ray treated provided the perfect example of what can be accomplished by purifying the bloodstream with herbs and keeping it clean with proper diet. Her doctor had offered a dim prognosis and had sent her home to die of cancer.

Ray started her on the Red Clover Combination, and asked her to take it faithfully for the period of several months. He also advised a sound diet of fresh fruits, vegetables, grains, seeds, and nuts, and he asked her to avoid hard water, processed foods, sugars, and cholest-erol-containing foods. Finally, he prescribed a three-day juice cleanse once a month, advising the woman to take only distilled water and carrot, celery, or grape juice during the cleanse.

Several months later, after following Ray's suggestions carefully, she sat on her doctor's examining table draped with a pale blue cotton gown. Much to his astonishment, the cancer was gone.

A few months earlier, he had been helpless against what he believed to be a terminal disease. That afternoon, he pronounced her cured.

As he used the Red Clover Combination in his practice, he found that it had powers that surprised even him. One of these was the ability to reverse the Rh factor in the bloodstream, long considered a genetic trait that could not be "cured" or reversed. A baby born to an Rh-negative mother and an Rh-positive father develops severe complications, extensive liver damage, and life-threatening blood clotting if not treated immediately. Traditionally, the only "treatment" was

complete draining of the baby's blood followed by total blood transfusion. Sometimes the treatment is successful, but in some cases the baby dies or develops permanent complications.

A woman in Brigham City, Utah, was an excellent example of both the problem and the proper treatment. She had borne three children, all of whom had inherited the Rh factor problem, and all of whom had narrowly escaped death as they struggled through the blood transfusion at birth. When she underwent open-heart surgery a few years later, her obstetrician gave her the stem warning that another pregnancy would very probably kill both her and her baby. She and her husband yearned for a large family, however, and approached Dr. Christopher's study group with a plea for help.

Ray started her on a basic program that included a sound diet. That's not all. He asked her to drink at least a gallon of steam-distilled water each day, and at least a quart of red raspberry tea each day. He advised a three-day juice cleanse once each month, and prescribed daily doses of the Red Clover Combination.

After a time on the program prescribed for her, the woman became pregnant. She adhered to the program Ray prescribed for her throughout the pregnancy, and she suffered no complications. At its culmination, she delivered a strong, healthy baby completely free of the Rh factor. During the ensuing years, she and her husband became the parents of two more Rh-free babies.

Many of the experiences Ray had in Olympia shaped the direction of his career and led to the development of a number of his formulas. He often remembered one woman who came to him in despair. In the years since she had married she had gained almost a hundred pounds.

Her husband was threatening to leave her, and she herself was discouraged and felt defeated from her many unsuccessful attempts to lose weight.

Ray started with nutrition. He instructed the woman to faithfully adhere to the mucusless diet, a program of fruits, vegetables, grains, nuts, and seeds, it calls for avoidance of foods that cause the body to produce mucus. He also prescribed a three-day juice cleanse once a month. Ray promised the woman that if she was faithful to the program, she would lose weight- not rapidly, but in a gradual, healthy way.

Months after her initial visit to him, he received a jubilant phone call. She had lost all the weight she had gained, and wanted him to bring his family to a dinner of celebration. After they finished a glorious vegetarian dinner, Dr. Christopher and his family were beckoned to the backyard. Ray was puzzled as he took his seat in one of the chairs that had been carefully arranged around a freshly dug grave. As he saw the array of bright wild flowers that were scattered over the mound of fertile soil, he imagined that they must be planning to bury a beloved family pet.

Suddenly the children began carrying from the house pots and pans of expensive aluminum. They placed each one carefully in the grave. Without saying a word, they marched to the outside cellar and hauled up slabs of bacon and large smoked hams, each to be buried with the pots and pans. At a time of rationing and severe economic depression, their act was one of special sacrifice, and an inspiration for another of Dr. Christopher's formulas.

Wanting to help those who struggled with weight control. Dr. Christopher formulated CSK Plus, a product to be used in conjunction with the mucusless diet for safe, effective weight loss without robbing the body of essential nutrients. To help appease the appetite and encourage weight loss, he combined chickweed, safflower flowers, burdock root, parsley, Norwegian kelp, licorice root, fennel seed, echinacea, black walnut hulls, papaya leaves, and hawthorn berries.

Throughout the years he practiced he saw people experience astonishing results with CSK Plus. The licorice root and fennel seed both curb appetite and relieve cravings.

The ancient Greeks nibbled on fennel seeds to control hunger during periods of fasting. From his studies, Ray knew that the body stubbornly holds on to fat reserves if it is not getting all the trace elements it needs, and the natural foods that enrich CSK Plus enable the body to release excess fatty tissue. Other herbs in the formula feed the adrenal and thyroid glands and help regulate metabolism for permanent weight control.

The formulation of CSK Plus was only one example of Ray's compassion toward people with conditions that were usually ridiculed. Another was the sensitivity he demonstrated when a family, weary from the struggle, brought in a fifteen-year-old boy ravaged with epileptic seizures. The boy, who regularly suffered as many as twenty-five seizures in a single day, could not be left unattended, and family members had hired a staff of nurses to watch him night and day. The epilepsy created a roaring cacophony of noise inside his head, and in an attempt to quiet it, the boy pounded his head against the walls until blood poured from his ears, nose, and mouth.

Doctors throughout Washington were helpless to relieve his condition, specialists called in merely shook their heads with weak apologies. The boy could not talk and had never attended school. Medical authorities proclaimed him severely retarded and told the family to institutionalize him. Instead, they came to Dr. Christopher in a desperate last attempt for help.

Help the boy he did. Ray began by giving his parents strict nutritional guidelines, and next used therapeutic massage. Finally, he gave the boy two herbal combinations designed to build and strengthen the tissues of the nervous system. Ray showed the boy's parents how to brew them into soothing teas that he could sip through parched lips.

Within six months, the boy that had been labeled retarded was speaking, and the family brought in tutors twice a week to begin the arduous task of teaching him. Instead of being handicapped as the doctors had determined, he was instead brilliant! Within a few months of tutoring, he was at the normal grade level for a fifteen-year-old. He enrolled in school, free of the seizures that had once completely crippled him.

The herbal combinations Ray used to help the boy became B&B, MEM, and Relax-Eze, all formulated to heal the nervous system. MEM, a blend of blue vervain, blessed thistle, gotu kola, ginger root, cayenne, and Brigham tea, cleans and heals the tissues of the nervous system, restores memory, and strengthens the thought processes.

A combination of skullcap, wood betony, black cohosh root, hops flowers, valerian root, and cayenne, Relax-Eze also feeds and rebuilds the nerves. Especially rich in calcium and phosphorous, the herbs in Relax-Eze repair and nourish the spinal cord, the nerve sheath, and the capillaries of the nervous system. That's not all. The herbal combination helps reduce irritation of the nervous system, soothes spasms and tics, and relieves pain.

As a base for the formula, Ray used skullcap, an herb with the power to feed, regulate, strengthen and rehabilitate nerve cells without the side effects often caused by pharmaceutical nerve medications. Skullcap is naturally calming, especially for those troubled by worry or emotional distress. Ray watched it induce quiet, natural sleep in hundreds of his patients over the years. He often remembered one woman who had been troubled throughout her life with chronic insomnia, and for years she had never succeeded in sleeping for more than thirty minutes at a time. After sipping a tea brewed from Relax-Eze, she slept soundly throughout the night.

It was also in Olympia that Dr. Christopher developed two career trademarks. The first were his famous house calls. His wife stood in the doorway on many a chilly night, their children gathered around her skirts as she waved goodbye to the dedicated herbalist who never considered the hour or the weather above the needs of his patients. He often traveled more than fifty miles one way through thick darkness and over orchard-lined roads to ease the suffering of a caller he'd never met.

The second trademark was his unwavering willingness to meet the challenge of conditions usually considered incurable by the orthodox medical establishment. On one of his famed house calls in Washington, he entered the home of a man stooped with the pain and paralysis of arthritis. Shifting slightly in his wheelchair and speaking through the grimace of excruciating pain, he turned to Ray and said, "Please, please help me."

"No one has been able to help me yet. I have tried every doctor available, but nothing has worked."

With a final burst of strength, he told Ray that the ineffective medical treatments had completely obliterated his financial resources. He had nothing left.

"Don't worry," Ray assured him, stroking the man's gnarled hand. "You don't need money to pay me. Let's see what we can do for you."

From his bag Ray took his morning's harvest of burdock. The first burdock of the season, it had firm roots and fresh, tender leaves. Ray chopped the roots and brewed burdock tea, and instructed the man to drink as many cups as day as he could tolerate. Then he fashioned the tender burdock leaves into poultices, which he gently placed over the locked, painful joints. As he taught the man how to make his own poultices, he prescribed a healthy diet and quarts of fresh juices.

Within weeks, the man's joints began to loosen, and for the first time in years, he was able to stand. As the healing continued, he was able first to walk, then to run. Eventually, he was completely healed, a stranger to the wheelchair that had held him prisoner for so many years. Only a few months after he first saw Dr. Christopher he was back on the job as a night watchman, walking his rounds without difficulty.

Ray's knowledge of the gripping pain of arthritis came first-hand. As mentioned, he was born with rheumatoid arthritis, a disease marked by joint swelling, debilitating pain, and the destruction of bone, cartilage, and joints. Much of his dietary knowledge came, too, from experimentation with his own disease. When he enjoyed fruits, vegetables, grains, nuts, and seeds, coupled with daily doses of olive oil or wheat germ oil, he scarcely noticed his arthritis. But if he ate breads or pastries, he needed a cane to walk. If he ate sweet foods laced with sugar, he became crippled. And if he ate red meat, he was relegated to his wheelchair within forty-eight hours.

He knew first-hand, too, the healing benefits of burdock root, which works a chemical reaction on the calcified joints of arthritis. He treasured it as one of the ingredients of AR-1, a formula he designed to reverse arthritis and rheumatism.

To the burdock root he added yucca stalk, wild yam root, hydrangea, Brigham tea, chaparral, black walnut hulls, black cohosh root, wild lettuce leaves, sarsaparilla root, valerian root, and cayenne -herbs that detoxify and cleanse the body, remove calcium deposits, relieve pain, and kill infection.

Over the years of his practice. Dr. Christopher saw remarkable and complete healing of even the most advanced arthritis. He always warned patients that healing would not be immediate, there was much rebuilding and healing to be accomplished. In addition to AR-1, he suggested that his patients use hot fomentations over extremely painful joints, a quart or two of kidney bean pod tea daily, faithful adherence to sound nutritional guidelines, and daily use of his BF&C formula.

Dr. Christopher found that people stricken with an "incurable" condition were often the ones most willing to try natural herbal remedies. There seemed to be a pervading attitude that I've tried everything else... I guess herbs won't do any harm. It was just such a man that called him one blustery autumn day in Olympia.

A veterinarian doctor, he had contracted undulant fever fourteen years earlier in the packing houses where he had walked up and down the rows of carcasses, inspecting meats for the federal government. Despite advanced medical treatments by some of the nation's foremost experts, his condition had gradually deteriorated.

By the time Ray arrived at the house, the man was completely helpless. Attendants had to roll him over to prevent bedsores, and he couldn't sit up or feed himself. As Ray was introduced, the man gazed at him desperately. "I've never tried herbs, but I'm at the end of my rope!" he explained. "I've been given only days to live. Please help me- I want to live!"

Ray knew that the answer was a thorough cleansing, and he knew he didn't have much time to accomplish the task. He prescribed herbs to purify and cleanse the blood. He prescribed juices. And then he prescribed a combination of herbs that became one of his best-known and most effective-a formula designed to cleanse the bowels and colon. The veterinarian, near death, followed the prescriptions faithfully and, within six weeks, he was out mowing the lawn.

Neighbors who passed were astounded. "I thought you were dead!" they would call out to him. "No, sir! I've turned to herbs. And if you want to feel this great, you should see Dr. Christopher yourself!" From him and many like him, word spread of the herbal practitioner, filling the waiting room of Ray's office each morning.

The formula Ray gave the dying veterinarian was Fen LB, a combination he tailored over the years as patients gave him feedback. The product of extensive trial and error. Fen LB evolved as Ray's practice evolved. He carefully assessed patients; when one complained of cramping, he added ginger; when one complained that the formula made her nauseated, Ray added raspberry leaves.

When another complained of too much gas while using the formula, Ray added fennel to prevent gas and ease colic.

The importance of Fen LB is perhaps due to the fact that more than 90 percent of all disease is caused by congestion in the colon. The commonplace American diet of processed foods causes the bowel to weaken, creating pockets and balloons filled with old fecal matter. Dried, compacted matter builds up on the walls of the colon, becoming hard incrustations that soak up fluid; most people have pounds of this matter, which interferes with the body's ability to absorb nutrients. And the problem doesn't stop there. The toxins of "constipation" back up into the blood vessels, the lymph system, and even the body cells.

Ray knew that commercial laxatives were not the answer to the problem. They further weaken the bowel and cause it to lose its peristaltic action. Instead, he sought an herbal food that could tone, rebuild, and strengthen the colon while breaking loose the impacted matter on its walls.

The herbal food that Ray formulated works not only as a natural laxative, but it prevents toxic buildup in the bowel and works to tone, strengthen, and rebuild. He began with barberry bark, which stimulates the flow of bile and acts as a non-habit-forming laxative. He added cascara sagrada bark, a food for the peristaltic muscle that also works as a non-habit-forming laxative; cayenne, which stimulates the cells of the bowel and stops bleeding caused by irritation;

Ginger, which relieves gas and stops pain and cramping; lobelia, which acts as a catalyst and which prevents spasms and cramping; nausea-relieving red raspberry leaves, which restore iron and essential acids; turkey rhubarb root, a pure, mild laxative herb; fennel, which relieves gas; and golden seal root, which heals, rebuilds, and prevents infection.

As designed by Dr. Christopher, the formula works on both the small and large intestine, and is a combination of bowel "foods" that work compatibly together as a healing laxative.

Fen LB enabled Ray to help patients by getting to the source of their problems instead of treating mere symptoms. His credo was to work on pain without working on the cause is leaving the job undone, and he liked to remember many patients whose seemingly unrelated symptoms cleared once they started taking Fen LB.

One in particular was a woman who came to him because of severe pain in her shoulders which was so intense that she could not even lift her arms. After examining her briefly, Ray determined that she had a large pocket of fecal matter trapped at the ascending transverse junction of her colon. Toxic waste had drained through her bloodstream, irritating the nerves of her shoulder and eventually causing excruciating pain.

Ray began by massaging the reflexology point on her foot that corresponded to the ascending transverse junction of the colon. As he described it, she "screamed with pain" as he kneaded the spot. By the time the pain in her foot had eased, so had the pain in her shoulders. Ray followed the reflexology treatment with Fen LB, and she suffered no further recurrence of the shoulder pain.

Word of successes like these spread rapidly throughout the forested countryside surrounding Olympia, and Ray's practice grew rapidly, composed of the townspeople who worked the logging industries and apple orchards of the area. But while his practice was satisfying, there was something missing. Ray and Delia both loved the sunshine and the Olympia countryside was almost always blanketed with clouds or murky fog. Rarely did they feel the warm caress of the sun. They longed, too, for family.

Ray had grown up without the association of aunts, uncles, or cousins, and yearned for the rich companionship of his in-laws. Many times he remarked that had he been given the chance to pick any family in the world, he could not have done better than the Walker family.

And so the Christophers closed the practice nestled among the apple orchards of Olympia, satisfied with the knowledge that Ray had changed the lives of many who had waited on the wooden chairs outside his office. With their worldly possessions carefully packed and securely tied, they returned to their beloved Salt Lake City and to the waiting arms of eager family members.

## Chapter 4

### Without Honor in His Own Country: The Return to Salt Lake City

For all practical purposes, John Raymond Christopher should have been welcomed back to Salt Lake City with open arms.

Settled by Mormon pioneers in the mid 1800's, the parched desert valley was the cradle of herbology in the western United States. The Mormon Church itself had strong ties to the practice of herbal medicine. Church founder Joseph Smith recalled gathering golden seal and other healing herbs on the family farm in upstate New York. And Brigham Young, the evangelist and statesman who led bands of weary pioneers across this nation's prairies, planted medicinal herbs in fragrant patches behind his pale adobe house on South Temple Street.

A hundred years later as John Raymond Christopher and his young family set down roots in the peaceful valley sheltered by towering peaks, however. Salt Lake City was no longer the cradle of herbal medicine. With several major teaching and research hospitals scattered over its avenues, it had become instead a respected center of medical science. Townspeople weren't ready to accept the notion of natural healing.

Ray and Delia were surrounded by the family that loved them. They basked in the brightness of Utah's sunlight. They had a comfortable home, and two sweet children to share their lives. But Ray was unable to support his growing family with his herbal practice. In order to make ends meet, he started selling, often traveling out of state.

As he traveled, he seemed drawn to people who needed his help, and he always offered it freely. While he did not find a ready clientele in Salt Lake City, the time he spent in the loving embrace of family members was nevertheless a time of growth in many ways. (It was only after he moved to Wyoming and then again returned to Utah that he was able to establish his first multidisciplinary clinic, staffed by fourteen professionals, the clinic offered masseurs, zonal therapists, and a chiropractor. At its peak, the clinic staff treated between thirty and forty patients a day.)

During the time he was in Salt Lake City he also found the precious time needed to advance his education. Over the years he was able to juggle clinic and family commitments with the completion of a naturopathy degree from Iowa's Institute of Drugless Therapy and an herbal pharmacist degree from the Los Angeles Herbal Institute.

And it was in Salt Lake that he began laying the groundwork for his School of Natural Healing. Established in 1953 as a way of sharing his knowledge with students interested in practicing natural healing, it was eventually also established in England.

But the greatest highlights of his time in Salt Lake City, as with his time anywhere he established a practice, were his patients and the impact he had on their lives. He loved to remember one family he met in Great Falls, Montana, while selling encyclopedias. Blessed with eight children, the family was crowded into a small frame house, and what they lacked in space, however, they seemed to more than make up for in love. Her frantic telephone call one afternoon was fraught with despair.

"Oh, Dr. Christopher, please help me!" she cried. "There's a terrible intestinal flu running rampant through our area. Whole families are coming down with it. In some cases it's lasting five or six weeks! Two of our children have come home with it, and I know we'll all be infected before it's over. Oh, please, tell me what to do!"

As he considered an answer, a smile crept slowly over Ray's lips. Was she more concerned with how to take care of all those sick people, or with the fact that the family shared a single bathroom?

Remembering a thick patch of red raspberries along the family's back fence, Ray instructed the

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worried mother to gather as many raspberry leaves as she could, bushels if possible, taking care not to strip more than a third of the leaves from any one bush. He then told her how to brew a tea from the harvested leaves.

"Give your two sick children nothing but raspberry tea," he instructed. "Give them all they can drink, and nothing else. When the other members of the family get home, give them tea, too. That's all they should eat or drink until the flu has cleared up" And, with a reassuring promise, Ray told her the family should be fine by morning if they followed his instructions carefully.

A few days later he received the happy report: the two sick children were fine by morning (instead of suffering for several weeks, as had their classmates). No one else in the family got ill.

Ray followed the family with interest over the years. After bearing sixteen children, the mother graduated from Brigham Young University as a registered nurse. At her graduation ceremony, she was honored by University President Ernest L. Wilkinson and recognized with a standing ovation from her classmates. Over the years as she practiced nursing she quietly helped patients by recommending herbal remedies.

While medical science stubbornly insisted that there was no cure for the flu or the common cold. Dr. Christopher heartily disagreed. He knew the family in Great Falls had cured a viral flu with the savory tea of red raspberry leaves, and he knew that other herbal remedies worked just as well.

He combined some of those remedies in Garlic, Rosehips, & Parsley, his formula for colds and flu. He started with a base of garlic, known throughout the ages for its ability to kill infection. He added rose hips, parsley, watercress, and rosemary leaves. He formulated the combination in both tablets and capsules and advised patients to take each with a cup of steam-distilled water. Garlic, Rosehips, & Parsley capsules could also be opened and brewed into a soothing tea for even faster relief.

Another malady physicians shrugged their shoulders over was the seasonal affliction of hay fever. While most who attempted to treat it relied on chemical remedies. Dr. Christopher formulated SHA, a combination based on a natural plant extract of pseudoephedrine. The product was manufactured in an herbal base of Brigham tea, marsh-mallow root, burdock root, parsley, cayenne, chaparral, golden seal root, and lobelia.

Used in conjunction with a mucusless diet of fruits, vegetables, grains, nuts, and seeds, SHA feeds and strengthens the pulmonary organs. Dr. Christopher chose each herb in the formula with care. Together, they ease nasal and respiratory congestion, working as a natural decongestant and antihistamine.

For people with an especially stubborn case of hay fever. Dr. Christopher advised another natural remedy to be used with SHA; he advised patients to thoroughly chew and swallow a thick pulp of chopped horseradish root and apple cider vinegar three times a day.

One of Dr. Christopher's trademarks was his deep sensitivity for his patients, and many of his formulas were developed in direct response to their requests for help. During his practice in Salt Lake, he was called on to treat many whose bodies had been battered by the physical effects of stress. Searching for a way to heal and rebuild the adrenal glands-the front-line soldiers in the body's stress response- he developed Adrenetone.

He began with a base of mullein leaves, long considered the perfect "gland food." To that he added licorice root, which directly supplies the adrenal glands with the nutrients they need for healthy function. The next ingredients in Adrenetone were gotu kola, which relieves fatigue and stimulates function of the adrenals; cayenne, which brings oxygen and other nutrients to the glands; and ginger root, which helps flush out congested capillaries. He rounded out the formula with Siberian ginseng, successfully used to ease stress and boost endurance among USSR athletes, and hawthorn berries, which tone the heart and reduce its load during periods of stress.

Another formula developed in response to patient request was Prospallate, a combination of herbs that dissolves kidney stones, kills infection, and clears sedimentation in the prostate gland. Through extensive patient use. Dr. Christopher discovered that the formula consisting of cayenne, uva ursi leaves, parsley, golden seal root, gravel root, juniper berries, marshmallow root, ginger root, and Siberian ginseng, was an effective remedy for gonorrhea. Pro<sup>o</sup>allate works even better when taken with parsley tea.

With Fen LB to tone and rebuild the bowel. Dr. Christopher next turned his attention to a system equal in importance to the intestinal tract-the urinary tract-which pumps, filters, and eliminates the more than 60 quarts of fluid that pass through normal kidneys in a single day. Of the 60 quarts

of fluid that are extracted by the kidneys each twenty-four hours, approximately two quarts are eliminated as urine; the rest is filtered and returned to the bloodstream for circulation throughout the body.

The kidneys-each containing two to four million filter mechanisms-filter approximately a quart of blood every minute. That means all the blood in the body passes through the kidneys once every seven minutes. To accomplish this task, the kidneys need to be in premium health.

To help patients troubled by incontinence, bedwetting, kidney stones, or bladder/urinary infection. Dr. Christopher developed Juni-Pars, an herbal combination specifically designed for the kidneys and bladder. As a base he used two of the most effective and fastest-acting natural diuretics-juniper berries and parsley. Juniper berries also correct problems in voiding urine, and parsley is one of the best-known herbs for rebuilding urinary tissues. Dr. Christopher liked to remember one woman in Chicago who lay dying from severe edema. After only four days of parsley tea and parsley fomentations, she was healed.

To the juniper berries and parsley. Dr. Christopher added ginger root, which stimulates all the herbs to work together; uva ursi leaves, which dissolve kidney stones and other inorganic calcifications; marsh-mallow root, which acts as a soothing and healing emollient to ease the flow of urine; cramp bark, which relieves spasms; and golden seal root, which kills infection and heals tissues.

Numerous patients who were given Juni-Pars were able to overcome incontinence and chronic urinary tract conditions.

Despite the love of family members and the comfort of being "home" again, Ray was frustrated and discouraged in the Salt Lake Valley. He could not become licensed in the state of Utah; one of the city's naturopaths suggested that he move to Evanston, Wyoming, to become licensed. Once he was licensed in Evanston, the naturopath assured him, he could return to Utah and set up practice there.

So Ray approached Delia with the idea, and the Christophers again tucked their belongings into boxes tied with string.

It was then that they fully realized the financial hardship they had endured for so long in Salt Lake, for twenty miles from their destination in Evanston, they ran out of gas. With no money to buy more, Ray trudged along the roadside until he spotted a rustic farmhouse surrounded by fields of winter wheat. Told of the family's plight, the farmer gave Ray gasoline from the tank of a rusted green tractor. On borrowed fuel, but plenty of hopes and dreams, the Christophers arrived in Evanston.

## Chapter 5

### "We Missed That One Day of Summer": The Chilly Town of Evanston

Fueled by the gasoline from the rusty green tractor outside of town, the Christophers arrived at the comfortable place they'd call home. With a spacious office at the front, it had cozy living quarters in back roomy enough for Ray, Delia, and their children. With nothing to live on but the few boxes of food they had tucked into the car, they hung out a sign announcing their arrival, and waited for the patients to come.

Townpeople passing on the wide sidewalk in front of the office eyed the sign with suspicion. They'd never even seen a naturopath before. No one was quite sure what a naturopath was. All the practitioners who had settled in Evanston's high country had been orthodox medical physicians; the town didn't even have a chiropractor.

Just when Ray was afraid they'd starve, a few patients started trickling in, most from curiosity, and most for minor ailments like athlete's foot or a sprained ankle. Even those few weren't quite enough to sustain the Christophers, as they were having a rough time putting food on the table and paying their monthly bills. When circumstances reached their most dire, the Christophers got the chance to receive the blessings that come from sacrifice.

It all started with a phone call. Delia's sister Jane, a model who was working part-time in California to build a career in film, decided she wanted to serve a mission for the Church of Jesus Christ of Latter-day Saints. Her voice sang over the telephone wires as she told them, "You know that father can't support me. But if I can find someone who will, the Church will let me serve a mission."

"We'll be glad to send you on a mission," Ray responded without hesitation. "And we'll keep you on your mission for two years."

As they said their good-byes and Ray replaced the black phone in its cradle, his eyes met those of his wife. How would they manage? They were scarcely able to eat for lack of funds, and there were times when the two of them shared a paltry amount so their sweet children could be filled. But they shared something besides their meager meals, they shared a faith in the Lord and an attitude of thanks for the many times He had helped them. Somehow, they'd manage.

As Jane prepared to enter the mission home, she asked her benefactors where they wanted her to serve. Ray, remembering the people who had left him at the orphanage in Salt Lake City so many years earlier, said, "My father was from Paris, and my mother was from Switzerland. I would love to see you serve in the French-Swiss Mission!" Then, catching himself, he told her, "Tell them to send you where they need you the most."

The Christophers borrowed money against the naturopathic equipment in the Evanston office to purchase the clothing and supplies Jane would need for her two-year mission. With the last of their funds, they boarded the train to travel with her to Salt Lake City.

The line of hopeful missionaries was long that afternoon, and church authorities shook each eager hand, giving each man or woman an assignment in some corner of the globe. When they reached Jane, one paused. "Where would you like to go?" he asked.

"I want to go where you need me most," she replied, echoing the words of her brother-in-law.

After a pensive moment he announced, "The place you are needed most is in the French-Swiss Mission." Ray's heart soared. He had the chance of sending a missionary to the land of his ancestors.

As Ray and Delia made the weary journey back to Evanston, they reflected on what they had just done. Early in the morning, as the frost etched graceful designs on the windows of the passenger car, Ray fingered the coins in his pocket. Hungry and tired, he and Delia spent their last few dollars on a meal in the dining car, and prayed for their family's future.

Hanging over the wide sidewalk, Ray's sign swung silently in the frosty breeze. As he turned the

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doorknob to enter his office waiting room that morning, he gasped.

It was filled. Patients sat in every available space, waiting for appointments to see the new naturo-path in town. From that day forward, his practice grew. There was money enough not only to keep Jane on her mission, but to feed his family again!

The patients themselves were the best advertisements Dr. Christopher could hope for.

Word-of-mouth recommendations came from people who had suffered for years, unable to get relief from the orthodox medical community. There was the woman whose arthritic joints were at last freed, the asthmatic whose airways were finally opened, and perhaps most astonishing to the residents of Evanston, the polio victim who at last walked.

Ray remembered the case fondly. The man arrived at the office in a wheelchair, bearing his doctor's pronouncement that he would never walk again. He had accepted with sorrow his fate, but was hoping to find some relief from the pain that accompanied his condition.

"I know I can relieve your pain," Ray told the afflicted man. "And if you'd like to walk again, I think I can help you do that, too." Given a program of herbal foods and dietary guidelines, the man left the office with new hope. Within a few months, he cast aside his wheelchair and walked around town, telling others about Dr. Christopher.

Although their business flourished, the Christophers had a hard time adjusting to the cold climate of Evanston. One of their favorite jokes was the sentiment that "we missed that one day of summer - we were in Salt Lake that day!"

From the time he was a young boy playing in the gardens along Highland Drive, Ray had loved the sight of a tender mother cradling her precious infant. Life was sacred to him. Throughout his practice he opposed birth control and refused to assist in abortion.

He remembered the chilling example of one belligerent young woman who was led into his office seeking an abortion. Although his patient schedule was relentless, he counseled her for almost an hour regarding the sanctity of life. "This baby has been sent for your enjoyment," he concluded. "Let it corner give it life; take care of it and love it."

Jumping from her seat, she screamed, "I hate you! If I had a gun, I would kill you!

I'm going to get rid of this baby, and if you won't do it, I'll get another doctor to do it!" As she ran from the office, he pleaded with her to remember the things he had told her.

About a year later, the woman came to the office again, this time bearing a sweet baby in her arms.

"I want to thank you," she said, stroking the infant's soft cheek. "I told you I hated you, that I wanted to kill you, but you made me think. I went to three other doctors seeking an abortion. Each time as I sat in their waiting rooms, I heard your voice. I never went through with it. This baby has changed my life, and she is the most beautiful thing I could ever have been given."

It was while in Evanston that Dr. Christopher had some of his greatest opportunities to help mothers and their babies. On one memorable occasion, the jangling of the telephone line cut through the heavy morning air. A frantic woman announced that she was hemorrhaging rapidly and about to lose her baby. "I've lost babies before," she cried, "and I want to save this one! Please, can you help me?"

Dr. Christopher instructed her to stay in bed until he arrived. He worked quickly to fill his bag with the herbs he knew would help. Just as he was about to press open the door against the frigid Evanston morning, the phone rang again. This time the message came from a small frame house on the opposite side of town, but the words were the same: another frightened woman was hemorrhaging rapidly and losing her baby. She, too, pleaded for help, and was also instructed to stay in bed until Dr. Christopher arrived. He paused long enough to stuff more herbs into his bag before racing into the not-yet-warm morning.

Each woman was given the same instruction: half a cup of false unicorn tea every half hour until the bleeding stopped, then half a cup every hour. They were to continue with half a cup of tea three times a day, enhanced with plenty of fresh juices and total bed rest.

Within months each of the women traveled the wide sidewalk in front of Dr. Christopher's office, each carrying a perfectly formed baby in the soft folds of a pastel blanket.

Dr. Christopher valued false unicorn so much that he used it in two formulas especially designed for women. The first is Nu-Fem; formulated to help rebuild a malfunctioning reproductive system, it contains golden seal root, blessed thistle, cayenne, uva ursi leaves, cramp bark, false unicorn root, red raspberry leaves, squaw vine, and ginger root.

One of his most versatile formulas, Nu-Fern was recommended by Dr. Christopher to women with a wide array of problems, ranging from menstrual cramping and flooding to infertility. Because blessed thistle provides a natural source of estrogen, Nu-Fem corrects the estrogen imbalance that is at the source of many female problems.

Ray's files were filled with letters from hundreds of women who used the formula with success. He found that it relieves cramps, pain, and flooding due to menstruation, reducing the flow without stopping it. The powerful uterine sedative in cramp bark helps relax the uterus and ovaries, resulting in painless periods. Other herbs in the formula promote a regular menstrual cycle.

Ray remembered a seventeen-year-old Texan whose menstrual cycles were so physically devastating that she was hospitalized each month for dehydration and excessive vomiting. Nu-Fem alleviated her problems.

A woman that Ray met while practicing in Evanston had suffered from agonizing menstrual periods for more than ten years, typically being bedridden with severe pain for a week each month. She had invested tens of thousands of dollars on specialists from coast to coast without avail. After using Nu-Fem for only ninety days, she experienced no pain or flooding with her periods, and had a twenty-eight-day cycle for the first time in her life.

In addition to easing cramping, the cramp bark in Nu-Fem helps rebuild the reproductive organs and correct the position of the uterus. An Ohio woman who had suffered severe pain from a tipped uterus was scheduled for a hysterectomy when she appealed to Dr. Christopher for help. After taking Nu-Fem for five days, her pain was eased. Within several weeks, her physician was astonished to find that the uterus was no longer tipped.

Because Nu-Fem provides a natural source of estrogen, delivers healing foods to the reproductive organs, and rebuilds organs that are immature or damaged, it also aids in conception and makes normal pregnancies possible. Ray liked to remember a couple who used the formula and conceived a child after fourteen years of desperate longing. Their success came after using Nu-Fem in conjunction with a proper diet, plenty of distilled water, wheat germ oil, and Fen LB.

A forty-one-year-old Portland woman who asked for Dr. Christopher's help had suffered nine miscarriages in the twenty years of her marriage. All had occurred during the second or third month of pregnancy, stealing with them her dreams of wading with a fair-haired child at the ocean's edge. Nu-Fem restored her reproductive system, and with it her dreams, as she successfully bore a child.

Even those who are pregnant reap the benefits of the herbal foods in Nu-Fem. Red raspberry leaves calm nausea and morning sickness, quiet false labor, assist contractions, check hemorrhage during labor, aid in rapid and safe delivery, relieve after-pains, and enrich mothers milk. Cramp bark aids in proper positioning of the fetus and prevents painful leg cramps during pregnancy. Squaw vine was widely used by the North American Indians to promote easy delivery; for centuries, they were back in the fields working the same day they gave birth. Cayenne improves strength and endurance during labor as well as stopping hemorrhage following delivery.

The other formula Ray based on false unicorn was Changease, a natural source of precursors to hormones needed by both men and women of all ages. He recommended it to many of his patients during puberty, pregnancy, nursing, and menopause, and used it in treatment of "male menopause" as well. To false unicorn was added black cohosh root, sarsaparilla root, Siberian ginseng root, licorice root, blessed thistle, and squaw vine.

The herbs in Changease help the body maintain the proper balance of hormones because they provide precursors to hormones. As such, the body has to do very little to convert them to estrogen and other hormones, which are easily assimilated and excesses naturally eliminated by the body. Dr. Christopher taught his students that synthetic hormones (such as those used in hormone replacement therapy) cannot be completely assimilated by the body.

The excess is stored by the body, builds up in body tissues, and eventually causes potentially serious side effects.

Changease eases the physical problems associated with puberty, provides quick relief for menstrual pain, acts as an outstanding pregnancy "food," and relieves hot flashes and other symptoms associated with menopause. Because both men and women need varying amounts of female hormones, Changease is also an excellent remedy for hormonal imbalance in men.

Blessed thistle, one of the herbs in both Nu-Fem and Changease, had special significance for Dr. Christopher: throughout the years of his practice, he used it to help many women nurse their

babies, even those who had adopted.

Historically, blessed thistle was known as the "holy herb." Legend has it that the French Emperor Charlemagne once found his army threatened with destruction by an epidemic of bubonic plague. An angel instructed him to shoot an arrow from his crossbow into the air - and that it would fall upon a plant that would cure the disease. The arrow fell on a blessed thistle plant, which eventually became the emblem of France's fourteenth-century Order of the Thistle.

Dr. Christopher's use of blessed thistle was not nearly as dramatic as that of an emperor seeking an angel's intervention on behalf of his dying army, but his endorsement of the humble herb saved untold numbers of innocent babes. He remembered one mother who lost her milk supply for more than two months. Her baby, who could not digest commercial formulas or animal milks, wasted away to the very brink of death. Sipping the blessed thistle tea she was given by Dr. Christopher, she was once again able to nurse her baby, who thrived and grew to play among the wild flowers that dotted the mountain meadows.

Another mother was ordered by a doctor to wean her three-month-old baby to a bottle. Her milk supply was insufficient, he said, and the baby was beginning to fail. Blessed thistle endowed her with a good supply of rich milk, enough to sustain her baby well. Still another mother of a large family grew fatigued and began to lose her milk supply, and just two capsules of blessed thistle each night restored so much milk that her nightclothes were wet with it.

But perhaps the most moving experiences for Ray involved women who breast-fed babies they adopted through love and charity. When one young mother was tragically killed in an automobile accident, her seventeen-year-old sister brought the blue-eyed baby girl to Dr. Christopher. The baby had been thrown clear of the car and was miraculously uninjured in the accident, but could not digest formula or cow's milk. As she cradled the baby to her shoulder, the young woman asked if she might nurse it. After a few days on blessed thistle tea, the seventeen-year-old had an ample supply of rich, nutrient-dense mother's milk. She reared the baby girl until she was weaned.

An unforgettable incident occurred shortly before his retirement when a tall, blond woman came to Dr. Christopher's office in Orem, Utah. With a proud smile, she told him, "I'm going to adopt a baby." Then, without hesitation, she leaned forward. "I've heard you have a program that will help me breast feed my baby. This is our fourth adopted child, and I haven't been able to breast feed any of them."

Prescribing a sound diet, plenty of fresh juice, and quarts of distilled water each day, Ray advised that she drink a cup of blessed thistle tea at least three times a day.

A few months later the same woman came through the doorway of his Orem office, draped like royalty in a deep purple robe trimmed with white fur. She threw the robe aside, and there, against the stark whiteness of her breast, nursed a chubby brown Navajo baby. Tears welled in her eyes as she gazed down at the suckling infant. "I love each of my four children so much," she whispered, "but I feel so close to this one. He is blood of my blood."

The practice in Evanston grew steadily, and eventually the small waiting room was filled to capacity each day long before most people in Evanston finished their morning chores. Some people came to be treated themselves, others brought loved ones or family members who needed the help that holistic healing could offer. Some needed only simple treatment, others presented problems that were so complex they had been abandoned by the medical community. Some even suffered from mental as well as physical illnesses.

One such woman came to the Evanston office one winter morning with her sixteen-year-old daughter. A victim of Down's syndrome, the girl had been institutionalized in Lander at the state's mental hospital (an "insane asylum," as they called it then). The girl walked slowly around the office, gazing intently at the equipment and the clear glass jars of dried herbs. Her face was brightened with a sweet smile, but she could not speak. Occasionally she uttered a guttural sound, but nothing was recognizable.

"I have fought to have my daughter at home for the next three months," the mother explained, never diverting her gaze far from the girl who wandered about the office. "Can you help me?"

Outlining a strict program of holistic healing, Dr. Christopher sent them back into the snowy Evanston morning. He checked on the child frequently, stopping to visit whenever he could find the time. By the end of the three months, her mind seemed quicker and brighter. She responded better to instructions. Best of all, she was speaking simple sentences that could be clearly understood by any who listened. Officials at the hospital were amazed with her progress when the child returned at the end of only ninety days.

As happened wherever Dr. Christopher practiced, the people in Evanston benefited from his unusual understanding of the human body and his inspired and unique formulas, combinations of herbs designed to build and heal. One particular patient arrived at the door of Ray's house well past midnight. Ray had just returned to his cozy home from making house calls, and was ready to settle wearily beneath the hand-stitched quilts, when there came a frantic pounding at the door.

Pulling his robe over his shoulders, Ray threw open the door. Leaning against the door frame were two young men, each supporting a wizened old man who was struggling for every breath of air. Ray recognized the wheezing sounds of asthma. The man who leaned on the others for support was probably one of the sickest and most pathetic Ray had ever seen.

"Please!" cried one of the young men. "Our regular doctor is out of town, and we can't find his assistant. Can you help keep Pap alive?" Ray nodded as he ushered the three out of the night air. As he settled the gasping old man into a chair and prepared a cup of peppermint tea, Ray listened to the tale of the old man's illness.

He had been stricken with asthma for twenty-six years, for twenty of those it had been so severe that he could not hold a job. It had been more than twenty years since he had reclined in bed, for if he lay down, he choked up so severely he risked death. His sons had built him a special chair in which to sleep at night.

Both sons were working full-time to meet the family's expenses. It wasn't just a matter of keeping a roof over their heads and food on the table, one explained-their father's medical care had devastated their savings and nearly ruined them financially.

The asthma was now so severe that he required shots, respiratory therapy, and oxygen treatments, often more than twice a week.

Dr. Christopher knelt by his side and helped him sip the steaming peppermint tea. Ten minutes later, he administered a full teaspoon of tincture of lobelia. Ten minutes later, as the four of them talked. Dr. Christopher spooned in another measure of tincture of lobelia, and ten minutes later, he swallowed the third teaspoonful. Then Dr. Christopher quietly began gathering pots, pans, and buckets.

Suddenly the man began vomiting. From two until five that morning he threw up, and with it came the thick, stifling, blackened phlegm that had choked his airways. Because he had sipped the cup of peppermint tea, his muscles were relaxed, he suffered no soreness from the hours of heaving.

Just after five o'clock, well before the morning sun began peeking over the mountainous horizon. Dr. Christopher turned to the boys. "You can take your father home now; he is finished with the treatment. He is fine now."

As the two rushed to their father's aid, he waved them aside with a brush of the hand. "You don't have to help me, boys," he said. "I'll walk." After seeing them out into the early morning. Dr. Christopher finally settled into bed for an hour's rest before the patients began filling his waiting room again.

He wasn't the only one who settled into bed that night, as the two young men signaled for their father to sit in his chair, he shook his head. "Put me to bed, boys" he insisted. "I'm going to sleep in a bed tonight" "You can't. Pap!" one argued. "It will kill you!"

But there was no persuading the man, who was gulping the fresh Evanston air as if it were a feast. He settled into bed and fell into a heavy sleep and slumbered deeply for thirty hours. Finally, he arose from his bed, filled his chest with oxygen for the first time in twenty years, and announced, "I'm healed. I'm going out to get a job"

Years later, a tall, handsome young man stopped Dr. Christopher on the street in Salt Lake City. "Do you remember the time we woke you in the middle of the night when my dad was having that asthma attack?" Dr. Christopher smiled at the memory. "Well, it's been years now, and he's never had another attack. He got a job as a gardener, and he's never lost a day's work. He sleeps in a bed every night. We don't know how to thank you"

For others who suffered from asthma, as well as any respiratory condition. Dr. Christopher developed Resp-Free, a formula of chick-weed, marshmallow root, mullein leaves, comfrey leaves, and lobelia. He chose all of the herbs in the formula for their ability to rebuild the lungs and expel the thick mucus secretions that accompany so many respiratory conditions. Some also soothe inflamed tissue, relieve pain, and heal hemorrhaging tissues in the lungs. In addition to Resp-Free, Dr. Christopher recommended a sound diet, plenty of steam-distilled water, [oil](#)

[massage](#), and external application of BF&C ointment.

One of the most valuable herbs in the formula is chickweed. It soothes, softens, and reduces irritation of the mucous membranes while relieving the cough of colds, influenza, and bronchitis. It activates the liver to eliminate the toxins related to these conditions. A powerful expectorant, it increases the secretions of the broncho-pulmonary membrane, facilitating the discharge of mucus.

While Resp-Free enabled some to partake of the breath of life, another of Dr. Christopher's formulas gave others the precious gift of sight. Herbal Eyebright is formulated around the eyebright herb, so named because early herbalists discovered that it helped heal the eyes. Along with the other herbs in the formula - golden seal root, bay-berry root bark, red raspberry leaves, and cayenne -it feeds the cell structures around the eyes. Dr. Christopher used it on many occasions to help restore sight to those who could not see.

Herbal Eyebright is usually brewed into a tea and applied to the eye externally in an eye cup as well as taken internally. Dr. Christopher used it to heal the eyes and relieve the pressure of glaucoma, to remove scar tissue on the cornea caused by infection, and to remove cataracts. An elderly man in Fort Worth, Texas, who suffered from both glaucoma and rapidly-growing cataracts healed both with the formula. A Michigan woman used Herbal Eyebright for ten days and removed cataracts on both eyes. A woman in Covington, Kentucky, who had suffered an 80 percent loss of vision due to subretinal hemorrhage had her sight completely restored with Herbal Eyebright.

Some of the cases seemed to defy possibility. A woman in California had the beginnings of cataracts when the jell broke in both her eyes. Her vision failed, and her eyes were so dry that she had to lift her eyelids with her fingers each morning. With continual use of Herbal Eyebright, her eyes healed and her cataracts dissolved.

But perhaps the most remarkable stories were those involving the gift of sight. An elderly woman who had lived in the dark loneliness of blindness for many years had her sight completely restored. A young man whose eye had been injured and without sight for ten years was able to see again. Two young adults, blind since birth, used the formula and saw the radiant hues of purple crocus nestled against the crisp white snow.

Two of Dr. Christopher's most touching patients were babies, and both involved the use of Herbal Eyebright. One story was told in the careful pen of a writer from Missouri. Her child had been born with Coloboma; one eye was smaller than the other. Three leading specialists examined the child and proclaimed that his blindness was permanent. She began patiently using Herbal Eyebright with a drop-per, placing the healing drops in each of his eyes. Within three months, the baby who was supposed to be blind was reaching for objects. By the age of three, he ran with excitement through the Missouri cornfields, his vision perfect. His mother concluded her tender note, "What a joy! Thank you."

Dr. Christopher remembered, too, the young couple who approached his lectern one night. "Our baby was born without optic nerves," the sweet mother explained. "Is it possible for us to help him? Can we help restore his eyesight?"

Ray was pensive as he considered an answer. To promise eyesight to one born without optic nerves was almost impossible! It would be like asking someone without ears to listen to the haunting strains of a Beethoven symphony, or like asking someone without legs to run through the fallen leaves along an autumn lane.

"I can't promise that your little boy will ever see" Dr. Christopher finally replied, "but I can recommend some herbal foods that will harm him in no way" With that, he recommended Herbal Eyebright dropped in the eyes and given internally, and B&B Tincture dropped in the ears and given orally.

Six months later the same couple trembled with excitement as they again approached Ray before a lecture. Tears streamed down this mother's cheeks as she told him that their toddler chased balls across the room and picked them up, engaged in the playful games all little boys love.

As his practice in Evanston drew to a close, and Dr. Christopher moved his young family back to the warmer climate of Salt Lake City, he left behind a tremendous legacy for the people of the small Wyoming community. One of the things he was most famous for was his great understanding of nutrition. He was well ahead of his time in many of his teachings. For example, he advocated the use of cruciferous vegetables, especially cabbage and broccoli, for healing and prevention decades before the American Cancer Society gave its famous endorsement. He promoted carrots as one of the most valued foods. He encouraged all he met to till the soil, plant a

garden, and harvest fresh produce. If anyone dared to protest that crops didn't do well in his area, Dr. Christopher never hesitated to tell the tale of his own father, who against all odds grew almonds and sugar maples in Salt Lake City.

He was an early proponent of a low-fat, high-fiber diet. He discouraged the use of processed foods, and encouraged people to instead eat the fresh fruits, vegetables, and grains harvested in their own backyards. He warned against the dangers of refined sugars and starches, and encouraged people to avoid meat.

And wherever he went he prescribed plenty of steam-distilled water and juices made from raw fruits and vegetables.

He often laughed about an experience he had while in Evanston. He was called to a sprawling farmhouse in Woodruff, Utah, a forty-mile journey from his small office in Wyoming. Inside he found the rancher and his entire family all weak and listless from an undiagnosed sickness.

As Ray quizzed the rancher and his wife, she described the ailment that afflicted them. "I'm so weak, I have to rest before I can even clear away the breakfast dishes. Then, after I've washed half of them, I have to rest again before I can finish." Her husband and children weren't any better off. The fences were in need of repair, the outbuildings needed a fresh splash of paint, homework wasn't being done, and grades were plummeting.

Ray stroked his chin thoughtfully. "What are you eating?" he asked.

"Oh, we eat well!" the rancher assured him. "I just stored up a thousand pounds of white flour, and we have plenty of canned goods, plenty enough to see us through the winter." "Have you ever considered whole wheat flour?" Ray asked.

"You could never force that down me!" the rancher jeered. "I don't believe in it. There's no common sense to it at all."

With his characteristic wit, Ray prepared to make his point with clarion brilliance. "Now, you're a rancher," he mused, "and you've got some prize cattle and quarter horses out there. Do you feed them carrots?"

"You bet!" the rancher smiled. "I've got about half a ton of carrots out there!" "Do you ever eat them?" Ray asked.

"Naw..." the rancher drawled. "They're just for the horses-you know, to keep them in good condition." "What about grains?" Ray continued. "I've got coarse-ground grains in the shed for the cattle." Then Ray proposed a daring experiment. "You bring in from the shed a thousand pounds of those coarse-ground grains. Prepare it over low heat until it is soft and chewy, stir in a little honey or some fresh-diced fruit. You eat that. Then take your thousand pounds of white flour, and give it to the cattle"

"What?" the man spouted with anger. "That horrible white flour would kill my prize cattle!"

Electrified silence filled the air. The rancher's face reddened as he realized the folly of his words. At last, he began to laugh. "You caught me" he smiled. "All right. I'll do it your way" Do it they did, and within just a few weeks of following the gentle doctor's orders, they knew the strength and vitality of health.

## Chapter 6

### A Legacy of Courage

As John Raymond Christopher took down the neatly lettered sign in front of his Evanston office and turned the key in the lock for the last time, he concluded not only a rural practice, but a significant chapter in his life. As he steered his family along the desolate wind-swept roads toward their native Salt Lake City, he probably had little idea of the trials that awaited him there.

As always, Ray was at peace in the bosom of his family. He was a tender father, a favored uncle. He cherished the association with those who understood him and his chosen trade. Perhaps it is well that he spent those difficult final years surrounded by his loved ones, for they gave him much of the strength he needed to carry on.

Established again in the valleys nestled between Utah's majestic Wasatch and her copper-studded Oquirrhhs, Dr. Christopher hung out his shingle and set about the task of healing those who sorrowed. If his was a privileged profession, there was no privilege attached, and the cold nights he spent alone in jail cells were little reward for his unselfish gift of time and talent. Because despite the naturopath's earlier promise, Ray was not licensed in the state of Utah, even though he had fulfilled the requirement of first being licensed in Wyoming.

Years before when he had struggled to establish a practice, he had nearly starved for lack of patients. This time it was different. Again he struggled to establish a practice, and far too few patients sought his help. But this time people didn't cast herbs aside as being worthless. This time people believed herbs to be harmful, and they vowed to prosecute any who prescribed their use. Legal harassments began. The few faithful patients who still made their way to Dr. Christopher were themselves suspect.

One day, a young man and his sister called Dr. Christopher to their home. Lying in bed was their mother, deep pain was etched across her ashen brow. Ray could almost taste death as he stood above her.

The children explained that she was riddled with cancer and had been given only hours to live. "But she wanted to die at home," they explained, "and we love her so. We wanted her here, too. Now we are afraid. Can you do anything to ease her pain until she passes?"

Ray had been warned against visiting the woman, warned that there would be legal ramifications if he attempted to treat her. But seeing her wrenching pain, he could not turn his back on her. His mighty compassion rose to the surface and spilled over to the brave victim who waited for death to carry her from pain and disease.

He leaned close to her and took her hand. "I don't know how long you'll be with us," he began, choosing his words with the utmost care. "But if you will follow this program for a few days, you will be free of pain. And I believe you will enjoy ease until your time comes." She nodded, the effort of a weak smile spreading across her drawn lips. He left the family with dietary instructions and a handful of herbal formulas. As he bid them farewell on their covered porch, he noticed neighbors peering out from behind heavy lace curtains in the house across the street.

He visited her several times after that, curious to note her condition. She was able to get out of bed. She was able to take short walks among the gardens she had so faithfully tended. A painless smile graced her lips, and she was able to share the association of her beloved children.

One morning a few months later, she gathered her children around her and bid them goodbye, telling each how much she loved them, then she closed her eyes and died peacefully, without pain. When they phoned Ray with the news of their mother's passing, her children expressed their gratitude to him for her final few months of joy and companionship.

It was a bitter victory for Ray. A few days later the police came to his house, handcuffed him, arrested him for murder, and transported him to jail. The neighbors across the street, the ones who had peered out from behind the heavy lace curtains and had done nothing to help their friend,

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had noted Ray's license plates and filed charges against him when she died.

It was lunacy at its height! Here was a woman, sentenced to death by the ravages of cancer and the proclamations of the orthodox physicians who had treated her. Yet Ray, who possibly prolonged her life by a few weeks, and who definitely gave it quality, was the one who paid the price. It was so, in the words of the prosecuting attorney, because he was an "unorthodox physician." Unbelievably, Ray's attorney shook his head. He wasn't sure Ray could avoid a prison term.

It was the beloved children who first summoned Ray to their mother's bedside that offered his greatest defense. After answering the attorney's interrogation, the angry young man insisted on giving his own statement. When the judge consented, all eyes were on the witness stand.

"My sister and I called this man to our home with our mothers approval," he began, obviously nervous at his duty. "She had been sent home from the hospital to die, and she was in excruciating pain. Her doctors told us she would only live a few hours. We didn't ask Dr. Christopher to heal her, we asked him to help relieve her pain until she died. The pain was so fierce that we suffered with her, and we feared we were not equal to the task."

A hush fell over the courtroom as the impassioned young man continued his testimony.

"We did what Dr. Christopher told us to do," he explained. "Within forty-eight hours, my mother was free of pain. Instead of dying that day, or even the next day, she lived for several months. Most important, she lived for several months without pain. She got out of bed. She walked around. She was happy, and so were we. He changed her life, and all our lives."

With a sharp rap of the gavel against the fine-grained wood of the stand, the judge announced, "Case dismissed." Ray always believed that the Lord was in court with him that day -- and that the Lord's blessings kept him from behind prison bars.

Unfortunately, there were many more times when the cold steel of handcuffs slapped around Ray's wrists, and many times when his family had to post bail to free him from unfair imprisonment. It is a tribute to his wife that her support never waned. Through arrests and trials and imprisonments, her belief in him remained firm. Toward the end, they had a private joke between them. As he'd leave the house each morning to attend to the sick, he'd call back over his shoulder. "I'll phone you when I get to jail tonight!" he'd promise, and they'd both smile as they waved goodbye. Sadly, his prediction too often proved right.

The persecutions became almost unbearable at the end, but in his characteristic style, Ray never showed bitterness or retaliation. National Health Federation official Clinton Miller recalled at Ray's funeral one of the trials in which he was accused. According to Miller, Ray was "sitting there with no anguish in his face -- no concern, no bitterness, just beauty."

The legal battles continued, and at last the war was won. Some would say that the persecutors won the fight, as legislation directed specifically against Dr. Christopher was introduced to the Utah Legislature and was passed into law. After decades of practicing his healing art, he was forbidden. His hands were tied. To go against the mandates of law would mean an indefinite prison term.

But did the persecutors really win? Those who knew Dr. Christopher best know they did not. He was the real victor. Why?

Because when he could no longer treat the patients he so loved, he did the only other thing he knew to help-- he began teaching. At his peak, he lectured in more than 120 cities a year. His lecture halls were filled to capacity. Eager students stood in the aisles and lined the walls, straining for the chance to learn from the master herbalist. In 1979, he began publication of a newsletter. Headquartered from his office in Springville, Utah, it went to an international audience, spelling out the art of using herbs for healing. Until the accident that caused his death, he continued to teach in his School of Natural Healing. Once the law "stopped" him, he reached tens of thousands more people than he ever could in his humble practice.

And John Raymond Christopher won the battle, too, because of the person he was. He never took credit for a miracle. There were plenty of healings, and some of them defied science. There were many that were, indeed, miracles. But Ray never took the credit, and he told any who would listen that he never cured anyone (not even himself).

He instead gave credit to the efforts of his patients, to the herbs that came forth from the rich soil, and to the Lord. Throughout his practice and his writings, he always used the plural "we," remembering the Lord in all he did.

He won, too, because the work did not stop with him. Those who visited his infirmary at Fort Lewis and who filled his waiting room in Evanston and who met him at the roadside on his house calls went on to help others. Scores of his patients became herbalists. Many of his students practice today. Even the rancher in Woodruff who refused to feed his prize cattle white flour bought a fruit farm, learned reflexology, and works as a full-time herbalist.

He won because he practiced without guile, with selfless concern for his patients. He never hoarded secrets or held back information for monetary gain; he freely shared any information he thought could help someone else. He took people into their yards and taught them to use the common "weeds" that grew in abundance, when he easily could have bottled them himself and exacted a handsome profit. The more than fifty formulas he created were not to make money, but to impart blessings to others.

And he won because through everything he endured -- crippling arthritis, the death of his devoted mother, separations from his family, and cruel persecutions--he maintained the wonderful sense of humor that endeared him to so many. Most who have heard him lecture remember one of his favorite stories, because he repeated it often.

An elderly man was hospitalized, and doctor's orders called for an enema. The nurse administered the enema, but was called away on an emergency before she could record the enema on his chart.

A second nurse entered the room and administered a second enema, despite the old man's protests. She, too, was suddenly called from the room before she could record it on his chart.

Amazingly, a third nurse did the same.

When the exasperated man heard a knock on his door, he called out, "Who goes there? Friend or enema?"

Wherever he went in those final years, the eyes of the world followed. In 1975, a Canadian news editor wrote that "when he said he took a drink of cayenne pepper each morning, I nearly dropped my pen. Admittedly, I am not too familiar with cayenne...how could anyone consider taking a tablespoonful in a glass of water and dashing it back? Well, the good doctor wasn't kidding." She summed up with a description of Dr. Christopher mixing three tablespoons of cayenne in a tumbler of water. According to the editor, he "downed the whole thing and came up smacking his lips."

San Francisco Recorder editor Paul Speegle, commenting on one of Ray's arrests and the accompanying \$50,000 bond, asked, "Where hardened criminals, guilty of crimes of violence and threats to society, are given low bail, some members of the legal profession are requesting that an investigation be made to determine what prompted such an excessive bail in this case. Could this be a ploy to take the heat off the doctors in the current malpractice mess by making it unpleasant for acupuncturists, herbal, and natural healers? Just asking!"

And, though he is gone, his words live on. He was prolific in his final years, adding eight works to his original booklet on the Word of Wisdom. Those interested in the art he practiced can read his words in Dr. Christopher's Three-Day Cleansing Program and Mucusless Diet, Rejuvenation Through Elimination, The Cold Sheet Treatment and Aids for the Common Cold, The Incurables, The School of Natural Healing, Herbal Home Health Care, Capsicum, and Regenerative Diet. At the time of his death, he had begun work on several other volumes. His family is working to finish them in his memory.

The "Doc," as he was affectionately called, touched all of us. He healed many of us. His legacy is his students, his formulas, and the love he left behind. With uncommon valor and unequalled compassion, he gave himself to all of us...and we, with him, are the winners.

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## AHY Radio

### A Healthier You

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HerbalLegacy.com was created as a way for people to find out more information on the formulas created by Dr. John R. Christopher, and how they were originally intended for use. One of Dr. John R. Christopher's goals was to have an Herbalist\* in every home, and a Master Herbalist\* in every community. Through HerbalLegacy.com, we hope to further the knowledge of Dr. Christopher by offering detailed information on his formulas, and natural healing programs. We also detail other information that people might find useful, including various healing programs put together by Dr. Christopher.

The name HerbalLegacy was chosen because of the rich legacy passed on by Dr. Christopher. Please see the biography, An [Herbal Legacy of Courage](#), written by his son [David Christopher BA MH AHG](#), to find out more about his legacy.

At HerbalLegacy.com you will find a great deal of information on all of Dr. Christopher's Formulas, Cleansing Programs, Recipes to ensure your good health, and various writings by him. In addition there are testimonials from people who have used these methods successfully. You **will not** be able to purchase any herbal supplements from this site. This site is intended to **educate** people in the correct usage of herbs and nutrition.

**New!!** Sign up for our *free* newsletter! Each month we will be sending out a newsletter with new information on ailments, Dr. Christopher's Formulas, or other health topics. [Sign up now!](#)

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\* Want to know how to become an Herbalist or Master Herbalist? Check out [The School of Natural Healing](#).

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**[Links](#)**: These are some sites that we feel are worth a look.

**[Literature](#)**: Here you can read selected writings by Dr. John Christopher, a biography of Dr. Christopher written by his son David, and other interesting topics.

**[History](#)**: Contains the biography of David Christopher, Master Herbalist and son of Dr. John Christopher who continues the work of his father.

**[Testimonials](#)**: We love to learn what herbs and natural healing methods have done for you and your loved ones. This area is for just that. These stories are some GREAT examples of what herbs are doing for people everyday.

**[Feedback](#)**: In this portion of the site you can send us your herbal success stories that can be used to help educate others in similar situations.

### Health Alert Topics:

**[Anthrax](#)**: Due to the recent terrorist activities and focus on Anthrax, we decided to add valuable information about this bacteria, including information on what to do to combat it.

**[Smallpox](#)**: Due to some debate over whether or not Smallpox could be used as a weapon as a result of recent events, we wanted to help you stay informed.

**[Fluoridation of our Water Supply](#)**: Utah and other areas of the world are currently debating putting Fluoride into the public drinking water. This area discusses the health problems with water Fluoridation. -- Contact your [Utah county House of Representatives](#).

<b>New Additions to the Site:</b>	<b>Date Added:</b>
<a href="#">Comfrey Thesis</a> added to <a href="#">Single Herbs</a> Section.	January 17, 2003
<a href="#">Comfrey</a> information added to <a href="#">Single Herbs</a> Section.	January 6, 2003
<a href="#">Herbs</a> section added to site. <a href="#">Cayenne</a> information moved to Herbs section.	January 6, 2003
<a href="#">Tahini Cookies (2 ways)</a> in the <a href="#">Recipes</a> area. <i>(Thanks Eliyafa )</i>	Nov. 24 2002
<a href="#">Fruit Shaker</a> in the <a href="#">Recipes</a> area. <i>(Thanks Gypsy)</i>	June 10, 2002

<a href="#">Hundreds of Children Poisoned by Tap Water</a> in the <a href="#">Fluoridation of our Water Supply</a> area under <a href="#">Literature</a> .	Dec. 7, 2001
<a href="#">Milk (Almond 2)</a> and <a href="#">Milk (Rice)</a> in the <a href="#">Recipes</a> area. ( <i>Thanks Nathan</i> )	Nov. 9, 2001
<a href="#">Smallpox</a> in the <a href="#">Dr. Christopher Ailments</a> area.	Oct. 29, 2001
<a href="#">Berry Banana Breakfast Juice</a> - Located under <a href="#">Recipes</a> ( <i>Thanks Pam</i> )	Oct. 29, 2001
<a href="#">Dentists to sue over continued fluoridation of drinking water</a> located under <a href="#">Fluoridation of our Water Supply</a> in <a href="#">Newspaper Articles</a>	Oct. 26, 2001
<a href="#">Anthrax</a> and <a href="#">Corns</a> in the <a href="#">Dr. Christopher Ailments</a> area. <a href="#">2-9: Garlic: Man's Best Friend in a Toxic World</a> in the <a href="#">Literature</a> area.	Oct. 17, 2001
<a href="#">Dr. John R. Christophers "Three Oil Massage"</a> and <a href="#">Dr. John R. Christophers "Cold Sheet Treatment"</a> in the <a href="#">Literature</a> area. <a href="#">Immucalm</a> and <a href="#">Deep Heating Balm</a> in the <a href="#">Dr. Christopher Formulas</a> area.	Sept. 4, 2001
<a href="#">Dr. John R. Christophers "Incurables Program"</a> , in the <a href="#">Literature</a> area.	Aug. 29, 2001
<a href="#">Dr. John R. Christophers "Anti-Plague Formula"</a> in the <a href="#">Literature</a> area.	Aug. 28, 2001
<a href="#">Apple Crisp</a> , <a href="#">Cashew Whipped Cream</a> , <a href="#">Festive Salad Dressing</a> , <a href="#">Twice Baked Potatoes</a> , <a href="#">Whole Wheat Bread Crumbs</a> - Located under <a href="#">Recipes</a> ( <i>Thanks Traci</i> )	Aug. 22, 2001
<a href="#">El Programa de los Tres Días de Limpieza y la Dieta sin Mucosidad</a> - Spanish Translation of An <a href="#">Dr. John R. Christophers "Three Day Cleansing Program"</a> .	Aug. 20, 2001

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They are the best site focused on Herbal Education we have found.

## Welcome to The School of Natural Healing

The School of Natural Healing was founded in 1953 by Dr. John R. Christopher. Since that time, thousands of students have taken classes with us. This site gives information on the various correspondence courses offered by The School of Natural Healing. These courses now include: Herbology, Iridology, Reflexology, and our new Aromatherapy Program. Here at Snh.cc, you will find information on what our courses are all about. We have detailed information about each level, and the materials that come in each program. You can even register for classes via our secure server! Snh.cc is also home of The School of Natural Healing's on-line [Community](#). Students and non-students are encouraged to use our chat room and bulletin board to discuss different health topics. We also have [links](#) to other informational sites to help our students with their studies.

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### [Frequently Asked Questions](#)

Have a specific question, or are just curious? Check out our FAQ section to find out more about commonly asked questions.

### [Herbal Reference Links](#)

There are many great Herbal Information sites out on the World Wide Web. We hope that you find the information that you are looking for to live a Healthy, Happy fulfilled life.

### [Community](#)

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\* Calls are limited to 3 minutes and are taken in the order received. (Typical hold time is 15 to 25 minutes)

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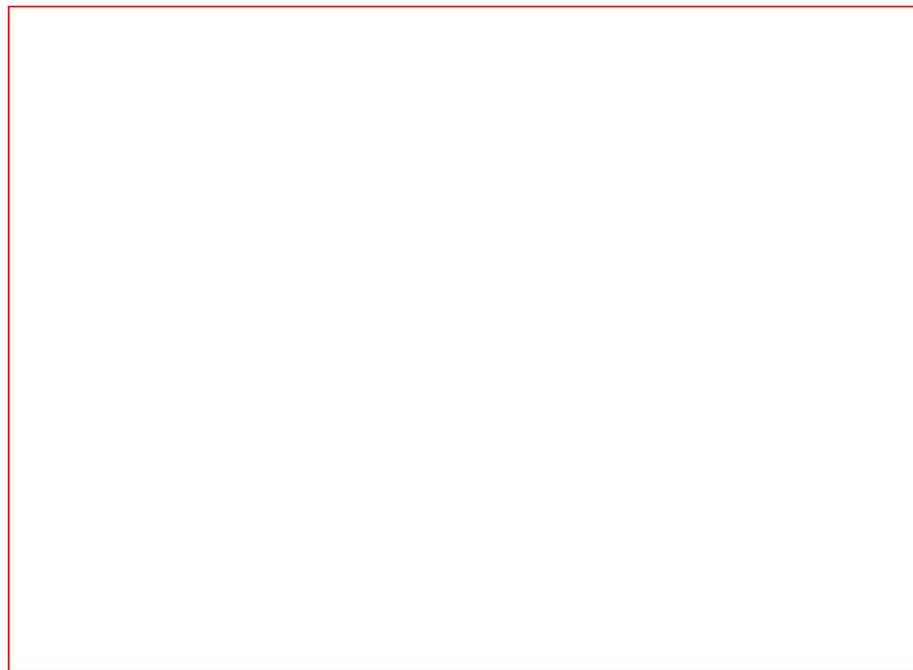
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### *Netscape Communicator / Navigator 4.x*

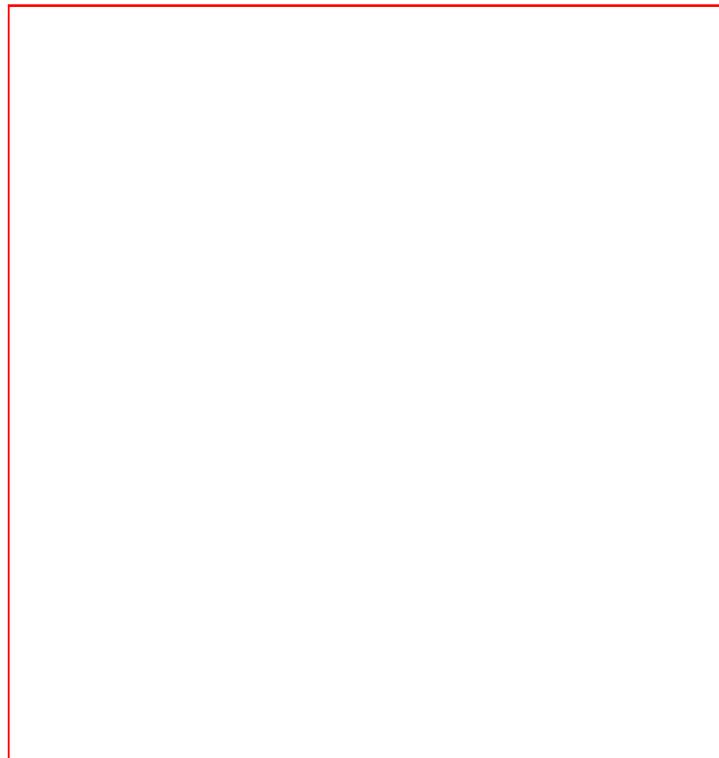
To configure Netscape Navigator, after clicking to start the broadcast, Navigator would indicate that the .pls extension isn't associated with a Navigator via a helper application. Immediately after, the following window would be displayed:



To proceed, click on the "Pick App..." button to indicate which application you wish to use to open the SHOUTcast streams from that moment on. Once you click the "Pick App..." button, the following window would popup:



Simply click on the "Browse..." button and navigate to the folder that contains the Winamp.exe executable. (Usually located in C:\Program Files\Winamp\Winamp.exe) Once you locate the executable(Winamp.exe), you would select it and press the "Open" button. This would place the path to the "Winamp.exe" executable in the field below the "Browse..." button. To complete associating the SHOUTcast stream file with Winamp, press "OK". A new window would appear immediately after pressing "OK". This window will give you the option to enable Winamp to always open a SHOUTcast streams without prompting you for action. The window should appear like the one seen directly below:



To complete the process, make sure that the "Open it" option is selected and that there is no check next to the "Always ask before opening this type of file" option. Press "OK" and the SHOUTcast stream should automatically begin playing with Winamp. From that point on, every stream you click to listen to, you should no longer be prompted for action, and automatically begin playing it with Winamp.

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## What is Homeopathy?

Homeopathy is a 200 year old well-established system of medicine based on unchanging principles. The basic principle is LIKE CURES LIKE. A substance that causes specific symptoms when taken in its raw form will alleviate those same symptoms when taken in its homeopathic form. Rather than focusing on the disease and trying to combat it, as is the case with conventional medicines, homeopathy works to encourage the body's natural healing mechanism.

The substances used in homeopathic remedies come from various plant, mineral and animal sources. Most have been used for centuries, yet discovery and development in homeopathy is an ongoing process.

Besides being completely natural many homeopathic remedies can be self administered and are

available in over the counter form. Most importantly, all homeopathics are free from harmful side effects.

### III. SMALLPOX (Variola)

An acute infectious disease characterized by pronounced skin eruptions. The eruptions have four stages: papule, vesicle, pustule, and crust. When the crust forms, it comes off, leaving a pit in the skin. In confluent types of the disease the scar is most pronounced, sometimes destroying otherwise good features.

**Etiology.**--Smallpox is considered one of the most virulent of contagious diseases, and it is generally believed that persons exposed are almost invariably attacked, unless protected by vaccination. This is one of the most stupendous exaggerations to be found in medical literature. My experience has been that very few people take it when exposed to it.

I remember quite a number of years ago being connected with a pest-house, where I was appointed physician and spent two hours a day with confluent smallpox for three months, without taking the disease. It is true I had a vaccination scar from childhood, but I have long since given up the opinion that that afforded me any protection. With me in that epidemic was a thirteen-year-old girl, who was caught and held there by the health authorities. She waited upon the sick people, and in all that time did not spend one hour outside of the house except in the small yard. She never had been vaccinated, and she failed to contract the disease. I could give many instances of personal experience where many were exposed without a single development. In this particular epidemic two German nurses took down, in spite of the fact that they had been vaccinated and re-re-vaccinated in the old country, where they do the work "just right."

**Age.**--The disease is common to all ages, and is very fatal to the extremely old and young. The unborn child may be attacked, but only when the mother develops the disease. It is said that in the case of twins only one may be attacked, thus showing that there is an immunity without vaccination.

**Race.**--It is said that the aboriginals suffered terribly from smallpox. Why? Because it is a disease of filth. The uncivilized people are just filthy enough to be good subjects for this disease. It is said that, when it was first introduced into America, the Mexicans died by the thousand. They yet suffer very greatly. Only a few years ago I was corresponding with a physician, located in Mexico, whose function was to take care of the miners for a large corporation. He gave me much information in regard to the severity of the disease among the natives. It is said the North American Indians have been decimated by this disease. The negroes are especially susceptible, and the mortality among them is great, being about forty-two per cent, against twenty-nine for whites.

**Variation in the Virulence.**--Sydenham states that smallpox has its peculiar kinds, taking one form during one series of years and another during another; which means that the severity of the epidemic probably varies with the atmospheric and local conditions. There is no question but that perfect sanitation has almost obliterated this disease, and sooner or later will dispose of it entirely. Of course, when that time comes, in all probability the credit will be given to vaccination; but if we could drop back to the aboriginal condition and do away with sanitation generally, smallpox would return with all its virulence.

**Prevalence.**--In the United States there has been a steady decrease.

When receiving orthodox treatment, pustules sometimes make their appearance on the tongue and throat and in the rectum. The disease has also been known to pass down the esophagus, and even down into the stomach. In decidedly severe cases of confluent smallpox it would be hard to say

what part of the anatomy is not affected. There is no disease so dreadful as the worst types of smallpox. That mortality should be great in this disease is obvious; for the entire surface of the body is involved to such an extent that radiation of heat must be sadly interfered with.

**Symptoms.**--Smallpox is divided into three forms: discrete, confluent, and the hemorrhagic variety. The discrete form is where the pustules are isolated and do not run together. The confluent form is where the surface is a mass of pustules all run together. The hemorrhagic variety is called black smallpox, because the hemorrhage into the skin turns it black. When receiving proper treatment only the first form develops.

There is a modified smallpox known as varioloid. This is supposed to be modified by vaccination, but I have seen cases of pronounced types of discrete smallpox that had no modification by vaccination, and the patients were not prostrated nor confined to the bed to exceed twenty-four hours. They were around, reading, doing chores, while the pustules were forming and drying up. The semi-confluent and confluent smallpox is a disease to be dreaded; but the force of the disease is undoubtedly being controlled by sanitation. In fact, the disease is one of filth, not only on the outside of the body, but also on the inside of the body. When people learn to live correctly, and domestic and civic sanitation is what it should be, it will be impossible for this disease to get a foothold even in the lightest form.

When a physician is called to see a case of smallpox, the patient may be complaining of headache; certainly a decided backache and bone-ache--in the olden times it was called the "breakbone fever." A never-failing symptom is a feeling of shot under the skin. By passing the hand gently over the forehead, cheeks, or arms--or, in fact, any part of the body--long before the skin is reddening there will be shot-like projections felt just beneath the skin. There is nothing about the early symptoms of smallpox that is so positively diagnostic as those symptoms. Some of these very discrete cases will have one or two pox in the roof of the mouth. The first twenty-four hours there will be heavy aching in the back, and perhaps vomiting and headache. After that, unless it is a case of confluent smallpox, the patient will be comfortable for the remainder of the sickness--that is, if the case is properly nursed and treated.

**Desiccation.**--The pustules terminate by either breaking and drying up, or drying up without breaking, and forming a crust. This takes place about the third week. In confluent smallpox the crust adheres for a long time. The reason for it is that the inflammation dips deep and leaves a permanent scar.

**Complications.**--Complications may set up in any of the mucous membranes, the lungs, bowels, or eyes. Pericarditis is a serious complication. Bright's disease may follow. Inflammation of the reproductive organs of both male and female may result. It is not my intention to give anything but a very short sketch of this disease. Those who would like to know its history, complications, variations--in fact, give exhaustive study to the subject--I would recommend to read Osler's "Practice of Medicine." There will be no complications if the patient is treated properly. Complications are made by regular practice.

**Treatment.**--Patients should be separated as widely as possible. It is very dangerous to bring two cases of confluent smallpox together in what might be called a large room; indeed, a large drawing-room is small enough for one case. Huddling such cases together will cause great mortality. The disease should be treated in tents, and out in the open as much as possible. Some authorities recommend opium to relieve the pain in the back. I think this is the worst kind of malpractice. The hot bath will relieve the pain, put the skin in as comfortable a condition as possible, and certainly will be a safe remedy to relieve all suffering. The baths should be continued long enough to relieve the pain. The bowels should be washed out every night regularly, using two quarts of water.

The patient should be given all the water desired, but positively no food of any kind. By some authorities it is recommended to give barley water, oatmeal water, lemon juice, etc. Until the temperature has been reduced to the normal, the patient should be given plenty of cold water, and nothing else. In case of diarrhea, a small opiate, such as paregoric, has been recommended; but there will be no diarrhea unless the patient is fed. The patient should be kept as clean as possible around the eyes, nose, ears, and the outlets of the body. If the bathing is kept up often enough to give full relief from suffering, this, in addition to applying a little olive oil to the skin, will keep the surface more pliable, and prevent discomfort and stiffness of the skin. In convalescence a patient should be warned not to eat too heartily the first week, After that, if convalescence is fairly rapid, by the second week the patient may eat moderately of all the food given to a well person.

# Hepatitis epidemic in Egypt caused by injection campaign

<http://www.timesofindia.com/110300/11hlth16.htm>

PARIS: A massive campaign in Egypt to eradicate a blood parasite went disastrously wrong, causing an epidemic of hepatitis C that infects up to a fifth of the country's population, a research released on Thursday said.

US and Egyptian epidemiologists, in a report to be published in Friday's edition of the British Medical weekly - The Lancet, said the hepatitis was transmitted across the Egyptian population through unsterilised needles and reused syringes that were used to combat a blood fluke.

This is the world's biggest case of blood-borne viruses being spread by a medical campaign, they said.

The anti-fluke campaign, called Parenteral Antischistosomal Therapy (PAT), was conducted across Egypt from the 1950s to the 1980s.

It entailed giving between 12 and 16 intravenous injections of an antimony salt, tartaremetic, to each patient over a short period, the study said.

However, the injections were often administered by reusable syringes and needles that were either not sterilised properly or used for multiple doses for a number of people in one sitting.

The injection campaign ended when a cheap, oral medication became available, but by that time, there had been an "epidemic spread" of hepatitis C, and many people had probably become contaminated with hepatitis B as well, the researchers said.

Between 15 and 20 percent of Egypt's population of 63.3 million have antibodies to hepatitis C, meaning they have been infected by the virus but may not necessarily have symptoms of the illness, they said.

# Vaccine syphilis

## Vaccine disease

### Quotes

[Chapter 6 of The Poisoned Needle by Eleanor McBean](#)

[INCREASE OF INFANT SYPHILIS by Dr Hadwen MD](#)

[COW-POX AND VACCINAL SYPHILIS--William Tebb](#)

[DR. M. D. MAKUNA'S MEDICAL VACCINATION CENSUS--William Tebb](#)

From The Family Doctor, March 1, 1883

The fearful affair at Algiers, again, has opened the eyes of the public to the frightful nature of the danger incurred by vaccination. From reports which have reached this country, it appears that the young soldiers of the garrison of Algiers, who had not already been vaccinated, were conducted to the Dey Hospital to be operated upon in accordance with the military regulations. They were vaccinated from two children in good health (apparently). Those vaccinated from one of the children presented no special incident, but the fifty-eight who were vaccinated from the other child *all to a man* broke out within a week with syphilis. The men were so bad that they were ordered into hospital. The names and regimental numbers of these unfortunate mortals are all recorded in *La Science Libre*, where they may be seen by anyone at any time. That syphilis may be, and frequently is, introduced into the system by vaccination, no one will deny, and therefore our duty is to ascertain whether the protective properties of vaccination from small-pox are sufficiently substantiated to warrant our adopting such a precaution at the fearful risk of contracting such a dire malady as syphilis. 'We have no hesitation in replying to this in the negative, and in declaring that if vaccination really does procure any immunity from small-pox, the remedy would be far worse than the disease itself, if any syphilitic virus were introduced into the system. Who would not rather run his chance with small-pox than syphilis?

"The tragedies attending Vaccination are not confined to any particular class or country, and although, doubtless, as much care is exercised in the selection of vaccine virus for recruits in the army as anywhere, yet the cases of injury are frequent and distressing. Many of them have been subjected to much artful smothering, with the praiseworthy design of keeping the Jennerian prophylactic in creditable odour; but the facts have been too terrible to admit of the attempted suppression, for "murder will out." In December, 1880, fifty-eight young men joined the 4th Regiment of Zouaves, at Algiers. In compliance with the rules of the service, they were vaccinated by the military surgeons, and the whole 58, without exception, were infected, and physically ruined by inoculation with the most terrible of all diseases. The details were published in *Le Petit Colon*, of Algiers, and in the *Paris Journal d 'Hygiene* for June 30th and August 25th, 1881, edited by Dr. DE PIETRA SANTA, a scientific gentleman, eminent alike for his ability and courage. This case was also briefly alluded to by the Paris Correspondent of the *Daily News*, and reproduced in the *Vaccination Inquirer* for August and October. The fullest details, however, appeared in *La Science Libre*, published at Nice, from the pen of an eyewitness, residing on the spot, Dr. P. A. DESJARDINS, after a careful medical examination of the unfortunate youths. From this narrative, it appears that on the 30th of December, 1880, the recruits in the 4th Regiment of Zouaves were conducted to the *Hôpital du Dey*, Algiers, to be vaccinated according to the regulations of the service. Two military surgeons operated, the vaccine being extracted from a couple of infants under

two years old, apparently, in excellent health, in whom the lymph appeared to be genuine and normal. Those vaccinated from one child displayed no special incident calling for remark; but the 58 youths (says this medical authority writing from personal observation) who were vaccinated from the Spanish child, developed in a few weeks all the characteristics of syphilis. The marks on the arm were disquieting, and the symptoms so threatening, that the infected youths were, some ten weeks after the operation, sent to hospital. In a month, all but six were dismissed, but they were soon compelled to return, as it was discovered that the terrible disease had infected their constitutions. Dr. DESJARDINS further says: " Some had ulcers, others affections of the palate; some shewed discoloration of the skin; affections of the teeth, gums, and joints, also presented themselves to my observation, in addition to the usual symptoms of this dangerous and disgusting malady. I also noticed decay of the hair, eyebrows, and eyelashes!" Then follows a list of the names and regimental numbers of these unfortunate young men, whose health and future prospects have been fatally blighted by this State-enforced operation."--[William Tebb](#)

DR. R. T. TRALL, New York, 1855.

Physicians are not at all agreed as to the propriety of resorting to vaccination as a protection from small-pox. There is no question that it is, to a great extent, a protection from the virulence and danger of the natural smallpox; at the same time, there is danger of inoculating the patient with some loathsome, and even worse disease, as syphilis or scrofula, from the impossibility of always getting a supply of matter from healthy constitutions. In either way there is a risk to incur, and it is a delicate matter for a physician to advise on a subject when both sides are hazardous. I am fully convinced, that if people could bring up their children in strict physiological habits, the non-vaccinating plan would be altogether the best; but in a city this seems next to impossible, and in the country it is pretty generally neglected. Children reared healthily in relation to food, exercise, and ventilation, have little to fear from any disease, however contagious; they may have this (small-pox), but it will not endanger life, nor produce much deformity, nor serious injury. I have seen within the last year a most horridly loathsome case of scrofulous disease, in which the patient literally rotted alive at the age of 15, from unhealthy virus received when he was but three years of age. Parents often find some of their children tainted with morbid humours, unlike any other member of the family, and which they are wholly unable to account for, except on the supposition of foul matter taken into the system by vaccination. My own practice would be to keep children as healthy as possible; and if the small-pox happen, let it have its natural course.—*Hydropathic Encyclopedia* p96

DR. LEVER, Physician to Guy's Hospital, London.

I have known syphilis communicated to a child by the hand of a legally educated medical practitioner.—*Reply to Circular of Medical Officer Of Privy Council* 1856.

PROFESSOR RICORD, M.D., Paris.

My position is simply this—I suspect that isolated examples of syphilitic infection through vaccination are much more common in this country than is generally admitted. For the chance of the

occurrence of such isolated cases is infinitely greater than that of a wholesale outbreak of vaccinal syphilis, and when such wholesale outbreaks have been noted, I cannot help feeling certain that many isolated cases of infection have occurred without their nature being detected or admitted.—Letter to MR. W. HUME-ROTHERY, December 24th, 1879.

DR. O. KRATZ, Surgeon, Confederate Army, U.S.A.

After reporting cases of vaccine syphilis, says, "I have seen one case, where the product of vaccination was *Surpetigo rodent*, a frightful disease of, I believe, a cancerous character. Some cases had herpes exedens, as the result of vaccination on their arms.—Confederate States Medical and Surgical journal, pp 104, Vol. i. 1864.

DR. BALLARD, now one of Her Majesty's Vaccine Inspectors,

Summed up the evidence as follows:—

1. There are numerous cases on record to prove that the vaccine virus and the syphilitic virus may be introduced at the same spot by the same puncture of the vaccinating lancet.
- 2.—From several instances on record, there can remain no reasonable doubt that the vaccine virus and the syphilitic virus may both be drawn at the same time, upon the same instrument, from one and the same vesicle.
- 3.—The vesicle which is thus capable of furnishing both vaccine and syphilitic virus may present, prior to being opened, all the normal and fully developed characters of a true Jennerian vesicle, as ordinarily met with.—*Essay on Vaccination*. Pimblished 1868.

PENNSYLVANIA MEDICAL JOURNAL, Sep. 1871.

American mothers at last are no more free from the plague of "vaccination" than are British parents. What a prospect for humanity is this propagation of loathsome, contagious diseases! National virusation by a staff of State officers to "preserve" the public health. All the vaccine virus now sold in Alaska-street, Philadelphia, is obtained from children suffering under the influence of scrofula, syphilis, or some kindred pestilence. The vaccine station is neither more nor less than a cesspool of germinal horrors.

Dr. HEIM, Public Vaccinator, Wurtemberg,

Says :—That the most expert diagnostician will not always be able to detect dyscrasy in children of the vaccination age, and that he himself has transplanted syphilis from a child which seemed to him perfectly healthy.—*From Horrors of Vaccination*. P. 26.

JOSEF HAMERNIK, M.D, Professor of the

## University of Prague, Bohemia.

Some years since, some terrible cases came to light, which were falsely registered as an epidemic, and which were caused by one vaccinator infecting a whole district with syphilis by vaccination.

In the beginning of this year a similar misfortune occurred in the neighbourhood of Melnik, when a number of children in several districts got syphilis by vaccination, and several died of it.

Such epidemics probably occur more frequently than they are described as doing. In the earlier times of the practice of vaccination, no one dared to write anything against it, and thus no means existed of obtaining a correct knowledge of conditions like these.

One would naturally suppose that a single case of the transmission of syphilis by vaccination, incontestably proved, would result in the immediate abandonment of the practice of vaccination, in the instant withdrawal of the Government grant for its support, and in advising the people as to the dangers of vaccination, and showing the impossibility of any but misguided or self-interested physicians advocating its continuance. — *The History of Small-pox and Vaccination*. Prague, 1872.

DR. J. EMERY CODERRE, Professor of Materia Medica, University, Montreal, Canada.

Vaccination has made victims among us; some have contracted small-pox in consequence of the inoculation of the vaccine; others have been attacked with gangrenous ulcers, syphilitic sores, &c., resulting from the introduction of this virus into the constitution.— *From a paper read before the Medical Society*, .Montreal, January 31st, 1872.

DR. STARTIN.

Believed in 30 years he had seen about thirty cases of syphilis communicated by vaccination. He had seen hundreds of cases of spurious vaccination, where contagious porrigo had been inoculated. He had seen scabies vaccinated on more than one occasion. When DR. SIMON sent out his circular, in 18566, he (Dr STARTIN) collected several cases, giving the names and addresses of the patients, but no notice had been taken of them. They were undoubtedly cases where the children had been perfectly healthy, as well as their parents and nurses.—*Discussion at the Royal Medico-Chirurgical Society*, June, 1872.

WILLIAM HITCHMAN, M.D., D.C.L.

I have been acquainted with the morbid effects of vaccination for nearly 40 years, and have witnessed crowds of cases, both in hospitals and private practice, analogous to the Guy's Hospital model; but lest my testimony may not be deemed sufficiently impartial or unbiassed, I shall quote from the records of the Smallpox Hospital, to prove that pure lymph, even in the hands of MR. MARSON himself, is occasionally attended with very impure consequences. M. A. W., aged 4, a fine child, was vaccinated by MR. MARSON in five places on the left arm, the poor child at the time being in perfect health, on the 19th May. The arms soon became severely inflamed, and spots

of purpura appeared on the face. The vesicles on the eighth day appeared dark and filled with blood, and numerous effusions were dispersed over the entire body. The areola assumed a mahogany appearance. In fact, the vaccine vesicles were jet black with fearful blotches—worse, I think, than the eruption of small-pox itself—dispersed (as I have said) over the whole body of this unhappy child thus "protected" by a paternal Government from disease; more especially involving the face, neck, and arms, and over the skin, together with bleeding from the left ear and nostril. Enough, and to spare, of these morbid phenomena now propagated by Acts of Parliament.—The Anti-Vaccinator, Oct. 7th, 1871.

As for time children recently vaccinated in Liverpool, I may say, from my own private observation, *without reference to the many thousands I have seen at the hospital for skin diseases*, that the health of hundreds has been thereby permanently affected with intractable forms of cutaneous eruption: emphatically have I seen strumous ulcers rapidly developed, acute ophthalmia, chronic enlargements of the cervical glands, diseases of the scalp, purulent discharges, foetid abscesses, and gangrenous inflammation of parts, followed by sloughing, while the throat, especially, of many such miserable sufferers *according to Act of Parliament*, together with the palate, uvula, and tonsils, are periodically covered with dark livid incrustations, more difficult to heal than those of small-pox itself, inasmuch as they owe their disgusting origin to the foul exudations of that indefinite, nameless, hideous thing now in course of active propagation throughout the land, *yclept vaccino-syphilis*.—From the Anti-Vaccinator, Dec. 16th, 1872.

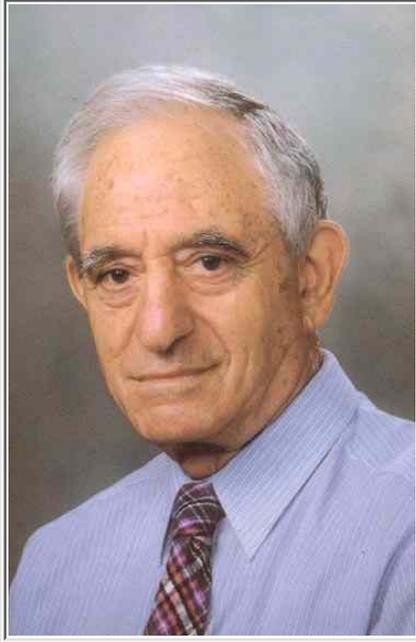
#### MEDICAL TIMES & GAZETTE, February 1st, 1873.

The important subject of vaccinal syphilis came again before the Medico-Chirurgical Society on Tuesday evening, when a paper was read by Mr. HUTCHINSON, detailing two new cases. He also drew some general deductions from the facts as already ascertained, which, together with others elicited in the course of the discussion that followed, constitute the most important practical suggestions yet made with regard to this most unsatisfactory subject. That syphilis could be communicated by vaccination was, though admitted abroad, long disputed in this country. Since the publication of MR. HUTCHINSON'S paper, and a communication by MR. THOMAS SMITH to the Clinical Society, where the patient was exhibited, it can no longer be so. We have now emerged from the region of doubt, to one of belief in the possibility of such an untoward occurrence; and, in accordance with the practical turn which most professional discussions sooner or later take in this country, we have promptly begun to seek a remedy for the possible evil.

Heretofore, as we have said, it has not been admitted that, if due care be taken, syphilitic infection by vaccination is possible. Especially has this been urged by the Crown officers when asked to encourage heifer vaccination. The facts flow before the public will tend to rouse them, if they have not been roused already, from the false security into which they have been lulled. And, as was stated at the meeting, it is plain that Our compulsory vaccination laws cannot be maintained unmodified.

[\[Smallpox\]](#) [\[Vaccination\]](#)

## Dr Archie Kalokerinos, M.D.



Dr. Archie Kalokerinos took his medical degree from Sydney University in 1951 and then spent six years in England. On his return to Australia he was appointed Medical Superintendent of Collarenebri Hospital where he served until 1975. He is a Life Fellow of the Royal Society for Health, a Fellow of the International Academy of Preventive Medicine, Fellow of the Australasian College of Biomedical Scientists, Fellow of the Hong Kong Medical Technology Association, and a Member of the New York Academy of Sciences. In 1978 he was awarded the A.M.M. (Australian Medal of Merit) for 'outstanding scientific research'. Dr. Kalokerinos has authored a book with profound orthomolecular medicine implications entitled 'Every Second Child', as well as many scientific papers. He is also author of two books on the subject of opal, on which he is considered to be an international authority. Currently he is working as a general practitioner at Bingara, New South Wales, where he is in charge of the local hospital. He is also the Honorary Medical Advisor for Aboriginal Health.

### Quotes

#### [Dr Kalokerinos interview-----International Vaccine Newsletter June 1995](#)

"Deliberate attempts have been made to allow (Aboriginal) infants under my care to die. The real authorities don't want these infants to live. The real intention on the part of the authorities is genocide."

<http://www.freeamerica.com/GovernmentCtrl/govctrl8.html>

### WHO & Third World

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Swine Flu vaccine by Dr Kalokerinos [At Whale](#)

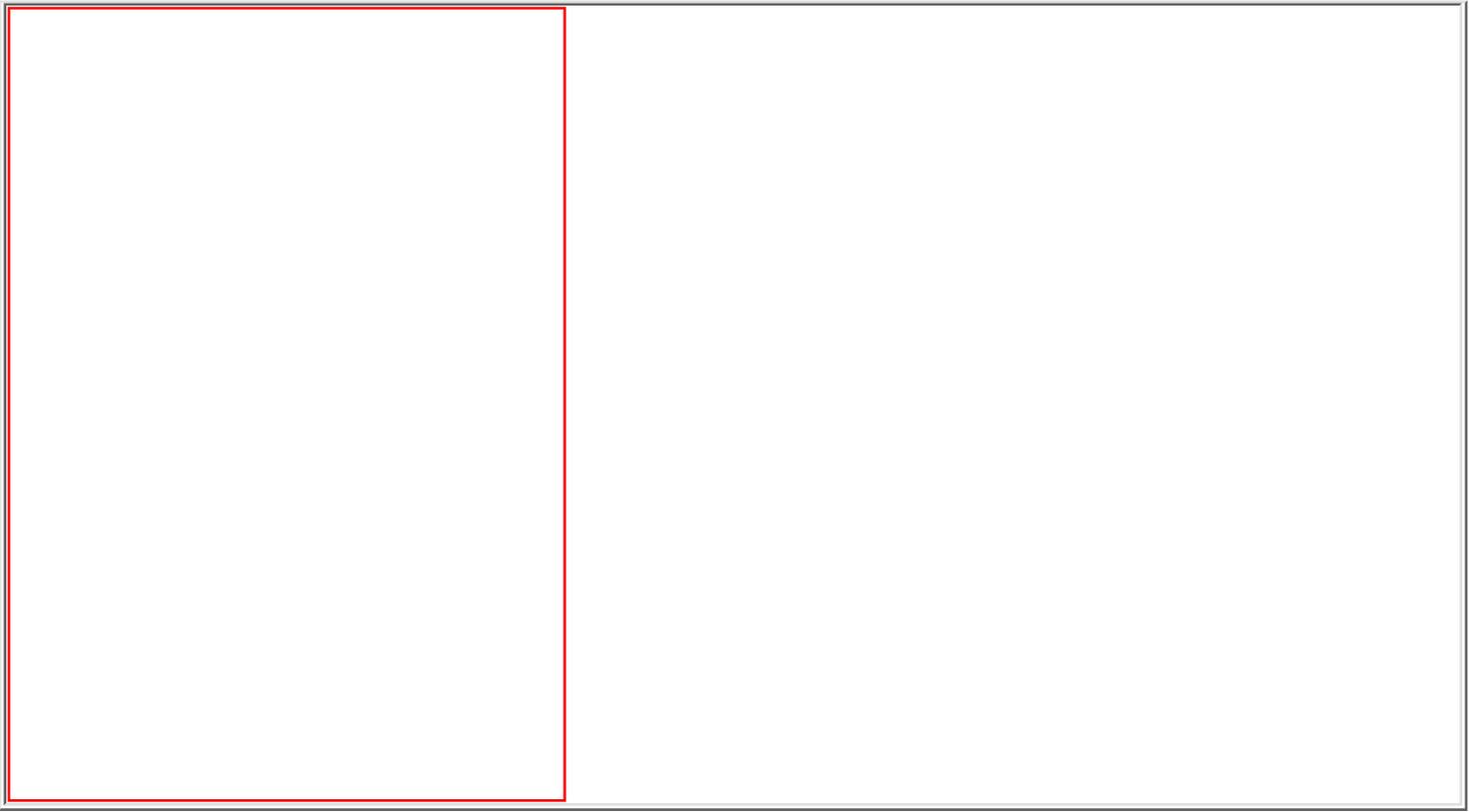
<http://webpages.netlink.co.nz/~ias/swine.htm>

[Second Thought About Disease by Drs Kalokerinos & Dettman 1977.](#)

### JUDGE NOT SURE HOW BABY DIED

**Books: Every Second Child, Vitamin C Nature's Miraculous Healing Missile! (co-author with Dr Ian Dettman & Dr Glen Dettman), Vaccines Vital or Vulnerable.**

**Book 2000: Medical Pioneer of the 20th Century---Dr Kalokerinos ISBN 0646408526**



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[Compulsory Vaccination in England by William Tebb \(1 document 164KB\)](#)

[Compulsory Vaccination in England by William Tebb](#)

[\[Vaccination\]](#) [\[Smallpox\]](#)

Letter to William [Tebb](#)

"BROOKLYN, NEW YORK, *May 7th*, 1883.

"DEAR SIR,—I found the Vaccination tyranny much more than sentiment on board the *Adriatic*. Aboard-ship, as everywhere, it has attained terrible proportions, which makes it probable that, in the near future, it will become The Great Terror that shall 'cause that as many as will not worship the image of the beast shall be killed,' and that 'no man may buy or sell save he that has the mark of the beast.'

"The first intimation I had that Vaccination was a requisite for free travel in America was an 'Important Notice' on the stairway to the effect that passengers not provided with certificates of Vaccination were liable to be detained in quarantine on arrival, and that the ship's medical officer was prepared to give certificates to those unprovided on showing marks of successful Vaccination.

"In a few days, I heard of this ship's medical officer magnifying his office down among the women and children. I conversed with one young woman who had submitted to the great ordinance, and, after characterising the whole business as the most idiotic folly of the times, I begged of her to suck the poison out of her arm. But many hours had elapsed, and the endeavour failed. Day by day she had to carry her burden of pain until she landed. Whether she is now rejoicing in enhanced health as a consequence of the small-pox proofing process, or whether she is suffering from the weary illness that is often its 'accident' I have no means of knowing.

"The bulk of the passengers were Irish, German, and Welsh ; there were very few English. I held many small indignation meetings, and did all in my power to enlighten them as to the filth, fraud, and folly of Vaccination. I trust I did a little good, and sowed a little seed that may some day and somewhere produce fruit.

"I was anxious to know to what extent the immigration Vaccination law was enforced at New York, and had a chat on the subject with the chief steward. His information was terrifying. Said he, 'When we get to New York the doctor comes aboard, with half-a-dozen policemen, and you have to be vaccinated.' 'But,' said I, 'suppose you refuse to be vaccinated, what then?' 'Then they'll sling you into the tender, and clap you in jail till you submit.' 'But I won't be vaccinated. I'll stay out of New York for ever first.' He replied, 'No use; you'd have to be. Five of our crew, once, refused to be done; but they just put 'em into quarantine and kept 'em there until they came to. They might as well have been done first as last; they only delayed the vessel.'

"I tell you, I felt bad after this recital, and came to the conclusion that America was closed against the unvaccinated anti-vaccinator, and that he was fast falling into the condition of the American negro-slave who was hunted down everywhere by everybody.

"One morning it was rumoured that the doctor was coming to examine the passengers, and I went with two friends to the surgery to state our objections. I told him that we had been vaccinated, if that fact would let us pass without further trouble, we could satisfy him; but if not, vaccinated we would never be. Like most doctors, he was without capacity to understand our conscientious objections, and the degradation involved in submission to the rite. He curtly told us the law was not his; it was the United States law. He should come forward at two o'clock, and if we shewed him that we had been vaccinated, he would give us a certificate, and, if not, he would vaccinate us if we chose; if not, we must take the risk of passing the doctor at the port. It mattered nothing to him.

"About two o'clock there was a great commotion for'ard. Such a stripping of clothes, rolling up

of sleeves, and searching for 'marks.' Some were craning their necks over their shoulders in a half-hopeless search after obliterated or invisible scars; some calling in the help of a neighbour to make them out; and some raising an excited discussion as to whether an indentation was a vaccination mark, or forgotten boil, and going into an ecstasy of satisfaction when they had settled it was exactly what was wanted.

Others, in despair of vaccination marks, recollected that they had had small-pox, and set up a search for pox-marks. Some, after a protracted quest for marks, vaccine or variolous, put on their coats sadly, with the air of criminals about to be hanged. It was a sight to make men blush with shame for the devilish superstition that has taken possession of the Christian civilization of the nineteenth century.

"By-and-by came the doctor in his gold-laced cap, with his bottle of 'lymph,' pure from the sores of children or heifer's buttock, and commenced operations. First a rope was stretched from a post, and held by two stewards in a horse-shoe form, and into this enclosure passed, one by one, the victims of an insane medical legislation, and bared their arms to the Medical Ignoramus, who stood on the other side. If he there saw the orthodox scars, he forthwith bestowed a ticket like this:--

WHITE STAR LINE  
S.S. Adriatic  
VACCINATED  
C.S. MURRAY  
Surgeon  
14<sup>th</sup> April 1883

Which further had this exhortation on the back:--

PASS  
Keep this card to avoid detention at  
quarantine, and on railroad in the  
United States.

"If a poor wretch could not show vaccine or pock marks, he got no ticket, and was asked whether he would be vaccinated, or risk being stopped at landing. All preferred the first alternative as the lesser evil. The doctor, dipping his lancet in the bottle of mystery, wiped it on a spot on the arm, and cut and cross-cut the skin, and then, after rapidly stretching and closing the incisions with his thumbs, gave the wretch his ticket and passed him on. Such was the ordinance of Vaccination—a sight not to be forgotten. A crowd of hundreds passing forward to prostrate their conscience or manhood, or lack of them, at the shrine of the most outrageous humbug of these latter days! A mixed crowd of big and little, fat and lean, dirty and clean, reputable and disreputable, sober and drunken, healthy and diseased, all ground down to the dead level of VACCINATED. There was nothing in common among them save their degradation, and, as I thought, the most degraded of the lot was the Vaccinator. How a man with any sense of decency and the congruity of things could, for mere pay, consent to the folly that the individuals of such a heterogenous crowd were *all alike liable* to small-pox, and were *all alike saved* by his performance, passes my understanding. It is hard to believe in a man's sincerity in view of such absurdity; and yet he may be sincere. When a lie is

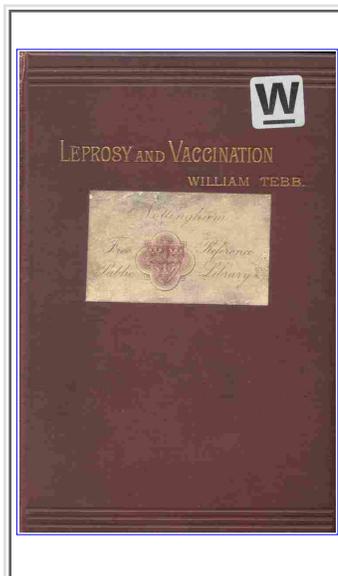
taught, and still more when a lie is practised, it confounds the intellect, and is ultimately taken for the truth of truth.

"I am fain to believe that not much harm was done to those vaccinated. After the operation, there was a mighty scuttling off into secret corners, with sucking and spitting. Happily I had a store of borax, and dispensed it liberally with energetic advice. Anyhow, I heard little of the Vaccination 'taking.' Perhaps the 'matter' was not good, but it mattered not.

"Yours truly, "F. SCRIMSHAW."

"To Mr. WILLIAM TEBB."

HUMAN AND Bovine Tuberculosis.—At a meeting of the National Veterinary Association, on May 8, in a paper written by Mr. J. K. Cox, of the Army Veterinary Department, several cases were cited where the milk from "wasting cows " was used for food, and those using the milk were attacked with phthisia and died. Apparently there is no question among veterinarians that tuberculosis is communicable in the milk and flesh of animals to man; and if thus communicable in the process of digestion, how much more must it be communicable when the products of disease from tuberculous animals are inoculated in the blood under the euphemism of "pure lymph from the calf!" . ([Vaccination Inquirer 1883 Vol5 p114](#))



# LEPROSY AND VACCINATION

WILLIAM [TEBB](#)

THE RECRUDESCENCE OF LEPROSY AND ITS CAUSATION BY  
WILLIAM TEBB  
LONDON  
SWAN SONNENSCHN & CO  
1893

[Converted--WHALE Nov 2000]

**One file 644kb:**

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# VACCINATION A DELUSION

**Its Penal Enforcement a Crime**

**PROVED BY THE OFFICIAL EVIDENCE IN THE REPORTS  
OF THE ROYAL COMMISSION**

By

**ALFRED RUSSEL WALLACE**

**LL.D. DUBL., D.C.L. OXON., F.R.S., ETC.**

**London**

**SWAN SONNENSCHN & CO., LIMD.  
PATERNOSTER SQUARE  
1898**

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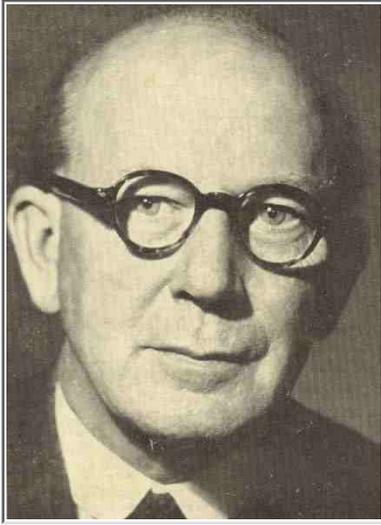
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## M. Beddow Bayly M.R.C.S., L.R.C.P.



"Perhaps the greatest evil of immunization lies in its diversion of public attention from true methods of disease prevention. It encourages public authorities to permit all kinds of sanitary defects and social problems to remain undressed, particularly in schools. It ignores the part played by food and sunlight and many other factors in the maintenance of health. It exaggerates the risk of diphtheria and works upon the fear of parents. The more it is supported by public authorities, the more will its dangers and disadvantages be concealed or denied." M. Meadow Bayly, M.R.C.S., 1944

### Quotes

[\[1956\] THE STORY OF THE SALK ANTI-POLIOMYELITIS VACCINE BY M. BEDDOW BAYLY, M.R.C.S., L.R.C.P.](#)

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Bayly, Dr M. Beddow [Diet in Relation to Health and Disease](#)

Bayly, M. Beddow [The Futility of Experiments on Living Animals](#)

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The Case Against Vaccination - Beddow Bayley

*The same applies to the development of vaccination<sup>1</sup> and all the fundamental drugs like digitalis, strophanthine, atropine, iodine, quinine, nitro-glycerine, radium, penicillin. Not one single important therapeutic discovery is due to vivisection, whereas books can be filled with the cases where animal experimentation has indisputably spelled disaster for humanity, besides misleading or retarding clinical research."*

([Hans Ruesch](#), **Slaughter of the Innocent**, page 198, also M. Beddow Bayly, M.R.C.S., L.R.C.P., **Clinical Medical Discoveries**.)

A glimpse at the overwhelming evidence from medical practitioners reveals the falsity of claims made in [Animal Research Saves Lives](#) that life-saving surgical techniques were founded on vivisection. As shown in **Clinical Medical Discoveries**, Dr M. Beddow Bayly documents the many surgical advances which owing nothing to vivisection but were discovered and pioneered through clinical research. These advances being supremely valuable to the benefit of human beings and animals it is the practice of those who set out to support and defend vivisection, and their jobs, to distort historical facts and thereby create the impression in the minds of the public that such advances were the result of vivisection. Dr Beddow Bayly, in dispelling these claims also outlines the inadequacies and grossly misleading results arising from vivisection. His views are openly shared by hundreds of medical doctors whose opinions are concisely documented in [Hans Ruesch's One Thousand Doctors \(and many more\) Against](#)

[Vivisection.](#)

Dr Fadali's evidence is borne out by medical historian Dr M. Beddow Bayly in **Clinical Medical Discoveries** who writes:

*"As for bypass surgery, animal research actually retarded this therapy for humans. Because a dog's clotting characteristics and coronary valves are so different from ours, the initial human patients died. The first success was Dr Kunlin's work in France. Dr Kunlin's work was clinical and had nothing to do with animal research."*

Beddow Bayly, author of the book "The Case Against Vaccination" said: "After vaccination was introduced, cases of aseptic meningitis were more often reported as a separate disease from polio, but such cases were counted as polio before the vaccine was introduced. The Ministry of Health admitted that the vaccine status of the individual is a guiding factor in diagnosis. If a person who is vaccinated contracts the disease, the disease is simply recorded under a different name." (6)

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THE FABLE  
OF THE  
SMALL-POX HOSPITAL NURSES  
SAVED FROM  
SMALL-POX  
BY  
RE-VACCINATION

LONDON SOCIETY FOR THE ABOLITION OF COMPULSORY VACCINATION, 1882

PREFACE TO THE FOURTH EDITION.

The persistent attempts that are now being made to create panic over the increase of small-pox in London have so far met with little success. What evidently is wanted is to drive the people in flocks to the doctors for re-vaccination. The "roaring trade" that was done during the epidemic of 1871 is remembered with fervour, and such another "good time" is earnestly prayed for. It is lucrative work vaccinating troops of terrified middle and upper class Londoners. They hear of "carefully selected vaccine" with touching simplicity; drop their guineas with grateful alacrity; and retire persuaded that they are fortified for at least seven years from possibility of infection. Here we see old sorcery and witchcraft under new forms without essential difference.

One of the fictions resorted to by the Medical advisers of the Local Government Board, echoed with parrot-like simplicity and persistency by the Press, and blindly accepted as Gospel truth by Boards of Guardians, is the oft-repeated tale of the immunity of the Small-Pox Hospital Nurses; as glaring a specimen of the "*suggestio falsi*" as was ever promulgated, which the compiler of the following pages has endeavoured to expose, with the aid of truth, and well attested facts.

London, 1882.

**THE SMALL-POX HOSPITAL NURSES AND RE-VACCINATION**

THE oft repeated argument respecting the immunity from small-pox enjoyed by the nurses at the Small-pox Hospitals, owing to re-vaccination, is the sheet anchor of the vaccinators' logic. Without any attempt at verification, without any suspicion of subjacent fallacy, this argument has been adopted with unquestioning faith and published with amazing industry by the leading dailies, weeklies, and monthlies throughout the country.

In 1871 the College of Physicians put it thus :—" For more than thirty years all the nurses and servants at the Small-pox Hospital, *who had not previously had smallpox*, have been re-vaccinated before entering on their duties; and not one case of small-pox has occurred among these persons, although living in an atmosphere of concentrated infection."

The *Times* of the 26th September, 1878, expresses itself as follows :—" From the foundation of the first Small-pox Hospital till now there has not been a single instance of a nurse contracting the disease."

Mr. Ernest Hart in his "Truth about Vaccination," speaks of the "absolute protection afforded by re-vaccination to nurses of the Small-pox Hospital."

Dr. W. B. Carpenter, writing to the *Spectator*, April 23rd, 1881, remarks on "the absolute security afforded by thorough re-vaccination," and observes that "*not one* of the re-vaccinated nurses was attacked by small-pox."

A card issued at public vaccination stations to mothers, by order of the Local Government Board, says, "The nurses of the Small-pox Hospitals are always re-vaccinated before commencing their work. This has been the rule for over fifty years. None of them have taken small-pox since this rule has been observed."

Having thus enunciated the proposition we propose to examine it more closely.

**I.** —Is it true? Have the re-vaccinated nurses at the Small-pox Hospitals enjoyed complete immunity from the disease? And the answer is No.

At the Stockwell Hospital three of the re-vaccinated nurses and attendants contracted smallpox (*Pall Mall Gazette*, April 23rd, 1877.)

At the Fulham Hospital three of the re-vaccinated attendants under Dr. Makuna took smallpox (Smallpox and Vaccination. Dr W.T. Iliff, Pp 10) and, the same hospital, Dr Sweeting recently stated in public that four of his re-vaccinated nurses had taken the disease.

At the Deptford Hospital one attendant took small-pox eight days after re-vaccination.

At the Halifax Hospital, in April, 1881, the matron and a nurse contracted small-pox from a patient; (British Medical Journal, May 7<sup>th</sup>, 1881) the matron had been previously vaccinated, while the nurse had been re-vaccinated only a week before she was taken ill.

At the Sheffield Small-pox Hospital the medical officer and an attendant, both previously vaccinated and re-vaccinated, took the disease.

At the Lewes Fever Hospital a nurse who had been vaccinated and re-vaccinated suffered from an attack of smallpox in November, 1881.

Dr. Bakewell, of the Trinidad Hospital, took small-pox after he had been re-vaccinated six times. So that the allegation of absolute immunity is proved *in limine* to be absolutely false.

**II.**—Is there no underlying fallacy which vitiates the conclusions drawn respecting the alleged immunity of the nurses? Is there no disturbing cause? Is no other explanation possible? Now it has frequently been asserted that many of the small-pox nurses have had the disease before they are engaged, nay, are frequently patients retained after recovery, and this assertion is in great measure true, especially of the old Small-pox Hospital at Highgate. Mr. Marson, the Resident Medical Officer, thus expressed himself before the Select Committee of 1871 :—

Q4218. "Have any of the nurses in your hospital had smallpox before they have been engaged as nurses? Some of them."

Q. 4225. "As to your answer to the Right Hon. Member for New Shoreham, with reference to some of the nurses having had small-pox before you engaged them, will you explain that statement which has been made to the Committee, that some of the nurses of the Small-pox Hospital have been seen to be marked with small-pox? Yes; but that very nurse that was alluded to was a person who had remained with us after being a patient." Question (4226): "That case was the case of a person coming in as a patient, and engaged as a nurse after she recovered? Yea, she came in as a patient, and she was for some years the matron's housemaid. She left us for a short time, and came back again, and is now our head nurse. *We never had so many employed in the hospital as we have at this time who came in as patients, for, in consequence of the want of nurses, we have employed those who have come in as patients, and were willing to stay.*"

And, again, in answer to Q. 4220: "Do you consider that small-pox itself is as great a protection as vaccination?" he said—" Yes, much greater, as you see from the returns. There are a few cases of persons who have had small-pox after small-pox; and in the first tables which I gave, the number was less than 1 per cent, of small-pox after small-pox, whereas it was 53 per cent, of smallpox after vaccination."

At a lecture at the Eleusis Club, Chelsea, April 18th, 1881, a nurse from the Fulham Hospital confessed that she herself had contracted small-pox, although vaccinated, and had become a nurse after convalescence in Highgate Hospital, and further admitted that many hospital nurses had, like herself, been hospital patients.

Then, again, at the Hampstead Hospital no less than 50 of the employees, and at the Fulham Hospital 23, had previously had small-pox.

Hence it follows that the *relative* immunity from smallpox among hospital nurses is in part, at least, due to antecedent small-pox, which, on Mr. Marson's showing, is a much greater protection than vaccination.

**III**—It is found that where vaccination is neglected, the same immunity is found, the following cases furnish us with purely differential evidence.

Dr. Porter in the *Medical Press and Circular*, No. 1729, March 27th, 1872, observes :—" 'With reference to re-vaccination, I have no faith in it. Not one of the 36 attendants at the South Dublin Union sheds has taken small-pox. *Only 7 of the number were re-vaccinated, and as the remaining 29 enjoy the same immunity, wherein is the necessity of the operation?* I have known gouty inflammation, abscess of the breast, and augioleucitis to result from the operation. I cannot, in the face of such facts, approve of it, and moreover the sense of the profession is against it. It is only to be employed when there is no evidence of the success of infantile vaccination, and even then it seems to do more harm than good, at least, so far as I have seen."

And again :—" The personnel of Bicetre (where 8000 soldiers, suffering from smallpox, were treated), nearly two hundred in number, suffered little from small-pox, one only dying from it. Of forty medical attendants none took the disease, *in spite of the negligence of most of them with respect to vaccination*". Still more remarkable was the complete exemption of forty nurses, who lived in the centre of the hospital and attended the patients day and night." (*Medical Times and*

*Gazette*, October 18th, 1873.)

Dr. Borel, of Neufchatel, in a medical paper printed in the "Correspondent Blatt fur Schweizer Aertzte (Corresponding Journal for Swiss Medical men)," published at Basle, on July 1st, makes the following remarks :—" It is impossible to deny acclimatisation; or to explain myself more clearly, the special disposition acquired by those who are constantly exposed to the same infectious agents; the *immunity* for example, which, undeniable though doubtless relative, *protects all persons occupied in pathology*. All evidence is in favour of such a phenomenon of acclimatisation. My two friends, Professors Kleinwachter and Jirus, assured me that they had frequently observed during their sojourn –as house surgeons in the small-pox ward of the Prague Hospital, that the nurses and hospital attendants, who had been some time in the service, *never caught small-pox*, although *not protected by previous artificial vaccination*."

Then, again, it is extremely rare for visitors to patients in small-pox hospitals to contract the disease, in spite of neglecting re-vaccination, and taking only rational precautions against infection.

Dr. Bridges, in his Report, observes that "of 796 visitors who paid 1118 visits, only 3 were afterwards admitted into the hospital with small-pox."

Mr. Sweeting, of the Fuiham Hospital, writes :—" 33 patients were visited by 48 persons, who made altogether 76 visits; only one of the visitors was afterwards admitted with small-pox." (*Report for the year 1880*.)

Dr. Bernard, of the Stockwell Hospital, writes :—" 1056 visits were paid into the wards of the hospital. It is interesting to be able to say that, as far as I have heard, no one caught small-pox thereby ;" the following rules are observed:

1. Not to enter any of the wards when in a weak or exhausted state. 2. To partake of food before entering the hospital 3. To avoid touching the patient or exposing themselves to his breath, or to the emanations from his skin. 4. To sit on a chair at the bedside, at some little distance from the patient (*Annual Report for 1880*)

**IV.** The relative immunity of nurses and doctors from infection is proverbial, and has been observed in diseases other than smallpox and in smallpox before vaccination was in vogue.

This immunity, whether due to so-called seasoning, or to that remarkable condition of insusceptibility, otherwise known as health, is so well recognised as hardly to need evidence in support of it; but the following may be cited for the sake of the sceptical :—"This well known phenomenon attending small-pox will appear less singular when we reflect that the same observation has been made respecting the plague, a more virulent contagion, the history of which shows, in every invasion of that dreadful malady, that many escape, though constantly employed about the sick, or infants sucking their infected mothers." (*Small-pox*. R. Walker, M.A., London, 1790.)

Nurses being generally advanced in years, habituated to fatigue, and little liable to worry of spirits, do not readily receive infection." (*Instructions relative to Contagious Diseases*, London, 1801.)

Dr. Lionel S. Beale in his work on "Disease Germs," 2nd edition, pp. 322 and 323, says :—"The fact of the escape of the attendants of the sick, in spite of their continual exposure, ought to suffice

to relieve the alarm of the most timid, and prove to them that exposure does not imply contraction of disease. The body in its normal state of health has the power of resistance; and the fact that many members of the medical profession and nurses, although exposed time after time to the influence of contagious disease, reach old age without having suffered from a single attack, ought surely to encourage and afford a justification to those who, having determined to devote themselves to the service of the sick, must be continually exposed to contagion."

Wilson Philip, M.D., in his "Treatise on Fevers," 4th edition, page 177, says:

"One powerful means of fortifying the body against infection, on many accounts deserves attention, viz., the frequent exposure to contagion. It is well ascertained that those who are frequently exposed to contagion become at length, in some measure, hardened against its effects. *Thus nurses and physicians often escape infection.*"

Lord Bacon says :—" The plague is not easily received by such as are continually about them that have the plague, as keepers of the sick and physicians."

Miss Florence Nightingale, in her Notes of Nursing, observes :—" True nursing ignores infection, except to *prevent* it. Cleanliness, fresh air from open windows, are the only defence a true nurse either asks or needs."

V. —if, however, Re-vaccination is so eminently protective in the atmosphere of a small-pox hospital, it seems strange that its saving power should fail so conspicuously under the less severe test of the outer world. Small-pox after re-vaccination is of common occurrence. Dr. Copland says,--- "Re-vaccination has been adopted in many places, and has often failed, natural small-pox having notwithstanding appeared in the re-vaccinated, both in those in whom the measure appeared to have succeeded, and in those in whom it failed." (*Dictionary of Practical Medicine*, pp. 829.)

The report of the Deptford Hospital for 1879, gives notes of 10 cases of small-pox after re-vaccination, one of whom died of black small-pox, while another was in hospital nearly a year with a severe confluent attack; and the superintendent, Dr. M'Combie, gracefully adds :—"It would appear from this, then, that cases of small-pox do occasionally occur after apparently successful re-vaccination."

Every soldier and sailor is re-vaccinated, and yet from 1859 to 1876, there were 1306 cases of small-pox in the army with 94 deaths, and 686 cases in the navy with 42 deaths. (*Vide Appendix to "The Truth about Vaccination."*) If re-vaccination will not protect the general public, the army and the navy, is it re-vaccination that protects the nurses?

The foregoing premises warrant the following conclusions:—That some re-vaccinated nurses do take small-pox, though many, whether from a process of seasoning or mental and-bodily vigour arising from due regard to healthy regimen, or some other cause, resist it altogether, and that the same immunity is observed where re-vaccination is neglected, while not a few of the nurses have received the additional protection which an attack of small-pox affords. This fashionable action, then, of absolute immunity of the hospital nurses owing to re-vaccination, is both false in its statement and fallacious in its reasoning.

[\[Vaccination\]](#) [\[Smallpox\]](#)

Tuesday, December 21, 1937

**Address of William Howard Hay, M.D., Pocono, PA., on June 25, 1937, before The Medical Freedom Society**

MR. BURDICK. Mr. Speaker, under the leave to extend my remarks in the RECORD, I include the following address by William Howard Hay, M.D., of Pocono, PA., on June 25, 1937, before the Medical Freedom Society on the Lemke bill to abolish compulsory vaccination:

I was glad to hear the Honorable Mr. Lemke's presentation of the subject matter of his bill. I have thought many times of all the insane things that we have advocated in medicine, that is one of the most insane—to insist on the vaccination of children, or anybody else, for the prevention of smallpox, when, as a matter of fact, we are never able to prove that vaccination saved one man from small-pox. Naturally not. When you have protected anybody, as we denote protection in medicine, you have at the same time destroyed your evidence. If that man doesn't take the disease against which he is supposed he be protected, how can you ever know he would have taken it if he hadn't been protected? We have destroyed the evidence.

As a matter of fact, perhaps it is safe to say that not more than 10 per cent of the people ever would take smallpox if sleeping in the same bed with an infected smallpox victim. We know there is a large immunity to smallpox. Very few people are subject to it, and these usually in the filthiest surroundings. Now, if we carry that natural immunity to smallpox as we do other diseases, and we have been protected by vaccination and then we are exposed to smallpox and don't take it, don't you see there is no proof there? We may be carrying a natural Immunity. If one case that has been successfully vaccinated afterwards develops smallpox, that is proof that it isn't protection, now, isn't it?

I know of one epidemic of smallpox comprising nine hundred and some cases in which 95 per cent of the infected had been vaccinated, and most of them recently. I have had in my own experience one very small epidemic comprising 33 cases, of which 29 had vaccination histories a "good" scar, and some of them vaccinated within the last year. There was no protection there.

Among these was one girl who was not vaccinated, never had been, who had five cases of smallpox in the family, nursed those cases that were ill, a baby among the others, the worst case of small-pox among them, refused vaccination and was never infected at all—a natural immunity.

What is true of smallpox is true of every other disease. We are not all equally subject to all the diseases that occur. We know that king. an

epidemic of influenza sweeps over the country. Why doesn't everyone have it? The germ, if it is a germ, and we don't know that it is, is ubiquitous. They are everywhere. You can't hide from them. And yet perhaps but 10 per cent of the population of any region will be infected. What protects the 90 per cent? Natural immunity.

We may have natural immunity this year and we may not have it next year, but we can't create it artificially by using a so-called immune serum. As I say, when we do use an immune serum we have destroyed every possibility of using that case as evidence, because we have no way of knowing whether it would ever have been infected.

We have always recognized the fact that but 15 per cent of children are subject to diphtheria, no matter how thoroughly they are exposed. Statistics of every epidemic of diphtheria in every section of the country, if averaged, will show that average, with 85 per cent who are not infected. We have taken diphtheria antitoxin, we have used toxin-antitoxin and toxoid, and if we found a susceptibility or reaction to this, we have immunized that case against diphtheria by a series of three injections of anti diphtheric serum. We have to admit 15 per cent of the children are still unprotected because they take diphtheria. Isn't that the same 15 per cent? We have no way of proving it isn't.

A number of years ago when we were just beginning to study diphtheria antitoxin minutely, Cook County, Ill., hospital decided to immunize one-half of the nursing staff and not the other half. Diphtheria broke out soon afterward among the immunized cases, not the others. It invaded both halves, both the immunized and the unimmunized, and the total of cases was much higher among the supposedly immunized cases than among those not immunized. We didn't do much for those nurses.

When we took over the management of the Philippines and all of its destinies, we announced to the bloomin' cockeyed world we were going to dean up smallpox in the Philippines. Well, we waited a few years but we did make a serious effort. In fact, in a population of 10,000,000 people we consummated 30,000,000 vaccinations within a period of 6 years. The Province of Rizal, of which Manila was the center, was the most accessible, of course; the little rascals couldn't get away there, we could catch them, and did, and some of them were vaccinated three and four and five and six times in the 6 years. We were going to make it thorough. In Mindanao and some of the other more outlying provinces, more mountainous, we couldn't catch the little rascals, so there was a smaller percentage of vaccinations in the outlying districts. Rizal had to take it.

Within 6 years of that time the Philippines suffered the worst attack of

smallpox, the worst epidemic three times over, that had ever occurred in the history of the islands, and it was almost three times as fatal. The death rate ran as high as 60 per cent in certain areas where formerly it had been 10 and 15 per cent, and the thing that climaxed the whole point was this: In Rizal we had the highest incidence and the highest mortality of any part of the Archipelago. The Navy reported that vaccination of the sailors went on as regularly as drills, every so often they were vaccinated, but they had their usual percentage of smallpox, and yet they were protected!

Now we are asking in many States to have the privilege of deciding whether we will be vaccinated or not. No one wishes to deny his brother the privilege of being vaccinated if he has any faith in it, but here is the ridiculous thing about it: The ones who are objecting to abolishing the law and who are insisting on vaccination are the ones who are afraid. that they will take smallpox if their brothers are not vaccinated. Now if you are vaccinated, you are protected, aren't you? What are you afraid of? Suppose your next-door neighbor does get smallpox because he was not vaccinated; that is his business; he has a right to have smallpox if he wants to; he can't give it to you if you have been vaccinated, so what are you worrying about? Let him do as he pleases. That is all we are asking; we are not asking that they forbid vaccination. Let everyone have what he wants, but let us not compel those to have vaccination who know there is nothing in it, who know it is not a protection.

It is now 30 years since I have been confining myself to the treatment of chronic diseases. During those 30 years I have run against so many histories of little children who had never seen a sick day until they were vaccinated and who, in the several years that have followed, have never seen a well day since. I couldn't put my finger on the disease they have. They just weren't strong. Their resistance was gone. They were perfectly well before they were vaccinated. They have never been well since. Now you can't record those as deaths from vaccination because they are still alive; but in England, where statistics are a little more frank than they are with us, where they are kept a little more accurately, a little more aboveboard than in this country, the actual official records show three times as many deaths directly from vaccinations as from smallpox for the past 21 years. If they record three times as many deaths, I will guarantee, you that there are three times as many deaths that were not recorded that are directly traceable to vaccination. That doesn't take into account the many, many cases of encephalitis or sleeping sickness, of this or that form of degeneration, that occur as a direct result of vaccination. That case is still alive. It hasn't entered here the mortality records yet, but it is suffering and has suffered ever since vaccination.

And if you have been dealing, as I have, with the derelicts from all over the world for 30 years, you would find an almost fatal relationship between this history of vaccination and some failing that follows this for many years that has kept a person from being as well as he should have been.

It is nonsense to think that you can inject pus—and it is usually from the pustule of the dead smallpox victim; that is the basis of it; we used to think it was from cowpox, but the manufacturers deny that and say the most reliable form originates in the pustule of someone who had died from smallpox—it is unthinkable that you can inject that into a little child and in anyway improve its health.

What is true of vaccination is exactly as true of all forms of serum immunization, so called. There is no such thing as immunization, but we sell it under the name, “immunization”. We jab a needle full of pus germs, we will say the streptococcus, for instance, in attenuated form so it won’t pollute too badly, and we increase the dose or potency of that little by little until we build up what we call a resistance to it. You can do the same thing with the rattlesnake venom. You can be bitten just a little by a rattlesnake and not die, and if you are bitten often enough, you can be bitten in a vital part and not die; you have built up a resistance to the venom of the rattlesnake, but have you improved your physique by doing so? If we could by any means build up a natural resistance to disease through these artificial means, I would applaud it to the echo, but we can’t do it. The body has its own methods of defense. These depend on the vitality of the body at the time. If it is vital enough, it will resist all infections; if it isn’t vital enough, it won’t, and you can’t change the vitality of the body for the better by introducing poison of any kind into it.

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# THE BLOOD POISONERS

By Lionel Dole (1965)

(149KB)

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## PREFACE

WHEN I UNDERTOOK to write a short booklet to replace the late Miss Lily Loat's *The Truth About Vaccination and Immunization*, written over twelve years ago, I saw that, as the latter dealt only with smallpox and diphtheria, it was obviously necessary to bring the subject of so-called "immunization" up to date. It would be useless to describe all the vaccines that are now being thrust upon the public, and quite impossible to give intelligible information as to how they are made or what they really contain. Are they ever the same for two weeks running?

We have all been told repeatedly that Prof. Ramon's toxoid (anatoxine) "practically wiped out diphtheria in Britain"; yet the *compulsory* use of the same stuff at the same time in France showed very different results. In Britain, with mass inoculations, there was an increase in cases and deaths for several months, but in France, with compulsory inoculations, the increases were much greater and lasted for many years.

Why was Prof. Ramon fired from the Pasteur Institute? What did British officialdom do about this—apart from suppressing all mention of the scandal? Was Prof. Ramon's toxoid not quietly changed in celebration of the event?

In his book, *Pour La Libere*, M. Marcel Lemaire reminds us of the almost forgotten fact that the great Pasteur Institute was founded solely to sell rabies vaccines and thus save (perhaps!) about 30

lives per annum in France. It seems almost incredible that, in spite of the subsequent increase in rabies deaths, the Institute went from strength to strength financially. After such a promising start, it is little wonder that it now makes vaccines for everything and thousands of millions of francs by selling them. The Pasteur Institute also seems to make its own laws, and, never having registered as a business firm it dodges all taxation on its turnover and profits, which the less privileged firms have to pay. When, moreover, the politicians have made each new vaccination compulsory see how the prices go up! In 1935 3 ampoules of diphtheria and tetanus toxoid were sold for 12 francs, by 1951, they cost 510 francs! The price of tuberculin also rose to over 40 times its original price

This kind of thing goes on all over the world and no body seems to care, but surely, if a chemical firm can make something—a synthetic hormone, for instance—at \$30 per pound and sell it to the public at \$50,000 per pound, that is all we need to know. We do not have to eat the whole of a bad egg to know that it is bad, but it is more than a one man job to change such an appalling international situation

The best that can be done in a short booklet is to cover the principal vaccine rackets as lucidly as possible, and say things which need to be said about them much of which has not been widely published if at all

One reason for this new booklet is to tell readers more about Miss Loat's work than she said about it herself

## INTRODUCTION

*Medical Protection Selling—How it Really Began and Grew*

"By the historical method alone can many problems in medicine be approached profitably.

"This dictum has gained added force since Osler uttered it." (*The Lancet*, December 1st 1962).

## VACCINATION v. SMALLPOX INOCULATION

The history of vaccination in text-books for medical students, nurses, etc., often consists of little more than the three words: ". . . since Jenner's day . . ." It is taken for granted that all good children have learnt the pretty fairy story at their mother's knee of "Jenner's great discovery" of the fact that cowpox protects against smallpox. This is called "one of the greatest discoveries of modern medicine".

Yet, if one tries to take it seriously as an important step in medical progress, the whole silly, dirty stunt stands out like a sore thumb, and it becomes plain that the great Dr. Charles Creighton was meticulously accurate in calling it "a grotesque superstition".

Anyone who reads Jenner's alleged *Inquiry* can see for himself that his specific was not cowpox, but horsegrease transferred to the cow by the hands of a dirty milker. Ordinary cowpoxes were "spurious". It was the London doctors, Pearson and Woodville, who forced the spurious cowpox on the public and on Jenner. They knew the smell of horsegrease and would not touch it with the end of a bargepole.

The person who provided the alleged cowpox lymph which was sent out all over this country and abroad from Woodville's Inoculation Hospital, King's Cross, was a young woman of twenty, Ann Bumpus, who had 310 pustules on her body. Other victims of this alleged cowpoxing experiment had many more—even 700; so it was not surprising to find that this lymph produced an infectious disease. It was quite obviously mainly smallpox pus. Thus did "vaccination" triumph over smallpox inoculation and eventually make it illegal!

The story is hardly dignified: it is too true to be good; and so, for broadcasting purposes, it has to be boiled down to the charming fairy-tale of "Jenner and the dairymaids", and no one must be allowed to escape it.

While the people are being lied to in every known language, and drugged and inoculated for the benefit of the huge chemical combines who own the Press and the Radio, it is obviously necessary to hit back with the truth. Nevertheless, it is quite common to find people, and even journalists, who have never even heard of the National Anti-Vaccination League, and who cannot understand why anybody should bother to fight vaccination when, since 1948, nobody in England has been compelled to be vaccinated— at least, there is no legal compulsion.

Only those who come up against the blackmailing methods of the vaccinators in relation to employment, education, travel, etc., will "have another think". The late Miss Loat herself had no delusion that the battle was over when the compulsory vaccination law was abolished. She knew that its repeal was a strategic move, for the vaccine industry knew very well that people who are not forced to bother about a tyranny are far easier to fool than those who are. In fact, they knew that, with the Press and the Radio, not to mention the Government, still in their pockets, they could expect to sell more vaccines by blatant advertising *at the public's own expense*, than they could dispose of by force, and this has proved to be true.

The BBC calls this type of propaganda "news"—to save themselves from the charge of illegal advertising. They do not fool us, but they do fool the public at large. Answering back is impossible. That is what makes the radio so dangerous.

What can one do, for instance, about the idiotic boost which vaccine was given when a news bulletin included a story of how, when the drains in Tobago were damaged by hurricane "Flora", a typhoid epidemic was averted by mass immunization, "which seems to have been successful"—this, if you please, only about four days after the damage? We know that typhoid fever takes from 7 to 14 days to incubate, and the "shots" take from 10 to 20 days to "take" properly! If a real epidemic had begun in Tobago and lasted as long as the Zermatt incident in 1963, would the BBC have told us so, or, would they have observed an eternal silence out of respect for the dead? It seems that drastic powers will be needed to stop this constant stream of idiotic and gratuitous poison-plugging, which is obviously considered to be top priority in all radio news services, dramas, talks, etc.

After fighting our battle for nearly fifty years, Lily Loat knew well enough that the propaganda methods of the whole vaccine industry had undergone a marked change. They no longer consisted of playing a polite parlour-game called statistics, compiled and edited by themselves. That game was almost played out and was only a bore. In fact, the way in which the figures were recorded in some hospitals years ago, and the astonishing differences in such figures, made it quite impossible, if not downright wicked, to trust such figures. Some hospitals, for example, gave a complete record of the vaccinal condition of each patient, while others, a few years later, showed more than half the

cases as "doubtful" or "unknown". We need say no more about this farce now; except that the wonderful statistics of the past defeated their own ends by "proving", with overwhelming success, things which are now known to be absurdly untrue.

Lily Loat, being the Secretary of a League, had always to steer clear of libel actions. The fact that she did so was no small achievement, because telling the truth about really big villainy is always dangerous. Also, it was one of the marvels of her career that she always managed to confound the enemy, even with nothing to rely on but their own figures.

Whenever she set out to prove that vaccination was killing more people than smallpox, she always did so, even under the handicap of having to treat the official record of vaccination deaths as if it were really true! Even today, there is no obligation to report such deaths properly, and Miss Loat knew that the official mortality figures represented probably not one-tenth, possibly not one-hundredth, of the true number. As Bernard Shaw put it, the true figures, "could they be ascertained, would probably horrify Herod".

Another thing that Lily Loat always did with uncanny success was to prove from the official records that whenever any infectious disease, such as diphtheria, for instance, was being "conquered" by a vaccine, the other infections, for which there was no so-called "immunization", were declining just as fast or faster. Have we ever known the Radio or the Press to tell us anything like that? If ever we do hear the Radio telling such truths to the schools several times a week, or broadcasting them to the world in every language, then we shall know that Mankind deserves to survive. In the meantime, we must do our best to further that object in spite of the big wholesale poisoners.

How often have we heard that "diphtheria in Britain has been practically wiped out by immunization"? Has it once been broadcast that the compulsory inoculation of the same toxoid at the same time in France was followed, in the six years of 1941-6, by 150,000 serious cases, with 15,000 deaths, *over and above the average figures*, or that Sweden, without this wonderful toxoid, had no diphtheria deaths in 1937 or 1938?

People who study medical statistics will find the subject full of traps for the unwary. They should be used as a means of discovering facts, not proving them. It is admitted that *post hoc* figures and arguments prove nothing, and yet the public are being constantly fed with them. On the other hand, very large and very long-term figures can mean a very great deal. This is why the contrast between Australia and the Philippines during this century has to be studiously ignored in all vaccination propaganda. We give the figures elsewhere.

Our loudspeakers keep telling us that vaccination rid Britain of smallpox. Other media do the same, but the real epidemiologists would not dare to say such a thing; in fact, if they mention this subject at all, they say the very opposite.

How can any sane person possibly believe that it was a pure accident that we had our biggest smallpox epidemic after about 16 years of compulsory vaccination and lost our smallpox altogether only when, thanks to the conscience clause, fewer than half of the children were vaccinated and our population had more than doubled?

Most people can be fooled easily with sorted statistics, because they do not realise that an epidemic of any real size or duration is not a static thing and cannot be illustrated by a simple table of figures. It is easy enough to demonstrate this.

Suppose, for example, you have a street or village with 100 unvaccinated people in it, and a smallpox case is imported (probably well vaccinated, as usual). The case is notified, and the B.B.C. gets busy. The 100 are all vaccinated. There may be, let us say, 10 contact cases, though that number would be very exceptional; all the cases would be isolated and everything would be disinfected, so that there would be no further risk of smallpox infection. At the end of the scare the statistics would prove that 10 per cent were unvaccinated at the time of infection and all got smallpox; 90 per cent were vaccinated and all escaped! One more triumph for Jenner, Marconi—and statistics!

The trick works even better in regard to diphtheria "immunization". The source of infection is traced and cleared away. A lot of radio listeners get their "shots", spread over several weeks, and they are not officially "immune" until three months later; therefore, the "immunized" will run no risk whatever of being infected, if the sanitary authorities have done a really good job.

The idea that it takes several weeks, or even several months, to develop immunity, but only a few hours or days to develop a disease, was put out by Pasteur when he was trying to save the face of his rabies vaccines, even though in the cases he treated the tedious inoculations could be carried on until the patient was thought to be out of danger. Immunity was not officially considered to be complete until a fortnight after the last of the many injections. The Pasteur Institute was founded solely to sell these rabies vaccines; so a truly heroic bluff of this kind was of vital importance at the time. In the great science of medical apologetics, the principle, with modern extensions and improvements, survives to this day.

## ANTIBODIES

If one reads the medical journals every week, it does not take long to discover that the supposed efficacy of a vaccine is "proved" by the antibody response of the vaccinated human or animal. This might seem to be scientific if antibodies did in fact bear any noticeable relationship to immunity, but this is much more easily disproved than proved (*see* Medical Research Council Report 272, May 1950). As long as we know that, we can leave the experts to stew in their own abominable juices. To nature cure enthusiasts, however, fruit and vegetable juices are safer.

## CHAPTER ONE

### THE WIND OF CHANGE

FORTUNATELY, the official attitude towards compulsory or mass vaccination has begun to change. The officials of the Ministry of Health, as well as the public, know quite well that an epidemic of vaccination always causes a lot of deaths, to say nothing of other permanent mental and physical injuries.

It is not so well known, however, that mass vaccination also causes a big increase in the number and severity of smallpox cases. This is no new discovery. Vaccination during epidemics was banned in some places more than a century ago because it was known to increase the number of deaths.

Things do, however, seem to be improving suddenly. During the Brighton smallpox outbreak (1950-51), the usual BBC encephalitis campaign opened with an anonymous doctor assuring the world, with authoritative emphasis, that "smallpox is the most infectious disease known to Man"! The BBC had evidently never heard of influenza. During the smallpox outbreak of 1961-2, on the

other hand, we heard medical officers of health saying on the radio such things as, "After all, smallpox is not such a very infectious disease." This would have been held to be pure blasphemy only a few years ago. May the good work go on!

A great deal remains to be done, however. The radio advertising of commercial vaccines, especially with public money, is the greatest enemy we have to fight. This dishonest propaganda is incessant, and it is impossible to be forewarned against it. It crops up on every possible and impossible occasion. Sometimes it is too conspicuously silly to be very dangerous, but we are always defenceless if we cannot hit back, and one cannot measure its total effect. The radio has often been proved to be a dangerous fomentor of panic.

### POISON-PLUGGING BY RADIO

The art of lying by radio is not quite as easy to master as it may seem. Bernard Shaw said very truly that if you tell a lie the microphone gives you away hopelessly. Probably the TV makes matters worse. That is why, when the pretty legends about Jenner and Pasteur have to be pumped into immature minds, announcers must be found who really believe these stories. The essence of a lie is the intent to deceive, and so the radio deceiver must seem to have no such intent.

Nevertheless, the TV can sometimes fool the public by showing pictures or documents to "prove" things which no one would dare to utter. The really expert technique is to tell nothing but the truth, *but to omit part of it.*

A perfect example of this occurred in a BBC TV extravaganza, "Matters of Medicine", which was designed to boost the terrors of poliomyelitis. The TV screen showed one page from a parish register, dated 1773, stating that about 7 or 8 out of every 10 deaths were due to smallpox. We need hardly say that the year 1773 just happened to be the very worst in that century for London smallpox. The purpose of the programme was to prove that, before vaccination began (a farmer named Jesty really began it in 1774), smallpox was a merciless scourge which threatened the very existence of the British race until Jenner, in 1796, began saving the usual "millions of lives".

We may suspect that that dramatic page mentioned above records the output from a local fever hospital, but we know that what was studiously omitted from the broadcast was the all-important fact that we had our biggest smallpox epidemic in 1871-3, not in 1773, and that we had 44,000 smallpox deaths after 16 years of compulsory vaccination whereas, in 1773, only about 2 1/2 per cent of Londoners got smallpox, and *only one-half of one per cent died from it.*

Is there any reason why the BBC should not be charged with fraud if they encourage the use of commercial vaccines by misrepresenting the facts of history? The Postmaster General would, in such an event, be perfectly justified in withdrawing its licence for causing a public mischief— even, in fact, for committing multiple murder.

By the terms of the Licence granted by the Postmaster General, the BBC . -.

"shall, whenever so requested by any Department of Her Majesty's Government in the United Kingdom of Great Britain and Northern Ireland, at the Corporation's own expense, send from all or any of the stations any announcement (with visual image of any picture or object mentioned in the announcement if sent from the television station or any of them) which such Department may request the Corporation to broadcast: and shall also, whenever so requested by any such Department

in whose opinion an emergency has arisen or continues, at the like expense send as aforesaid any other matter which such Department may request the Corporation to broadcast: Provided that the Corporation when sending such an announcement or other matter may at its discretion announce or refrain from announcing that it is sent at the request of a named Department."

That is the background to the incessant disguised advertising on the air of dangerous commercial vaccines, at public expense.

What can the public do about it?

It would seem that the National Anti-Vaccination League and all the A-V societies will have to be nationalised and turned into a Government Department before they have the least chance of a fair and equal hearing on the radio.

Could they not be called the Ministry of Truth and attached to the Fraud Squad of Scotland Yard? The latter would have to be much enlarged, of course, but, then, it would have a lot of work to do.

### **NO TIME TO WASTE**

Polite appeals to authority have been tried in vain. An impressive deputation of anti-vivisectionists, who are bound to be also anti-vaccinationists because of the foul cruelties inflicted upon millions of animals every year by the vaccine trade, went up to the BBC before World War II. It was led by Miss Lind of Hageby and the Dowager Duchess of Hamilton, and included several qualified doctors. They were politely received by the schools broadcasting officials, and the promise was duly given that their appeal for fair play would be given serious consideration. We have no doubt that it was—with the result that most of the participants in this conference, including all of the doctors, have since died without anything effective being done, except that, of course, a constant stream of vaccine-and-panic-boosting has been kept going in about 72 languages, day and night, ever since!

In fact, the Ministry of Health itself has become slightly more enlightened than the radio mugwumps, though that is not saying much.

### **A BELATED EFFORT**

The Ministry has made one hesitant attempt to mitigate the mischief done by the radio advertisers of vaccination.

When five Pakistanis brought smallpox to England and started the outbreak of 1961-2, it was known they all had valid certificates of revaccination, showing more than one dose; but this fact was published only after, instead of before, the Press and Radio had started playing the fool as usual, and spreading panic and pox all over the country. The Ministry knew that this would cause more death and injury than a few smallpox cases. The five Pakistanis themselves had already proved that vaccination is a dangerous fraud, and so the injections had to be restricted to contacts only.

The purely commercial dogma that the whole world can be rid of smallpox by maintaining a high level of vaccination could never have survived till now if the real truth had always been told about epidemics. Modern epidemiologists know that vaccinations cannot prevent the spread of any disease whatever, but they are seldom quoted in the Press, even when they cling to the idea that vaccination

can protect the individual, just as drowning men clutch at straws. Both Press and Radio continue to preach that smallpox is a terribly infectious and deadly scourge. They never tell us that " - . - provided no mischief be done either by physician or nurse, it is the most safe and slight of all diseases". (Dr. Thomas Sydenham, 1688).

All of us, except a few cranks, are brought up to believe that every unvaccinated person is bound to get smallpox in a serious outbreak. Business is business! The truth is that it would be very rare for even one in ten to contract the disease even in the worst years in the worst places, such as London was in 1773, when only one-half of one per cent died of it.

That would, no doubt, have been hailed as a 99 1/2 per cent triumph if there had been any vaccinators at that time and any BBC and Press barons to lick their boots for them!

## CHAPTER TWO

### THE CHANGE OF WIND

THE VACCINATORS can no longer claim to be able to prevent epidemics. They now have to depend on the great drama of "conquering" them, usually with vaccines rushed by air with all the familiar ballyhoo. Not having enough vaccine to cope with smallpox in the very places where one would expect to find plenty of both is the recognised prescription for "stamping out" an epidemic. By the time mass vaccinations have been organised, the worst will be over; most of the contacts will already have been exposed and will, as usual, have resisted infection or will have had "subclinical" attacks. These people are obviously the best prospects for showing the wonderful "modifying" or "protective" effect of vaccination in each of the affected localities, and the doctors can be forgiven for forgetting that epidemics always die out anyway.

One doctor, sent out on such a mission with a colleague, claimed to have seen several thousand people die of smallpox. Possibly they were not all vaccinated—not by him, at least—but, as to stamping out the outbreak, this allopath freely admitted that his colleague, a homoeopath, presumably using an oral prescription, was every bit as successful as he himself. This is worth noting (particularly by advocates of "horrific" vaccinations with virulent lymph), because the homoeopathic method is so much less dangerous than the usual one. The travelling public should agitate for its universal recognition. It would be a big step forward—for them, at least.

Mass vaccination frightens the Ministry of Health more than it does the radio-doped public; and, in the opinion of Prof. C. W. Dixon, as expressed in his big book, *Smallpox*, 1962, and in his letters to the medical papers, what is needed is not mass vaccination but only "horrific" vaccination with "virulent" lymph for contacts only.

### VACCINE LYMPH

This raises the eternal and unanswerable question:

"What is vaccine lymph?"

The National Anti-Vaccination League always tries to be up-to-date on this repulsive matter, and when they wrote to the fountain-head, the Lister Institute, in June 1962, to ascertain the official source of the current issue of the "true life-preserving fluid", they received the solemn reply that" . . . the seed virus used for the production of smallpox vaccine is derived neither from cowpox nor from

smallpox matter, but is a recognised strain known as *pox-virus officinale*".

So now we know! Poor old Jenner!

Surely it is time to face up to the question of what the lymph is rather than what it is called. The only possible, true, scientific description of vaccine lymph is that it is something which Nature, or Providence, in its wisdom, considers too filthy to be allowed to pollute the tissues of any animal and therefore expels with contempt. But for that, we should never have had any vaccine lymph. It is evident, however, that if it is not smallpox virus in any form it cannot be a real vaccine.

## THE ELECTRON MICROSCOPE

The electron microscope has come into the picture only after all kinds of theories and guesses have been discussed for more than 160 years. In the last century, Antoine Be-champ and Lionel Beale recognized certain minute living particles as being the active agents in vaccine lymph; Monckton Copeman, much later, regarded the similarity in size and appearance of such particles in smallpox pus and vaccine lymph as presumptive proof of a common origin. Béchamp would not have jumped to such a conclusion, but, without the electron microscope, no one could see the viruses of these diseases. What, then, were they looking at? One can only suppose that it was microzymes or micrococci infected with virus.

The general question of the connection between germs and viruses is a very complex one. We have to wait for scraps of truth to escape from the laboratories, as they sometimes do, almost invariably by accident or by indiscretion. It is amusing to hear that the makers of electron microscopes have promised the laboratories almost any degree of magnification (or resolution) that they want. It appears, however, that they have already got a bit more than they can handle.

It is curious to find that few of the animal viruses have been studied until fairly recently. The scientists, very naturally, were fascinated by the virus of tobacco mosaic, the first filterable virus discovered, and by other plant viruses. Then came the bacteriophages, which infect and kill bacteria. Human and animal virus diseases were almost ignored for years.. The fact is that plant viruses are far easier to obtain pure than the viruses from infected animals. Something like 85 per cent of the juice of an infected tobacco plant may be tobacco mosaic virus (TMV); some potatoes are crammed with virus which does no harm to them; if, however, one smears their juice on the leaves of other plants, it may start a virus disease.

Such facts are not only very interesting, they are clearly of immense general importance. They compel us to realise that all life on this planet has always depended upon the integrity of living cells which have adapted themselves to their food and environment. We are apt to forget this fact because it is by no means a simple one. It is, however, a very obvious one.

'We know that if we try to grow foods in new and unsuitable soil they are at once attacked by pests, fungi or viruses. The indiscriminate use of new and deadly poisons is not the real answer to the problem. We are all getting countless poisons in the air we breathe, the food we eat, the water we drink, and on almost everything we handle. Our hospitals are plague-spots because of the deluge of antibiotics, and we are now being told that it is impossible to clean them out properly because they are being kept too busy! No wonder!

When will our Government be made to realise that the enormous increase in degenerative disease is

the inevitable result of the ever-increasing number of poisons thrust upon us all for the sake of commercial profit?

The more new poisons we have, the more impossible it becomes for us to get used to them, or to identify any particular one of them as the cause of any particular disease, or of different diseases in different people.

"Whom the Gods would destroy they first make mad."

Let us get back to sanity while there is yet time and stop this commercial villainy altogether, *especially the injection of blood-poisons through the skin and thus bypassing the natural defences of the body.*

When people have to travel overseas they are often in holiday mood and are a notoriously easy mark for confidence tricks. The oldest of the witch-doctors' tricks is to do things which are so repulsive and unnatural that the wide-eyed public will say: "These clever devils would never dream of doing such awful things if they were not necessary; therefore they must be really necessary." It is the oldest trick in the bag, and it still pays enormous dividends.

Thus, innocent travellers are persuaded that "shots" for several diseases are a necessary but quite trivial nuisance. No vaccination can be really trivial unless it is faked. We ask everybody to remember that it was the commercial success alone of smallpox vaccination which led to this huge trail of corruption, not only of public health but of the Press, the Radio and most of the government departments in the world.

In Britain, thanks very largely to the late Miss Lily Loat, we have had no compulsory vaccination since 1948; but there is a large amount of pigheaded tyranny on the subject in the Services and in schools and institutions; furthermore, a lot of stuffed-shirt societies and councils, and completely uneducated and unauthorised educational authorities, exert pressure which is far more difficult to resist than any law from which exemption can be claimed.

Anti-vaccinationists are almost invariably referred to as "ignorant cranks" by the popular publicists of the poison-plugging profession. They are ridiculed for making an unholy fuss about the "supposed" dangers of all vaccinations and medications. In truth, it is the poisoners themselves who do all the high-voltage scaremongering. They still speak of smallpox as a scourge which, but for Jenner's "great discovery", would have solved all the world's feeding problems by killing off all the surplus millions.

What Jenner discovered, though hardly original in its general principle, was that it pays far better to scare 100 per cent of the fools in the world—the vast majority—into buying vaccine than it does to treat the small minority who really get smallpox and who cannot afford to pay anything. It was indeed a very great discovery—worth thousands of millions. That is why this kind of blackmail is still kept going.

When the Philippines were taken over by the U.S.A., in 1898, they became a shop-window for the sale of vaccine. They had had plenty of vaccination, of course, under Spanish rule, but the Americans began to clean the place up, and the smallpox figures took a big dive, as might have been expected—and the vaccinators took the big bows, as usual.

The sale of vaccine was enormous. The health reports prove this—an account rendered for the taxpayers to pay. When, however, the inevitable epidemic came, in 1918-20, it is worth noting that, out of a population of 10,000,000, the huge total of 71,000 deaths was more than equalled by several other epidemics during the same three years. Malaria took 93,000, influenza 91,000, tuberculosis 80,000, while dysentery, cholera and typhus together took another 70,000. It will be seen, therefore, that, during one of the very worst epidemics in all history, the deaths from smallpox were well below 1 per cent of the population. Yet we are always being told of the millions of lives saved by the noble work of Jenner and his prosperous followers.

We also hear of the noble work of Father Damien among the lepers of Hawaii, but we are not told that there was not one leper in the whole of the Hawaiian Islands before the noble work of Jenner reached them. By the 'nineties, 10 per cent of the natives were lepers.

### CHAPTER THREE

#### BROADCASTING v. LIBERTY

THE EXTREME danger of a biased, monopolistic broadcasting system was well illustrated during the smallpox scare of 1961. In two consecutive "Any Questions?" programmes, *eight popular broadcasters in a row all demanded the return of compulsory vaccination*, apparently on the grounds that "we are getting slack about it".

*Who is getting slack about what?*

Did these hand-picked BBC brains never learn that the first trial of compulsory vaccination, beginning in 1853, was followed, in the four years of 1870-73, by Britain's biggest smallpox epidemic, with 46,000 deaths? Since then, our population has more than doubled; so, if "like causes produce like results", do we want about 100,000 smallpox deaths in a few years' time? If not, why ask for it? Evidently, the price of liberty and health is eternal vigilance, not eternal listening.

All of these popular speakers, one of whom is a clergyman, agreed that people should be allowed to escape vaccination on religious grounds. What do they really believe in—religion or vaccination?

No official broadcaster has ever been allowed to hint that there are the strongest possible intellectual reasons, and many of them, for rejecting every kind of preventive vaccination. The Radio, in peddling its garbled stories of Jenner, Pasteur and company to the schools, etc., always omits to mention that when the first scientific attacks on vaccinationists began, the antis were led by serious scientists all of whom had been brought up to believe in the sacred rite, but who, for one disinterested reason or another, had studied it closely, rejected it completely and had the courage to say so.

Dr. Charles Creighton, Alfred Russel Wallace, William White, Prof. Edgar Crookshank, William Tebb, Dr. Scott Tebb, Dr. William J. Collins and his father, of the same name, who had been a public vaccinator for 20 years and had renounced the practice, were all head-and-shoulders above their opponents, both in intellect and in integrity. They may therefore never be mentioned on the radio, nor may their history.

This omission is undoubtedly intended to imply that the principle of blood-poisoning for health has been established beyond all reasonable doubt. History has consistently proved the utter futility of

vaccination as well as its manifold dangers, and we must remind the radio mugwumps that they cannot fool all of the listeners all of the time, even by hand-picking their broadcasters and ruthlessly firing any one of them who dares to question the divine right of the blood-poisoners, let alone laugh at them like Commander Campbell.

In the meantime, we have to put up with perpetual propaganda glorifying Jenner and Pasteur. It would be difficult for any child to pass an examination in general knowledge without having absorbed most of it. On the chapel wall by Pasteur's tomb, for instance, we can read:

"1865: The Silkworm Diseases." What this means is that in that year Pasteur began trying to save the silkworm from the ravages of *pebrine* and *flacherie*. His triumph has to be taken for granted—on the radio, anyway. What is missing, however, is the official record of the output of silk before and after Pasteur's genius was brought to bear upon the problem. In the last broadcast we heard on this subject, the ending was abrupt: ". . . and so, Pasteur saved the silkworms." Just like that! Here are the figures, in kilogrammes of cocoons:

1850, when the industry was prospering: 30,000,000.

1866, when Pasteur had begun saving it: 15,000,000.

1873, when he had officially triumphed: 8,000,000.

1886, the output fell almost as low as: 2,000,000.

At the time of his triumph, Pasteur was awarded a pension of 12,000 frs. We imagine that this figure was well maintained.

In the case of the silkworm diseases, as in that of anthrax in cattle, despite all Pasteur's conjuring-tricks and salesmanship, the people professionally concerned had to solve their problems for themselves, as usual. Do we hear this from the radio?

The best antidote to Pasteurian propaganda is the book by E. Douglas Hume, *Bechamp or Pasteur?* (Daniel). It will disillusion anyone who really wants to be disillusioned.

### WHO WANTS TO BE DISILLUSIONED

Most people cherish their delusions even more than their other ailments. As Thomas Edison was fond of saying:

"There is no expedient to which Man will not resort to avoid the hard work of thinking."

The germ theory and the idea that germs can be conquered by vaccines was one of the most greedily grasped of all such expedients. It was so much more modern and scientific than the fuddyduddy idea of mending our ways or atoning for past errors. Man wants to believe that the maladies he brings upon himself are all due to those terrible germs, which, being unable to sue for libel, are the ideal scapegoats. What a tremendous debt we owe to Louis Pasteur, the Microbe Man!

And yet Pasteur himself, at the end of his life, was quoted by his old friend, Prof. Renon, who attended him in his final illness, as having said:

"Bernard was right. The germ is nothing. The soil is everything."

It cannot be believed that this final scientific utterance of Pasteur's is not authentic, but it is not inscribed on the wall of his tomb, nor have we ever heard it quoted on the radio.

The germ theory means big money. The show must go on! The Press seldom mentions any mysterious, infective or degenerative disease without holding out the hope that if we give enough millions to the millionaire laboratories to enable them to plague millions of animals for years, then a vaccine will be "discovered", millions of lives will be saved and all will be well—for the laboratories, at least

The mere fact that compulsory vaccination in any country is always followed by more and worse smallpox must be sternly suppressed. So must the fact that the least vaccinated country in the world, Australia, has had fewer than one smallpox death per annum throughout her whole history and only three deaths among children under the age of five. The one Australian victim during the last 43 years—a hospital nurse—was infected by a woman who was landed at Fremantle with smallpox after two vaccinations during the previous six months—as usual, we must add. At one time, the infant vaccination figure was below 1 per cent, but it has lately been raised, possibly by the pretty fairy story about Jenner and the dairymaids, which we have heard broadcast from Melbourne by voices which do not sound Australian.

It would seem that International Blood-Poisoners Unlimited have decided to remove the Australian thorn from their side, and so they have refused to allow Australia to subscribe to the International Sanitary Conventions. They try to pretend that Australia has always been very strict about vaccination, and -will not let anyone enter the country without proof of having paid tribute in cash to the Golden Calf. They are actually trying to make vaccination compulsory in Australia. Can they give the smallest excuse for not letting well alone? Of course not—but the mere truth does not pay them well enough.

It is certain that if the Australians are all compulsorily poisoned with real vaccine they will eventually enjoy the biggest smallpox epidemic they have ever known, but by that time, no doubt, the vaccine promoters will have found new fields to conquer, as happened in the case of the Philippines scandal.

## CHAPTER 4

### DO ANTIBODIES REALLY PROTECT?

FROM REPEATED medical investigations, it would seem that antibodies are about as useful as a black eye in protecting the victim from further attacks. The word "antibody" covers a number of even less intelligible words, quaint relics of Erlich's side-chain theory, which the greatest of experts, McDonagh, tells us is "essentially unintelligible". Now that the old history, mythology and statistics of vaccination have been exploded by experience, the business has to depend more upon verbal dust thrown in the face of the lay public. The mere layman, assailed by antibodies, receptors, haptophores, etc., is only too pleased to give up the fight and leave everything to the experts. This is just what they want, especially when he is so pleased that he also leaves them lots and lots of real money.

The whole subject of immunity and antibodies is, however, so extremely complex and difficult, *especially to the real experts*, that it is a relief to be told that the gaps in their knowledge of such

things are still enormous.

We can obtain some idea of the complexity of the subject from *The Integrity of the Human Body*, by Sir Macfarlane Burnet. He calls attention to the fact—the mystery—that some children can never develop any antibodies at all, but can nevertheless go through a typical attack of, say, measles, make a normal recovery and show the normal continuing resistance to reinfection. Furthermore, we have heard for years past of attempts made to relate the amount of antibody in patients to their degree of immunity to infection. The, results have often been so farcically chaotic, so entirely unlike what was expected, that the scandal has had to be hushed up—or put into a report, which is much the same thing (*vide* M.R.C. Report, No. 272, May 1950, *A Study of Diphtheria in Two Areas of Great Britain*, now out of print). The worse scandal, however, is that the radio is still telling the schools that the purpose of vaccinating is to produce antibodies. *The purpose of vaccinating is to make money!*

Another equally authentic report is worth noting, more particularly because of its source—the Pasteur Institute at Teheran (*see* W.H.O. Bulletin, 1955, Vol. 13, No. 5). The laboratory report on five cases out of 17 all of whom were badly bitten by a really big bad wolf which also bit 12 other persons, 6 cows and a horse in one night, and was presumably not quite normal, is clear and concise. The purpose of the whole report was to advertise a new serum, and so the 17 worst cases, with head injuries, were divided into three groups. Six patients were given two or more shots of the new serum; none died. Six others got only one shot; one died. The remaining five got no serum; three died. Needless to say, all the cases were treated surgically and with antibiotics, etc., and *all had 21 days of the Pasteur vaccines.*

The report might be said to make out a case for the new serum as a protection against the Pasteur vaccines, although we could suggest a better, cheaper and quicker way of dealing with them. This, however, is what it says about the five patients whose fate had to depend on them:

*"Series C.—The five patients in this series received a course of vaccine but no serum, and none showed antibodies before the 19th day. However, three developed definite titres between the 21st and 25th days. Two of these three patients died. Two other patients failed to develop any demonstrable antibody during the period of observation. One of these died of rabies; the other survived. The two highest levels of antibody in this group were obtained from fatal cases shortly before death."*

That should be enough about antibodies!

## REAL IMMUNITY

It may be true to say that our lymphocytes and mesenchymal cells form a large part of our natural defences, and that these cells are produced in enormous numbers and stored at strategic points, the main depots in the alimentary tract being the tonsils and the appendix!

How often is the appendix solemnly called "the nuisance organ" by those who, at no loss to themselves, remove thousands of appendices every year, a majority of two-thirds of them being in fact quite normal and useful? The real doctors who still retain some respect for the wonderful complexity of the human organism, at the risk of being called "dangerous cranks", should really get together with the business-surgeons and discuss this subject—on TV, please!

When we learn that something like 500,000,000,000 lymphocytes die and are replaced in a human body every day, not to mention all the other "immunologically competent" cells, we cannot help feeling that it is grossly impertinent to add to the complexity of the situation by squirting people full of other cells and viruses which can multiply to an utterly unpredictable extent. No wonder there are often complications!

### **HOW MANY VACCINES DO WE NEED?**

When a full inquiry had to be made into the alarming amount of cross-infection in our hospitals, it did not take long to discover several thousand strains of antibiotic resistant germs, particularly of the *staphylococcus aureus*. Must every hospital patient therefore have several thousand new vaccines pumped into him, three shots of each, and a booster dose some months later if he is still living? If not, why not? The reason is that the public—even the viewers and listeners—would begin to see that the whole idea of vaccinating, if carried to its logical conclusion, is a vast, grotesque, commercial racket which can never produce a healthy race or even allow anyone to enjoy real health. Of course, the real, hospital-prone patient will try anything once. He might be willing to settle for a single new multimillivalent vaccine from the Salk Institute. Who can tell?

### **WHAT IS A VIRUS?**

The electron microscope has focused attention upon what are all-too-loosely called viruses. The word virus used to mean any kind of foul and poisonous matter; but now the notion is being encouraged that a virus particle, whether called an "intact", "living" or "whole" virus, is merely a very small kind of germ, too small to have been seen by Pasteur with the optical microscope.

A virus is a nucleic acid, a chemical chain or pattern. The excuse for regarding it as being alive is that it can multiply itself by getting into a cell and causing it to produce a lot more of the same virus—even a thousand times as much in a few minutes. We can grasp the idea more easily if we remember that a poisonous lie, a mere chain of letters, can get into a newspaper, be multiplied millions of times and spread all over the country in a few hours.

This is obviously a very different thing from simply dividing as bacteria do. The main difference is the amazing speed of virus multiplication. A bacteriophage, for instance, which can infect a bacterium and make it produce more than a thousand new virus particles exactly like itself in 20 minutes, has a potential breeding rate of one-thousand million times per hour for as long as it gets enough cell to infect. These figures come from *The Times Science Review*, Autumn 1959.

### **CRIMINAL NEGLIGENCE**

What a splash the journalists could have made with this sensational figure if only they had had the courage to warn the mothers of the world, with banner headlines, never to have viruses pumped into their defenceless babies or fed to them in pink cocktails! Unfortunately, they missed their glorious opportunity. The matter was never fully discussed and many very important questions are still unanswered

What is really meant, for example, by the expression "living virus"? Is there such a thing as a dead one? How do the real virologists talk about this when they "let their hair down", if they have any?

Commenting upon the first of the CIBA Foundation Lectures, Study Group No. 4, Dr. H. G. Pereira,

a very well recognised virologist, of the National Institute for Medical Research, Mill Hill, London, said: —

"The position is even more difficult now since it has been shown that the nucleic acid by itself, e.g., that of poliovirus, will infect many different tissues which are quite resistant to the whole virus."

When we know that the word "infect" means that the nucleic acid (the virus) multiplies enormously, and that "whole virus" simply means a tiny spot of virus coated with protein derived from an infected cell, we can appreciate the fact that sometimes a "whole" virus cannot infect, while a decoated, or "killed", virus always can *if it is a real virus*. The reason is that all cells have to feed through their walls and can absorb free virus in the same way, *after which they can "replicate infectious virus"*.

In the second lecture, given by Prof. H. R. Morgan, of Rochester, New York, the above facts were confirmed with regard to type I poliovirus, which can infect chick-embryo cells only after being deprived of its protein covering.

Most of the world must have read several times about the huge sums paid out by the Cutter Company, of California, to the victims of their Salk polio vaccine. The total amount was over \$3,000,000, only \$2,000,000 of which was covered by insurance. The facts which have been given already about "living" virus particles should have been known well before the claims were settled. The jury, or 11 out of the 12, awarded these huge sums on the grounds that the Salk vaccines had contained "living virus particles".

Would it be going too far to guess that the vaccinemongers—those directly or indirectly concerned—preferred to pay up and shut up rather than have the scandal discussed for several more months, or even years, through an Appeal to the Supreme Court on the grounds that the cases were tried, as they seem to have been, on a completely false basis?

The whole thing must surely seem a little queer to the intelligent layman, especially when he knows that the Sabin vaccines are deliberately made to contain living viruses. Naturally, it is hard to get any real sense out of all this, because there never was any real sense in it!

What the intelligent doctor thinks is seldom published in the popular newspapers, but when the writer remarked to the late Dr. Beddow Bayly, very shortly before his death, that he had concluded that the difference between a living virus and a dead one was twelve minutes, Dr. Bayly laughed, in evident agreement, and said these memorable and forceful words:

"You need not be afraid that they would use real viruses in all these vaccines. They simply would not *dare* to! *The whole thing is absolute humbug!*"

This final dictum by Dr. Bayly sums up the position with his usual meticulous accuracy. It does not, however, answer all the questions that are being asked about the latest vaccines, though it covers the subject well enough

The latest virus vaccines, whether oral or inoculated, are said to be made with "modified" viruses, regardless of the fact that real viruses have a way of unmodifying themselves with alarming and sometimes fatal results. Very frequently, even in medical journals, they are oh-so-reassuringly called "inactivated" viruses, vaccines, etc. In plainer English, they do not work!

Now, surely, to vaccinate with an inactivated virus is about as foolish, not to say unethical, as it is to travel with an expired season ticket. Even when the latter has been scientifically modified by partial or complete lysis of the date, its use can prove to be a badly miscalculated risk.

As to "modified" viruses, however, Dr. John Kendrew, F.R.S., in his series of BBC TV lectures on "The Thread of Life", stated that it had been proved in the laboratory that a virulent virus (that of virus pneumonia), if placed side by side with a "variant", can "take over" the variant, restoring its virulence, and make it "breed true". Viruses can, in fact, infect one another! Another revelation comes from *The Genetics of Bacteria and their Viruses*, by Willam Hayes, in which, on pp. 365-6, he classifies these viruses as "virulent" and "temperate" and says that the change from one class to the other can be made in a single mutation in response to altered environmental conditions. Furthermore, these viruses, in their temperate mood, do not kill their host cells. They allow them not only to go on living but to breed offspring which continue to reproduce virus as well as themselves.

These facts would seem to explain a vast host of disasters, from single cases to world pandemics. They show the risk of vaccinating with modified viruses, especially when virulent ones are present. They overwhelmingly endorse the late Dr. Beddow Bayly's resounding dictum, quoted previously.

As to smallpox vaccines, it has always been impossible to define them. Jenner could hardly have known that almost any foreign matter, applied with skill and an impressive air, can produce a festering sore on the skin. Case No. 5 in his famous Inquiry—a gentlewoman who acquired "cowpox" through handling dairy utensils—may well have been an early case of vaccination with milk or cream, but not the last one by any means. Jenner would have been shocked by this idea, no doubt, because he did not think of it himself.

Any mixture of chemical and biological refuse can be called a vaccine, and, with enormous free advertising by Press and Radio, it can be sold, but, if it does not cause specific infection, it is not a real vaccine. The latest smallpox vaccines appear to be more infectious than smallpox itself. These mysteries are seldom fully discussed or explained, but there can be little doubt that the smallpox vaccines used in the U.S.A. and our own true British *pox- -virus officinale* contain traces of human smallpox virus.

In the light of what is now known about viruses, it is not surprising that the most vaccinated populations have always had the worst record for smallpox. The Philippines, for example, had 163,000 cases, with 71,000 deaths, in 1918-20, after 20 years of compulsory poisoning with "modified" smallpox lymph. The Mexicans were the most thoroughly vaccinated people on earth from 1876 onwards (with compulsory vaccination within four months of birth, revaccination at least once every five years and every time there is a local outbreak), and yet, until about 1935, they had the worst record in the world for smallpox, the death rate being between 2 1/2 and 3 1/2 times higher than that of India! The League of Nations were blowing them up about it. They could hardly recommend more vaccine, of course, but there has been some improvement since then in Mexico, due, no doubt, to other factors of a more general environmental nature.

## CHAPTER FIVE

### INTERNAL SANITATION

**WE ASSOCIATE** epidemics generally with poverty-stricken and dense populations, and with

insanitation, but it is noteworthy that the worst pandemic ever known, the influenza of 1918-19, which is believed to have infected half the human race and caused 25,000,000 deaths—some say twice as many—has never been fully and honestly reported. Of course, the epidemiologists tried to trace it to its source, and it seems to be generally agreed that the virus took on its terribly virulent form in certain American army camps on the eastern side of the U.S.A. Why, though, has this matter never been properly investigated? Is it a medical secret? (There was a rumour that one of the typhoid vaccines had "gone wrong".)

It is quite certain that those camps were not the most insanitary places in the world—very far from it—nor were the men underfed, but it is certain that they were about the most inoculated, i.e., internally insanitary, people on earth at the time, and the mortality among such men, when the infection spread, was many times higher than among civilians of the same age-groups. One may suspect that most of the "immunologically competent" cells in those army men were exhausted through working overtime against all the vaccines forced upon them. The general fatality rate was very low, and if the patients had all been properly treated by Nature Cure methods it is unlikely that any would have died. This fact is not yet universally accepted, and if we get 'flu vaccines on sale everywhere, it will no doubt be sternly suppressed.

It is obviously impossible to vaccinate in advance against new strains of influenza virus, and they are the only ones that matter. Apparently we are all already full of the older ones; vaccinating against them would therefore be equally futile, to say nothing of the possibility of "boosting" them and thereby causing "provocation cases".

The virologist whom we have quoted above, Dr. H. G. Pereira, Director of the World Influenza Centre, Mill Hill, London, said in an interview in the *London Times*, 13<sup>th</sup> February 1963, that "the Asian influenza virus was now seeded in the population. It was there all the time and could appear when conditions were favourable".

This idea that basic viruses, whether spread naturally or pumped into everybody for money, can lie dormant and then be aroused to renewed activity would seem to explain quite satisfactorily why, some years after a large population has been subjected to compulsory vaccination, it always gets the worst smallpox epidemic it has ever known. We in England began it. The 1871 epidemic was not only the biggest but one of the very worst, according to contemporary opinions. It also explains why it is so dangerous to vaccinate during epidemics and thus add a lot of "provocation cases" to the general total.

All these things have happened so consistently, in so many countries throughout the world, that they cannot be all due to pure coincidence. They are the facts of history, and they cannot be brushed aside as "yesterday's news".

### **DISEASE FOR ALL**

In spite of a reward of \$15,000 having been offered, apparently without response, to anyone who will prove that the Salk polio vaccines are not fraudulent, a huge Salk Institute is now being established on 27 acres at San Diego, California, the alleged object of which is to provide ideal as well as practical opportunities for scientists—even real ones—to work without hindrance or financial worries.

Needless to say, the vaccine industry has already got more than one foot in the door, but Dr. Jonas Salk will not be the only man there. Some quite important and humane thinkers have already been invited to join the happy band, It will be very interesting to see how the members react upon each other!

One object—presumably a "top priority"—mentioned in connection with this ambitious set-up is that of concocting, or "discovering", a single vaccine to protect everybody from everything—except, presumably, the vivisecting, vaccinating, chemists, the Press and the Radio.

At present, however, an "absolutely safe" vaccine against some 10, 50 or 100 virus diseases is all that is modestly envisaged; surely, however, when we read of the vast number of viruses that exist in the world, and of the fantastic speed with which they can vary and multiply, a mere hundred of them would seem hardly to be worth bothering about.

The fact that the antibiotics have encouraged the bacteria to turn our happy hospitals into plague-spots should make us apprehensive about what the viruses may do in reply to new vaccines. California has had one Salk disaster already.

*The British Medical Journal*, of 1st June 1963, has mentioned varieties of the *staphylococcus aureus*, coliform bacilli and poor little TB germs which cannot even live without streptomycin, the antibiotic commonly used in fighting TB. What are we supposed to think about this kind of thing—or aren't we?

We can be sure, at least, that the proposed wonder vaccine, if and when it arrives, will be hailed by the Press and the Radio, with flags flying, church bells ringing, sirens wailing, etc., and advertised with public and "charity" money, with no financial restrictions whatever—and without mercy.

### VETERINARY VACCINES

As there is no public registration of births and deaths for animals, their vaccinators can say almost anything they like about the triumphant progress of vaccination against all animal diseases. The Radio never ceases to proclaim it. Its complete and universal efficacy must be swallowed whole because such propaganda helps to sell all vaccines.

Listeners, however, should always remember that all pedigree animals are selected, bred, fed and experimented upon just as laboratory animals are. They are not so much vaccinated as *tested* with vaccines. When distemper vaccines began to kill dogs or give them nervous disorders, the worst cases were obviously not sold but destroyed. This principle cannot be applied to human babies, at least, not officially, and so there is no real comparison between humans and domestic animals, especially those which are allowed to live only for a few months anyway.

It must be clearly understood that it is always possible that a strain of rapidly breeding animals may adapt themselves to a certain treatment, and may eventually become unable to do without it—like the germs that pine for antibiotics. This provides limitless opportunities for the manufacturing chemists, but is not so good for anyone else.

If the human race wants to be turned into a lot of laboratory freaks, with no health or integrity whatever, and dying from degenerative diseases at an ever-increasing rate—well, are we not more than halfway there already?

Our air, food and water are being increasingly poisoned with hundreds of new chemicals. No one can escape them. Atomic fall-out is a trivial red herring by comparison. It is difficult to travel the world without being converted into a walking cesspool of biological refuse, germs and viruses of every kind.

Is there not one really self-governing, self-respecting and independent nation that will make a stand and refuse to admit any person who has recently been vaccinated or inoculated against anything? Even Britain refused at one time to admit dogs which had been vaccinated against rabies without adding an extra three months to the usual six months' quarantine, knowing the vaccination to be an added danger. If one country, Australia, perhaps, would set the example by banning all immigrants who had been poisoned by vaccines, the subject would have to be fully and publicly discussed for the first time. What matters more than anything else is that the freedom of the Press and of Radio should be strictly enforced by international law, with no censorship by militarism, medicine or money.

### **INTERNATIONAL SANITARY CONVENTIONS**

About the middle of the last century, some seventy nations contributed to a meeting held in Paris to frame rules for the control of epidemics, for there was an obvious need for agreement upon such things as health inspection of immigrants, quarantine regulations, etc. Since then however, it appears that the vaccine salesmen, as might have been expected, have moved in and taken control of everything—except, of course, the epidemics.

No members of the public are admitted to the Conventions to hear what is being cooked up for them or what is said by the real doctors who are present, if any. Consequently, the ridiculous pretence is still kept up that a certificate can disinfect a person, inside and out, with all clothing and personal effects. Could humbug possibly go further? We constantly see the fatal results of this official imbecility. It must be cured.

An International Certificate of Vaccination proves nothing except that somebody's money has had to be spent on vaccine—in other words, that the love of money is the root of all evil.

### **"AUTOIMMUNE" DISEASES**

This strange name has been given recently to a number of well-known degenerative diseases of unknown origin, such as rheumatoid arthritis, Hashimoto's disease of the thyroid, and a growing list of others. The feature common to all of them seems to be that certain cells which are not normally in direct contact with the blood stream, become damaged or exposed; they are attacked as strangers by the lymphocytes, plasma cells, etc., antibodies appear in the blood, a vicious circle is set up and the battle continues until the offending cells are destroyed.

In fact, it would seem that all who die of "natural causes" or "senile decay" really die of "autoimmune" disease.

We very strongly suspect that this new name, completely unintelligible to the layman, has been adopted to obscure the fact that all these troublesome and incurable diseases really ought to be classed as "autogenous vaccinations", but the word "vaccination" has to be kept out of it at all costs.

The National Anti-Vaccination League, however, will be neither surprised nor depressed to be told

that, if nothing else kills us first, we all die from vaccinations in the end. We shall strive, like others, to put off the end as soon as possible, and to do our best to protect everybody from being systematically poisoned with antigens and antibodies for money, sometimes even before they are born.

We like to believe that if the original inoculators had had the faintest idea of what they were doing, in their impudence, or of the fantastic tangle of vicious circles and chronic diseases they were bound to create, the whole dirty business, in spite of its giving full employment to doctors and colossal profits to the chemical industry, *might* never have been started.

We have always held that the zymotics tend to cure themselves if properly treated, but that the effects of vaccination are incurable and often disastrous. We must therefore resist all vaccinations. We would rather be cranks than crocks.

The present official advice as to the "safest" age for primary vaccination puts it at "after 1 year", which amounts to admitting that most of the world's statute laws on this matter have always been pure criminal lunacy (as if we didn't know!). We believe that all vaccinations should be voluntary and should be strictly forbidden before the age of 150, after which anyone who still believes in vaccination deserves to be treated as a guinea-pig. He ought to be happy, anyway, to die crammed full of beautiful, healthgiving antibodies, like other people.

## CHAPTER 6

### THE VACCINATION CONTROVERSY

ALTHOUGH, IN THIS short history of medical protection-selling, we must confine ourselves mainly to its present and maybe future aspects, it would be ungrateful not to remember those great fighters in the past, especially the medical men, including public vaccinators of long experience, who studied the subject honestly, saw right through it and bravely told the truth about the whole repulsive racket, often at great cost to themselves, They began doing this more than a century ago.

Who can dispute the opinion that Dr. Charles Creighton was the greatest of these doctors? His *History of Epidemics in Britain*, in two volumes, 1891 and 1894, was justly called "the greatest medical work ever written by one man". Having previously written for the *Encycloptedia Britannica*, he was asked to contribute the article on vaccination for the Ninth Edition. Its appearance, in 1888, was such a profound shock to the advocates of, and vested interests concerned in, vaccination that Creighton's article was replaced as soon as possible by what was little more than an advertisement for glycerinated calf lymph written by one of its promoters. Creighton, perhaps the greatest medical mind of the last century, was virtually turned out of his profession.

The fact that such a disgraceful thing was ever allowed to happen appears to have been taken as a precedent, which has been religiously followed by most publishers ever since. Vaccination is big-money business; so is the publication of school text-books. No medical text-book telling the truth about the vaccine industry would ever reach the printers.

In addition to those previously mentioned, who had a lot to lose and little to gain by denouncing the fraud of vaccination, there were many others who were scandalised by it; for example, Alfred Russel Wallace wrote a lot against it and said that he considered this work the most important that he ever did, in spite of his writings on natural selection.

William White wrote a very good book, *The Story of a Great Delusion*, 1885, the first of the larger works exposing Jenner, but, unfortunately, he made one error in misinterpreting some of Dr. Farr's statistics; this error is all that a medical student is required to know about the contents of this book of over 600 pages.

Creighton may have been too irritated by Jenner's style of writing to be quite fair to his essay on the cuckoo, submitted to the Royal Society, but he expressly disclaimed being a naturalist himself; after all, the only important thing about Jenner's cuckoo, "the bird that laid the vaccination egg", was that it got Jenner an F.R.S. Apparently, the Royal Society failed to notice that it was the cuckoo that was the genius, and not Jenner. Where Jenner obtained his information about the cuckoo is of no importance whatever, but even the recent big book, *Smallpox*, by Prof. C. W. Dixon, has to seize the opportunity to justify Jenner's paper and to dismiss Creighton as an "armchair critic". Prof. Dixon even calls him a "syphilophobe". The excuse for implying that he was morbidly afraid of syphilis is presumably that, in his small book, *Cowpox and Vaccinal Syphilis*, he tried to explain to doctors certain outbreaks of supposed syphilis in recently vaccinated groups of children. His theory was that the trouble had been caused by taking the lymph too late, which, in a series of arm-to-arm vaccinations, had allowed the cowpox to revert to its original virulence, the affinity of cowpox being to the great pox rather than to the smallpox.

Considering that almost nothing has been published about the real nature of cowpox, we may indeed wonder why it is that modern medical dictionaries tell us quite dogmatically that it is "a virus disease of cattle". Is this definition really true or is it just commercially convenient? Also, what has become of the bacillus of smallpox and also that of influenza, both quite real to Prof. W. M. Crofton? Are they brushed aside as mere minor inconveniences? In short, it is wiser to be sceptical about all opinions about bacteriology in the early part of this century, when little was really known and no one could distinguish between a virus particle and the filterable form of a bacillus. Creighton was obviously a sceptic to the end of his life. Prof. William Bulloch, after Creighton's death, said, "He was the most learned man I ever knew." He could speak six or seven European languages fluently and could read many more. Was this all for fun? Did he go to India in a Sedan chair to study leprosy and plague?

Dr. Walter Hadwen, "the terrible Hadwen", as Shaw called him, is not mentioned in Prof. Dixon's terse account of the Gloucester smallpox, in 1895-6. Hadwen replied shatteringly and completely to the official Report prepared for the Royal Commission on Vaccination, which, however, was not prepared to wait for it, and ended its seven years of sessions before the Report appeared. The whole outbreak was probably spontaneous and due to blocked sewers and polluted water. If it were not, why did the authorities have to spend thousands in putting these things right? The stinking manholes leading to the sewers may well not have been noticed by the official reporter, because they had been sealed up before he ever got there. Prof. Dixon sneers at the local antis, meaning the phoney ones, of course. We heard of one man who championed the antis' cause because he edited a local paper and wanted to improve its circulation. He went to Cheltenham and had himself secretly vaccinated. Are dishonest journalists so very rare, however?

One genuine citizen of Gloucester had a wife and children who were never vaccinated; a servant girl, who was living in the house and who had been vaccinated, contracted smallpox, and the father of the family allowed his wife and four children to sit by the girl's bed and cheer her up. None of them became ill. They were badly brought up and lacked faith in the official propaganda, no doubt.

We cannot, of course, recommend this kind of conduct, but Prof. Dixon's readers may as well have the whole truth, and not just garbled and twisted bits of hostile local gossip, especially if they are asked to pay £6 10s. 0d. for his book.

It is impossible to review all the old books, papers and reported speeches on this controversy. The modern reader has to be content with a brief summary of it all, and he must make up his own mind as to which kind of evidence he can accept as genuine. On the one hand, we have statistics compiled behind closed doors by medical wags who knew what the bosses wanted and who had been brought up on the vivisectors' slogan, "The end justifies the means". Were they not on the side of the angels? Why shouldn't they lie like hell?

These people have to be a little more astute today than the wags of the last century who proved such wonderful things that we can only laugh at them (such as, for example, a case mortality of 71 per cent among the unvaccinated, and one of only 1.3 per cent among the vaccinated cases). When we know that, before the cowpoxing ever began, the smallpox case mortality was only about 18 per cent in England, we know what to think about the miracles performed by vaccination in the glorious days of the Victorian era—or, should we say, by statistics?

On the other hand, we have the example of the brilliant minority of really honest men who risk their own professional advancement by fearlessly telling the truth as they see it with their own eyes—men of long experience and of the highest integrity. Their testimony, as might be expected, flatly contradicts and exposes everything that was claimed by Jenner and his prosperous followers.

The late Major Reginald Austin, of the Royal Indian Army Medical Corps, was one such man. No one who knew him could possibly doubt his word for a moment. When the writer showed him some official figures about smallpox in the Army in India, Major Austin's exact words (with emphasis) were these: —

"Why do *you* take the *slightest notice* of their statistics? You don't know the people who compile them. I do: I've *seen them at it*. They are all the most unconscionable LIARS!"

After 20 years in India and Burma, treating the Army men and the followers, Major Austin knew what he was talking about and meant what he said. Of course, he did not publish such things about his professional colleagues, but he did tell them what he thought of them. Presumably they replied by calling him a crank and giving him that reputation. That is the usual official routine.

Carlo Ruata, Professor of Materia Medica, at the University of Perugia, was obviously another fearless champion of the truth; and it is very important to remember that all such men make themselves personally responsible for what they say and write; they do not hide in the herd and quote figures for which no one would dare to admit personal responsibility.

In a letter to the *New York Medical Journal*, published 22nd July 1899, Prof. Ruata wrote a shattering rebuke to Dr. Joseph M. Mathews, who, in his Presidential Address to the American Medical Association, had called the antivaccinationists "mad" and "misguided". The letter is too long to quote in full, but he deals with the smallpox in Calabria, Sardinia and Sicily during the epidemic of 1887-9.

After showing that Italy was about the most vaccinated country in the world (the Army call-up showed that 98.5 per cent of the men had been vaccinated already, and they were then

revaccinated), he shows that smallpox deaths were exactly divided between the sexes before the call-up age of 20, but that afterwards the revaccinated men were hit much more than the women. He gives a lot of figures from the worst places hit by the epidemic. The gem of his collection was: Vittoria, Sicily, population 2,600: deaths from smallpox 2,100! And he adds:

"Can you cite anything worse before the invention of vaccination? And the population of these villages is perfectly vaccinated, as I have proved already; .....I obtained from the local authorities a declaration that vaccination has been performed twice a year in the most satisfactory manner for many years past."

Incidentally, it is interesting to note that the lymph used in Italy at that time was the animal lymph such as was afterwards adopted by the British Government to replace arm-to-arm vaccination. The excuse for the change was that animal lymph could not transmit syphilis, leprosy or other human diseases. The real, commercial reason was, of course, that animal lymph has to be purchased from the firm's which produce it, instead of being obtained by private arrangement with doctors, vaccinifers, etc.

### **WHAT IS THE PRESENT POSITION?**

We have no space here in which to pay tribute to all the people who have been fighting for truth and justice, not only in Britain but all over the world. Unlike the World Health Organisation, the National Anti-Vaccination League is not subsidised. It has no multilingual secretariat, and it cannot hope to support such a thing by voluntary contributions from that very small percentage of the public which really cares even twopence for the truth about anything (the so-called "cranks").

The high-minded Victorians who supported our cause made the tragic mistake of thinking that, when we had "knocked the bottom out of a grotesque superstition", as Creighton put it, the battle was almost over, and very few of them made any attempt to endow the League with substantial capital or even permanent headquarters. These honest people could hardly have foreseen such horrible, costly follies as two World Wars and the atombomb—or that the Jenner-Pasteur business would become an enormously wealthy international protection-selling racket, which, in spite of its universal failure, has the power to monopolise the Press and the Radio almost completely, to use large sums of public and "charity" money to advertise its abominable wares and even to capitalise their manufacture, which inflicts cruelty upon countless millions of animals every year. The optimism of the Victorians was tragic, but only an extreme pessimist could have imagined what was to follow.

As to the present, we are aware of the efforts of those in other countries—France, for example, where M. Lemaire and M. Hoffet, whose son was killed by BCG vaccine, have been leading a brave fight to get compulsion taken out of the whole vaccine trade. There are many French doctors who would make all vaccinations illegal. There is no doubt that they soon would be if free discussion on the Radio were possible; at present it is simply not allowed. Only the feeblest pretence at fair play for both sides has ever been made in Britain, the opponents of vaccination being granted only a very few minutes in a year—with luck, and then without being given any warning or allowed time for adequate preparation. There is invariably a very long interval between one such concession and the next. The anti will be lucky to get from two to five minutes in which to demolish a mountain of lies which have been piling up for a century. His broadcast will probably be made from a provincial

station, lest the heart of the British Commonwealth should die from shock, He will be up against maybe half-a-dozen opponents, each of whom will be given exactly the same time as he on the air, just to ensure scrupulous fairness. Furthermore, if the programme is filmed and so can be edited, his most telling facts and figures will be cut out by one of the anonymous broadcasting house-surgeons. If, in spite of all this, he manages to get any real information to the listeners, the scandal has to be given several months to blow over.

Even that excellent broadcaster, Bernard Shaw, we recall, had to be cut off in a hurry when, in an interview, he was casually referring to Jenner and Pasteur as if they were mere mortals. Shaw really studied the vaccination controversy and said many trenchant things about it, but his writings are still available and so need not be quoted here.

## LILY LOAT

In modern times, the one person who did more than anyone else to restore our right to choose whether or not we should be poisoned with commercial inoculations was the late Miss Lily Loat. The fact that she received no obituary notices whatever from our national newspapers was the highest compliment they could pay her. The only radio tribute to her great work was an oblique smear in a Granada TV serial. It showed two police officers looking with horror under a blanket at the corpse of an old woman recluse who had died of smallpox and who was said to have been a notoriously eccentric crank. Later in the episode, the junior officer remarks that at one time she had "actually started a league for the abolition of compulsory vaccination"; his Chief Inspector replies: "Oh, so it caught up with her!"

We need hardly say that the original society was for the Abolition of Compulsory Vaccination and that it became the N.A.V.L. in 1896, or that Miss Loat was inseparably identified with it for about 50 years. Incidentally, she did *not* die of smallpox.

Probably, mothers will be telling their children for years to come that is what happened to the founder of the League. It was God's will—they saw it on the TV. Such is the kind of publicity we get from the ignorant and unscrupulous powers-that-be. A printed protest sent to them received no reply.

The late Dr. Killick Millard, who wrote so much against mass vaccination, told the writer that he admired Miss Loat so much that he hoped to survive her so that he could write her biography, but that was not to be. What would he have said about that typical TV tribute to her work—the only one of any kind from the Radio?

Miss Loat was not herself a doctor, but there are many medical members of the League and she always had the benefit of their help and advice. The doctor who might have been the Chief Medical Adviser to the Ministry of Truth was the late Dr. M. Beddow Bayly. He did so much work, writing books, pamphlets and leaflets against vaccination and other allied rackets, that he left little for others to do. His opponents could not answer him, because, as he used to say with a gleeful chuckle, he hardly ever quoted any evidence against them except what they had themselves said or written. His works are still available to the serious student, and they are very valuable for their wealth of information and quotations.

The average person, however, cannot be expected to want to be dragged backwards through the whole history of the controversy, or through Hansard. Nevertheless, the experience would reveal

that the mainstay of the vaccine tyranny has always been the conceit, credulity and intolerance of people in high places. We well remember the tumult in the House, in November 1942, when one M.P. who had obviously read Dr. Beddow Bayly's big booklet on diphtheria "immunization", as the minister of Health to hold an inquiry into its safety and its efficacy, and to appoint a committee upon which both sides should be represented. His arrest was at once demanded by an indignant medical M.P. for "causing the deaths of innumerable children through this agitation".

In Parliament such idiocies can be answered at once by any M.P. with a brain, but protests to the Press or the Radio bosses can be suppressed. One advertising agency actually sent out a circular letter to its members warning them not to accept advertisements for Dr. Bayly's booklet. One of these members was also a member of the N.A.V.L., and so we were able at once to advertise this piece of backstairs thuggery without charge. Another example of this criminal conspiracy to stifle the truth was that, when Dorothy Lamour, Mickey Rooney and Orson Welles had been made seriously ill by inoculations, we tried to get small advertisements into several popular film papers, simply offering to inform travelling film artists as to their legal rights on the subject; all these papers refused to insert them. Incidentally, the papers no longer exist.

As Dr. John Rowan Wilson tells us, however, in *Margin of Safety*, "The Anti-Vaccinationists are still in existence, though their influence now is negligible". If this is so, the world has at least the right to know why—and the duty to do something about it. We can assure the world that the blood-poisoners are also still in existence and, even though they no longer dare to use real vaccines, their corrupting influence on public health and public life is extremely costly; the world can no longer afford their rapacious rule (*see* Dr. Wilson's book).

The worst threat to human welfare is monopolised Radio. The most infectious disease in the world is insanity, and the Radio is the principal carrier of it. Its evil power spreads so far and so fast that something more than the slow, cumbersome and expensive laws of libel is absolutely essential for its control. The Radio lie gets a 12,500 miles start. This is infinitely worse than the proverbial 12 hours. The truth never overtakes it, because it never gets started at all.

## CHAPTER SEVEN

### THE DELUGE OF VACCINES

IT IS OBVIOUSLY due to the commercial profits from cowpox, to the £30,000 paid to Jenner and to the official prestige bound up with this, that a continuous deluge of vaccines began to descend upon Mankind. Pasteur saw the enormous possibilities of extending the vaccine business to cover every known kind of infectious disease. To him, germs were the cause of all such diseases. Fight the germs and save Humanity.

We now know that the cell is not the unit of life, which it was believed to be at that time by Pasteur and most others, except Béchamp and a few more with greater scientific insight. Every kind of living cell, in fact, contains many elements which can multiply, perform fermentations, and even act as viruses, but the old fear of germs is still being commercially exploited to sell vaccines, serums, antibiotics and disinfectants.

The principal commercial vaccines which have been thrust upon the public, more or less in their historical order, are those for smallpox, rabies, typhoid, cholera, tetanus, diphtheria, whooping-cough, tuberculosis, plague, yellow fever, poliomyelitis and influenza.

Sometimes, as with diphtheria, for example, a serum is made first, but when it fails to reduce or even increases the mortality a vaccine is sure to follow.

However, serum can only be sold to people who are under treatment for some reason, whereas a dozen vaccines can be sold to everybody, even to those that are whole and "need not a physician". If everybody is made chronically ill by them, so much the better for the chemists—and even the physicians. No wonder the Press and the Radio never let us forget the vaccine cult.

## SMALLPOX VACCINES

Vaccination was introduced *not* as a "great discovery", but as a makeshift substitute for the much more plausible and excusable smallpox inoculation, which had proved ineffective and too difficult to handle. What was wanted was something to save the faces and the pockets of the medical men, and anything that did not cause an infectious disease was good enough for that. Jenner's notions about horse-grease were not good enough for London, so the "spurious" cowpox had to be elected.

We need not try to give the history of all the lymphs that were used in the arm-to-arm days of years gone by, because Prof. Crookshank did all that for us. His *History and Pathology of Vaccination* deserves to be called a classic, because he had the luck to go to the Royal College of Surgeons' Library just when Jenner's original writings were rediscovered. They had lain there unheeded for years, without even being catalogued. When the present writer went to the British Museum to read Crookshank's works, he had to cut some of the pages in order to do so; obviously, they had never been opened, although the book had been in the Reading Room for 34 years. It is evident that the usual expedient for avoiding the hard work of thinking is to leave it to others.

It is impossible to tell the public what vaccine is, because so many different strains are used, and none is likely to remain the same for long. If a strain becomes weak, it is made virulent, or dirty, again by "passing it through" a series of wretched animals. It is then tested on rabbits' eyes for its destructive power, or possibly by some other vile method.

The subject has been covered fairly fully in the earlier pages of this booklet, but, as to the future, it seems likely that the theory of vaccination and the idea of producing antibodies will be quietly abandoned, while the business of inoculating will continue, mainly because it is very big and very profitable.

We shall deal with the voodoo or witchcraft aspect of vaccination more especially when we discuss rabies vaccines, because that is the right place for it, but it is obvious that some people benefit from the "placebo" effect of a vaccine. Most of us, however, are more sceptical than formerly about vaccines in general. There can be very few large families that have not had some experience of the blasting effects that can follow inoculations.

Encephalitis has been well publicised, even in the Press; although the worst examples of its results are seldom kept alive in the public mind, such as that of incurable and progressive insanity leading to violence, even murder, sometimes several murders—as in the case of the wretched man of whom one of the BBC brains-trusters said that he should have been hanged for strangling three little girls. We do not consider it fair to hang a man merely because his family believed in vaccination.

Smallpox vaccination is known to be by far the most common cause of this encephalitis, although

other inoculations can also cause it—diphtheria toxoid, whooping-cough vaccines, etc. Two women died from it after having the Pasteur rabies vaccines. They had not even been bitten, but only frightened, by a savage dog—and by Pasteur, of course. These deaths, and very many others, show how far the inoculators will go in pushing their profitable trade—just to be on the safe side!

### WHAT ABOUT TREATMENT?

Does one ever learn anything from the Press or Radio as to the proper way to treat a smallpox case? The textbooks evade the issue by saying that "there is no specific treatment". Nature Cure advocates would agree that the proper treatment of fevers does not have to be specific, but it can be very effective indeed. In fact, the "orthodox" school would never dare to face fair competition with them. It would be practically impossible to arrange such a contest, but, then, fair play was never a laboratory product.

The N.A.V.L., of course, cannot sponsor treatments or preventives, for that is not their job; they are, however, interested in results. If, for instance, magnesium chloride prevents and cures diphtheria and also poliomyelitis, as Prof. Lépine, of the Pasteur Institute, now appears to admit, and if the new drug, N-methylisatin b-thiosemicarbazone ("compound 33T57", or "Marboran"), is several times better than vaccination for the protection of smallpox contacts (*vide The Lancet*, 7th September 1963) we shall be glad to see them triumph over their dirty and dangerous rivals. We must admit, however, that we do not quite see how *marboran* can be several times more effective than recent vaccination if the latter gives 100 per cent certain protection, as we are told so often from our radio. We would rather trust *The Lancet* than the Radio, however.

Nature Cure does not approve the use of drugs, of course, but all those who travel abroad often would be glad to avoid repeated inoculations by carrying, instead of certificates, a box of pills or cachets *without any obligation to swallow them*, of course. It is up to them to worry their M.P.s to that end.

### VACCINAL INJURIES

It is impossible to deal adequately with this subject in anything less than an enormous illustrated encyclopedia. We cannot go into hospitals and photograph the patients, but the horrors of badly treated smallpox can be photographed by the doctors for propaganda purposes, and this is done frequently. There is no denying, however, that vaccination can cause death and permanent injuries, blindness, insanity, maiming, etc. We do not wish to dwell upon the subject, but it must be pointed out that the long-term results of vaccination cannot be shown in the Registrar General's returns. Vaccination may, for example, cause cancer to start up or flare up, and deaths from this cause will never be the subject of an inquest. As to blood diseases, there are many of unknown origin, such as leukemia. Who knows who has been poisoned by vaccine and who has not? Not long ago, a child was born covered all over with vaccinia eruptions. The mother had not, during the pregnancy, been vaccinated, but there was another child in the house who had been, and so the vaccinia must have spread from this source. This illustrates the general complexity of the whole subject. It is quite certain, however, that vaccines will always be given the benefit of any doubt, whereas the public will not.

### RABIES VACCINES

We need not deal at length with Pasteur's rabies vaccines, made from allegedly rabid rabbits' spinal

cords. The manner in which Pasteur made rabbits "rabid" by boring holes in their skulls and inserting filth into their brains was not science but simply brutal quackery. Pasteur cannot be proved to have saved a single life with his vaccines, but it is quite certain that many people died from his treatment of them, even when the dogs that had bitten them remained perfectly well—like the ones that Dr. Lutaud kept as pets in his house for years to prove that they were not rabid. The reader who wants a fuller account of all this should read Lutaud's *Pasteur and Rabies*, and other contemporary reports.

The most important fact revealed by this history is that, once an ambitious mountebank has successfully fooled himself and a lot of important people, such as the Tsar of Russia, or any royal family, he is more or less immune from public criticism or ridicule. This fact has always been traded upon by the most successful quacks. Innocent royalties, popular film, TV or stage stars, presidents, etc., are always dragged into the game at the earliest possible moment. The financial backers are usually astute enough to get out at a profit before the crash comes, but the other brilliant people may not be so lucky.

The newspapers depend upon the advertising chemists for much of their profits, and only the most sensational vaccine disasters—those which are too big to be suppressed—are likely to be mentioned. Rabies disasters are naturally sporadic and they seldom involve many people, but, in Fortaleza, Brazil, in November 1960, some 22 deaths (later reduced to 16 by the familiar process called "reclassification") resulted from rabies inoculations in about two days. This was reported by Reuters and the U.P.I., and so almost any paper in the world could have made a splash with the news, and yet only one British provincial paper published the story, and only two small items, both from Detroit, seem to have mentioned the matter in the American Press. Some French and Belgian papers, however, made a big thing out of it. It is true that the original story in the Brazilian Press was grossly sensationalized, but the deaths were real enough. In short, how do the vaccine-pluggers manage to run the entire English-speaking Press and Radio news to suit themselves? The public should be told *how* the trick is done. We know *why*.

When Stephen Leacock, the economist with a sense of proportion, called Pasteur the man who "brought rabies within the reach of all", he said all that we really need to know about such a very rare disease—and about Pasteur.

The dramatic and sensational nature of rabies, and the folklore associated with it, made it eminently suitable to the furtherance of Pasteur's ambitious. Rabies, in fact, built the Pasteur Institute, which was founded solely to make and sell rabies vaccines and thus (perhaps) save about 30 lives per annum in France. This can be seen from the Articles of the Institute, published in M. Marcel Lemaire's recent book, *Pour la Liberté*.

We need not discuss the subject further here, but this is the right place for something to be said about the voodoo and witchcraft element in selling "protection" to all who can be scared into buying it—especially at public expense.

The reason why the subject is ignored in all the literature of vaccino-apologetics is that it cannot be dealt with by statistics, even when their compilation is entirely in the hands of the medicine men. The element of suggestion, and especially of conviction, is, however, so extremely important, both in resisting infection and in recovering from it, that not to consider them at all is entirely unscientific, in fact, absolutely insane.

We have all heard or read innumerable stories of death following the breaking of some taboo, or prayer of death or ritual curse. Most white folk like to think that only the primitive "natives" can be killed in this way, but that is not true. It seems that a real conviction that death will come is enough to cause it.

One typical case, reported by a missionary's wife, was that of a healthy young man, just about to marry a girl working at the mission, who sent a message to say that it was no good going on with the wedding preparations as he would be dead in two days. He had been told by a local witch doctor that this would happen if he saw a white crocodile. A white doctor tried to convince the boy that what he had seen from his boat was only a dead crocodile turned over in the water and exposing its white underside. But the boy's mind had been made up for him and he died.

A more impressive story was that of the fate of eleven African native soldiers who were guarding some land against poachers. They shot one young poacher and, in celebrating their victory, they got drunk and, reverting to their tribal custom, they also ate him, after which they got more drunk and openly boasted of their triumph. The victim's father heard of this and he publicly cursed the men, declaring that they would all die within three weeks—and they did; the Army doctor who reported this incident performed autopsies on three of the men himself and could find no natural cause of death. It seems obvious that when the first of the men died, the weakest link in the chain, the others would be almost certain to follow suit.

The last case we wish to mention was that of a young Maori woman singer, whom the writer met years ago. When several years later, he met Maggie Papakura, the well known guide to the show places of New Zealand, he asked her what had become of that young woman and was told "Oh, I'm sorry, but I'm afraid she's dead. . . - No, she wasn't old: she just sat down and died." What did that mean? "Oh, we Maoris can do that, you know."

It seems clear that this young singer, a Maori "princess" was able to do this because she knew that it was in keeping with an old and revered tribal tradition. It is plain that in this case there was no element of fear, nor of any curse nor of the breaking of any Maori *tapu*. The West has still a lot to learn. Even Sir Bernard Spilsbury had to put a warning notice on the door and turn on the gas when he felt that his usefulness was at an end.

We have devoted a page or two to this subject because we are sure that in rabies, tetanus, polio, pneumonia and any other condition where life may be in the balance, the mental state of the patient is of paramount importance to resistance or recovery.

Major Reginald Austin, R.I.A.M.C., said that he saw 20 men die of "rabies" at Kasauli, and he was sure that "they all died of pure fright and nothing else", because the Pasteur vaccine salesmen got at them and told them that the dogs that bit them were "very mad".

It is always held that if the symptoms of rabies start to develop, the fate of the patient is sealed, except in cases of "laboratory rabies" caused by the vaccines, in which paralysis may be confined to the injected limb. If, however, the vaccines can produce the smallest sign of tetanus or paralysis, they must therefore be extremely dangerous; if they cannot do even that much, then they are probably useless at best.

The value of rabies antibodies has already been dealt with (*see* page 58). We must stress the fact

that the mortality in any outbreak or scare about rabies depends almost entirely upon the panic it arouses. When Pasteur, on 4th May 1886, was advertising his vaccines at the Academy of Medicine, he said that the mortality could be "even 100 per cent". While this panic propaganda was going on, five workers coming into Paris were all bitten by one "mad dog". They all died of "rabies". There is your 100 per cent; but can anyone believe that they would all have died if they had not been reading the papers?

Perhaps the most significant "rabies" incident in modern times occurred during World War I, in Cairo, when a number of Anzacs were injured in a serious brawl. Those who were afterwards in hospital were told by somebody with more imagination than sense that they were in danger of getting rabies. This was probably due to a common misunderstanding of the expression, "street virus". The dust of the Cairo streets was alleged to be systematically sprinkled with the saliva of a horde of rabid pariah dogs. The unfortunate victims of the dusty street brawl were also tactfully persuaded that they must on no account be silly enough to develop rabies, because there were no Pasteur vaccines on hand! It is certain that no one was infected with rabies, but this did not prevent several of the men from dying after going raving mad. Naturally, the details were medical secrets and were not officially published, but one report numbered the deaths at twenty; even if they were fewer, however, the lesson is the same. The men should have been told that the term "street virus" is only used to distinguish it from the "fixed virus" which Pasteur made more and more virulent by inoculating it upon a series of wretched animals—the old laboratory trick. "Street virus" has nothing to do with street dust: it only means the ordinary virus coming from a rabid animal.

With no rabies and no Pasteur vaccines, this whole incident proves the extreme danger of witchcraft and panic-mongering. An official estimate for Australia is that well over 100 people there are killed by witchcraft every year, which makes it several hundred times more deadly than rabies or smallpox. In any emergency, panic-mongering is a much more serious crime than looting, and it should be dealt with as promptly.

The number of people killed by Press and Radio panic-propaganda, to sell vaccines and other poisons, must far exceed the total due to all the other professional murderers put together.

## **TYPHOID AND CHOLERA VACCINES**

It is well known that typhoid and cholera are both due to sewage-contaminated food or water. By means of sanitary improvements, Britain got rid of all of its cholera and most of its typhoid without any vaccines; and officials who now recommend their use must be suspected of having dirty, stupid and slipshod minds and dealt with accordingly.

It was a great pity that the "Old Tiger", Sir Almroth Wright, who did such great service to all by turning Listerian surgery out of every hospital in the civilised world, should have spoilt his record by making one of the most hated and dangerous vaccines known to Man. Since very few doctors have much faith in it, we can be brief about it. The story of its use in the Boer War, its rejection and restoration, has been told repeatedly already. The real Press publicity that it got during World War I, however, was an example of how a vaccine can do nothing but harm and yet appear to be an enormous boon. We were told that Wright's vaccine practically banished typhoid from the Gallipoli campaign. We know that when men got typhoid after vaccination it was called "paratyphoid". Then, in the same way, came the other paratyphoids, A, B, etc., and if the campaign had lasted long

enough, the statisticians would have saved their faces with a whole alphabet of paratyphoids. Many people, old enough to know better, were fooled by this kind of thing, but the main fact—and one which must be taken seriously—is that 96,684 men were invalided out from Gallipohi with enteric disease, which means that the health of the troops was many times worse than it was during the Boer War. Insanitation (including vaccination) was, of course, entirely responsible for this.

As to typhoid "carriers", we remember the fuss made about Typhoid Mary, but relatively few people know that it had to be allowed to die down when it was found that from 3 to 10 per cent of the dairy workers in New York State were potential Typhoid Marys. Even the official health authorities could see that Americans would not submit to having tens of millions of innocent citizens kept in prison permanently, or allowed to go free only if they had their gall-bladders removed. The whole thing had to be allowed to fizzle out, but it was a cruel and disgusting story while it lasted. If it still survives, it is only in the pages of children's books or the more incorrigible newspapers.

A point of historical interest and importance about the typhoid vaccine is that when Wright published his opinion that "serum therapy rests upon a foundation of sand", the Pasteur Institute naturally felt obliged to hit back by proving from the hospital records of France and North Africa that Wright's typhoid vaccine was quite useless. As mere lay observers, we do not feel that we need say any more about it except that, in its deadly, or health-shattering, effects it has proved to be one of the very worst. Wright's most loyal and famous pupil, Sir Alexander Fleming, was not the only victim of it. Ask the troops!

### **WHOOPING-COUGH VACCINE**

Vaccines for whooping-cough seem to be especially liable to provoke encephalitis, etc. At present there are at least four strains of virus to be dealt with, so that a quadruple vaccine has to be smuggled into babies with diphtheria and tetanus toxoids. It would be hard to guess how two germ poisons and four viruses manage to get along together. We can only recommend readers to leave them alone to settle it among themselves.

### **DIPHTHERIA VACCINE**

Diphtheria fluctuates very greatly in its incidence and mortality, from time to time and from place to place. The word "immunization" is a fraudulent trade term; "inoculation" should always be used instead. As usual, it is impossible for the public to know what any diphtheria vaccine contains or what it will do. Even the makers do not know (*see* page 19). One thing is certain: the toxoid now being used, if we can trust the description of it in recent books and journals, is very different from the stuff that was used when the mass inoculations began in Britain with Prof. Ramon's toxoid (anatoxine).

Six years after compulsory poisoning with it began in France, on 1st January 1941, Prof. J. Tissot, of the National Natural History Museum, Paris, wrote to the Minister of Public Health, in May 1947, informing him that diphtheria bacilli could be cultured from the saliva of every child inoculated with Ramon's toxoid if tests were made from two to five days later. Every doctor in France was challenged to make the tests for himself. Very naturally, the Minister passed the letter to the Pasteur Institute—and then "the balloon went up". The Board decided that Ramon would have to go, and he was barred from his laboratory, but, as they did not dare to give any reason publicly,

they had to wait until Ramon had made rude remarks about their commercialism and their ingratitude for his past services, before they fired him in the following January.

We can appreciate the position in which the Institute was placed. It was founded solely to boost the terror of germs and sell protection against them, and here was Prof. Tissot, a champion of Béchamp, the man who opposed Pasteur, virtually accusing them of causing, in the six years, 1941-46, 150,000 serious cases of diphtheria, with 15,000 deaths (over and above the average figures). They saw themselves being sued by 15,000 bereaved parents, for all they were worth—and a great deal more! Obviously, they, of all people, could not say that the terrible figures were merely coincidental, or that *post hoc* arguments prove nothing.

Needless to say, our own Ministry of Health, the Press and the Radio poison-pluggers were too deeply committed then to be able to do anything but maintain a conspiracy of silence. Public interest must always come second to vaccine-mongering

The N.A.V.L., not being addicted to *post hoc* thinking, could only use the figures to prove that diphtheria had greatly increased in France in spite of compulsory inoculation. It seems fair to estimate, however, that perhaps 3 or 4 per cent of the increase in cases was due to "provocation cases"—a term now frequently used in connection with vaccination campaigns, as a warning against the well-known risk of making epidemics worse.

When the toxoid was first tried out in Alsace, in 1925, Dr. Zoeller inoculated 305 French Army recruits, leaving more than 730 of them uninoculated as controls. In 12 days, the usual incubation period, 11 inoculated men developed diphtheria, while the controls had only 1 case. The Pasteur Institute was equal to the occasion. The 11 cases were not immunised: they had only had 1 "shot"; they needed 3, properly spaced, of course, and then 6 months in which to develop immunity. So the 11 were dumped with the other case, making 12 cases in the "Un-inoculated" group.

We thus see the familiar pattern of the Pasteurian statistics which made the purchase of toxoid compulsory in France, and did great service in starting the polio industry in America. The great charm of the method is that the more infectious the vaccine the better the statistics! It should be obvious that, during the first few weeks of a mass campaign to inoculate with a poisonous vaccine, such as diphtheria toxoid or poliovirus, the one-shot victims will far outnumber those who have had a second shot, and they will also show a worse record for serious or fatal results, because the first shot is more likely to cause trouble than the second. This is taken to prove that two shots are better than one. At this point, somebody whispers that no one who has had three shots has had the disease in question in a serious or fatal form. The fact that no one has yet had three shots, because it takes seven months to give them, is ignored for the moment; the whisper soon becomes an official pronouncement, and the world rejoices. Medical M.P.s, Radio doctors and Ministers of Health revel in it, and vaccine shares reach their highest peak. When, a few months later, there is a growing list of hundreds of serious or fatal cases in "fully immunised" persons, the facts have to be recorded, of course; but the Reports will be marked "Confidential", if only to hide their source. If they are published at all, it will be by the anti-vaccinationists, whose "influence now is negligible".

In Britain, early in World War II, diphtheria had been declining for so long that a mass vaccination campaign was decided upon, lest, as in Sweden, there might soon be no more diphtheria to prevent. However, as we had about half-a-dozen vaccines competing with each other, the situation had to be cleaned up. It was obviously impossible to use public money or the BBC to advertise more than one

vaccine, so a foreign one was chosen—Ramon's toxoid— although the Ministry of Health obviously knew no more about it than Ramon did at the time.

The decline in cases and deaths was reversed for some months, but thereafter it resumed its former trend. If this toxoid does not still confer diphtheria bacilli upon its victims, then it must have been changed from its original prescription, although we still hear a lot about "carriers" wherever there is a local outbreak. If the toxoid has not been changed, why was the famous Prof. Ramon fired from the Pasteur Institute in 1948?

### TUBERCULOSIS (BCG) VACCINE

Tuberculosis is obviously one disease against which any vaccine must be useless, because TB itself does not immunise the patient who contracts the disease and then recovers; in fact, the reverse is true. Almost every large family must know this from experience. Any kind of inoculation may cause TB, but none can prevent it.

When a very pushing business salesman like Calmette wants to sell a vaccine, however, he sells a vaccine. What is to stop him? When Calmette and Guërin had obtained some filth from a tuberculous cow and cultured it on bile and potato, Sauton's medium, etc., for many generations, bacteriologically speaking, until it was too weak to give TB to some specially selected and obliging guinea-pigs, it was obvious that the "saving of millions of lives" by the "conquest" of human TB was "just around the corner", as usual.

Those who can remember 1930 will recall the disaster at Lubeck, where 73 children were killed by oral BCG vaccine in a few months. It was a big blow to the sale of BCG vaccine in any form, but we are now told, in *Margin of Safety* (Collins, London), that "a complete enquiry eventually exonerated the vaccine, on the grounds that accidentally a virulent strain had been substituted for BCG - . . ." Is that really true? We do know that two doctors went to prison—one of them committed suicide—as a result of the affair, but we regard them as scapegoats who were sacrificed in order to save the face of BCG. The idea that both of them could have mistaken a bottle of virulent TB germs from Kiel for the BCG culture which they had made themselves is impossible to believe, in spite of the wishful suggestion that the labels *might* have become detached, etc. The nearest that anyone got to proving that an error had been made was that one woman laboratory worker was bullied into admitting that a mistake *might* have occurred.

The late Lily Loat, who was for some time educated in Germany, read all the official reports, and she pointed out that the doctors were never charged with having made a mistake in the laboratory, and so they were never convicted of that, but only of failing to recall all the vaccine after it had come under suspicion.

Dr. K. Neville Irvine, in his book, *BCG Vaccination in Theory and Practice*, gives an account of the disaster, calling it by far the biggest of its kind. He makes no mention of the rumours of an even worse disaster in Madrid a year before, nor of an Association of Spanish pediatricians telling their members not to use BCG vaccine. We never had official and detailed reports of this matter, but it was much discussed at the time of the Lübeck trial, although nothing was said officially. If the rumours were true, the Madrid disaster was worse than anything that followed it. It may be very convenient to deal with one publicised calamity, explain it away and use two medical scapegoats to cover all the deaths caused by BCG all over the world, but the N.A.V.L. are not convinced.

The difficult task of exonerating BCG in Germany went on for years, and the highlight of the drama was the fact that the Kiel TB germs produced a green pigment when cultured in bouillon, and that, when a stray ampoule of the Lübeck vaccine, which had somehow escaped destruction until 1933, was similarly treated, the culture slowly turned green. Very pretty, but we are not satisfied that this "gives the green light" to BCG.

When John Tyndall was writing a paper, in 1875, for delivery to the Royal Society, on 13th January 1876, he mentioned, to quote his own words, "the struggle for existence between the *bacteria* and the *penicillium*", and he remarks incidentally that "the *bacteria* which manufacture a green pigment appear to be uniformly victorious in their fight with the *penicillium*".

Tyndall was not writing only of TB germs, but of any kind that might be found in the air of the Royal Institute, where he was working. Did the green pigment prove *identity*—or anything at all except that such germs are particularly tough customers? It is only too obvious that the mere virulence of the Kiel and Lübeck cultures was never in dispute.

Incidentally, should any laboratory workers care to use this information and culture such germs to produce a very much needed antidote to penicillin poisoning, the writer will be very pleased—and immensely surprised—to share any Nobel Prize with them!

The most shocking thing about the whole BCG campaign is that, in spite of its trail of death and injury, when it was loudly proclaimed that 100,000,000 children in the U.S.A. and Europe were to have BCG pumped into them, the thing was treated as a noble attempt to wipe out tuberculosis. The Press reacted quite differently to the news of what German vivisectors did to equally defenceless prisoners during World War II. Why?

The whole vast BCG experiment appears to have done nothing at all but give tubercular abscesses to a vast number of poor sufferers who might otherwise have lived without them all their empty lives. Even its protagonists do not seem to love it any longer. How much did it cost, and who got the money?

## POLIOMYELITIS VACCINES

It appears that epidemic poliomyelitis is a peculiarly American product. That, no doubt, is why, in order to sell us vaccines, we all have to be made polio-conscious. The Radio, if we allow it to, will keep the polio cult going as long as it can; although the frightful dirge broadcast some months ago, glorifying the relentless power of polio, may have caused reactions violent enough to prevent many repetitions of it. Such things should be firmly put down by law.

When Dr. Gustave Rappin, Director of the Nantes Pasteur Institute, wrote a book on infectious diseases, before World War II, he noted the strange fact that, when a few cases of polio appear in a district, it is often impossible to trace any connection between them. One case may be a child sharing a bed with others, with no spread of infection. The nearest other cases may be a mile or so away, all widely separated, with no common milk or water supply, or anything to explain the wide distribution. This seems to mean that the virus is very common and may be in almost everybody, that its infectivity is negligible, and that it requires other factors in order to produce symptoms.

Now, however, since the big-money vaccinators have taken charge, we read of polio-vaccinated babies giving fatal polio to their mothers, etc. Is it possible not to suspect that a new and much more

infectious poliovirus has been artificially produced? Remember the myxomatosis virus, a laboratory strain deliberately made more virulent and distributed to kill the rabbits, and the influenza virus of 1918-19, which- arose and spread from the American Army camps after a mysterious though unintended modification and infected half the world's population.

We have no need here to discuss the battles between the Salk and the Sabin vaccines. Readers who want a real insight into that mutually destructive, big-money war should read *Margin of Safety*. It is a high-class pot-boiler to boost the Sabin oral vaccines (while there is yet time?), but it contains a lot of alarming and amusing stuff. We doubt, however, whether America will be willing to accept statistics of millions of Russians all saved from polio by pink cocktails! If these contained real virus, developments may be expected eventually—but will they be reported?

The author of the book, Dr. John Rowan Wilson, tells us that Dr. Salk, before he made his vaccine, was in touch with Prof. Lépine, who had replaced Prof. Ramon at the Pasteur Institute. We have discussed the question of "live" and "killed" viruses on pages 32, 33 and 34 of this booklet, dealing with it in the light of the latest discoveries, but Prof. Lépine, in 1950, wrote a book, *Poliomyelitis*, in which he dismissed the idea of using vaccines against the disease. He says that one either uses a live virus and runs the risk of causing an epidemic, or one uses a killed virus, which does not give lasting immunity.

Nevertheless, he gave a striking proof that, even at that date, he knew what really matters about poliovirus. In Athens, he tells us, monkeys fed upon natural foods and living in the open air were able to bear poliovirus injected right into their brains, and not one of them developed polio, whereas, the same kind of animals, kept in small, dark cages in Paris, and fed upon laboratory (pasteurised?) food, succumbed to the injections at the rate of 9 out of 10!

As this is by far the most important laboratory information ever published in the whole vast literature of the subject, we demand that it should be broadcast in all languages and to all the schools in the world. This would save more lives and more suffering than any vaccine—past, present or future.

Some people may indeed wonder why Prof. Lépine ever began making a polio vaccine, but we cannot help feeling that, when the Pasteur Institute saw the profits that were being made by the Salk vaccine, they may have hinted that if he would not make a new polio vaccine for them, they might find someone else who would.

Nature Cure followers know already that if the pasteurised milk, white sugar and white flour, and all such rubbishy food, could be absolutely banned for a few years, the figures for most serious diseases would fall very quickly.

It is revealing to study the history of polio in the U.S.A., and to compare the graph of the 1916 epidemic, without the use of vaccines, with that of recent years in which we have had the benefit of all the vaccines. The line of the first outbreak rises and falls equally rapidly and looks like a sharp church steeple—quite symmetrical and only covering about two years; the graph of the recent epidemic, on the other hand, covers many years and looks like Milan Cathedral after an air raid. Is this not yet another instance of vaccines prolonging the reign of an epidemic?

### **TETANUS VACCINE (OR SERUM)**

Tetanus, like tuberculosis, is a disease which does not protect the victim against a second or subsequent attack— unless the first one is fatal, of course. It is therefore inexcusable to pretend that one can vaccinate against it. This fact was clearly known to doctors and clearly proclaimed at the end of the last century.

Nevertheless, there is great confusion about this subject. If tetanus is held to be synonymous with lockjaw, there is no recovery rate at all, but people can get something called tetanus several times in a few months; when Army medical reports mention recovery rates of 60 per cent or more, they must be referring to something quite different from true tetanus. This fact, and the confusion in the public mind as to the difference between vaccine and a serum, makes it hard to discuss the subject briefly. If, as some people believe, the tetanus bacillus is merely a morbid, anaerobic evolution of the common colibacillus in its coccal form, this would explain why it is never found in the oxygenated bloodstream, but only at the site of an injury. It would also explain how tetanus may arise without any external wound. What is important is the proper treatment of the wound and the patient, preferably by safer methods than routine serum inoculation, as this has killed large numbers of people.

As to vaccinating against future wounds, the present habit of mixing tetanus vaccine with diphtheria and whooping-cough vaccines makes confusion worse confounded and adds to the danger of causing encephalitis. The only way to escape these confounded dangers is to avoid every vaccine and serum on principle.

The worst thing about the tetanus industry has been the haunting fear, in the minds of most intelligent people, that they may be knocked down in the street and be unconscious when they are first treated by a doctor. This means that they may be inoculated with antitoxin, which may be fatal, as it so often has been. This antitoxin is not sold by blackmailing the patient, who, in any case, cannot give his consent while he is unconscious. In this case it is the doctor who is menaced if he does not use the serum. If the patient should die from tetanus, some serum-worshipper will demand an inquest, so that the doctor can be publicly censured. If, on the other hand, he dies after, and probably from, massive doses of serum, the coroner will describe the case as "one in a million", and no one will be blamed.

That is how the business has been run for many years, but the doctors are now getting dissatisfied with the position and are trying to replace routine injection with drugs or some other and safer method. It is good news indeed if antitoxin is on its way out at last. Serum-worship has retarded the real progress of medicine for far too long.

## YELLOW FEVER VACCINES

The story of "Yellow Jack" and of its conquest by means of mosquito control is very well known, but the sequel, "Yellow Jack Breaks Jail," published in the American *Saturday Evening Post*, has not been very closely followed up by most people; it is all too complicated. Apparently, as there were no yellow fever vaccines at the time when the Panama Canal was constructed, something had to be done about this, lest yellow fever should disappear altogether without a vaccine. Consequently, it was then discovered that the monkeys of Brazil had antibodies in their blood, thus "proving" that they had been infected at some time by something like yellow fever. Since the aedes mosquito was not present in the Brazilian jungles, other carriers had to be found, and it appears now that any disease resembling yellow fever, in Brazil or Africa, is carried by ticks or insects. They

carry, at the present time, about 60 new yellow-feverish viruses, called "arbor viruses", and so the possibilities for vaccination are practically limitless. Many nations have compulsory vaccination and they can always add one more to the growing list, just like France.

When the staff of the SHAEF Office had to go to Paris for two or three weeks, just before VE Day, after residing in Grosvenor Square, they all had to be vaccinated against everything, of course, and one of the deadly perils they had to be protected from was yellow fever. So successful was this vaccination in protecting them from the arbor viruses of the jungles of Paris that not one of them developed yellow jack during a whole month! The unqualified success of this daring experiment, and of others like it, no doubt, explains why, according to *Margin of Safety*, it has been arranged "by international agreement" (probably with no member of the public present) that all travellers to yellow fever areas in Africa or South America shall be compelled to have this dangerous vaccine pumped into them, The show must go on.

### **PLAGUE VACCINES**

The major plagues of history have been studied as closely as possible by modern epidemiologists, and the only safe general conclusion to be drawn is that soil, sanitation and pest control, in that order, are much more important, both to humans and to domestic animals, than any kind of injections.

We, in Britain, need not waste time in discussing plague vaccines, because we got rid of plague completely without them. In recent times, the one plague death reported was that of a scientist who infected himself while working on the disease. He had been vaccinated against it only shortly before—for the 23rd time in 12 years.

### **INFLUENZA VACCINES**

Enough has been said (on p. 37) about the impossibility of vaccinating against any new and virulent strain of influenza virus—the only kind that really matters. But, there has been news recently of a new oral vaccine against influenza.

It is impossible to make fair comment upon a new drama, comedy or farce before the curtain has gone up on the first performance. If one warns the public to stay away on the grounds that the stars are hopelessly incompetent and the author an idiot, and tells the management to vacate the theatre and make room for people who know their job, there is likely to be legal trouble. In fact, it has happened.

Nevertheless, we are entitled to suspect that all those vaccines for which safety can be claimed are not really vaccines so much as drugs or placebos.

Nature Cure adherents know that the dangerous complications of influenza are due to bad treatment and other factors. The disease itself is not a killer.

### **IMMUNITY AGAINST VACCINATIONS AND INOCULATIONS**

The immunity of the individual to the vaccination tyranny depends, firstly, upon his knowledge of the real nature and the true history of the business, and, secondly upon his being able to stand up to the completely ignorant and officious underlings who support the whole racket.

It is almost incredible that a liberty-loving country like France should submit to an impudent tyranny which requires that all who want passports to travel abroad should have a large number of poisonous "shots" pumped into them (it was 11 even before the BCG vaccination was made compulsory, and it took over 4 months to give all of them properly). If the whole nation could have the fact brought to their notice at the same moment, there would be a second French Revolution.

We invite all who care for health and liberty to join the N.A.V.L. and be informed in good time as to how to deal with particular problems. Many travellers put off asking for help until it is too late for the League to do anything for them. Some have had all their "shots" and then found that it was not necessary to have any. Many have been mad too ill to travel, and some have been killed through their lack of foresight.

Many members of the League have gone all over the world without any inoculations, but most people can avoid them if they will insist upon their legal rights under Article 83 of the International Sanitary Regulations.

The whole subject of travel restrictions and the vaccination certificates required here and there is, however, too complicated to be described briefly; also, regulations may be changed or suspended at any time and at short notice.

We therefore urge anybody who cares for human and animal welfare to help themselves and others by joining the National Anti-Vaccination League.

Available from VACCINATION INFORMATION, PO BOX 43, HULL HU1 IAA, UK. (£2)

*The following extract from an article by Keki R. Sidhwa from Heath for All, "The Scare Diseases , May 1965.*

<http://members.rotfl.com/sidhwa/index.html>

For years Dr. Matthew J. Rodermund, MD of Wisconsin, USA, offered \$10,000 to anyone who could prove scientifically that smallpox is contagious. Nobody ever claimed the money.

Dr Charles A.A. Campbell, MD of San Antonio, USA, who was for years in charge of an isolation hospital made exhaustive experiments in order to demonstrate that smallpox is contagious, but found that this is not the case. He even succeeded in persuading the mayor of San Antonio and the city council to go to the hospital and mingle with the patients and have a meal with them. The Bexar County Medical Society, before whom he read a paper detailing his experiments and his conclusions, refused to publish his findings. He later published them in his book, 'Bats, Mosquitoes and Dollars'. Dr. Rodermund was even more daring, he broke open the smallpox pustules, rubbed the pus on his face and hands and moved about freely for three or four days,, deliberately neglecting to wash himself. No smallpox outbreak occurred.

The famous Dr. Sydenham, of England, called smallpox 'the most safe and slight of all diseases as long as no mischief be done by either physician or nurse', which is significant indeed. In olden days people died not of smallpox but of the treatment that was given to them.

Does vaccination prevent smallpox? Anyone who has made a thorough study of the subject will in all honesty have to admit that it does not. In India, even today, when over 90 per cent of the population are said to have been vaccinated, thousands are dying of what is diagnosed as smallpox in spite of - or because of - the compulsory injections. Major Reginald F. E. Austin (R.A.M.C.), who served in India in a medical capacity, was greatly in favour of hygienic living, cleanliness, and sanitation rather than vaccination, and he said so in so many words. He poo-pooed the whole vaccination programme as a diabolical disaster.

'MOST INNOCENT'

Dr. Henry Blumberg, the medical superintendent of Southport Children's Sanatorium, speaking before the Royal Commission on Vaccination, described smallpox as 'most innocent and least dangerous', and he spoke against vaccination.

When we turn to tetanus - and other of the scare diseases - we find Dr. I. A. Toomey, MD of Cleveland, Ohio, USA, saying in the Journal of the American Medical Association, May, 1942, that drainage, cleanliness and proper incision of wounds were of greater importance than the anti-toxins administered. In 1940, the Surgeon-General of the American Army sent a letter to Congress requesting a change in the manner of treating tetanus in soldiers. He rightly stressed the fatal effects due to anaphylaxis resulting from the administration of anti-toxin, and claimed that better results were achieved by ensuring cleanliness and the proper drainage of wounds.

What applies to smallpox and tetanus applies to all the other scare diseases. In typhoid and cholera more people are killed by wrong treatment, i.e., feeding and drugging the patients, than by the disease itself. The writer knows many people who have suffered from quinine poisoning - the after effects of the deadly 'cinchona. bark' remedy for malaria. The list could be multiplied.

What, then, is the nature cure approach to these so-called scare diseases? In brief the answer is the

same as that which applies to to all problems of ill-health. Health/high-level health alone will safeguard you against coronary thrombosis, typhoid, cholera, etc.

Keki Sidhwa ND, DO, British Natural Hygiene Society, Shalimar, 3 Harold Grove, Frinton on Sea, Essex CO13 9BD. 01255 672 823

[\[Vaccination\]](#)

## Henry Lindlahr MD

Natural Therapeutics : Iridiagnosis and Other Diagnostic Methods. 1974.

Natural Therapeutics: Practice. (Vol. 2)

Natural Therapeutics: Dietetics. (Vol. 3)

Natural Therapeutics: Iridiagnosis. (Vol. 4)

Acute Diseases: Their Uniform Treatment by Natural Methods AND Mental,

"The greatest part of all chronic disease is created by the suppression of acute disease by drug poisoning." Henry Lindlahr, M.D.

<http://www.soilandhealth.org/02/0201hyglibcat/020128iridagnosis/020128toc.html>

"Every acute disease is the result of a purifying, healing effort of Nature." ~Henry Lindlahr, M.D.

<http://www.nmsnt.org/html/curriculum.html>

Dr Lindlahr further states that: "The pus-like mass exuding from the Small-pox pustule contains the virus not only of Small-pox but also of scrofula, psora, tuberculosis, syphilis, gonorrhoea, anthrax, lumpy jaw and poisons in the animal or human being from which the virus was secured."-----[H Valentine Knaggs](#)

# SANITATION, NOT VACCINATION THE TRUE Protection against Small-Pox

*A Paper read before the Second International Congress of Anti-Vaccinators, held at Cologne, October 12, 1881,*

By WILLIAM [TEBB](#).

AT the first International Anti-Vaccination Convention, held last December at Paris, I had the honour of explaining the existing state of the opposition at that period to the Compulsory Vaccination Acts in England. My first thought on the present occasion was that I might appropriately continue the same theme, with a record of the important events which have occurred since our last convention, including the acceptance by Mr. P. A. Taylor, the leader of the Anti-Vaccination party in the House of Commons, of the position of President of the London Society for the Abolition of Compulsion, together with a glance at the conferences and public meetings in the metropolis and elsewhere, the public demonstrations at Brighton and Leicester, the considerable accessions of active support from influential quarters, the issue of important Parliamentary returns confirmatory of our position, and the publication and distribution of literature, at least five-fold that of any similar period in England, with other indications of encouraging progress, which, if detailed, would constitute an interesting chapter in the history of our agitation. I have preferred, however, to take a wider range, and to address you on the subject of "Sanitation *versus* Vaccination, as a preventive of Small-pox."

One of the most serviceable arguments in use by our opponents the pro-vaccinators is, that prior to Jenner's discovery, small-pox was a scourge of the first magnitude, a relentless and fell decimator and destroyer of the human race. I shall not attempt to inquire how much of this is true, and how much is due to a lively imagination, except to mention one testimony, that of Dr. James Moore, who, in his "History of Small-pox (a work dedicated to Dr. Jenner), says that inoculation has occasioned the loss of millions of lives. These points have been dwelt upon by abler pens than mine, and their testimony is before you.

Sanitation, which has for its end the prevention of disease by the removal of the causes of disease, is

a science which of late years in England, America, France, and Germany, and in other countries has engaged the attention of some of the ablest and most thoughtful minds. It is not, however, a new discovery. It was taught by the Jewish lawgiver, Moses, in numerous stringent regulations for the tent and camp, and by the Greeks and Romans, as their systems of baths, aqueducts, and drainage-works testify. In Rome the remains of the *Cloaca Maxima* are pointed out to every stranger as one of the sights of the city. With the decline of the Roman Empire, sanitation became one of the lost arts, and for many centuries plagues and epidemics carried off countless thousands in all the large centres of population, and were regarded as visitations of God with which it was presumptuous to interfere. Macaulay, in his "History of England," showing the conditions of life two centuries ago, says : "Cabbage-stalks and rotten fruit accumulated in heaps at the thresholds of the Countess of Berkshire and Bishop of Durham. Rubbish was shot into Lincoln's-inn-fields, and St. James's-square was a receptacle for all the offal, dead cats and dogs of Westminster ; and these were deposited under the windows of the great magnates of the realm—the Norfolks, the Pembrokes, and the Ormonds." "Men died faster in the lanes of our towns than they now die on the coast of Guinea."

Other writers confirm this testimony. The streets were mostly unpaved, with open gutters, cesspools under houses, stagnant ditches, polluted streams, tainted wells; and the air was contaminated with effluvia arising from the decaying bodies of the dead, interred in close proximity to living urban populations.

Mr. BUCKLE says, that the smells in London were so bad that sweet herbs and perfumes were kept in the rooms to neutralise them. Nor were the interiors of our houses much more wholesome than their exterior surroundings. "The floors," says a writer of the sixteenth century, "generally are made of nothing but loam, and, are strewed with rushes, which, being constantly put on fresh, without a removal of the old, remain lying there, in some cases, for twenty years with fish-bones, broken victuals, the dregs of tankards, and impregnated with other filth underneath from dogs and men." Clothing was seldom changed, and was pervaded with unwholesome odours; linen and cotton were aristocratic luxuries; the food was coarse and badly cooked; two centuries ago there were no fresh vegetables grown in England, small quantities being imported from Holland for the exclusive benefit of the rich. These were days when the plague, sweating sickness, black-death, remittent fever, small-pox, and all forms of zymotic diseases, engendered by filthy habits and unwholesome surroundings, abounded. Violation of the laws of Nature breeds its own cure through manifold chastisements, but it was not until the severe visitation of cholera in 1831, that attention was awakened in England to the importance of the subject.

And in 1848 public opinion had sufficiently advanced to enable Parliament to pass what was called the "Nuisance Removal Act," as well as the "Public Health Act," by which was established the General Board of Health, and thenceforward the furtherance of sanitation became one of the recognised duties of the State. A series of amending Acts of Parliament have been passed relating to the public health, embracing cleansing of streets, removal of nuisances, construction of sewers, building of streets and houses, ventilation of public buildings, regulation of lodging houses, prevention of river pollution, and similar matters, and if the authorities had been content to fight disease by preventive measures of this kind alone, the zymotics might by this time have been deprived of their epidemic power; but, unfortunately, in an evil hour Parliament was induced to listen to a faction of the medical profession, who, unable to obtain the public acceptance of their theories on their own merits, determined to do so by the authority and assistance of the State, and

were enabled to force upon everybody a disease called the cow-pox, because, as it had been pertinently said, somebody might catch the small-pox. In 1853 the Vaccination Acts were introduced by a private member, and passed into law, without notice or public discussion, and it is no exaggeration to say that a more wretched and obnoxious edict has not been foisted on the English-speaking race since the passage of the atrocious Fugitive Slave Law in America thirty-five years ago. Vaccination, which is a spreading of disease, became thenceforward, by a strange perversion of the fitness of things, officially associated with sanitation.

Several of the diseases I have mentioned have now practically disappeared, without any medical preventive, but solely by the effect of improved sanitation; yet small-pox, which vaccination promised to stamp out, is still raging, notwithstanding the lavish expenditure of millions among the medical profession; and the fell disease is a standing disproof of the Jennerian predictions. Reposing on a State-endowed remedy, which has been insolently called the greatest discovery in medical science, all special investigations into the causes of small-pox have been officially considered superfluous. During the present epidemic in London, June 10, 1881, a member of the English Parliament, Mr. Daniel Grant, asked in the House of Commons whether the Government would appropriate a sum of money to inquire into the causes of the outbreak. The President of the Local Government Board replied that the Board had no funds for that purpose; yet the official vaccination grants amount to over £100,000 a-year! Were it not for the determination to uphold vaccination at all hazards, the official excuse that the cause of small-pox lies in unfathomable mystery would long ago have been summarily set aside.

In a recent number of the *Leicester Free Press*, it is said :—" So far as we are concerned in Leicester, a town containing 120,000 inhabitants, with many thousands of unvaccinated children, smallpox seems to be about the least dangerous of all diseases, and is not to be named by the side of scarlet fever, measles, whooping cough, diarrhoea, or even consumption. If a case of small-pox is discovered, instant isolation is adopted, and during the last five years we have hardly had five deaths. That being the state of the case, one need not wonder that the fear of the disease should disappear, or that resistance to vaccination should increase."

Dr. FARR, in his official report for 1876, says :—" Experience has shown that the various forms of plague are influenced to a large extent by sanitary conditions. All zymotic diseases are most fatal in the densest districts, and although this may be due in part to contagion, it is certainly due in part to the concentrated impurities of towns."

And Professor PLAYFAIR says :—" No epidemic can resist thorough cleanliness." Those who have intelligently watched the course of zymotic outbreaks, and noted the localities where they have arisen and the causes by which they are engendered, are convinced that it is within the power of Governments by means of scientific sanitary appliances and methods to stamp out small-pox altogether. Supposing vaccination to be abandoned, this revolution would be brought about, for it is the opinion of many of the ablest opponents of the vaccination laws in England that one cause of the perpetuation of small-pox in our midst is the application of this alleged remedy of vaccination. Every one now admits that a considerable portion of vaccination in England is variolation, *i.e.*, small-pox matter passed through the cow, and that what is called vaccination is nothing but modified small-pox. In no part of England has submission been so rigorously enforced as in the English metropolis, where, in addition to the energetic efforts of vaccination officers and public vaccinators, stimulated by special awards, there has been inquisitorial house to house and school to

school visitation; the remorseless cow-poxing in the work-houses even of infants scarcely a week old; the hunting of unvaccinated fugitives from parish to parish, like slave-hunting in the United States ; and the relentless prosecution of the parents of un-vaccinated children in every police-court in the metropolis. And what is the result? Has small-pox been stamped out, as all the Jennerian prophets in succession have loudly predicted? On the contrary, in proportion as public money and State machinery have been diverted from sanitation (the only scientific adversary of small-pox), to vaccination, or the unscientific treatment by poisoning the blood, the disease has spread with the result shown by the Registrar-General in his annual summary for the year 1880, which tabulates the small-pox mortality of London for the last thirty years as follows:

Decades.	Estimated Mean Population	Small-pox Deaths.
1851-60	2,570,489	7,150
1861-70	3,018,193	8,34.7
1871-80	3,486,486	15,551

The last decade showing an increased small-pox mortality of 80 per cent. It must not be supposed, however, that this mortality is equally spread over the Metropolis, or that it exists in all classes of habitations alike. In the princely mansions of South Kensington, Hyde Park, and Regent's Park, in the aristocratic districts of Bayswater, Notting Hill, Haverstock Hill, the open and airy slopes of Hampstead [Dr. EDMUND GWYNN reports (*Lancet*. Nov 5, 1881) the death-rate for Hampstead, with a population of 45,436, at 12.6 per 1,000 for 1880, as compared with 22.2 in the metropolis generally] and Highgate, in the salubrious suburbs of Ealing, Clapham, South Hornsey, [Dr. JACKMAN, Medical Officer of Health for the South Hornsey district, states that the death rate of the district is only 10.7 per 1,000 living, and the birth-rate is equal to 39.0 per 1,000. Special inspections of the houses in the district are made from time to time by Mr. ABRAMS, the Sanitary inspector, and a proposal is now on foot to procure for the inhabitants a constant water supply.—*Lancet* Nov.. ,1881] Sydenham Hill, Wimbledon, Chislehurst, and Finchley, cases of small-pox are of the rarest occurrence. The epidemic is found amongst the poor, ill-fed, uncleanly, intemperate, over-worked populations of Hackney, St. Giles's, Bethnal-green, Poplar, Shadwell, Bermondsey, and Southwark, amongst those who live in the courts and alleys, in old and decayed habitations, and in the miasmatic atmosphere in which the neglected residuum of this immense city are reduced to dwell. Amongst the denizens of these tin-wholesome districts will be found the largest proportion of the specially unhealthy children, the offspring of the diseased and vicious to whom the so-called protection, vaccination, is prohibited by official instructions. These children have no vitality to resist small-pox and other zymotic diseases, hence it is that a larger number of the unvaccinated or unhealthy children die of small-pox than the general average. This pretended protection must needs be given not to the weak and sickly, who most require protection, but to those whose physical strength is itself an all-sufficing safeguard.

The *British Medical Journal*, an ardent pro-vaccinating advocate, in its issue of Oct. 23, 1880, says, "It is probable that a larger proportion of unvaccinated persons is to be found amongst the ignorant, dirty, and wretched inhabitants of the slums of London, and very few amongst the educated and better fed members of society. The disease is much intensified by over-crowding." Thus the highest vaccination medical authority vitiates and overturns the entire fabric of Dr. BUCHANAN'S figures which, both in England and Germany, seemed a few months ago to have galvanised the vanquished Jennerians into a spasmodic vitality. When Dr, SOUTHWOOD SMITH, Mr. EDWIN CHADWICK, Mr. H. D. DUDGEON, and other leading sanitarians, commenced their work thirty

years ago, by showing that filth, bad drainage, impure water, and overcrowded dwellings were the causes of zymotic diseases, the rank and file of the medical profession ridiculed their theories with unsparing scorn. Evidence, nevertheless, as to the truth of the theory and contention accumulated, so rapidly indeed, that had not many of the doctors. relinquished their fatuous objections, they must have placed themselves outside the intelligence of the age. The vaccinators yielded to public opinion reluctantly, and so far as small-pox is concerned, many of them still audaciously defend their oft-exploded theories. One of the most striking proofs in support of my contention is that afforded in a letter written by our esteemed friend and colleague, the energetic sanitary reformer, Dr. OIDTMANN, illustrating the enormous advantages of sanitation in preventing small-pox in the German invading army, and the dangerous consequences of the neglect of these precautions in the French army ; the conditions as to vaccination being alike in both cases.

In the *Natur-Arzt*, published at Dresden in 1873, Dr. OIDTMANN says :—" In my numerous marches and halts in the campaign of 1870-71, I directed my particular attention to the health statistics. After the taking of Verdun, I noticed that the rooms in which the French hospital patients were miserably decimated during the bombardment, were inexpressibly close and ill-smelling—breeding places of small-pox poison. The only German physician of the garrison being unwell, it fell to my lot to root out these filthy lurking-holes of pestilence. At a later period, after the battle of St. Quentin, I was physician of the garrison staff of that place, and all the statistics of the French, German, and International Hospitals for six weeks in succession passed through my hands. The number of French who, during that time, died in these hospitals of pyaemia (blood-poisoning) and phlegmonia (blood impurities) was so wonderfully great in proportion to the small death-rate of the German hospitals, that the vaccination statistics of your English newspapers can hardly admit of comparison with it. What then was the cause of the 'protection' of our people from these two diseases? Had they been inoculated for pyaemia and phlegmonia? Certainly not. But, whereas in the French hospitals a veritable pest atmosphere reigned night and day, yet at Abbeville, on the contrary, where we had no French army doctors, and where the arrangements of the hospital were in the joint hands of myself and the medical men of the place, the statistics of recovery from small-pox were highly favourable, and indeed equal for French and Germans. The enormous difference between the small-pox mortality of the two armies, was caused by the crying neglect of hygienic precautions in the French military department, and by the excessive concentration of their system of stationary sick depots, as opposed to the freshness of the hygienic arrangements of the German hospitals, and the ambulatory movements of their scattered troops. No more decisive proof can exist of the correctness of my theory— that the strength and spread of small-pox is both proportioned to and progressive with the fostering and shutting in of the small-pox vapour—than these statistics of the Franco-German War."

Proofs of the truth of the value of sanitation are, however, nearer at hand, and a satisfactory demonstration is afforded by the associations in London which have devoted their attention to improving the dwellings [Dr. SOUTHWOOD SMITH, referring to the improved conditions of the inhabitants of the model dwellings, at p.17 of his "Results of Sanitary Improvements." says.:—"There has been in the improved dwellings complete exemption of typhus, cholera, and, it may be added, small-pox; yet it must be admitted, that other forms of zymotic disease—scarlet fever, measles, whooping cough, and diarrhoea—have occurred, though rarely, and these maladies have in no instance spread."] of the poor. A wholesome habitation in a crowded district is shown to diminish the death-rate by a third or half, as compared with that of the occupiers of old houses in

the same locality. I have before me a report of the thirty-sixth half-yearly meeting of the Improved Industrial Dwellings Company, held at the Mansion House, London, August 5, 1881. This association controls 3,681 tenements or habitations (with a population of 18,000 persons), nearly all of which are located in the denser parts of London, and the mortality is only 16.7 per thousand, while the death-rate of the adjoining houses is 30 to 35. Although the report is for a year when there was a severe epidemic of small-pox the secretary, Mr. JAMES MOORE, informs me that only one death from that disease occurred. The thirty-seventh report of another, the Metropolitan Association for improving the Dwellings of the Industrial Classes, read June 6, 1881, gives the death-rate of an average population of 5,675 at 155 per thousand. And as the average mortality of the entire metropolis is 23 per thousand, there has been a saving of life of seven or eight per thousand. In the last-named association there has not been one death from smallpox during the past ten years, while the surrounding habitations have often been the hotbeds of contagion. An equally satisfactory result has been achieved by the Victoria Dwellings Association, which has been in existence six years. Their buildings are situated at King's Cross, a crowded centre of the Metropolis, and at Batter-sea, one of the outlying suburbs. The average population has been 2,500, out of which only twenty-four deaths occurred during the past twelve months, or less than half the Metropolitan death-rate, and not a single death from small-pox since the association was formed. The facts prove the truth of my contention, that sanitation is sufficient to prevent and stamp out all zymotic diseases including small-pox; and even if it could be shown that vaccination would do the same, it is nevertheless wholly unnecessary. Earl SPENCER, in opening the Sanitary Exhibition in London, on July 16, said that already in Great Britain the death-rate had been so much diminished during the past ten years that 300,000 lives have been saved, as compared with the previous decade, and this was largely due to improved sanitation. An official report on the sanitary condition for 1881, says that more than three-fourths of the reduction is due to the decrease of severe zymotic diseases, the product of filth, which good sanitation can remove.

It is clear, therefore, from the foregoing facts, that small-pox can be extirpated by means of sanitation alone, a remedy which, besides being absolutely efficacious, can be adopted by municipalities and by individuals with the certainty that it is attended with none of the dreaded evils inseparable from the compulsory injection of lymph of doubtful origin and unknown virulence and power. The testimony of Dr. FARR and Professor PLAYFAIR, both pro-vaccinators, and the evidence deduced from the death-rate of the various improved dwellings associations, leave Governments without excuse for continuing a system which, besides being of non-effect as a preventive, is often the cause of ineradicable mischief. Compulsory medicine, according to the testimony of Mr. MACLAREN, the late Lord Advocate for Scotland, and other high authorities, is opposed to the ancient constitution of England, and is, therefore, a gross infraction of the liberty of the Citizen and of parental rights. The work of our Congress is to assist in restoring the birthright of our citizens, to give back to parents their highest duty and privilege—the sacred right to protect and defend their offspring *from* evil, and to liberate the oppressed of many nations from an ignorant, unjust, and indefensible tyranny.

The laws which I arraign are overbearing, but being founded on injustice, must ere long crumble before a growing public opinion, which now demands, and will soon compel, their unconditional repeal ; and the pretended duty of experimenting upon our neighbour's children will cease to supersede the real duty of protecting our own.

[\[Smallpox\]](#) [\[Tebb\]](#) [\[Smallpox books\]](#)

# Smallpox death rate

by [Dr Shelton DC](#)

If the death rate of smallpox and fevers was so enormous, it was largely due to the medical treatment of that time. A number of eruptive diseases such as measles, chicken pox, scarlet fever etc. were regarded as smallpox before Dr. Sydenham differentiated between the various symptom-complexes. How great the number of deaths was from scarlet fever, measles, chicken pox etc., that were included in the smallpox epidemics will never be known. Dr. Russell T. Trall, the eminent Natural Hygienist, considered smallpox "as essentially . . . not a dangerous disease." He cared for large numbers of patients afflicted with smallpox and never lost a case. Under conventional medical treatment, patients were drugged heroically, bled profusely, were smothered in blankets, wallowed in dirty linen, were allowed no water, fresh air and stuffed with milk, brandy or wine. Antimony and Mercury were medicated in large doses. Physicians kept their patients bundled up warm in bed, with the room heated and doors and windows carefully closed, so that not a breath of fresh air could get in, and given freely large doses of drugs to induce sweating (Sudorifics), plus wine and aromatized liquors. Fever patients were put into vaporbath chambers in order to sweat the impurities out of the system. Given no water when they cried for it and when gasping for air were carried to a dry-hot room and after a while were returned to the steam torture. Many must have died of Heat Stroke!

How did smallpox originate? It appeared only with the collapse of the Greek and Roman Civilization with its high standards of health. Neither Greece nor Rome suffered from smallpox while a disease resembling it decimated populations in Africa and Asia. The sanitary and hygienic systems of the great pagan civilizations—public baths, gymnasia, solaria, athletic stadiums, municipal water supply, drainage, toilet facilities, well-aired, sunny, spacious and clean living quarters, garbage disposal, simple, natural and unspoiled foods—prevented the appearance of infectious diseases and fevers. The sanitary conditions in the towns and cities of Europe in which smallpox raged were most frightful. According to Montgomery's English History, the streets of London and other cities were rarely more than twelve to fifteen feet wide were neither paved nor lighted. Pools of stagnant water accumulated everywhere, heaps of garbage abounded and were only removed when it began to obstruct the traffic. There was no sewage and dead dogs, cats, rubbish, rotten vegetable and fruit refuse, human and animal excreta, and slops from the kitchen were all thrown into the streets. Surrounded by high walls, cities could not expand and people were forced to live in a slum-like manner. Holes served as windows, with little or no ventilation, whole families slept in one room often in one bed, and hundreds of persons lived in one building crowded in from the sub-celler to the attic. They rarely ever washed, had no bath tubs, no underwear and wore the same clothes day and night. They lived in utmost poverty, slaved long hours, even the children worked, drank heavily of alcohol, ate like hogs of spoiled, unnatural food and suffered from malnutrition.

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## Fluoridation

### Articles

This section includes a few Newspaper Articles on the topic of Fluoridation. One is from our own Master Herbalist, David Christopher.

### Letters

This section has a handful of letters from various organizations and people on Fluoridation.

### Professionals

This page was prepared by the Citizens for Safe Drinking Water - Utah and provides the names and contact information for some knowledgeable professionals.

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### Fluoridation Survey

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## Letters

This section has a handful of letters from various organizations and people on Fluoridation.

This page is just a few of the letters that we thought you might find interesting.

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### *National Federation of Federal Employees*

P.O. Box 76082, Washington, DC 20013

202-260-4683 (V) 202-401-3139 (F)

Local 2050

July 2, 1997

Mr. Jeff Green

Citizens for Safe Drinking Water 3243 Madrid Street San Diego, CA 92110

Dear Mr. Green:

I am pleased to report that our union, Local 2050, National Federation of Federal Employees, has voted to co-sponsor the California citizens' petition to prohibit fluoridation of which your organization is the sponsor. Our union represents, and is comprised of, the scientists, lawyers, engineers and other professionals at the headquarters of the U.S. Environmental Protection Agency here in Washington, D.C..

A vote of the membership was taken at a meeting during which Professor Paul Connett and Dr. Robert Carton made presentations, respectively, on the recent toxicological and epidemiological evidence developed on fluoride and past actions (and their bases) of Local 2050 with respect to fluoride in drinking water. The membership vote was unanimous in favor of cosponsorship.

It is our hope that our cosponsorship will have a beneficial effect on the health and welfare of all Californians by helping to keep their drinking water free of a chemical substance for which there is substantial evidence of adverse health effects and, contrary to public perception, virtually no evidence of significant benefits.

These judgments are based, in part, on animal studies of the toxicity of fluoride coupled with the human epidemiology studies which corroborate them, and the studies of rates of decayed, missing and filled teeth in the United States (fluoridated and non-fluoridated communities) versus non-fluoridated European countries.

Our members review of the body of evidence over the last eleven years, including animal and human epidemiology studies, indicate a causal link between fluoride/fluoridation and cancer, genetic damage, neurological impairment and bone pathology. Of particular concern are recent epidemiology studies linking fluoride exposures to lower I.Q. in children.

As professionals who are charged with assessing the safety off drinking water, we conclude that the health and welfare of the public is not served by the addition of this substance to the public water supply.

Best wishes to you and your organization for success in keeping what would otherwise be a hazardous waste of the fertilizer industry from being disposed of in California's drinking water supplies.

Sincerely,

J. William Hirzy, Ph.D.

Senior Vice-President

---

**Ed. Note:** As of April 1998, the National Federation of Employees Local 2050 changed its name to the National Treasury Employees Union. Chapter 280.

They have 1500 Members.

Dr. Hirzy invites your call at 202-260-4683

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This is a letter from the Citizens for Safe Drinking Water-Utah

April 4, 2000

To whom it may concern,

There is currently an active effort in Utah to fluoridate our public drinking water. Current law allows the issue to be placed on the ballot by city councils or--in first and second class counties--by county commissioners. This is the only issue allowed by law to be placed on the ballot without going through the initiative process first.

Citizens for Safe Drinking Water--Utah is concerned about fluoridation for a number of reasons, including:

The fact that there has never been a scientific study, using tap water, which proves the safety of fluoride.

The fact that there has been a steady stream of research studies which show that fluoride in drinking water is not safe for everyone, and that the federal Health and Human Services warns that subsets of the population are at substantial risk from fluoride.

The fact that it is not appropriate to use the public water supply as a delivery system for mass medication; chlorine treats water; fluoride treats people.

The fact that a product which cannot be diluted enough to be legally dumped into the Ocean is purported to be safe when diluted at 1 ppm and added to our drinking water.

The fact that fluoride is cumulative in the body and that it is impossible to regulate the dosage in a one-size-fits-all approach.

The fact that when total intake of fluoride from all sources is taken into consideration, including commercially processed foods and beverages, fluoridated water results in the overdosing of many people

The fact that there are many good alternatives for those who want fluoride, such as rinses, gels, and fluoride tablets.

The fact that proponents of fluoride use decades-old documentation in addressing both the effectiveness and the safety of fluoride.

Feel free to contact us, for further information. This is not simply "a voting issue" or "letting the people decide." This is a matter of public safety for Utah citizens and highlights the responsibility of the promoters of fluoridation to inform the public of potentially harmful effects of fluoride to subsets of the population. This, they are not doing.

Citizens for Safe Drinking Water-Utah

P.O. Box 1973

Provo, Utah 84603

Phone (801) 492-0217 or (801) 221-5815

Fax (801) 492-0210 or (801) 221-5817

**E-mail:** [SafeDrinkingH2O@aol.com](mailto:SafeDrinkingH2O@aol.com)

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This Letter is from The University of Utah.

Thursday, May 14, 1998

To whom it may concern:

It has been proposed to add fluoride to the water supply of the larger communities of Utah to prevent dental caries. This proposal will undoubtedly generate debate about the benefits and risk of low level ingestion of fluoride on human health.

I wanted to comment on some possible untoward side effects associated with the ingestion of low levels of fluoride. In 1991 three colleagues and myself published a paper in the Journal of the American Medical Association entitled "Hip fractures and fluoridation in Utah's elderly population." (See JAMA 1992; 268:746-748) suggesting that there was a 27% (rate ratio=1.27) increase in hip fractures among women, and a 41% (rate ratio= 1.41) increase in hip fractures among men age 65+ living in Brigham City, the largest fluoridated community in Utah, compared to Logan and Cedar City. The study covered fractures occurring between 1984-1990.

We undertook the study because of reopens in the medical literature of increased hip fractures among women who had received high doses (75 mg/day) of fluoride for the treatment of osteoporosis. We were surprised to find an effect at the much lower dose from a fluoridated water system (between 1-2 mg/d).

Since our study was published three additional reports have appeared in the medical literature. Sower et al., (American Journal of Epidemiology 1991, 133:649-660) reported a more than 100% increased risk of hip fracture among women ages 55+ living in Iowa communities with 15+mg/l of fluoride compared to communities with 1 mg/l of fluoride.

Jacobsen et al., (Annals of Epidemiology 1992, 2:617-626) studied 129 U.S. counties with fluoridated water supplies and reported an 8% (rate ratio=1.08) for women and 17% (rate ratio=1.17) increase in hip fractures among the fluoridated compared to 194 counties without fluoridation.

Jacquín-Gadda et al. (JAMA 1995, 273:775. letter to the editor) reported on hip fractures among 3578 people age 65+ living in southwestern France, and drinking fluoridated water. They were able to calculate an individual dose for each subject, and control for body mass, and cigarette smoking. They reported an 86% increase in hip fractures (rate ratio=1.86) among those with the highest levels of fluoride intake (0.11-1.83 mg/L) and no effect for calcium in water, nor for other sites of fractures besides the hip.

One of the four scientific studies on the association of hip fracture with fluoride consumption in drinking water, all found an increased risk of hip fracture among those age 65+.

The study by Jaquin-Gadda et al., had the most precise information on the study subjects daily fluoride consumption, and was able to control for other potential confounding factors such as cigarette smoking, physical activities, etc.. The investigators found the strongest association between low level fluoride consumption and subsequent hip fracture.

All four studies mentioned above suggest that hip fracture may be an adverse health effect of fluoridation of public water systems. Certainly further work needs to be done on this association including a cost/benefit analysis before additional public water systems are fluoridated.

Sincerely yours,

Joseph L. Lyon, MD., M.P.H. Professor

Department of Family and Preventive Medicine

50 North Medical Drive

Salt Lake City, Utah 84132

(801) 581-7234

Fax: (801) 581-2759

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**Ed. Note:** As of February 2000, Dr. Joseph Lyon says he continues to stand by his research.

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## Professional Contacts

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**J. William Hirzy, Ph.D.** is Senior Vice-President of the National Treasury Employees Union. Chapter 280. This union is comprised of and represents the approximately 1500 scientists, lawyers, engineers and Other professional employees at the Environmental Protection Agency Headquarters in Washington D.C. He holds the official position with EPA as senior scientist chemist in the Risk Ph.D. (1962) degrees in chemistry from the University of Missouri. He is currently Professor of Chemistry at the American University in Washington. D.C.

**Office:** 202-260-4683

**David Kennedy, DDS** for over 20 years has been a member of the American Dental Association (ADA), the California Dental Association (CDA) and the San Diego County Dental Society (SDCDS). For three years he was elected to the SDCDS Board of Directors, participating in numerous committees - including Senior Care, Speakers Bureau, Political Action Committee, and the Council on Dental Care. In 1974, Dr. Kennedy planned and built the Chicano Children's Dental Health Clinic in San Diego. He is a Past President of International Academy of Oral Medicine and Toxicology, the author of a book on preventive dental health entitled *How to Save Your Teeth*, and a nationally and internationally recognized lecturer on toxicology and restorative dentistry.

**Office:** 619-231-1624 (Monday -Wednesday)

**Home:** 619-222-8177

**Joseph Lynn Lyon, MD** has been a professor of Family and Preventive Medicine at the University of Utah since 1971. Dr. Lyon received his B.S. and M.S. Degrees from the University of Utah and in 1969 graduated from Harvard University.

**Office:** 801-581-7234

**Hardy Limeback, B. Sc., Ph.D.** in Biochemistry, DDS started his career as a basic scientist (MRC Scholar) studying tooth development and pig enamel protein biochemistry. His clinical interests in practice and research have been in geriatric dentistry (Chief of Dental Services for the Metropolitan Homes for the Aged) and preventive dentistry (University clinic and private practice). He currently holds an MRC grant to study the effects of fluoride on tooth and bone development. Dr. Limeback has only recently started to publish in the area of dental and skeletal fluorosis. He is the fluoride-biochemistry expert serving as a member of the Canadian Dental Association's Consumer Products Recognition Committee. Dr. Limeback is currently the head of the Preventive Dentistry department and own his own dental office.

**Office:** 416-979-4929 ext 4461

Prepared by:

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Citizens for Safe Drinking Water - Utah  
P.O. Box 1973 Provo, Utah 84603

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(801) 492-0217

Rosemary Minervini  
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Ken Howard  
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Fax: (801) 4924-210 or (801) 221-5817 E-mail: [SafeDrinkingH20@aol.com](mailto:SafeDrinkingH20@aol.com)

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Utah county House of Representatives:

<http://www.le.state.ut.us/asp/roster/roster.asp>

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### **FLUORIDATION INCREASES LEAD ABSORPTION IN CHILDREN**

The chemical most commonly used to fluoridate America's drinking water is associated with an increase in children's blood lead levels.

Most studies that purport fluoridation's safety and effectiveness in preventing cavities use the chemical sodium fluoride. However, 90% of fluoridated communities inject cheaper Silicofluorides (fluosilicic **acid and sodium Silicofluorides**) **into their drinking water** based on the theory that each chemical comes apart totally so that freed fluoride can incorporate into tooth enamel.

Silicofluorides **do not separate** completely, as sodium fluoride does, reports Professor Roger D. Masters, Ph.D., of Dartmouth College, and co-researcher Myron Coplan, chemical engineer. "As a result, **water treatment** with silicofluorides apparently functions to **increase the** cellular uptake of lead," they state.

In research published in the International Journal of Environmental Studies (September, 1999), Masters and Coplan studied lead screening data from 280,000 Massachusetts children. They found that **average blood lead levels are significantly higher in children living in communities whose water is treated** with silicofluorides. A survey of over 120,000 children in Georgia towns (population 15,000 to 75,000) corroborates this effect.

The Center for Disease Control (CDC) warns that excessive blood lead levels can cause learning disabilities, behavioral problems and seizures.

## Geography

Take a look at which Cities and States Fluoridate their water.

## Links

Don't take our word about fluoridation, check out what others have to say about it. There are both pro-fluoridation and anti-fluoridation sites listed. We also have a few quotes we feel you might like.

## Fluoridation Survey

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Masters and Coplan report that lead is a highly significant risk factor in predicting higher rates of crime, attention deficit disorder, hyperactivity and substance abuse. In a study now in press, Masters' research team found higher rates of violent crime and substance abuse in silicofluoridated communities.

Is this a risk we want to take with our children?

---

## WATER TREATMENT WITH SILICOFLUORIDES AND LEAD TOXICITY

**Roger D. Masters and Myron J. Coplan\***

*Department of Government, Dartmouth College and Gruter Institute  
for Law and Behavioral Research, IL. B. 6222, Hanover, NH 03755 (USA);  
Intelleguity, 38 Silver Hill, 8 Natick, MA 01760 (USA)*

*(Received in final form 26 August 1998)*

Toxic metals like lead, manganese, copper and cadmium damage neurons and deregulate neurotransmitters like serotonin and dopamine (which are essential to normal impulse control and learning. Earlier studies show that - controlling for socioeconomic and demographic factors - environmental pollution with lead is a highly significant risk factor in predicting higher rates of crime, attention deficit disorder or hyperactivity, and learning disabilities. Exposure and uptake of lead has been associated with industrial pollution, leaded paint and plumbing systems in old housing, lead residues in soil, dietary habits (such as shortages of calcium and iron), and demographic factors (such as poverty, stress, and minority ethnicity). We report here on an additional "risk co-factor" making lead and other toxic metals in the environment more dangerous to local residents: The use of silicofluorides as agents in water treatment. The two chemicals in question - fluosilicic acid and sodium Silicofluorides - are toxins that, despite claims to the contrary do not dissociate completely and change water chemistry when used under normal water treatment practices. As a result, water treatment with silicofluorides apparently functions to increase the cellular uptake of lead. Data from lead screening of over 280,000 children in Massachusetts indicates that siliconfluoride usage is associated with significant increases in average lead in children's blood as well as percentage of children with blood lead m excess of 10 ug/dL. Consistent with the hypothesized role of silicofluorides as enhancing uptake of lead, whatever the source of exposure, children are especially

at risk for higher blood lead in those communities with more old housing or lead in excess of 15 ppb in first draw water samples where silicofluorides are also in use. Preliminary findings from county-level data in Georgia confirm that Silicofluorides usage is associated with higher levels of lead in children's blood, In both Massachusetts and Georgia, moreover, behaviors associated with lead neurotoxicity are more frequent in communities using silicofluorides than in comparable localities that do not use these chemicals. Because there has been insufficient animal or human testing of Silicofluorides treated water. Further study of the effect of silicofluorides is needed to clarify the extent to which these chemicals are risk co-factors for lead uptake and the hazardous effects it produces.

\* Corresponding authors.

*Intern J. Environ. Studies*, 1999. Vol. 56. pp. 435  
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## Populations that are Unusually Susceptible

The title says it all.

Excerpt below taken from: *Toxicological Profile For Fluorides, Hydrogen Fluoride, and Fluorine* (19,

PB93-182566, April 1993, Agency for Toxic Substances and Disease Registry, U.S. Department of Health and Human Services, TP-91/17, page 112.

**Existing data indicate that subsets of the population may be unusually susceptible to the toxic effects of fluoride and its compounds. These populations include the elderly, people with deficiencies of calcium, magnesium, and/or vitamin C, and people with cardiovascular and kidney problems.**

Because fluoride is excreted through the kidney, people with renal insufficiency would have impaired renal clearance of fluoride (Juncos and Donadio 1972). Fluoride retention on a low-protein, low-calcium, and low phosphorus diet was 65% in patients with chronic renal failure, compared with 20% in normal subjects (Spencer et al. 1980a). Serum creatinine levels were weakly correlated ( $r=0.35-0.59$ ) with serum fluoride levels (Hanhijarvi 1982). People on kidney dialysis are particularly susceptible to the use of fluoridated water in the dialysis machine (Anderson et al. 1980). This is due to the decreased fluoride clearance combined with the intravenous exposure to large amounts of fluoride during dialysis. Impaired renal clearance of fluoride has also been found in people with diabetes mellitus and cardiac insufficiency (Hanhijarvi 1974). People over the age of 50 often have decreased renal fluoride clearance (Hanhijarvi 1974). This may be because of the decreased rate of accumulation of fluoride in bones or decreased renal function. This decreased clearance of fluoride may indicate that elderly people are more susceptible to fluoride toxicity.

**Poor nutrition** increases the incidence and severity of dental fluorosis (Murray and Wilson 1948; Pandit et al. 1940) and skeletal fluorosis (Pandit et al. 1940). Comparison of dietary adequacy, water fluoride levels and the incidence of skeletal fluorosis in several villages in India suggested that vitamin C deficiency played a major role in the disease (Pandit et al. 1940). Calcium intake met minimum standards, although the source was grains and vegetables, rather than milk, and bioavailability was not determined. Because of the role of calcium in bone formation, calcium deficiency would be expected to increase susceptibility to effects of fluoride. No studies in humans supporting this hypothesis were located. Calcium deficiency was found to increase bone fluoride levels in a two-week study in rats (Guggenheim et al. 1976) but not in a 10-day study in monkeys (Reddy and Srikantia 1971). Guinea pigs administered fluoride and a low-protein diet had larger increases in bone fluoride than those given fluoride and a control diet (Parker et al. 1979). Bone changes in monkeys following fluoride treatment appear to be more marked if the diet is deficient in protein or vitamin C, but the conclusions are not definitive because of

incomplete controls and small sample size (Reddy and Srikantia 1971). Inadequate dietary levels of magnesium may affect the toxic effects of fluoride. Fluoride administered to magnesium-deficient dogs prevented soft-tissue calcification but not muscle weakness and convulsions (Chiemchaisri and Philips 1963). In rats, fluoride aggravated the hypomagnesemia condition, which produce convulsive seizures. The symptoms of magnesium deficiency are similar to those produced by fluoride toxicity. This may be because of a fluoride-induced increase in the uptake of magnesium from plasma into bone.

Some people with **cardiovascular problems** may be at increased risk of fluoride toxicity. Fluoride inhibits glycolysis by inhibiting enolase (Guminska and Sterkowicz 1975; Peter et al. 1964). It also inhibits energy metabolism through the tricarboxylic acid cycle by blocking the entry of pyruvate and fatty acids and by inhibiting succinic dehydrogenase (Slater and Bonnet 1952).

There is evidence that daily doses of 34 mg fluoride (0.48mg/kg/day) increases the risk of non vertebral fractures in women with post menopausal osteoporosis (Riggs et al. 1990). **Post menopausal women** (Danielson et al. 1992; Sowers et al. 1991) and **elderly men** (Danielson et al. 1992) **in fluoridated communities may also be at increased risk of fractures.**

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## Rejection of Water Fluoridation

A list of places that have retracted fluoridation since 1990.

### Since 1990

#### Sorted By Date

Place	Date	What's happened
Ithaca, New York	11/7/00	
Spokane, Washington	11/7/00	
Brattleboro, Vermont	11/7/00	
Wenatchee, Washington	11/7/00	
Shawano, Wisconsin	11/7/00	
Nibly City, Utah	11/7/00	
Hyrum City, Utah	11/7/00	
Providence City, Utah	11/7/00	
Smithfield City, Utah	11/7/00	
Logan City, Utah	11/7/00	
River Heights, Utah	11/7/00	
Pequannock, New Jersey	11/7/00	
Ozark, Missouri	11/7/00	
Wooster, Ohio	11/7/00	4th rejection
Squamish, British Columbia	10/16/00	
Woodside, California	9/00	
Ste. Genevieve, Missouri	8/8/00	
Winfield, Kansas	3/6/00	
Wilmington, Massachusetts	2/15/00	

Santa Barbara, California	23-Nov-99	
Johnstown, New York	19-Nov-99	
Tooele, Utah	2-Nov-99	
Wichita, Kansas	26-Oct-99	
Boca Raton, Florida	25-Oct-99	
E! Cajon, California	27-Apr-99	
Escondido, California	7-Apr-99	
Helix Water District, California	7-Apr-99	
Lakeside Water District, California	6-Apr-99	
Riverview Water District, California	24-Mar-99	
La Mesa, California	9-Mar-99	
Santa Cruz, California	4-Mar-99	Banned
Bremerton, Washington	2-Feb-99	
Olympia, Washington	15-Dec-98	
Seward, Nebraska	3-Nov-98	
Whitehorse, Yukon Territory, Canada	28-Jul-98	Quit after 30 years
Ste. Genevieve, Missouri	1-Jul-98	Quit after 13 years
Grand Island, Nebraska	13-May-98	Quit after 1 year
Norfolk, Nebraska	13-May-98	
Scottsbluff, Nebraska	13-May-98	
Aurora, Nebraska	13-May-98	
Stromsburg, Nebraska	13-May-98	
North Platte, Nebraska	13-May-98	
Washington, Missouri	7-Apr-98	
Kitimat, British Columbia, Canada	Mar-98	Quit
Hot Springs, Arkansas	Feb-98	
Ridgefield, Oregon	22-Dec-97	
Methuen, Massachusetts	4-Nov-97	
Brisbane, Australia	1-Oct-97	

Spokane, Washington	25-Aug-97	
Largo, Florida	15-Jul-97	
Clearwater, Florida	15-Jul-97	
North Redington Beach, Florida	15-Jul-97	
Amsterdam, New York	21-May-97	
Suisun City, California	1-May-97	
Yardly, Pennsylvania	16-Apr-97	
Erie, Pennsylvania	21-Mar-97	
Western Nassau County, New York	21-Nov-96	Quit after 23 years
Kelowna, British Columbia, Canada	16-Nov-96	Quit after 42 years
Worcester, Massachusetts	6-Nov-96	
Bloomer, Wisconsin	6-Nov-96	
Gothenburg, Nebraska	Nov-96	
Kodiak, Alaska	12-Jul-96	
Carle Place, New York	1-Feb-96	Quit
Winter Springs, Florida	10-Jan-96	
Pasco, Florida	14-Dec-95	
York, Pennsylvania	29-Jul-95	
Albany, New York	8-Dec-94	
Thurmont, Maryland	3-Feb-94	
Barnstable, (Cape Cod) Massachusetts	4-Nov-93	
Middletown, Maryland	Nov-93	Quit
Port Hardy, British Columbia, Canada	Nov-93	Quit after 19 years
Squamish, British Columbia, Canada	Nov-93	Quit after 20 years
Wagoner, Oklahoma	17-Jun-93	
Campbell River, British Columbia, Canada	Apr-93	Quit after 33 years
Redwood Valley, California	6-Feb-93	
Sarnia, Ontario, Canada	30-Jan-93	
Milltown, Wisconsin	17-Oct-92	

Washoe County, Nevada	15-Jul-92	
Bellingham, Washington	19-May-92	
Comox/Courtenay, British Columbia, Canada	Feb-92	
Palm Beach County, Florida	22-Oct-91	
Ketchikan, Alaska	2-Oct-91	
Suffolk County, New York	15-Aug-91	
Davis, California	14-Dec-90	5th rejection
Cumberland, Maryland	17-May-90	Quit after 2 years
Morgan Hill, California	7-Mar-90	Quit
Los Altos Hills,(Purissima) California	1993	

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# Fluoridation

## Fluoridation in Europe

### Articles

This section includes a few Newspaper Articles on the topic of Fluoridation. One is from our own Master Herbalist, David Christopher.

### What are other countries doing?

### Letters

This section has a handful of letters from various organizations and people on Fluoridation.

Water fluoridation was stopped in the following World Health Organization (WHO) Countries:

### Professionals

This page was prepared by the Citizens for Safe Drinking Water - Utah and provides the names and contact information for some knowledgeable professionals.

Federal Republic of Germany (introduced 1952, stopped 1971)

Sweden (introduced 1952, stopped 1971)

Netherlands (introduced 1953, stopped 1976)

Czechoslovakia (introduced 1958, stopped 1988/90)

German Democratic Republic (introduced 1959, stopped 1990 (Spremborg 1993) Union of Soviet Socialist Republics (introduced 1960, stopped 1990)

Finland (introduced 1959, stopped 1993)

Outside Europe: Japan (introduced 1952, stopped 1972)

### Silicofluorides & Lead

Here, we have some information on what the affects are of Fluoride on people and our children.

"The reason for these cessation's of water fluoridation was not a political one, but the consequence of scientific discussion of its effectiveness and side effects."

### Unusually Susceptible

The title says it all.

"Dentists and WHO experts have predicted a very large caries increase ("a tide of caries") after termination of fluoridation. Analyses of the data, however, reveal a significant decrease in dental caries (caries decline) after suspension of water fluoridation in Japan in the Netherlands, in Prague, in the German Democratic Republic, and elsewhere. Never has any real increase in dental caries been observed after water fluoridation was discontinued."

### Rejection ???

A list of places that have retracted fluoridation since 1990.

<http://www.fluoride-journal.com/98-31-3/313-171.htm>

### In Europe

What are other countries doing?

IF YOU'RE NOT SURE IT'S SAFE,

**DON'T FLUORIDATE!**

**VOTE NO ON FLUORIDATION.**

### Geography

Take a look at which Cities and States Fluoridate their water.

Fluoridation in Europe. *FLUORIDE* 31(3), 1998, pp 171-174 International Society for Fluoride Research

### Links

Don't take our word about fluoridation, check out what others have to say about it. There are both pro-fluoridation and anti-fluoridation sites listed. We also have a few quotes we feel you might like.

### Fluoridation Survey

Please take a moment to share your feelings with us and possibly, the world here on our site.

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## Fluoridation

### Articles

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### Letters

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### Professionals

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### Silicofluorides & Lead

Here, we have some information on what the affects are of Fluoride on people and our children.

### Unusually Susceptible

The title says it all.

### Rejection ???

A list of places that have retracted fluoridation since 1990.

### In Europe

What are other countries doing?

### Geography

Take a look at which Cities and States Fluoridate their water.

### Links

Don't take our word about fluoridation, check out what others have to say about it. There are both pro-fluoridation and anti-fluoridation sites listed. We also have a few quotes we feel you might like.

### Fluoridation Survey

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## A Little USA Geography

Take a look at which Cities and States Fluoridate their water.

## Largest Fluoridated Cities

Forty-two of the fifty largest cities in the U.S. are supplied with fluoridated water

Largest Fluoridated Cities

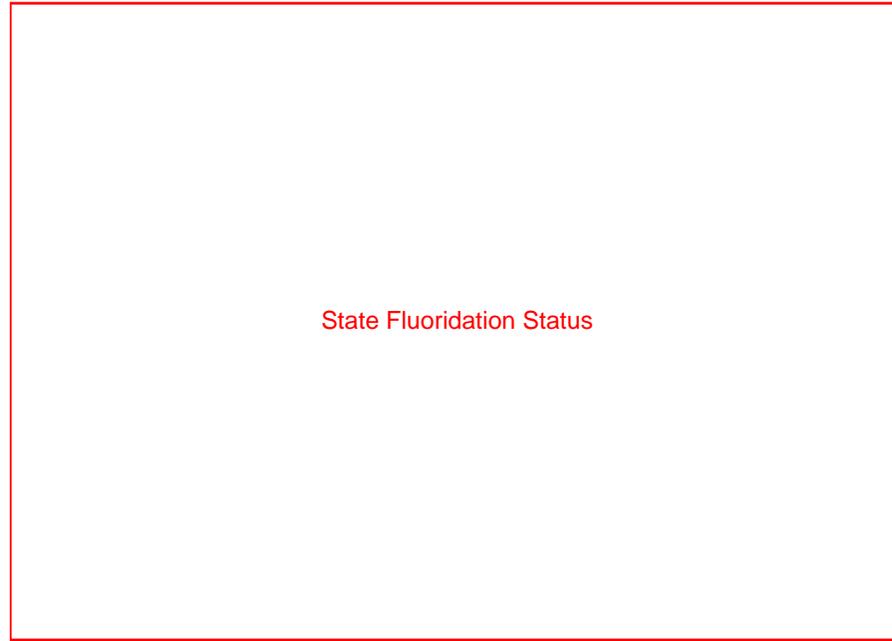
*Two cities (Jacksonville, Florida, and El Paso, Texas) are naturally fluoridated.*

*\*Los Angeles, California, plans to implement fluoridation in early 1999.*

*Information current as of November 1998.*

# State Fluoridation Status

States with 75% of the population served by fluoridated community water supplies.\*



*\*Data compiled by the American Dental Association and the Centers for Disease Control and Prevention/Division of Oral Health.*

*Current as of November 1998.*

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# Fluoridation

## Articles

This section includes a few Newspaper Articles on the topic of Fluoridation. One is from our own Master Herbalist, David Christopher.

## Letters

This section has a handful of letters from various organizations and people on Fluoridation.

## Professionals

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## Silicofluorides & Lead

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## Unusually Susceptible

The title says it all.

## Rejection ???

A list of places that have retracted fluoridation since 1990.

## In Europe

What are other countries doing?

## Geography

Take a look at which Cities and States Fluoridate their water.

## Links

Don't take our word about fluoridation, check out what others have to say about it. There are both pro-fluoridation and anti-fluoridation sites listed. We also have a few quotes we feel you might like.

## Fluoridation Survey

Please take a moment to share your feelings with us and possibly, the world here on our site.

# Fluoridation Links and Quotes

Don't take our word about fluoridation, check out what others have to say about it. There are both pro-fluoridation and anti-fluoridation sites listed. We also have a few quotes we feel you might like.

Here are some links to some different sites that discuss fluoridation. We thought that we would also throw in some Quotes we like.

-----

[Woodside California Rejects Fluoridation 6 to 1](#)

[http://www.nofluoride.com/palo\\_alto\\_daily\\_news.htm](http://www.nofluoride.com/palo_alto_daily_news.htm)

-----

[San Francisco Supervisor Wants Fluoridation Reviewed](#)

[http://www.nofluoride.com/sf\\_fluoridation\\_study.htm](http://www.nofluoride.com/sf_fluoridation_study.htm)

-----

"The American Medical Association is NOT prepared to state that no harm will be done to any person by water fluoridation. The AMA has not carried out any research work, either long-term or short-term, regarding the possibility of any side effects."

- Dr. Flanagan, Assistant Director of Environmental Health, American Medical Association.

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[California's mandatory fluoridation program is rejected by key cities.](#)

[http://www.nofluoride.com/cal\\_cities\\_say\\_no.htm](http://www.nofluoride.com/cal_cities_say_no.htm)

-----

[Santa Barbara Rejects California's Mandated Fluoridation](#)

[http://www.nofluoride.com/santa%20\\_barbara.htm](http://www.nofluoride.com/santa%20_barbara.htm)

-----

"Water contains a number of substances that are undesirable, and fluorides are just one of them" stated Dr. F. A. Bull, State Dental Director of Wisconsin, speaking at the Fourth Annual Conference of State Dental Directors.

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<http://www.fluoridealert.org>

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Visit Citizens for Safe Drinking Water - Utah Division Web site:

[www.stopfluoridation.homestead.com](http://www.stopfluoridation.homestead.com)

Citizens for Safe Drinking Water

[www.fluoride-journal.com](http://www.fluoride-journal.com)

2425 Third Avenue

San Diego, CA 92101

[jgreen@abac.com](mailto:jgreen@abac.com)

800-728-3833 phone

[davidkennedy-dds@home.com](mailto:davidkennedy-dds@home.com)

619-281-1578 fax

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Men stumble over the truth from time to time, but most pick themselves up and hurry off as if nothing happened

- Winston Churchill

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[Dental Fluorosis Prevention Program](#)

-----

[Campaign for Fluoride Free Water in Ireland](#)

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"I am appalled at the prospect of using water as a vehicle for drugs. Fluoride is a corrosive poison that will produce serious effects on a long range basis. Any attempt to use water this way is deplorable."

- Dr. Charles Gordon Heyd, Past President of the American Medical Association.

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[Low-Level Fluoridation and Low-Level Radiation](#)

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"fluoridation ... it is the greatest fraud that has ever been perpetrated and it has been perpetrated on more people than any other fraud has."

- Dr. Professor Albert Schatz, (Microbiology), Nobel Prize Winner and the discovery of Streptomycin, the cure for tuberculosis and numerous other bacterial infections.

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[Dangers of Fluoridated Water](#)

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Fluoride may be destroying our bones, our teeth and overall health... it doesn't need to be added to our water and we may be taking unnecessary risks by doing so.

- Dr. Hardy Limeback, a leading Canadian fluoride authority, former fluoride advocate and long-standing consultant to Canadian Dental Association. Now a Professor of Dentistry at the University of Toronto.

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[National Center for Fluoridation Policy & Research \(NCFPR\)](#)

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"The evidence against the safety of this public health policy keeps mounting; it is too compelling to ignore."

- Dr. Phyllis Mullenix, Children's Hospital, Boston

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[Preventive Dental Health Association](#)

-----

"By 1983 I was thoroughly convinced that fluoridation caused more harm than good. I expressed the opinion that some of these children with dental fluorosis could, just possibly, have also suffered harm to their bones"

- Dr. Colquhoun, former Principal Dental Officer for Auckland New Zealand.

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[The Fluoridation Fiasco](#)

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"Based on data from the National Academy of Sciences, current levels of fluoride exposure in drinking water may cause arthritis in a substantial portion of the population long before they reach old age"

-Dr. Robert Carton, former EPA scientist.

-----

[Fluoridation: A 50 Year old Blunder and Cover-Up](#)

-----

"E.P.A. should act immediately to protect the public, not just on the cancer data, but on the evidence of bone fractures, arthritis, mutagenicity and other effects."

- Dr. William Marcus, Senior Toxicologist at E.P.A.

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[STOP Fluoridation USA](#)

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## Fluoridation Feedback Questionnaire

Please take a moment to share your feelings with us and possibly, the world here on our site.

Now that you have looked over the fluoridation information, please take the time to fill out our **Fluoridation Feedback** questionnaire. We are very interested in what your thoughts are.

Items with the \* are required fields.

**Your Name: \***

**Email address: \***

**Your age?**

**How do you feel about Fluoridation? \***

Against it

For it

Undecided

**We would really like to know your feelings on the fluoridation issue. Please take a minute to share your thoughts with us.**

## Fluoridation

### Articles

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### Unusually Susceptible

The title says it all.

### Rejection ???

A list of places that have retracted fluoridation since 1990.

### In Europe

What are other countries doing?

### Geography

Take a look at which Cities and States Fluoridate their water.

### Links

Don't take our word about fluoridation, check out what others have to say about it. There are both pro-fluoridation and anti-fluoridation sites listed. We also have a few quotes we feel you might like.

### Fluoridation Survey

Please take a moment to share your feelings with us and possibly, the world here on our site.

## May we publish your comments? \*

Yes

No

### Example

**Brent Lindsay**

*Provo, Ut.*

I really like the information that you have provided here. It has helped me understand the issue of fluoridation better. I am definitely against it now.

Thank you tons.

**Thanks for taking the time to fill out this little questionnaire. We really value your thoughts and views on fluoridation. If you would like to be placed in The School of Natural Healing mailing list, please fill in the rest of this form. Once you are done, Click the "Submit" button at the bottom.**

**Street Address:**

**Street Address:**

**City:**

**State:**

**Zip Code:**

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## UTAH STATE LEGISLATORS

Year

Name	Senate/House	Party	District	Legislation
<a href="#">Aagard, Douglas C.</a>	Representative	Republican	15	<a href="#">Link</a>
<a href="#">Adams, J. Stuart</a>	Representative	Republican	16	<a href="#">Link</a>
<a href="#">Alexander, Jeff</a>	Representative	Republican	62	<a href="#">Link</a>
<a href="#">Allen, Ron</a>	Senator	Democrat	12	<a href="#">Link</a>
<a href="#">Allen, Sheryl L.</a>	Representative	Republican	19	<a href="#">Link</a>
<a href="#">Anderson, Eli H.</a>	Representative	Democrat	1	<a href="#">Link</a>
<a href="#">Arent, Patrice M.</a>	Senator	Democrat	4	<a href="#">Link</a>
<a href="#">Barrus, Roger E.</a>	Representative	Republican	18	<a href="#">Link</a>
<a href="#">Becker, Ralph</a>	Representative	Democrat	24	<a href="#">Link</a>
<a href="#">Bell, Gregory S.</a>	Senator	Republican	22	<a href="#">Link</a>
<a href="#">Bennion, Chad E.</a>	Representative	Republican	44	<a href="#">Link</a>
<a href="#">Bigelow, Ron</a>	Representative	Republican	32	<a href="#">Link</a>
<a href="#">Bird, Calvin G.</a>	Representative	Republican	65	<a href="#">Link</a>
<a href="#">Biskupski, Jackie</a>	Representative	Democrat	30	<a href="#">Link</a>
<a href="#">Blackham, Leonard M.</a>	Senator	Republican	24	<a href="#">Link</a>
<a href="#">Bourdeaux, Duane E.</a>	Representative	Democrat	23	<a href="#">Link</a>
<a href="#">Bowman, DeMar Bud</a>	Representative	Republican	72	<a href="#">Link</a>
<a href="#">Bramble, Curtis S.</a>	Senator	Republican	16	<a href="#">Link</a>
<a href="#">Bryson, Katherine M.</a>	Representative	Republican	60	<a href="#">Link</a>
<a href="#">Buffmire, Judy Ann</a>	Representative	Democrat	35	<a href="#">Link</a>
<a href="#">Bush, Don E.</a>	Representative	Republican	14	<a href="#">Link</a>
<a href="#">Buttars, Craig W.</a>	Representative	Republican	3	<a href="#">Link</a>
<a href="#">Buttars, D. Chris</a>	Senator	Republican	10	<a href="#">Link</a>
<a href="#">Buxton, D. Gregg</a>	Representative	Republican	12	<a href="#">Link</a>
<a href="#">Christensen, LaVar</a>	Representative	Republican	48	<a href="#">Link</a>
<a href="#">Clark, David</a>	Representative	Republican	74	<a href="#">Link</a>
<a href="#">Clark, Stephen D.</a>	Representative	Republican	63	<a href="#">Link</a>
<a href="#">Cox, David N.</a>	Representative	Republican	56	<a href="#">Link</a>
<a href="#">Curtis, Greg J.</a>	Representative	Republican	49	<a href="#">Link</a>
<a href="#">Daniels, Scott</a>	Representative	Democrat	25	<a href="#">Link</a>

<a href="#">Davis, Gene</a>	Senator	Democrat	3	<a href="#">Link</a>
<a href="#">Dayton, Margaret</a>	Representative	Republican	61	<a href="#">Link</a>
<a href="#">Dee, Brad L.</a>	Representative	Republican	11	<a href="#">Link</a>
<a href="#">Dillree, Marda</a>	Representative	Republican	17	<a href="#">Link</a>
<a href="#">Dmitrich, Mike</a>	Senator	Democrat	27	<a href="#">Link</a>
<a href="#">Donnelson, Glenn A.</a>	Representative	Republican	7	<a href="#">Link</a>
<a href="#">Dougall, John</a>	Representative	Republican	27	<a href="#">Link</a>
<a href="#">Duckworth, Carl W.</a>	Representative	Democrat	22	<a href="#">Link</a>
<a href="#">Dunnigan, James A.</a>	Representative	Republican	39	<a href="#">Link</a>
<a href="#">Eastman, Dan R.</a>	Senator	Republican	23	<a href="#">Link</a>
<a href="#">Evans, Beverly Ann</a>	Senator	Republican	26	<a href="#">Link</a>
<a href="#">Evans, James M.</a>	Senator	Republican	1	<a href="#">Link</a>
<a href="#">Ferrin, James A.</a>	Representative	Republican	58	<a href="#">Link</a>
<a href="#">Ferry, Ben C.</a>	Representative	Republican	2	<a href="#">Link</a>
<a href="#">Frank, Craig A.</a>	Representative	Republican	57	<a href="#">Link</a>
<a href="#">Gladwell, David L.</a>	Senator	Republican	19	<a href="#">Link</a>
<a href="#">Goodfellow, Brent H.</a>	Representative	Democrat	29	<a href="#">Link</a>
<a href="#">Gowans, James R.</a>	Representative	Democrat	21	<a href="#">Link</a>
<a href="#">Hale, Karen</a>	Senator	Democrat	7	<a href="#">Link</a>
<a href="#">Hansen, Neil A.</a>	Representative	Democrat	9	<a href="#">Link</a>
<a href="#">Hardy, Ann W.</a>	Representative	Republican	20	<a href="#">Link</a>
<a href="#">Harper, Wayne A.</a>	Representative	Republican	43	<a href="#">Link</a>
<a href="#">Hatch, Thomas V.</a>	Senator	Republican	28	<a href="#">Link</a>
<a href="#">Hellewell, Parley G.</a>	Senator	Republican	15	<a href="#">Link</a>
<a href="#">Hendrickson, Neal B.</a>	Representative	Democrat	33	<a href="#">Link</a>
<a href="#">Hickman, John W.</a>	Senator	Republican	29	<a href="#">Link</a>
<a href="#">Hillyard, Lyle W.</a>	Senator	Republican	25	<a href="#">Link</a>
<a href="#">Hogue, David L.</a>	Representative	Republican	52	<a href="#">Link</a>
<a href="#">Holdaway, Kory M.</a>	Representative	Republican	34	<a href="#">Link</a>
<a href="#">Hughes, Gregory H.</a>	Representative	Republican	51	<a href="#">Link</a>
<a href="#">Hutchings, Eric K.</a>	Representative	Republican	38	<a href="#">Link</a>
<a href="#">Jenkins, Scott K.</a>	Senator	Republican	20	<a href="#">Link</a>
<a href="#">Johnson, Bradley T.</a>	Representative	Republican	70	<a href="#">Link</a>
<a href="#">Jones, Patricia W.</a>	Representative	Democrat	40	<a href="#">Link</a>
<a href="#">Julander, Paula F.</a>	Senator	Democrat	2	<a href="#">Link</a>
<a href="#">King, Brad</a>	Representative	Democrat	69	<a href="#">Link</a>
<a href="#">Kiser, Todd E.</a>	Representative	Republican	41	<a href="#">Link</a>
<a href="#">Knudson, Peter C.</a>	Senator	Republican	17	<a href="#">Link</a>

<a href="#">Last, Bradley G.</a>	Representative	Republican	71	<a href="#">Link</a>
<a href="#">Lawrence, M. Susan</a>	Representative	Republican	36	<a href="#">Link</a>
<a href="#">Litvack, David</a>	Representative	Democrat	26	<a href="#">Link</a>
<a href="#">Lockhart, Rebecca D.</a>	Representative	Republican	64	<a href="#">Link</a>
<a href="#">Love, Dana C.</a>	Representative	Republican	13	<a href="#">Link</a>
<a href="#">Mansell, L. Alma</a>	Senator	Republican	9	<a href="#">Link</a>
<a href="#">Mascaro, Steven R.</a>	Representative	Republican	47	<a href="#">Link</a>
<a href="#">Mayne, Ed P.</a>	Senator	Democrat	5	<a href="#">Link</a>
<a href="#">McCartney, Ty</a>	Representative	Democrat	31	<a href="#">Link</a>
<a href="#">McGee, Rosalind J.</a>	Representative	Democrat	28	<a href="#">Link</a>
<a href="#">Morgan, Karen W.</a>	Representative	Democrat	46	<a href="#">Link</a>
<a href="#">Morley, Michael T.</a>	Representative	Republican	66	<a href="#">Link</a>
<a href="#">Moss, Carol Spackman</a>	Representative	Democrat	37	<a href="#">Link</a>
<a href="#">Murray, Joseph G.</a>	Representative	Republican	8	<a href="#">Link</a>
<a href="#">Newbold, Merlynn T.</a>	Representative	Republican	50	<a href="#">Link</a>
<a href="#">Noel, Michael E.</a>	Representative	Republican	73	<a href="#">Link</a>
<a href="#">Pace, Loraine T.</a>	Representative	Republican	4	<a href="#">Link</a>
<a href="#">Parker, Brent D.</a>	Representative	Republican	5	<a href="#">Link</a>
<a href="#">Peterson, Darin G.</a>	Representative	Republican	67	<a href="#">Link</a>
<a href="#">Philpot, J. Morgan</a>	Representative	Republican	45	<a href="#">Link</a>
<a href="#">Seitz, Jack A.</a>	Representative	Republican	55	<a href="#">Link</a>
<a href="#">Shurtliff, LaWanna Lou</a>	Representative	Democrat	10	<a href="#">Link</a>
<a href="#">Snow, Gordon E.</a>	Representative	Republican	54	<a href="#">Link</a>
<a href="#">Steele, David H.</a>	Senator	Republican	21	<a href="#">Link</a>
<a href="#">Stephens, Martin R.</a>	Representative	Republican	6	<a href="#">Link</a>
<a href="#">Stephenson, Howard A.</a>	Senator	Republican	11	<a href="#">Link</a>
<a href="#">Styler, Michael R.</a>	Representative	Republican	68	<a href="#">Link</a>
<a href="#">Thomas, David L.</a>	Senator	Republican	18	<a href="#">Link</a>
<a href="#">Thompson, Mike</a>	Representative	Republican	59	<a href="#">Link</a>
<a href="#">Ure, David</a>	Representative	Republican	53	<a href="#">Link</a>
<a href="#">Urquhart, Stephen H.</a>	Representative	Republican	75	<a href="#">Link</a>
<a href="#">Valentine, John L.</a>	Senator	Republican	14	<a href="#">Link</a>
<a href="#">Waddoups, Michael G.</a>	Senator	Republican	6	<a href="#">Link</a>
<a href="#">Walker, Carlene M.</a>	Senator	Republican	8	<a href="#">Link</a>
<a href="#">Wallace, Peggy</a>	Representative	Republican	42	<a href="#">Link</a>
<a href="#">Webb, R. Curt</a>	Representative	Republican	5	<a href="#">Link</a>
<a href="#">Winn, Bradley A.</a>	Representative	Republican	57	<a href="#">Link</a>
<a href="#">Wright, Bill</a>	Senator	Republican	13	<a href="#">Link</a>



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## History of Comfrey

The genus name of Comfrey, *Symphytum*, is derived from the Greek *symphyo*, “to make grow together,” *phyton* which means “plant,” and *officinale* which means that this was the official medicinal plant sold in apothecaries and pharmacopoeias. The common name, Comfrey, comes from the Latin *con firma*, alluding to the uniting of bones, and from the Latin *confervere*, to boil or grow together, or to heal. The other common names given to this plant allude to its healing powers: boneset, bruisewort, and knitbone.

By 400 B.C. this plant was already in use in Greece. The earliest recorded Comfrey remedies were made only of the root. The Greek historian Herodotus recorded its use and recommended it to staunch severe bleeding and the Greeks later used the root to cure bronchial problems. The Greek poet-physician, Nicander, (of the second century B.C.) mentions the plant as a remedy for poisons in his herbal *Alexipharmica*; and another famous Greek physician, Galen (A.D. 130-200), mentions its healing powers in his writings as well. Greek physician Dioscorides, a well-known natural healer of his day, documented its use in his herbal and prescribed it for healing wounds, broken bones, as well as respiratory and gastrointestinal problems. He was employed as Nero's medical officer to the Roman army (thus, traveling extensively and having much cause to use Comfrey) and documented his experiences in five volumes with descriptive accounts on medicinal plants. Dioscorides prescribed Comfrey for its bone-knitting and wound-healing virtues.

The Roman naturalist and contemporary of Dioscorides, Pliny the Elder, experimented with the roots and remarked that boiling Comfrey roots in water produced a sticky paste which glued pieces of meat together. The people of the first century A.D. made poultices of Comfrey because of this observable fact and drank it as a tea for internal ailments such as diarrhea, bleeding and stomach disorders. Pliny, as well, was an army man and avid writer who compiled fifteen volumes on medicinal plants.

Comfrey appears in monastery writings and herbals from A.D. 1000. Saxon herbariums recommended it for “internal bleedings, ruptures, hernias, for which purpose, to give one example, Comfrey leaves were heated in or over hot, near-ash embers, ground and stirred into honey, and then taken on an empty stomach.” The Cistercians, Benedictines and other religious orders are credited with furthering the cultivation of Comfrey plants during long stretches of warfare because it was a mainstay plant in the monastery gardens and used specifically to heal soldiers' wounds.

The Middle Ages saw continued use of this wonderful plant. Swiss physician Paracelsus, (1493-1541 A.D.) remarked, “To what purpose do you superadde vinegar to the root of Comfrey,” he asked surgeons, “or bole, or suchlike balefull additaments, while God hath compos'd this simple sufficient to cure the fracture of the bones?” The gummy roots actually stiffen into a cast when spread on muslin and wrapped around a sprain, a broken bone that has been set, or torn ligament. Comfrey roots were used in teas for those who would cough up blood, according to Turner's Herbal (1568). By the late sixteenth century the herb had reached a high level of popularity and all levels of social status (from King to pauper) were known to cultivate it in their gardens. Another herbal from this era (1597) was written by herbalist John Gerard, who was renowned during Queen Elizabeth's reign, and who also recommends Comfrey for “those who spit blood and have inward wounds and burstings.”

In the seventeenth century the leaves were also being used in tea form, though English herbalist Nicholas Culpeper still recommended the Comfrey roots, “full of glutinous and clammy juice...for all inward hurts...and for outward wounds and sores in [all] fleshy or sinewy parts of the body...[It] is especially good for ruptures and broken bones.” He also prescribed the herb for hemorrhoids, gout, gangrene, fever, respiratory and menstrual problems. John Parkinson, Master Herbalist and apothecary to King James I, raised Comfrey to a new level of well-deserved acceptance. His herbal, *Theater of Plants*, (1640) was the bible for contemporary herbalists and

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physicians of his day. He suggested using the herb internally as an expectorant for lung problems, in tea form to take away fevers and in syrup form for any inward hurts. For external applications, Parkinson cited his findings that the roots were great for gluing together torn flesh and broken bones; a decoction of the root was used to heal hemorrhoids; putrescent ulcers, gangrene and similar problems were also noted to be helped by Comfrey.

Englishman John Josselyn wrote a book titled *New England Rarities Discovered* (1672), which catalogued his observations of early colonial herb gardens; he notes, "Good examples of the Englishman's herbal transplants were the well-known Plantain, Mallow, Nettles, Dandelion, Shepherd's Purse, Wormwood, Knotgrass and the hardy perennial `Compherie with the white flower." In 1812 English physician, Dr. William Withering, recorded various uses of Comfrey in his *Systematic Arrangement of British Plants*, Vol. II. He lists its edibility, but notes that not all animals seek the herb as forage.

People also used Comfrey for more than medicinal reasons-they cooked it in soups, stews and tossed it into salads; farmers cultivated it as fodder for their livestock; and one Englishman, Henry Doubleday, even used Comfrey as a substitute for the stamp glue, gum Arabic, that was difficult to obtain. He was so impressed with this plant, and moved by the suffering caused by the Irish Potato famine of the 1840's, that he established a charitable organization to research the use and cultivation of Comfrey in hopes of ending world hunger. The earlier part of the 19th century found Comfrey tea as one of the best selling herbal beverages, enjoyed for both its flavor and for its healthful benefits.

In the Americas, the Native American Cherokee tribe is known to have used this plant internally for many ailments and early settlers raised the herb in their gardens. The nineteenth-century Eclectic physicians prescribed it for dysentery, cough, diarrhea, bronchitis and menstrual discomforts. Dr. Charles J. Macalister, the scientist who isolated allantoin from Comfrey, tells of a case in Lancashire, England where a physician he knew had an experience of Comfrey's healing powers. He writes, "Three years ago I was called to see a girl with gastric ulcer, haematemesis and severe vomiting and treated the case in the usual orthodox manner. In three weeks the patient was able to return to the mill. When congratulating the mother on her daughter's speedy recovery the old woman said to me: "Do you mind my telling you something Doctor?" On my replying in the negative-"Well," she said, "my girl has never taken a drop of your medicine and all she has supped is pints of strong Comfrey tea." `Since this occasion I have found it an excellent sedative for the gastric mucous membrane.'

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## Location of Comfrey

Comfrey is a member of the Boraginaceae family whose major noticeable characteristics include bluish flowers and bristly hairs and is of the genus *Symphytum*. There are three plant species in the genus *Symphytum* that are relevant to the crop known as Comfrey. Wild, or common Comfrey (*Symphytum officinale*) is native to England and extends throughout most of Europe into Central Asia and Western Siberia. Prickly or rough Comfrey (*Symphytum aspernum*), named for its bristly leaves, was brought to England from Russia around 1800. Quaker, Russian, or blue Comfrey originated as a natural hybrid of *S. officinale* and *S. aspernum*. This hybrid was called Caucasian or Russian comfrey in reference to its country of origin. Cuttings of this hybrid were shipped to Canada in 1954 and it was named Quaker Comfrey after the religion of Henry Doubleday, the British researcher responsible for promoting Comfrey as a food and forage plant. The majority of Comfrey grown commercially in the United States appears to come from these same plants shipped to Canada and derived from the British Bocking Mixture (the place where they were grown is Bocking, England), which is a mix of several clones that differ slightly in plant vigor and general organic structure.

The Comfrey plant is a low, dense shrub whose stems can reach three to five feet in height. Being a perennial herb, it dies back in the winter. The leaves are coarse and hairy; clasping and alternate (without stipules) on the stem and their margin is entire. The size of the leaves ranges from five to twelve inches becoming progressively smaller toward the top of the plant. The flowers are purplish, white or pale yellow and each single one is tubular shaped and about a half inch in length. They come in a cyme (cluster of 15-20 flowers per peduncle) and are scorpioid in their growth pattern. The calyx consists of five sepals, the corolla is five lobed and the flower has five anthers. The nutlet is deeply embedded in the calyx of each flower. The roots are short, thick and tuberous and the entire root system is expansive and grows as deep as eight feet into the ground.

The plant requires deep, though not necessarily good, soil for cultivation. Productivity is not very sensitive to soil pH, but highest yields occur on soils with a pH of 6.0 to 7.0. The ideal planting times are in the spring and Comfrey is best propagated by division, not seed. It produces its highest yields in full sunlight and under cooler conditions, though, it is drought resistant due to its extensive root system. It prefers moist, fertile soil, but is adaptable to many kinds of soil. Comfrey plantings are known to last indefinitely (more than twenty years) if soil fertility and proper weed control are maintained and are best planted three to four feet apart from one another. Comfrey is a high-protein forage that obtains all of its nitrogen from the soil; therefore, this nutrient must be added to the soil through composting and fertilization. It drives its roots deep into the soil, bringing up calcium, phosphorus and potash, as well as many trace elements.

Diseases are not a serious problem here in the United States. In England, Comfrey rust fungus (*Melampsorella symphyti*) overwinters in the roots and reduces the amount of old plantings harvested, but this disease has not spread to the U.S. due to plant quarantine regulations on the importation of plants or roots. There haven't been any insect problems reported in the U.S. related to Comfrey.

Comfrey is also recommended as a fertilizer in the garden because its carbon to nitrogen ratio is about 14 to 1. When compost is made we are using bacteria to lower the proportion of carbon to nitrogen compounds in order to produce heat. It is compost which makes a garden into a thriving place, too, because it makes the minerals and nutrients that plants need readily available to them. The average ratio of carbon to nitrogen is 10 to 1. Therefore, Comfrey is nearly compost before it goes on the heap! The following is a recipe for Comfrey fertilizer:

“Pick a good sized handful of leaves. Place them in a container with enough water to cover the leaves. Cover and let this cook for 4 weeks in cool weather or 2 weeks in hot weather. Then squeeze the leaves to extract as much juice as possible. Strain and use at a rate of 1/3 cup of comfrey juice to one gallon of water. Use as a foliar feed and soil drench around the plants...the

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smell while it is cooking is strong!"

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## Chemical Constituents

There has been much research and study done (Australia, Great Britain, Africa, USSR, United States) on Prickly Comfrey (*Symphytum asperrimum*) and Quaker Comfrey (*Symphytum peregrinum*) as forage plants due to their high protein content and the fact that Comfrey is the only land plant that takes vitamin B12 from the soil. The entire plant is a good source of vegetable protein, and the green leaves contain vitamins A, C, E, and several B vitamins, including choline, the fat-emulsifying vitamin that helps fight cholesterol deposits. Other ingredients are folic acid, the anti-anemia vitamin, and some B12, which controls the deadly pernicious anemia. The leaves also contain the vital minerals of calcium, potassium, phosphorus, some iron, a little iodine, and many other trace minerals. Comfrey is one of the richest sources of silicon in the botanic world, surpassed only by horsetail grass. On the following pages is a list of the chemical constituents in *Symphytum*, their medicinal actions and where *Symphytum* lands on the list of plants species with the highest amount of that constituent (ppm = parts per million):

[allantoin](#) (leaf) 13,000ppm; (root) 6,000-8,000 ppm-the biological activities are antidandruff, anti-inflammatory, anti-peptic, anti-psoriatic, anti-ulcer, immuno-stimulant, keratolytic, sunscreen, suppurative, vulnerary. *Symphytum* is the number one plant species with the highest amount of allantoin.

[aluminum](#) (root) 237 ppm-the biological activities are anti-silicotic, anti-vaginitic, candidicide, encephalopathic. *Symphytum* does not make the top plant list for this constituent.

[ascorbic-acid](#) (root) 132 ppm-the list of the biological activities of this mineral is about 65 actions long! For my purposes, I would highlight the fact that it is anti-hepatotoxic, anti-inflammatory, anti-hemorrhagic, anti-mutagenic, anti-oxidant, anti-septic, anti-tumor, anti-ulcer, cancer-preventative, diuretic, interferonogenic, uricosuric, and vulnerary. *Symphytum* does not make the top plant list for this constituent.

[ash](#) (root) 140,000 ppm-no biological activities reported. *Symphytum* does not make the top plant list for this constituent.

[asparagine](#) (root) 10,000-30,000 ppm-the biological activities of this mineral are anti-sickling and diuretic. *Symphytum* is the third highest plant species with this mineral.

[beta-carotene](#) (root) 660 ppm-again, the biological activity list is too long to mention, so I will highlight what I see as the most pertinent to this study: anti-carcinomic, anti-leukoplakic, anti-mutagenic, anti-oxidant, anti-tumor, anti-ulcer, cancer-preventative, immuno-stimulant, interferon-synergist, and phagocytotic. *Symphytum* is number fifteen on the top plant species list.

[bornesitol](#) (root)-no amount is listed. There are no biological activities reported for this constituent. *Symphytum* is number three on the top plant species list.

[caffeic-acid](#) (root)-no amount is listed. The biological activities that most pertain to Comfrey use are the following: analgesic, anti-bacterial, anti-cancer, anti-carcinogenic, anti-hepatotoxic, anti-inflammatory, anti-mutagenic, anti-oxidant, antiseptic, anti-spasmodic, anti-viral, cancer-preventative, diuretic, fungicide, hepatoprotective, immuno-stimulant, insectifuge, and sedative. *Symphytum* doesn't make the top plant list for this constituent.

[calcium](#) (root) 11,300 ppm-this mineral is crucial to the formation of strong bones and teeth, proper blood clotting, cancer preventative, anti-atherosclerotic, among many other actions. *Symphytum* doesn't make the top plant list for this constituent.

[carbohydrates](#) (root) 759,000 ppm-there are no biological activities reported, though, these are the building blocks of foods for the body. *Symphytum* doesn't make the top plant list for this constituent.

[carotenes](#) (plant) 6,300 ppm-this is vitamin A and is intrinsically connected to beta-carotenes because one beta-carotene molecule can be converted to two carotenes in the body. Both of these substances are known as liver builders and cleansers. It is helpful in wound healing, anti-oxidant,

protects mucous membranes, anti-cancer, and is known to be non-toxic in any amount. “Many researchers are now saying that people who have a high beta-carotene intake may have a lower risk of cancer.” *Symphytum* is number one on the plant species list to contain the highest amount of this vitamin.

chlorogenic-acid (root)-amount is not listed. The biological activities that most pertain to the use of Comfrey are as follows: anti-bacterial, anti-cancer, anti-hepatotoxic, anti-inflammatory, anti-oxidant, antiseptic, anti-viral, cancer-preventative, diuretic, fungicide, hepatoprotective and vulnerary. *Symphytum* doesn't make the top plant list for this constituent.

choline (root)-amount is not listed. The biological activities that most pertain to the use of comfrey are as follows: anti-cirrhotic, hepatoprotective, ileorelaxant, and lipotropic. *Symphytum* doesn't make the top plant list for this constituent.

chromium (root) 8 ppm-this mineral plays a vital role in the metabolism of glucose in the body. It helps to synthesize cholesterol, fats and proteins. *Symphytum* does not make the top plant list for this constituent.

cobalt (root) 129 ppm-this mineral plays an important role in assisting the body to assimilate and utilize vitamin B12. It participates in the production of red blood cells, boosts the cells ability to assimilate iron and it stimulates the production of enzymes required for a variety of body processes. *Symphytum* is number thirteen on the plant species with the highest amount of this constituent.

consolicine (root)-the biological activities listed are CNS-paralytic, curaroid, myoparalytic and appears to have some toxicity to it. However, note that it doesn't even have a ppm or trace amount after the name-is there so little of this in the root as to barely make the chart? *Symphytum* is number one on the plant species with the highest amount of this constituent.

consolidine (root) 17 ppm-the biological activities listed are CNS-Depressant, CNS-paralytic,curaroid and myoparalytic and they have some toxicity connected to them. Again, I notice the small amount found only in the root. *Symphytum* is number one on the plant species to contain this element in the highest amount.

d-mannose (root)-amount not listed. This is a monosaccharide and plays a role in inducing interferon in the cells which helps in immunity. *Symphytum* is the number nine on the plant species list to have the highest amount of this constituent.

echimidine (root)-amount not listed. This is another one of the toxic alkaloids because its biological activities are listed as hepatotoxic and mutagenic. Again, *Symphytum* is listed as the number one plant species to have the highest amount of this constituent. Note, too, that the amount available in the plant is not listed.

echinatine (root)-amount not listed. There are no biological activities listed for this chemical and *Symphytum* (root) is the number two plant to contain this chemical in its highest amount.

fat (root) 17,000 ppm-there are no biological activities reported. *Symphytum* does not make the top plant list for this constituent.

fiber (root) 72,000 ppm-biological activities listed are anti-diabetic, anti-obesity, anti-tumor, anti-ulcer, cancer preventative, cardioprotective, hypocholesterolemic, hypotensive, and laxative. *Symphytum* does not make the top plant list for this constituent.

GABA (root)-amount not listed. The biological activities are too numerous to repeat here but the ones that are relevant to the usage of Comfrey are sedative, tranquilizer, anti-stress, neurotransmitter, hypotensive, cardiovascular, diuretic, neuroinhibitor, CNS inhibitor, and anti-lethargic. *Symphytum* is number twenty-seven on the top plant species list. glucose (root)-amount not listed. The biological activities that are specific to Comfrey usage are anti-edemic, anti-hepatotoxic, anti-varicose. *Symphytum* doesn't make the top plant list for this constituent.

glucuronic-acid (root)-amount not listed. The biological activities listed here are: antidote (camphor), antidote (morphine), anti-hepatotoxic and detoxicant. *Symphytum* is number eighteen on the top plant species list.

gum (root) 50,000-100,000 ppm. There are no biological activities reported for gum. *Symphytum* is number six on the plant species list.

heliosupine-n-oxide (root)-amount not listed. This appears to be one of the pyrrolizidine alkaloids because of the “n-oxide” attached to the name. *Symphytum* is number one on the plant species list.

hypoxanthine (root)-there are no biological activities reported for this chemical. *Symphytum* is the

number ten on the plant species list.

iron (root) 810 ppm-this chemical is crucial to a healthy immune system because it carries oxygen from the lungs to all other bodily cells and tissues. Among many important bodily functions that are too numerous to mention, one function worthy of note is that it also boosts liver and kidney functions. *Symphytum* does not make the top plant list for this chemical.

isobaneranol (root)-the amount is not listed and there are no biological activities reported. *Symphytum* is the number one plant highest in this constituent.

kilocalories (root) 2,170/kg-there are no biological activities reported and *Symphytum* does not make the top plant species list.

l-arabinose (root)-the amount is not listed and there are no biological activities reported, though this is a gum/simple sugar and therefore an energy provider. *Symphytum* is number twenty-three on the top plants list.

l-rhamnose (root)-the amount is not listed and there are no biological activities listed. It is a gum/simple sugar and therefore provides energy. *Symphytum* is number twenty-three on the top plants list for this constituent.

lasiocarpine (root)-there is not an amount listed. The biological activities present are anti-tumor, carcinogenic and hepatotoxic. *Symphytum* is number one on the top plants list for this constituent.

lithospermic-acid (root)-amount not listed. The biological activities are anti-gonadotrophic, anti-thyroid and cardiotoxic. *Symphytum* is number five on the top plants list for this constituent.

lycopsamine (root)-amount not listed. The biological activity is hepatotoxic and *Symphytum* is number two on the top plants list for this constituent.

magnesium (root) 1,700 ppm-there is a myriad of benefits due to this chemical. The following are only a few of the ones that are more specific to the action of Comfrey: anti-convulsant, anti-inflammatory, anti-lithic, and anti-spasmodic. *Symphytum* is not listed on the top plants list for this chemical.

manganese (root) 67 ppm-there is a myriad of benefits due to this chemical. The ones more closely related to the action of Comfrey are as follows: it is required for the breakdown of protein (of which Comfrey has a lot) and fats and is involved in bone growth and development; it is vital for the proper functioning of nerve health; it stimulates the production of antibodies and phagocytes which fight infection and disease. *Symphytum* is not listed on the top plants list for this chemical.

mucilage (root) 290,000 ppm-the biological activities listed for this constituent are cancer-preventative and demulcent. *Symphytum* is number ten on the top plants list for this constituent.

mucopolysaccharides (root) 250,000-300,000 ppm-there are no biological activities reported for this constituent, but this is a long sugar chain that stores energy. *Symphytum* is number one on the top plants list for this constituent.

niacin (root)-no amount is listed. This is vitamin B3 and is necessary for a healthy nervous system and proper brain function. Among many important functions are the following: anti-convulsant, anti-dermatitic, anti-spasmodic, cancer-preventative, hepatoprotective, sedative. *Symphytum* is not listed on the top plants list for this constituent.

octadecatetraenic-acid (seed)-no amount is listed and there are no biological activities reported for this constituent. *Symphytum* is number two on the top plants list for this constituent.

phosphorus (root) 2,111 ppm-this is the second most plentiful mineral in the body next to calcium and most of it is located in the bones and teeth. It is essential to the proper development of bones, teeth and cells. It helps the body to utilize vitamins and helps to convert food to energy and it is an immuno-stimulant. *Symphytum* is not listed on the top plants list for this constituent.

potassium (root) 15,900 ppm-the cell of the human body contains more potassium than any other mineral and it is essential for the chemical reactions that take place at the cellular level. It is important in the nervous system and works with sodium to maintain the proper acid/alkaline balance in the blood. It is an anti-fatigue and anti-spasmodic. *Symphytum* is not listed on the top plants list for this constituent.

protein (root) 94,000 ppm-there are no biological activities reported for protein. Of course, proteins are the building blocks of life, so this is crucial to the action of Comfrey as a vulnerary. *Symphytum* is not listed on the top plants list for this constituent.

pyrocatechins (root) 24,000 ppm-there are no biological activities reported for this constituent. *Symphytum* is number one on the top plants list for this constituent.

reducing sugars (root) 51,500 ppm-there are no biological activities reported for this constituent. *Symphytum* is number four on the top plants list for reducing-sugars.

riboflavin (root) 7.2 ppm-this is vitamin B2 which helps the body to digest fats, proteins and carbohydrates and convert them into usable energy. Among many of its benefits, it is necessary for cell respiration and growth, it facilitates the use of oxygen by body tissues and is thus vital to the repair of bodily tissues. It is also a cancer-preventative. *Symphytum* is not listed on the top plants list for this constituent.

rosmarinic-acid (leaf) 5,000 ppm-the biological activities that are relevant to the usage of Comfrey are as follows: anti-bacterial, anti-hepatotoxic, anti-inflammatory, anti-oxidant, anti-shock, anti-viral and cancer-preventative. *Symphytum* is not listed on the top plants list for this constituent.

selenium (root)-the amount is not listed. The biological activities that are relevant to the usage of Comfrey are as follows: analgesic, anti-cirrhotic, anti-oxidant, anti-ulcerogenic, cancer-preventative and fungicide. *Symphytum* is not listed on the top plants list for this constituent.

silicic-acid (leaf) 40,000 ppm-the biological activity listed for this is anti-diabetic. *Symphytum* is number three on the top plants list for silicic-acid.

silicon (root) 35 ppm-the biological activity listed is anti-arteriosclerotic. *Symphytum* is not listed on the top plants list for this constituent.

sodium (root) 3,510 ppm-the biological activity listed is hypertensive. *Symphytum* is not listed on the top plants list for this constituent.

stigmasterol (root)-the amount is not listed. The biological activities that pertain to the usage of Comfrey are as follows: anti-hepatotoxic, anti-inflammatory, anti-viral, cancer-preventative, and sedative. *Symphytum* is not listed on the top plants list for this constituent.

sucrose (root)-the amount is not listed. The biological activities that pertain to the usage of Comfrey are as follows: anti-oxidant, demulcent, and vulnerary. *Symphytum* is not listed on the top plants list for this constituent.

symlandine (plant)-the amount is not listed and no biological activities are reported. However, *Symphytum* is number one on the top plants list.

symphytine (root)-the amount is not listed. The biological activity listed is hepatotoxic. *Symphytum* is number one on the top plants list.

symphytocynoglossin (root) 21 ppm-the amount is not listed and no biological activities are reported. However, *Symphytum* is number one on the top plants list.

tannin (plant) 80,000-90,000 ppm-the biological activities that pertain to the usage of Comfrey are as follows: anti-bacterial, anti-hepatotoxic, anti-oxidant, anti-viral, cancer-preventative, hepatoprotective and anti-HIV. *Symphytum* is not listed on the top plants list for this constituent.

thiamin (root) 1.2 ppm-the biological activities that pertain to the usage of Comfrey are as follows: analgesic, anti-cardiospasmic, anti-deliriant, anti-fatigue and anti-neuralgic. *Symphytum* is not listed on the top plants list for this constituent.

tin (root) 6.7 ppm-the biological activities listed are anti-acne and anti-bacterial. *Symphytum* is not listed on the top plants list for this constituent.

viridiflorine (plant)-the amount is not listed and there are no biological activities reported. However, *Symphytum* is number one on the top plants list.

water (root) 862,000 ppm-there are no biological activities listed for water, but it is important to remember that the body cannot function without water. It keeps all the systems functioning. *Symphytum* is not listed on the top plants list for this constituent.

xylose (root)-the amount is not listed. The biological activities are anti-diabetic, diagnostic, and dye. *Symphytum* is not listed on the top plants list for this constituent.

zinc (root) 2.8 pp-the biological activities that pertain to the usage of Comfrey are as follows: anti-arthritic, anti-eczemic, anti-infective, anti-viral, astringent, immuno-stimulant and vulnerary. *Symphytum* is not listed on the top plants list for this constituent.

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## Contra-Indications

The literature is full of warnings to not ingest Comfrey, especially the root, due to the pyrrolizidine alkaloids (hereafter noted as PAs) that it contains. In the past twenty years Comfrey has been linked to four cases of veno-occlusive disease worldwide. However, these cases involved long-term, abusive doses of Comfrey tea (e.g., ten cups of Comfrey tea plus handfuls of Comfrey-pepsin tablets every day for years). “The studies already performed certify that PAs have an acute hepatotoxic effect and a carcinogenic effect with chronic application; therefore, they confirm the opinion stated in the expert textbooks that the hepatotoxicity and carcinogenicity of these PAs is considered proven. Considering this fact, the use of higher constituent levels or an exposure of longer duration are connected with damaging effects, which go beyond the responsible measure of the insights of medical science. This evaluation corresponds to current scientific knowledge, regarding a methodical procedure for identifying carcinogenic substances, and the interpretation of existing reports. The data are scientifically defensible and therefore, sufficient. The demand for further evidence concerning the establishment of risk, before a decision is made, can therefore not be considered.”

Studies done in the United States have found that, “there is extreme variability in the PA content of commercial Comfrey products. Products containing Comfrey in combination with other ingredients were found to contain the lowest alkaloid levels, while the highest levels were found in bulk Comfrey root, followed by bulk Comfrey leaf. Hot water infusions of both Comfrey leaf and root were prepared and also proved to contain PAs; this is contrary to claims by proponents of Comfrey leaf who maintain that it is harmless because its PA levels are low and because PAs are not particularly water-soluble.”

These two articles are echoed throughout the literature in one way or another. The one article that I read which opposes these was by Dr. D.B. Long, Ph.D., M.A. He adequately explains the actions of pyrrolizidine alkaloids and which ones are active in Comfrey. He then goes on to critique two of the major studies done on this topic. The first one was done by the Chemistry Department of the University of Exeter in conjunction with the Toxicology Unit of the Medical Research Council at Carshalton and the Michaelis Nutritional Research Laboratory at Harpenden, England. Their studies consisted of 1) The extraction and purification of the alkaloid for direct injection into rats to determine immediate toxicity, 2) Direct feeding experiments with rats to determine long-term chronic effects, and 3) The determination of alkaloid content in the green leaves of various Comfrey clones. To summarize Dr. Long's critique, he noted that the method used was effective in separating out closely related alkaloid compounds, but is less reliable in giving repetitively reproducible results.

The second study that Dr. Long critiqued was done by Furuya and Araki in Japan. They confined their research to *Symphytum asperrimum* (not the one used medicinally) and they, too, extracted the alkaloids from the plant and fed it to rats. They gave the rats an intravenous injection of 300 mg of the purified alkaloid per Kg of rat tissue and this caused death in approximately 50 percent of the experimental animals. In reference to this Dr. Long notes, “Thus in the case of Comfrey tea if it be assumed that normal methods of infusion could extract just over half the alkaloid that was extracted by 8 hours in a Soxhlet apparatus in the laboratory, each cup of tea could contain 100 micrograms of alkaloid. At this level the consumer could never attain the lethal dose of 300 milligrams/Kg tissue found necessary to produce the acute reaction in rats. Even to consume this quantity it would take a 150 lb. man drinking 4 cups of tea per day a total of 140 years. Furthermore it is known that to produce chronic reactions, sub-lethal doses over a prolonged period are necessary.”

Dr. Long concludes his analysis of the studies by saying that the use of Comfrey as food for mankind or animals does not present a toxic hazard from alkaloids. He notes that extensive use of the herb as forage for animals has failed to reveal any deleterious effects, but instead has had considerable benefits to them. He states again that the alkaloid content is lower when the herb is

used in its wholesome state.

There are some interesting things that I noticed as I researched this herb, of which I will now note. First, there is no definition for pyrrolizidine in the Merck Index (twelfth edition, 1996), nor in the dictionary, nor in my medical dictionaries—the word does not exist in these books. The source in which I found some information was online. Still, none of the literature that I found would make a list of the PAs that are in Comfrey. Even Dr. Duke's database doesn't tell you exactly which ones are the noted pyrrolizidine alkaloids. In studying the chemical constituents list noted in Dr. Duke's database, I could not help but notice a few important chemical activities that are never mentioned in any of the literature that I have read to date.

For example, the following chemical constituents are listed as anti-hepatotoxic, hepatoprotective or otherwise liver-building: ascorbic-acid, found in the root at 132 ppm; beta-carotene, found in the root at 660 ppm; caffeic-acid, found in the root in trace amounts; carotenes, found in the whole plant at 6,300 ppm and one carotene is turned into two beta-carotenes in the body, putting the liver-building potential (when combined with beta-carotene) at 13,260 ppm. Comfrey is the plant that contains the highest amount of carotenes on Dr. Duke's list. To give you a contrast, the carrot, known as a tremendous liver builder, has 673 ppm of beta-carotene in its root. Then additionally Comfrey contains chlorogenic-acid, found in the root in trace amounts; choline, found in the root in trace amounts; glucose, found in the root in trace amounts; glucuronic-acid, found in the root in trace amounts; iron, found in the root at 810 ppm; niacin, found in the root in trace amounts; rosmarinic-acid, found in the leaf at 5,000ppm; selenium, found in the root in trace amounts; stigmasterol, found in the root in trace amounts; tannin, found in the plant at 80,000-90,000 ppm.

Some simple arithmetic puts the liver-building, hepatoprotective chemicals in the root at 1,602 ppm plus the eight constituents listed that are found in trace amounts. The amounts found in the plant and leaf come to a total of 101,300 ppm!

Now, let's compare that to the pyrrolizidine alkaloids, the chemicals noted on Dr. Duke's list as toxic or hepatotoxic: consolicine, found in the root in trace amounts; consolidine, found in the root at 17 ppm; echimidine, found in the root in trace amounts; heliosupine-n-oxide, found in the root in trace amounts; lasiocarpine, found in the root in trace amounts; lycopsamine, found in the root in trace amounts; symphytine, found in the root in trace amounts. For all of these chemicals, *Symphytum* is the number one (or two) plant known to contain the highest amount of this chemical. Nonetheless, if we do our math, we find that the total of PAs is 17 ppm plus the six constituents that are found in trace amounts. We have 102,902 ppm of liver-building, anti-hepatotoxic constituents as compared to 17 ppm of hepatotoxic constituents—not counting the trace amounts found on both sides. Although I am not a chemist, this discrepancy is glaring and needs investigation. My intent is to research this discrepancy.

I also find it interesting that four deaths in twenty years has given the FDA reason to blacklist Comfrey, and yet thousands of people die (or suffer serious and life-threatening side effects) each year from prescription drugs, chemotherapy, misdiagnoses and many other forms of modern medicine. Have we lost the good of reason here? Or do we have a political struggle that is rooted in greed and the lust for power?

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## Formulas and Dosages

The future for Comfrey looks grim, or at least mired in political controversy! I tried to obtain some bulk Comfrey root and leaf at my local health food store and they said that it had been discontinued. In fact, they only had 4 products in the entire store that contained Comfrey: three ointments for external application and one tincture, manufactured by the Herb Pharm, that claimed to have removed the PAs. For its dosage, the tincture recommends 30-40 drops in a little water, two to five times per day. The ointments say to apply externally only as needed. There is the BF&C formula through the Dr. Christopher Herb Shop that contains Comfrey leaf. This is one of two products that I found that is intended for internal use. The recommended dose is two capsules three times daily as a support to promote healthy bone, flesh and cartilage function.

There were many more products containing Comfrey to be found online:

Sun Soaps carries four products, mainly ointments/gels, that contain Comfrey. These are for external applications.

Hilton Comfrey Compress sells just the compress which is produced using the best Comfrey extracts. It is available in two different sizes, sells mainly for use on horses, and can be cut to suit individual use. For external use only.

Comfrey Herbal Anti-inflammatory creme sells just this one Comfrey containing creme. It is for external use only.

Elizabeth's Essentials Comfrey Range sells fourteen products containing Comfrey, all of which are for external application only.

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## Personal Experience

Let me begin with some of my own health history. In 1985 I had major back surgery to repair a badly herniated disc at L4-L5 and a broken bone at L5-S1. The surgeon took out seventy percent of my disc and then took bone from my hip and grafted it to the broken area of my spine. It was fully a year before I felt "normal" again; but I went on to play professional volleyball as well as other things which my surgeon told me would be athletically impossible. A doctor friend told me that I had had an unusual recovery, one out of a thousand, given the type of surgery. Interestingly enough, I took herbs after I left the hospital, though I was uninformed at the time; I just took what was handed to me and left it at that! As the years passed, I found as long as I stayed in great shape athletically my back never bothered me. After my athletic career ended in 1990, I changed occupations to carpentry.

In 1992, I hurt my back at work and was out for three months. I did physical therapy and returned to work full-time, until I hurt it again in 1997. I could never manage to stay in the kind of physical shape I needed (for my back), work full-time as a carpenter-and live life! So my back became progressively weaker until in 1997 it gave out. It was at this point that I became interested in herbs. I knew modern medicine could give me no hope for full recovery, so I began to look elsewhere; in my search I discovered the School of Natural Healing, BF&C and all the wonderful help that is available through natural therapies. In 1997, I was in constant pain, couldn't walk around the block without pain and couldn't bend forward at the hips more than ten degrees. I saw my chiropractor three times a week for a year. Now, in May of 2000, I can walk (even jog!) around the block, work a full day free of pain as a carpenter, and work in my garden; basically I am not hindered from doing the things I want to do in my life.

Comfrey, in the BF&C formula, has been a major part of this process. At first I began only taking BF&C internally; as I learned more, however, I branched out into other avenues of healing. I have done two three-week stints of "The Incurables Routine" for the past two summers and intend to do it again this summer. This, of course, involves drinking Comfrey leaf tea three times a day, taking BF&C internally, as well as BF&C fomentations it at night. I was surprised the first time I did this routine to discover that I felt amazingly strong and energetic throughout the entire process. I look forward to doing "The Incurables Routine" again as it made me feel wonderful!

I grow Comfrey in my garden as well. I have one plant that I know is *Symphytum officinale*; I also have two other plants that I know are not *Symphytum officinale*, as I purchased them before I knew there were different types. I have made and used "Comfrey tea" fertilizer for my garden; many of my plants are healthy and thriving. Though it was smelly, I'm sure that the Comfrey tea played a big part to do in my garden's success.

I've made the "Potassium Drink" recipe, which involves Comfrey leaves fresh from my garden, and had no deleterious effects from the Comfrey ingestion. I drank the whole eight quarts of it in one week and found that the broth was both tasty and nutritious.

In December of 1998 I wrenched my right hip out of the socket; I also discovered I was born with an unformed right hip socket (known as hip dysplasia). This caused another eight months of chronic pain. During that time I took large quantities of BF&C internally (3-4 `00' capsules three times a day), fomented with BF&C, and continued with other therapies-chiropractic, exercises, (semi) mucusless diet, other herbs, and prayer. In the midst of healing my right hip, I took a self-defense course (May 1999). On the first day I sprained my right ribs! Once again, I took massive doses of BF&C (2 `00' capsules every hour for about two weeks) internally, as well as fomentations at night. I had to sit out the second session, but was able to fully participate (carefully) for the remaining three sessions.

I use the BF&C ointment on any cuts or abrasions, of which I receive many in the field of carpentry. I put a glob of ointment on, followed with a bandaid at night; the cut is usually seventy-five percent healed in the morning and fully healed by the following morning. Recently, my husband had a bicycle accident and suffered severe "road rash" on his entire right side. He

had severe abrasions on his right calf, thigh, hip and forearm. We used poultices containing slippery elm and fresh Comfrey leaf at night; during the day we also applied copious amounts of the BF&C ointment. We did not take the ointment off to apply the poultices, but just kept adding more. The wounds have healed without scarring.

I have also had a nagging left knee problem over the past three years that continues to improve and it is nearly gone at the writing of this paper. My chiropractor thinks it's chondromylasia or tendonitis-either way, the therapy is still the same: BF&C!

I expect to be on the BF&C formula for a long time due to the amount of skeletal damage I've experienced in my life. I need to grow disc and bone material in my spine, right hip and left knee. X-rays have shown that I have mild arthritis in my spine as well; interestingly enough, however, my chiropractor could not tell by looking at my x-rays that I've undergone past surgeries. The bones have healed so well that the normal things that show up on x-rays (related to surgery) are not present! Due to the warnings about the pyrrolizidine alkaloids in Comfrey, I have been diligent to herbally protect my liver as well. I use the Barberry LG formula and take Milk Thistle in my morning green drink daily.

In brief summary, my personal use of Comfrey and the historical evidence noting the medicinal uses of Comfrey, have validated many positive healing results. I believe it is necessary for the herbal community to continue research to discover new uses of this wonderful herb and dispel the misconceptions put forth by agencies such as the FDA. I am grateful that Dr. Christopher's has not bent to the pressure of the FDA to remove Comfrey from the BF&C formula.

What a blessed plant Comfrey is; I for one, am grateful to have found it!

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## Contentions with the Comfrey Studies

We sent a large stack of documentation to the FDA and the FTC refuting their claims that Comfrey is harmful. The following is a list of problems we saw in the studies that the FDA and FTC used to make their decision. Click on the #s to find how we responded to them, or follow the links across the top.

Contentions:

- [1.](#) Studies pointing to harmful effects of *Symphytum officinale* were performed with the root which has a higher Pyrrolizidine alkaloid content and is not used internally in Dr. Christopher formulas.
- [2.](#) Studies were performed with extremely concentrated extracts or single constituents of the herb containing higher Pyrrolizidine alkaloid content than the whole plant.
- [3.](#) Studies were performed by injecting plant constituents under the skin or in tissue cultures, exhibiting an unrealistic scenario of this plant's use.
- [4.](#) Many studies cited in literature related to harmful effects of *Symphytum officinale* were performed on related species with higher Pyrrolizidine alkaloids content than *Symphytum officinale*.
- [5.](#) *Symphytum officinale* has been shown to act as a cell proliferant and have analgesic effects in clinical studies.
- [6.](#) *Symphytum officinale* has been clinically proven not to have carcinogenic effects.
- [7.](#) *Symphytum officinale* contains hepatoprotective constituents that help protect the liver from damage, these substances are not included in tests of this plant and would effect the outcome of these tests.
- [8.](#) *Symphytum officinale* has been used as a feed and forage crop for centuries without incident.
- [9.](#) *Symphytum officinale* has demonstrated its safety through thousands of years of documented traditional use.
- [10.](#) *Symphytum officinale* use has low incidence of hepatic problems.
- [11.](#) Case studies that seem to show harmful effects from consuming *Symphytum officinale* reflect poor application of the scientific method.

## Comfrey

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12. *Symphytum officinale* has demonstrated its safety through 43 years of use in Dr. Christopher's formulas without incident.

## Response to #1

1. Studies pointing to harmful effects of *Symphytum officinale* were performed with the root which has a higher Pyrrolizidine alkaloid content and is not used internally in Dr. Christopher formulas.

J Pharm. Sci 1994 May;83 (5):649-53

Determination of pyrrolizidine alkaloids in commercial comfrey products demonstrates that products containing comfrey leaf in combination with other herbs contained the lowest alkaloid levels (0.1 ppm) of the products tested.

*The leaves have the lowest alkaloid content of the plant parts tested. The leaf is the part used internally in Dr. Christopher's herbal combinations.*

Gastroenterology 1985 Apr;88(4):1050-4

Hepatic venocclusive disease associated with the consumption of pyrrolizidine-containing dietary supplements.

The case discussed in this article described a 49 year old woman who ingested large amounts of *Symphytum officinale* root over a long period of time.

*In this case the woman ingested large portions of the root for an extended period of time. The root is not used internally in Dr. Christopher's herbal combinations.*

J Appl Toxicol 1983 Jun;3(3):127-30

Mutagenic effects of aqueous extracts of *Symphytum officinale* L. and of its alkaloidal factions. This study was done on alkaloidal factions obtained from infusions of *Symphytum officinale* L. root and not the leaf. It shows that isolated constituents of the root may be toxic but fails to demonstrate the root is toxic in its whole form

*This study shows that isolated constituents of the root can be toxic but fails to implicate the leaf which is used in Dr. Christopher's herbal combinations.*

Experientia 1982 Sep 15;38(9):1085-7

Pyrrolizidine alkaloids from *Symphytum officinale* L. and their percutaneous absorption in rats. This study demonstrates that pyrrolizidine alkaloids are not readily absorbed through the skin and therefore, are not of significant concern when applied in this manner.

*The alkaloids in comfrey are not readily absorbed through the skin, external application of a crude preparation (cream or ointment of the whole plant) of the root is not harmful.*

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## Response to #2

2. Studies were performed with extremely concentrated extracts or single constituents of the herb containing higher Pyrrolizidine alkaloid content than the whole plant.

Nat Toxins 1996;4(4):163-7

Analysis, separation, and bioassay of pyrrolizidine alkaloids from comfrey (*Symphytum officinale*).

Demonstrates that some parts of the plant contain higher pyrrolizidine content than others (the leaf containing the lowest). And that the effect of the alkaloids individually is different from that of the alkaloids in the whole plant extract.

*Alkaloids react differently in the body when they are isolated. Many studies are done on the effect of these isolated constituents, but the results cannot be used to determine safety of the whole plant.*

Int J Exp Pathol 1993 Apr;74(2):211-7

Hepatocyte membrane injury and bleb formation following low dose comfrey toxicity in rats.

This study attempted to prove the toxicity of low level doses of comfrey by using isolated Pyrrolizidine alkaloids extracted from the plant.

*This study was not done on the safety of the entire plant, only certain isolated constituents. This study should not be used to determine the toxicity of the whole plant.*

T. Furuya and K. Araki (1968) Studies on Constituents of Crude Drugs. (Alkaloids of *Symphytum officinale* Linn. Chem. Pharm. Bull. 16 1512-2516

Pharmacological tests with rats showing symphytine to have a LD50 of about 300mg/kg; that in an intravenous injection of 300 mg of the purified alkaloid per Kg of rat tissue caused death in approximately 50% of the experimental animals. Thus in the case of comfrey tea, it is to be assumed that normal methods of infusion could extract just over half the alkaloid that was extracted by 8 hours in a Soxhlet apparatus in the laboratory, each cup of tea could contain 100 micrograms of alkaloid.

*At this level the consumer could never attain the lethal dose of 300 mg/Kg tissue found necessary to produce the acute reaction in rats. Even to consume this quantity it would take a 150 lb man drinking 4 cups of tea per day a total of 140 years. This scenario is unrealistic. Comfrey leaf is not toxic unless copious quantities are consumed for long periods of time.*

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## Response to #3

3. Studies were performed by injecting plant constituents under the skin or in tissue cultures, exhibiting an unrealistic scenario of this plant's use.

Planta Med 1989 Dec;55(6):518-22

Studies on the effect of alkaloid extract of *Symphytum officinale* on human lymphocyte cultures. This study used an isolated extract of comfrey on human lymphocyte cultures to show toxicity.

*This study fails to demonstrate the whole herb's toxicity and was not administered as a decoction or infusion (the way comfrey is realistically consumed).*

J Natl Cancer Inst 1979 Aug;63(2):469-72

Injection of hepatic tumors in rats by senkirkine and symphytine.

This study was conducted on 3 groups of 20 rats group 1 injected with an extract of senkirkine, group 2 with symphytine (an alkaloid of comfrey), and group 3 with a NaCl solution. The rats were predisposed to liver problems (male inbred ACI rats). All group 1 rats survived for more than 290 days after the start of injections, and 9 of 20 rats developed liver cell adenoma. All group 2 animals survived for more than 330 days after the start of injections. Of 20 rats 4 had liver tumors, 3 had hemangioendothelial sarcomas, and 1 had liver cell adenoma. The control group 3, had no liver tumors.

*This test demonstrated that injected isolated constituents may be harmful. However, it failed to show the toxicity of the whole plant administered realistically.*

Hirono I Mori H, Haga M: J Natl Cancer Inst. 61(3):865-868

Carcinogenic activity of *Symphytum officinale*.

Rats were injected with isolated alkaloids from *Symphytum o.* resulting in mild liver damage compared to a control group.

*This study proved that in order to produce even a limited amount of liver damage in a rat it is necessary to administer the equivalent of several times its own body weight of comfrey leaf (when the results are expressed as fresh material) or at least 1% of its diet as comfrey root. It is difficult to envision a situation in which a human subject would assimilate an equivalent amount of comfrey over a similar time span. Deaths in the rats occurred at levels which for humans would be equivalent to the alkaloid from 19,880 leaves or 28 times his body weight. So to extrapolate the results of Hirono's study to humans, it would be necessary to eat three ounces of fresh comfrey leaf every day for 56 years to induce any liver damage.*

T. Furuya and K. Araki 1968 Chem. Pharm. Bull 16 2512-1516

Studies on constituents of crude drugs specifically alkaloids of *Symphytum officinale*

Pharmacological tests with rats showed symphytine to have a LD<sub>50</sub> of about 300 mg/kg or rat tissue when given intravenously.

*At this level the consumer could never attain the lethal dose of 300 mg/per kg of tissue found necessary to produce the acute reaction in rats. Injecting plant constituents does not have the same physiological effect on the body as drinking an infusion (tea) of the plant.*

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## Response to #4

4. Many of the studies cited in literature related to harmful effects of *Symphytum officinale* were performed on related species with higher Pyrrolizidine alkaloids content than *Symphytum officinale*.

Pathology 1991 Jan;23(1):35-8

The effects of comfrey derived pyrrolizidine alkaloids on rat liver.

Pyrrolizidine alkaloids extracted from *Symphytum uplandicum* were used to show the toxicity of comfrey. This Russian comfrey species is not sold or distributed in herbal formulas.

*None of Dr. Christopher's original formulas include Symphytum uplandicum, or any other Symphytum species other than officinale.*

Experientia 1980 Apr 15;36(4):377-9

Structure and toxicity of the alkaloids of Russian comfrey (*Symphytum uplandicum* N.), a medicinal herb and item of human diet.

Alkaloids extracted from this related species exhibited chronic hepatotoxicity in rats. This study was not performed with the whole herb of the correct species.

*None of Dr. Christopher's original formulas include Symphytum uplandicum, or any other Symphytum species other than officinale.*

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## Response to #5

5. *Symphytum officinale* has been shown to act as a cell proliferant and have analgesic effects in clinical studies.

Roum Arch Microbiol Immunol 1993

Action of some proteic and carbohydrate components of *Symphytum officinale* upon normal and neoplastic cells.

Crude water extracts of symphytum officinale stimulated in vivo proliferation of studied neoplastic cells. Therefore, *Symphytum* is an effective cell proliferant.

*Traditional usage of comfrey as a cell proliferant is substantiate with this clinical trial.*

F.M. van den Dungen et al. Planta Med 57(2) 1991

Inhibition of Compliment Activity by High Molecular Compounds of *Symphytum officinale*.

Common comfrey, of *Symphytum officinale* L. is well known for its wound healing properties. At the site of a dermal wound, activation of complement is one of a complex series of processes.

Since complement factors upon activation exert important immuno-regulatory effects, modulation of complement activity may promote the healing of wounds.

*Traditional usage of comfrey as a cell proliferant is substantiate with this clinical trial*

R.S. Goldman et al. Fitoterapia LVI(6) 323

Wound Healing and Analgesic Effects of Crude Extracts of *Symphytum officinale* in Rats.

The crude extract of *S. officinale* (comfrey) afforded the cicatrization process by increasing at first the number of fibroblasts and in a later phase, the number of collagen fibers in experimental lesions produced in rats. The number of blood vessels was also increased on the seventh day of treatment. On experimental edema induced by carrageenin in rat's paws, the crude extract at doses of 150 and 300 mg/kg showed no effect. Analgesic effect was seen with doses of 300 mg/kg.

*Comfrey's use as a burn remedy is substantiate in this clinical trial.*

## Response to #6

6. *Symphytum officinale* has been clinically proven not to have carcinogenic effects.

Ames, B. PhD. et al. 1987. Science 236:271

Study of carcinogenity of naturally occurring and man made substances. Comparative risk assessment.

Dr. Bruce Ames determined in his clinical study that a water infusion (tea) made from *Symphytum officinale* had the same carcinogenic effect as 1 peanut butter sandwich (aflatoxin), ½ the risk of consuming a raw mushroom (hydrazine), ½ the risk of consuming a diet soda containing saccharin. And about 1/100 of the risk of consuming a standard beer or glass of wine (ethyl alcohol). Dr. Ames also estimated that comfrey/pepsin tablets carry up to 200 times the risk of comfrey tea.

*Symphytum officinale* is as safe as many common food items.

## Comfrey

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## Response to #7

7. *Symphytum officinale* contains hepatoprotective constituents that help protect the liver from damage, these substances are not included in tests of this plant and would effect the outcome of these tests.

James Duke; United States Department of Agriculture Phytochemical and Ethnobotanical Database. (Search for all active constituents of *S. officinale* was conducted and included later in this report).

Search for Hepatoprotective and Anti-Tumor principles of *Symphytum officinale*

This data base shows at least five substances in comfrey that have a protective effect on the liver; they are Caffeic acid, Chlorogenic acid, Glucuronic acid, Lasiocarpine, and Rosmarinic acid.

Caffeic acid has anti-hepatotoxic, anti-tumor, and hepatoprotective actions. Chlorogenic acid which has anti-cancer, anti-hepatotoxic, anti-mutagenic, anti-tumor, and hepatoprotective actions.

Glucuronic acid is a anti-hepatotoxic, Lasiocarpine exhibits anti-tumor actions, and Rosmarinic acid is a anti-hepatotoxic.

*Since Symphytum officinale has been used as animal feed and forage for centuries with safe results, it is likely that these hepatoprotective and anti-tumor qualities of the plant act to counter the plant's Pyrrolizidine alkaloids content. This is why the most damaging studies done on comfrey were conducted using Pyrrolizidine alkaloids isolated from the plant while disregarding the plant's significant liver protecting constituents that would have a profound effect on the results of the study.*

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## Response to #8

8. *Symphytum officinale* has been used as a feed and forage crop for centuries without incident.

Cheeke PR, Carlsson R: Nutritional reports International 18(4):465-472, 1978

Evaluation of several crops as sources of leaf meal: Composition, effect of drying procedure and rat growth response

This study suggests benefits of consumption of *S. officinale* and does not implicate comfrey as a liver toxicant.

*Comfrey used in its whole form is safe.*

Lawrence D Hills Comfrey- Past present and future 1976

A test at the Fujisawa Farm of the Nihon Agricultural University in Japan showed that adult pigs do well on 8 to 9 kg (17-19 pounds) of green comfrey leaf per day. This means replacing 30 percent of the meal with cut comfrey. The University report states a noticeable result was the improved health of the pigs fed on comfrey not only from the allantoin which banished scouring but better mineral balance. This was also observed an the Devon farm institute..

*Comfrey has been used as a feed crop for animals without incident, these were animals that consumed large amounts of comfrey for most of their lives.*

Lawrence D Hills Comfrey- Past present and future 1976

Experience gained over many years with feeding cattle and horses on comfrey in different parts of the world has failed to produce any evidence of an acute reaction. Equally well there is an absence of any direct evidence of liver tumors of the chronic reaction in comfrey fed animals having been observed in slaughter houses.

*No liver problems resulted in feeding farm animals comfrey in large amounts.*

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## Response to #9

9. *Symphytum officinale* has demonstrated its safety through thousands of years of documented traditional use.

Comfrey is referred to in Materia Medica written for thousands of years. Dioscorides (200 AD), Lobelius (1570), Sarracenus's version of Dioscorides (1596), Gerald's Herbal (1597) and The Pharmacopeia Londinensis Collegarum (1668) all point to the extensive use of *Symphytum officinale* as a herbal remedy. All also mention that *Symphytum officinale* was already established as a herbal remedy for some time. None of these early pharmacopeias and Materia Medicas give warnings of the herb's use and generally regard comfrey as a safe plant with high value.

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## Response to #10

10. *Symphytum officinale* use has low incidence of hepatic problems.

Human Toxicology, PC Anderson and AEM McLean

Hepatotoxic effects of *Symphytum officinale* questioned in clinical setting.

The Laboratory of Toxicology in London, sent volunteers a questionnaire regarding how long they had used comfrey and the amount and form in which the herb was taken. At the same time the participants underwent liver function tests at the local hospital. There was a considerable variation in how the herb was taken and in what form. Nonetheless, results of the tests were found to be within the normal range with the exception of a slight elevation in bilirubin levels in two of the participants. There was no evidence of liver injury in this sample, even for those who had consumed the herb for twenty years.

*Comfrey is safe when consumed in its whole state. The people in this study were repeat consumers of comfrey for long periods of time without ill effects.*

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## Response to #11

11. Case studies that seem to show harmful effects from consuming *Symphytum officinale* reflect poor application of the scientific method.

Mee Ling Yeong et al J. Gastroenterology and Hepatology 5,211-214 1990

Hepatic veno-occlusive disease associated with comfrey ingestion

A 23 year old man was diagnosed with veno-occlusive disease after going to the hospital for a fever and malaise. Diuretics were administered and a shunt employed to relieve liver congestion.

The man died of liver failure seven days after installing the shunt. The liver was not biopsied to see if Pyrrolizidine alkaloids or their metabolites were present. His friends reported that he had consumed comfrey 1-2 weeks prior to his hospitalization. It was not determined what species or if indeed it was comfrey at all. It was also not determined if there were other Pyrrolizidine alkaloids sources present in his diet. Also it was not determined if his habit of binge eating and consumption of marijuana caused deterioration of the hepatic cells leading to this problem.

*Nothing was done to determine if indeed he had ingested Symphytum officinale. The plant cannot be implicated on here say or second hand accounts of its usage.*

Nancy Bach, MD et al Am J Med. Volume 87 page 97 July 1989

Comfrey Herb Tea-Induced Hepatic Veno-Occlusive Disease

A 47 year old woman had consumed ten cups of comfrey tea a day along with handfuls of comfrey/pepsin tablets. This amount of consumption went on for more than one year. Four years later, she developed a liver problem diagnosed as veno-occlusive disease. Although the woman in the study consumed very large amounts of a plant, it was not determined exactly what species of *Symphytum* or indeed, if it was even a *Symphytum* species at all through current tests. She also had symptoms of abdominal pain and fatigue before using comfrey. These are both symptoms of veno-occlusive disease that she may have had before consuming the plant. This is not determined in this case. Therefore, the case study should not be used in reference to the hepatotoxicity of *S. officinale*.

*This woman had symptoms of veno-occlusive disease before consuming the plant. It cannot be determined if the plant worsened, caused, or had anything to do with her condition.*

Ridker PM, et al Gastroenterology 88:1050-4 1985

Hepatic Venocclusive disease associated with the consumption of pyrrolizidine containing dietary supplements

A 49 year old woman consumed six capsules of comfrey-pepsin tablets daily for four months.

For six months she had taken Mu-16, which also contained Pyrrolizidine alkaloids. The researchers failed to investigate. The pyrrolizidine alkaloids in the Mu-16 tea could have been the toxic Macrocyclic diesters or another alkaloid. Yet, comfrey was implicated in this incident.

There is also evidence that comfrey-pepsin tablets contain higher amounts of Pyrrolizidine alkaloids than other comfrey containing products.

*Comfrey was not the only source of pyrrolizidine alkaloids in his diet. Comfrey cannot be implicated in this case study.*

Weston CFM et al. Brit Med J July P 183 1987

Veno-occlusive disease of the liver secondary to ingestion of comfrey

A 13 year old boy was treated for liver enlargement and abdominal swelling with Prednisolone and Sulfasalazine. This treatment seemed to help and the medication was discontinued. He was then treated with acupuncture and comfrey root tea. Exact strength and frequency are unknown but the course of treatment lasted more than two years. A flare up of Crohns's disease led the doctor to prescribe more Prednisolone. After two years he was again hospitalized with fever, abdominal pain, and swelling. Liver biopsy showed veno-occlusive disease.

*Although at the time all other known factors were ruled out, further investigation shows that the medications he was taking could have been the major culprits in this case. Prednisolone can cause abdominal pain, gastrointestinal upset, and damage the liver. This liver damage (brought on through hypokalemic alkalosis) would have weakened his liver and made him more susceptible to liver toxicity. Sulfasalazine can cause headache, nausea, vomiting, gastric distress, and hepatitis. This indicates that people with a history of liver toxicity should not use Prednisolone and Sulfasalazine together.*

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## #12

12. *Symphytum officinale* has demonstrated its safety through 36 years of use in Dr. Christopher's formulas without incident.

There have been no reported incidents of serious side effects from people using Dr. Christopher's formulas containing comfrey. We have found this herb to be safe and effective. Two incidents of slight skin irritation have occurred but these cleared up after discontinuing use of the product.

Testimonials of the safety and effectiveness of Dr. Christopher products containing comfrey appear later in this report.

*With thousands of people consuming Symphytum officinale everyday and with no incidence of the plant causing serious harm, it is obvious that it is safe for human consumption.*

## Comfrey

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## Comfrey Testimonials

This is only a small sampling of the stacks of testimonials we have on Comfrey.

Testimonials of the safety and effectiveness of products containing *Symphytum officinale*.

### *S. officinale* effective for sprains and breaks

August 9, 2000 ~ This is my comfrey story. I'll try to be brief and concise. I began to study and research herbs and so called alternative health therapies several years ago, both as a consequence of publishing my own newspaper called "Active Voice," which allows all people equal access at unedited, mass communication, and as a result of a friend coming down with liver cancer and being told to go home and die by medicinal "experts." I make that intro only to explain that my quest to learn began in earnest and that my studies and research have become deep and serious. This past year I have been running a series in my newspaper called "Kicking Cancer's Ass," which is incorporating all I have learned as well as inviting information from others.

Over the course of my studies and research on health and healing, many of the herbal concepts and information were introduced to me via videotapes by Dr. John R. Christopher and Dr. Richard Schultze, thanks to a man named Sam Biser who put the tapes together. This is where I first began taking notes on comfrey and its curative powers. It is far from the only source I have come to trust which advocates the usage of comfrey and also emphasizes comfrey's abilities to heal.

As a person who has always been physically active, involved in playing sports with much running and jumping and physical contact, I have often and consistently suffered sprains in my ankles. I have been lucky to never suffer any breakages, but I have experienced severe, as well as minor sprains, ranging from those which have required air casts and usage of crutches to those which can be brushed off easily.

Earlier this year while playing basketball I came down on someone's foot and my own ankle rolled and suffered tremendous pain. My immediate reaction was more than simply "here we go again" because I genuinely thought I heard something snap as I went down. When I got up and hopped and walked gingerly around a bit it seemed to be similar to past twists or sprains I had suffered. It didn't seem to be as bad as the original pain indicated, or as bad as the sound made me fear, so I moronically began playing again until our game time was over for the day about an hour later. Having experienced such sprains before I should have known enough to take care of it then or at least afterwards that night. But I didn't, and the next morning my ankle was roaring tremendous pain and I was unable to walk.

As I thought about how dumb I was I also thought about all the times I had heard and read about comfrey being used to heal sprains and breaks back in the "days" of the Native Americans, and also by herbalists such as Christopher. I remembered not just the mere fact that comfrey was good, but that the key ingredient was allantoin, which somehow served to helped bind and mend tissue and even induce regeneration of new cells. We had grown comfrey in our herb garden and had some already cut and ready for tea in supply. And so I began that day my own experiment on myself with comfrey.

Every couple hours I would make a pot of comfrey tea, then douse my badly sprained ankle with wash cloths soaked in the tea. I had a strange feeling that as long as my ankle wasn't broken, which I felt strongly that it wasn't, that this might actually work better than paying a large sum of money to have somebody take a picture of my wounded ankle and tell me to stay off it for awhile. By night time the ankle was still certainly very discolored and not ready to walk on comfortably,

but I did notice a decrease in the terrible pain that was there in the morning. Perhaps it was natural due to the span of time. Perhaps it had something to do with the comfrey, which in many journals has been touted as having painkilling properties.

When I went to bed I was thinking it would be nice to be able to allow the comfrey to work on my ankle as I slept. But it would be too messy and the heat from the tea would die out too quickly if I wasn't awake to keep refreshing the dressings. I remembered, though, that the key ingredient, the allantoin, was also contained in the aloe vera plant. I decided to let the allantoin work overnight by applying a homemade ointment of aloe vera all around my wounded area.

Even though I have read in a few places that comfrey, when applied externally, does not penetrate to the inside, I didn't totally believe it because it didn't totally make sense to me. Surely if one has a hot tea being soaked and rubbed and allowed to rest on their skin, at least some of that heat and that water, and whatever content that water holds with it, is going to get through open pores and make their way into the system. I know these are not scientific thoughts or suggestions but they were mine and I should hope that ultimately there will never be an attempt by bureaucracies and governments to shackle individual thought and reasoning and choice which, after all, oftentimes leads to new discovery and progress and evolvment and positive growth.

The next morning, after allowing the aloe vera ointment to work on my ankle during the night, and after that day long of comfrey tea dousing, my ankle felt unbelievably better. I could not walk comfortably without limping but the pain that had been screaming at me a day earlier was almost completely gone. I was amazed and I decided to give my ankle another day of comfrey tea dousing, which I did. I also applied another round of aloe vera ointment that night. The next day I was almost walking normally. On the third day, after again using comfrey, I went to work at UPS where for five to six hours a night I put much physical strain and wear on my legs, my ankles, my whole body. There was soreness as I worked this night and certainly I was not totally healed at this point, but I absolutely believe if I hadn't used the comfrey and the aloe vera I would have had to stay away from work, as well as other things, for a much, much longer period of time. I do believe going to work slowed and retarded the healing process. For a few days, especially after getting home from work my ankle was sore and hurt. But the soreness and pain was minor, all things considered, and I never went backwards in my healing and I was back playing basketball a week later with typical energy and zest.

I don't pretend to be an expert at anything. It is my wish while here to learn and grow and evolve in a positive direction, and hopefully somehow prove to be positive for others as well. I question the motives and the sensibility and the logic of those who would try to control free choice and the dissemination of educational information regarding health and healing. The healing of my ankle, and my own attribution of that healing to the curative powers of comfrey may possibly be made in error. But I doubt it. I believe the comfrey alleviated my pain and speeded my recovery. And I didn't pay money to do it. I just used my mind and my heart and one of nature's gifts that was at my disposal. Perhaps that is why some are worried about people using comfrey. Perhaps easy access of the medicine poses a threat to those who care most about money and power, even in matters of health and healing, and in matters of life and death. Perhaps those who would represent inanimate entities which try to regulate such choices might be better off realizing they are essentially, ignorantly putting shackles on their own individual minds, hearts and souls.

### *S. officinale effective as a cell proliferant*

Just another story to substantiate the use of comfrey. I was slicing some vegetables with a big butchers knife and I accidentally sliced my pointerfinger along with it. It was a nice slanted incision and fairly deep. I immediately washed it and put some X-ceptic liquid (which contains comfrey) on it. Then I used the BF&C ointment (which also contains comfrey) on it and covered it with a bandage. By the next day, I could use my finger as if nothing happened. By the second day, my finger was starting to seal from the inside out of the cut. By the fourth day, I did not need the bandage anymore and used the finger freely. This combination of herbs is unsurpassed in its variety of healing situations.

Regards,

Pauline Esposito

*S. officinale effective treatment for soft tissue damage:*

I had two accidents in 1998, in which comfrey helped more than any traditional treatment offered by MDs. (In fact, all MDs offered were pain killers and physical therapy, which only made the injuries worse.)

In 1998, I had a trip and fall accident at work, Florida Power & Light, in Miami. I tripped on an uneven sidewalk there, and hit the concrete on both knees, one hand, and one elbow. I had several injuries shoulder, elbow, left hand, both knees, and foot. (My left hand is still quite disabled in the last 2 fingers.) I couldn't move or use my little finger on my left hand and was sure it was broken, I couldn't sleep well because my shoulder was in excruciating pain, and I had a bad limp because of my right foot and knee. I also have several pits and scars on both knees and my right forearm.

Work was incredibly painful- I was working in a foam collar, with my only good hand supporting my head. After not being able to sleep well for months, on the Labor Day weekend, I finally decided that the only way I could get care would be to use my own brain. I studied the two herbal reference books I found, and discovered comfrey. I went to "Bread of Life" health food store in Fort Lauderdale, and bought a pre made lotion with comfrey, and also some bulk comfrey to make other infusions and lotions at home.

I was amazed at the results- in less than 3 weeks, I was able to hold my head up without the collar, and my shoulder returned to near normal. The other injuries were helped somewhat, as well, although not as dramatically.

Of course, after all the time missed from work, Debbie Griffin and Ron Zabowski, the managers at Florida Power and Light, terminated my employment. I retained an attorney named "Mandell" from Miami, who did nothing for a year, then told me he couldn't help me, and I was out of cash.

I ended up living with my parents in Wisconsin, and about a year later, the County of Milwaukee started paying for my medical care through its GAMP program. (In a way, this was only fair the government had let the insurance companies run wild, so in the end, the government paid for my care). It was at this time, in 1999, that a second set of x rays taken in different positions showed the cause of my neck problems- the radiologist found a healed fractured neck. I'm sure that comfrey helped with the heal of that fracture in the previous year.

Although the physical therapy in Milwaukee didn't help much, and I had basically been an invalid for over a year because of myofascitis, I finally found a chiropractor/cranial sacral therapist who fixed me up in a few weeks. Once again, I was saved by alternative medicine. I am now working full time, and am gradually becoming more able to live my life as a normal person (I'm even able to do a few jumping jacks!).

I credit my recovery both to herbal medicine and chiropractic/cranial sacral treatments. (In addition to the comfrey, replacing ibuprofen and darvocet with valerian root helped the pain better, and the valerian stopped the spasms which were spreading the myofascitis. Horsetail also helped with providing silica and selenium for soft tissue damage, etc.) If anything, traditional medicine only spread my myofascitis with their exercises, causing my muscles to spasm even more, thus tearing other soft tissues around them (this is how myofascitis spreads and eventually becomes fibromyalgia). Their pain killers/ anti inflammatories/ muscle relaxers made my body so toxic that I gained over 60 lbs. in one year, which is weight I still haven't lost - when I try to lose it, I get symptoms of system toxicity (headaches, dizziness...).

All the best,

Pam Rotella

*S. officinale effective healer of connective tissue*

I have used comfrey is many ways as an external oil in conjunction with emu. All the comfrey is purchased through "HerbPharm" who removes the harmful agents. It works remarkably well for the treatment of psoriasis and excema. I would really hate to see the use of comfrey to be regulated when it has so many applications. It is also known as the bone knitter. Used with emu

oil I have found this to be true. We need our choices as to the fate of our bodies. They are ours.

Sincerely,  
Soapmstr@aol.com

*S. officinale useful in treating fractures, and other injuries.*

We use Dr. Christopher's BF&C containing comfrey at our house almost every day. We put it on wounds, scars, varicose veins, skin problems and hernia's in its ointment form. My children take the capsules in large quantities when they injure themselves or break a bone. After an accident last year that scraped one son up pretty bad, he took an herbal bath in BF&C. I have to keep it handy all the time because a couple of my children refuse to go to scout camp, girls camp or on a trip without having a bottle of capsules handy in case they have an injury. They know how fast they will heal if they have this great product. They also know that it will save them a trip to the doctor. We use the ointment instead of stitches. The tea and capsules instead of a cast for breaks, and to help with sprains. My son Jordan has learned that if he used BF&C properly, a sports injury will not keep him out of the next game. He had a bad goalie take out his knee in a soccer game last year and we were afraid that he may need medical help. He refused to go to the doctor and started taking large quantities of BF&C. The coach just couldn't believe it when I said he could play in the game the next Saturday.

Sincerely,

Natalie S. Petereit, MH

*S. officinale effective for soft tissue damage.*

I would hate to see the government decide to make you change the formulas with comfrey in it, just because someone, somewhere along the way didn't use prudence and wisdom and abused the use of comfrey. My experiences and my family's experiences have been numerable with products containing comfrey and not once have we had a problem.

My husband and I have been using the Herbal Tooth Powder for over a year now and have had great success. I had a tooth that was causing me a great deal of trouble and I was afraid I would have to have it taken out. Since using the powder I have been able to keep it and the sensitivity has almost disappeared completely. My dentist says my teeth & gums look great and healthy.

My husband had a bad cold that went into his chest and developed a cough we could not seem to get rid of. He took the Resp free and within a week his cough was gone and his lungs were back to normal. We use the Resp free now whenever someone in the family gets a chest cold and it helps the body repair itself.

BF&C has been a great blessing in our home. I sliced the top of my knuckle off and used BF&C ointment on it and within 1 week the skin had healed and I was able to use my thumb again. My daughter (who is a piano performance major in college) jammed her finger while playing volleyball and needed to be healed quickly due to her need for practice. We soaked the finger in comfrey "tea" and alternated with ice cold water. After a couple of hours we put a poultice of BF&C around the finger and by morning she had complete use of her finger. This same daughter also developed an irritation in her wrist (similar to carpal tunnel syndrome) from her 4 6 hours of practice a day. We got a brace and started using the BF&C ointment on her wrist and she has no problems with her wrist now.

Our family also uses Calc Tea and Anti plague with great success, also. Many skeptics will say that the successes we have had with these products is due to the treatments and time, not due to comfrey. But I know what works for my family and I have seen the healing take place. We have never had any problems with any of these products and I would hate to see the formulas change just because someone used comfrey unwisely. The Dr. Christopher products are safe and I am secure in this knowledge, from my own studies with herbs and from personal and family use.

Sincerely,

Karen Thomas  
Kempner, TX

*S. officinale used without side effects*

Hi Nathan Our herb baby is wonderful and growing like a weed!! She has gained 6 pounds in her two months of life, and has grown an inch already. Must be the good mother's milk with all the herbs eh??? about the comfrey: I have used the comfrey burn paste on some serious steam burns, with no scarring, and it took the pain out almost immediately!! I also use it regularly in many of my formulas with no negative results what so ever!! Get a life people and leave god' gifts to mankind alone. If it weren't for comfrey and many other herbs I wouldn't be here today! Hope this is helpful, Nathan. If any more details are needed, let me know. Keep in touch!!

Vicki Morrison

*Comfrey effective treatment for tissue damage:*

We have had only positive experiences with comfrey combinations.

When I did my thesis for my Master Herbalist Certificate I did it on Comfrey because of the experiences we had.

Early one morning about 4 years ago our son brought our grandson over with his hand wrapped in a towel. Our grandson (about age 2) had gotten a hold of a steak knife and had cut the end of his finger so that only the nail was holding the tip to the finger. We packed the cut with BF&C ointment and bandaged it tightly. They left the bandage on for 2 days without disturbing it and when they took it off the skin had sealed up and there was just a pink line where the cut had been. They covered it with more BF&C and bandaged it again. It was totally healed without a scar within a week. Our grand kids now call BF&C ointment "glue" because of how well it heals their cuts and scrapes. We used BF&C fomentations externally and tea internally over a period of a few months to successfully heal a hernia.

Anti plague has stopped many a cold from becoming a problem. We have used comfrey leaves as the basis for a morning green drink and it only made us feel better. We feel that the most important herbs to have for emergencies are comfrey and cayenne.

Margaret Thompson  
West Valley City, UT

*S. officinale effectively used to treat cornea tear.*

I have grown up knowing that Comfrey, left to grow underneath the wire mesh bottom of rabbits cages keeps these highly cold sensitive animals free from this problem, they eat it as it grows into the cage. I also lived in TX hill country when my children were very small. Allergies, resulting in sinus infections, were common. I used to make a tea from the Comfrey I grew that helped me keep them in better health. These may be 'simple' uses, but effective. And my grandmother would be amazed if she thought our government had come to the point of 'regulating' the things she taught me her herb garden was a source of healing, tasty delights and family time pleasures, for me.

I am sorry to hear that our government has so many lobbyists and special interests that they want to regulate anything that they're not making money (or paying) on and depriving us of our rights to make choices for ourselves.

Sally Rumpf

I just happen to have a great testimony for the use of BF&C! 3 Days after my youngest son's graduation, he and a friend were horsing around in the back seat of the car. When they imitated the 3 stooges fingers in the eye deal the friend got my son in the eye and took a gouge out of his cornea...

I tried BF&C. I was able to get some close to home at a health food store. Anyway, I did compresses for my son and also gave him 3 capsules 5 times a day. The eye was completely healed within 3 days!!!

I also did take him to an eye specialist who was amazed at how quickly the eye had healed. From no vision to 20/20 in 3 days!! That did not come from patching the eye alone or the anti inflammatory drops that we were made to use, it was the BF&C no doubt.

Hope this helps! I am going to continue in my studies to become a Master Herbalist but for financial reasons I need to do it one course at a time. I love the course and the experience I am getting. Everyone asks my help for their ailments already!

Have a GREAT day!

Dori Polnack

*S. officinale use to treat insect bites:*

I've used Comfrey successfully to treat insect bites on my daughter's legs. I simply put dried Comfrey into my coffee maker, made a few pots and added this to my daughter's bath water. Nothing else had worked..and she was surprised that the herbs helped, but she admitted that they, indeed, did the job.

Thanks,

R. Barfield

*S. officinale effective treatment for Carpel Tunnel Syndrome, used in large amount without side effect:*

This communication is from ROBERT N. HUMASON, presently one of your Master Herbalist curricula students in Fresno, California. I have also been heavily involved in wellness through proper natural nutritional dietary choices since 1958. It is through your school of herbology presently undergoing that I found a natural ally healing herbs to compliment all those years of emphasis on choosing proper raw, natural foods and beverages. As to your need for real time experiences with Comfrey, specifically, I herewith offer both my own as well as my wife's actual healing experiences with this wonderful herb:

My wife, Phyllis Humason, had developed a chronic right arm syndrome involving Carpel (Tunnel) of the right wrist and pain thereto, elbow nerve pain, and right shoulder joint, very painful discomfort and therefore limited motion. (Ironically, nothing in my "tool chest" of 42 years of nutritional knowledge seemed to remove what I've just described here, I say with some embarrassment). She had this problem for the last several years, but with much intensity for two years minimum. It was last August 1999 when I began your herbology studies that I discovered and learned sufficiently about Comfrey and the Christopher products incorporating Comfrey within their formulation. My wife began using CALC TEA for its organic calcium as well as for the mechanisms of removing inorganic deposits. She began applying BF&C Ointment on all painful areas. She began ingesting BF&C Syrup. Today, and for quite some months, she has been totally free of all symptoms in all sites of her right arm. While we certainly ascribe considerable worth to our ongoing dietary choices, we have POSITIVE evidence that

Christopher's CALC TEA, BF&C OINTMENT, & BF&C SYRUP were responsible for symptom relief within a period no longer than 3 months. Yes, by abstinence from animal meat (as my own ongoing studies proved was overly acid and harmful for the human organism) starting a few years back, my wife's challenge in the Carpel site was waning, but I fully believe the RATE at which remediation occurred AFTER BEGINNING the Christopher products listed herein was the key to

full confidence these products were highly instrumental in her purest of comfort and arm motion today. We can say without reservation that Comfrey played a vital role in the processes of this relief. My wife has absolutely NO adverse reactions from using Comfrey.

For all my 43 years in natural health, I still find it very difficult to understand why (our?) American government continues to hassle natural herbs and foods when 100% of ALL American approved medications are TOXIC to the human organism!

As to my own personal experiences, I take CALC TEA regularly also. My reason is rather differently. We have our residence on a large semi rural property with our own water well and pump. Our water is very hard and inorganic calcium buildups are very pronounced. However, I wasn't as "hep" about steam distilled water as your Dr. Christopher, but in taking your herbalist program of studies, there was no doubt that I should have been using steam distilled water for all the 28 years at this same home site. The long and short of this is that for the past 2 or 3 years, my blood pressure had risen higher than the traditional specifications, but yet in the "borderline" limits. From your school, I learned of the natural chelation characteristics of CALC TEA's organic calcium, and I find my BP moving back to normal. While certainly it is the organic calcium that has such a good effect, it is Comfrey which synergizes the formula to react favorably. I also have used successfully with POSITIVE indications that it is/was Comfrey at the helm when I applied fresh, raw leaf of Comfrey from my own garden to raw, just done, wounds from working on our small "farm." Wound healing almost in the wording of "miracle" occurred in every case. I have also used the bulk cut Comfrey from Christopher's for incidental burns and wounds on my own body. We genuinely feel that Comfrey leaves NO QUESTION that its use is beneficial however it is applied.

*Years of S. officinale use without side effect:*

I have been studying and using herbs for 7 years and I am a student of the School of Natural Healing. I have used the following products which have comfrey in it with absolutely no side effects. I have used Calc T, BFC, and herbal tooth powder. I have had no bad experiences.

Only good ones that have provided relief and healing effects of these products. I have recommended these products to other people who would not live without them. The Calc T is especially good. My sister in law will not live without this formula as it relieves the pains she has in her legs! The herbal tooth powder has stopped bleeding and inflammation of the gums for my husband. I had a sensitive area on my gums from a receding gum that is no longer sensitive due to the use of the tooth powder. My parents use the tooth powder and feel that their teeth are cleaner than when they used toothpaste. The BFC ointment is the best. It has cured my father's middle finger that always locked in place. Now it moves freely. I use the BFC ointment on my husbands lower spine and it has helped the stiffness from a little arthritis. I have used the BFC on all kinds of skin ailments with great success. I have used it on incisions and scars and they disappeared or diminished.

Seven years ago as I just started to learn about herbs, the sales women in the health food store took some time to explain her experiences to me. She told me that she had used comfrey and lobelia for years (even when she was told they were toxic). She said they never had a bad effect on her and she was healthier now than before. These herbs helped her and she still recommends them. If I can get her testimony in writing, I will send it to you.

I hopes this helps. Regards,

Pauline Esposito  
Port Washington, NY

*S. officinale effective treatment for "bunions" and insect stings:*

I have had trouble with a bunion for many years and recently the pain moved to the area on the bottom of my foot below my toes. The pain was such that I could barely walk on it. I began using the "Calc Tea" formula in a dosage of 1 tsp. twice a day. In about three weeks the pain is

completely gone and I have no trouble walking. I also use fresh comfrey leaves for any bee or ant sting. I simply chew a small portion of the leaf and apply to the sting and the poison is immediately drawn out and no pain or redness left.

Thanks for listening to my great results with comfrey.

Susan Williams  
Gulf Breeze, FL

*S. officinale used on fractures and sprains:*

I am writing to inform you of my latest experience with Comfrey. A friend of mine had accidentally walked into the corner of a piece of furniture and seriously injured her little toe. She and her husband were visiting and she showed me her foot, and asked if there was anything I could recommend she could use, because at this point she could not get on a pair of shoes, and had to sit with the foot up, because it was throbbing. I made a strong tea of Comfrey, Mullein, and Horsetail, and sent her home with instructions on how to use it. She said he didn't make a poultice, but just dabbed the tea repeatedly on the toe. She called the next day because she couldn't believe how fast her toe had healed. Within 24 hours, the swelling and discoloration was gone! She was so impressed she showed everyone at her work her foot, the next day!! Needless to say she was very happy, and has showed no ill effects from using Comfrey. I have also used it on my son's foot, that he sprained and could not return to work. He healed within 48 hours and was able to return to work, as a restaurant server, who must stand all night! He also had no ill effects. Each of the teas were made with dried bulk herbs from a local herb shop.

Sincerely,  
Cindy Osborn  
Mesa, AZ

*S. officinale used on fractures, hives, and lung problems without side effect:*

My family has grown and used comfrey for generations. I keep several plants in my yard and many time neighbors have come to "raid" my plants to use on broken toes, cracked ribs, as a tea for hives, etc. My self and a grandchild have asthma problems and have found the use of comfrey, mullein and garlic a lifesaver. Not only does it help expel the mucus, I actually use my prescribed inhaler only a couple of times a week instead of several times a day when I use this formula regularly.

Several years ago the USDA banned comfrey and it was removed from some formulas I bought at the health food store. There was a definite difference in the results I received and I stopped buying the formulas and had to make them myself. At that time it was stated that comfrey was banned because there were some suspicious deaths and the people or persons had been using comfrey as a tea. My response...how many have died from using aspirin and it is still on the market.

I hope this helps.  
Cynthia Troutman

*S. officinale used for pain relief*

She went to a radiologist who diagnosed her with osteoporosis problems. All of a sudden, the osteoporosis got very painful in her foot. She put up with that for about 3 weeks. Two days of using the BF&C relieved the pain.

Ethel Kurihara

Aiea, HI

*S. officinale used on mole and other skin problems*

Evelyn MacDonald from Valley Stream, NY called with this success story on BF&C Oil. She used BF&C Oil on flaky areas -- pre-skin cancers. They were completely diminished by using BF&C Oil 3 out of 5 days for 2 months. She also tried the BF&C Oil on a mole. She first tried the black ointment and it made the area large and inflamed. They then used the BF&C Oil and greatly reduced the mole.

*S. officinale used for joint problems*

Barbara, from Boca Raton, Florida

She had joint lock in her shoulder. She took 1 tsp of Calc Tea and 15 capsules of BF&C daily. She was also on a Cucumber and Celery Juice diet. In one week she had full range of motion.

*S. officinale used to treat bone spurs with out side effects:*

My daughter of twelve developed a spur in the base of her thumb around two years old and could never straighten her thumb out. We were told by the orthopedic surgeon to leave it alone and that surgery was to risky for the possibility of total nerve damage. About a year ago we heard about the Herb Shop and were encouraged to soak her hand in Calc Tea and vinegar and then we put BF&C ointment and Deep Heating Balm on. Next we wrapped her hand in gauze and covered that with a cotton glove. We did this procedure day and night. She also took BF&C capsules. It took approximately one month for the spur to dissipate and she can straighten out her thumb completely.

Thank you so much for two wonderful products.

*S. officinale used without side effects*

February 7, 1984

Dear Mr. Christopher:

I have found great relief by taking Dr. Christopher's calcium formula and thyroid formula through the night which was recommended in his "How Important is Calcium" newsletter. I have recommended this treatment to others and to my mother and they all have found it helps their insomnia also.

Thanks for your help, again.

Anne Richards  
Williston, ND

*S. officinale use to increase hair growth*

NOVEMBER 7, 1996

Meg Feinauer of Orem Utah (291 170N) said her hair wouldn't grow past her shoulders (5 yrs).

Started taking Calc Tea regularly after 6 months it grew 4-5 inches

*S. officinale used to treat "swimmer's ears"*

Gentlemen:

I have had phenomenal success with your God given Herbs. I have used the comfrey ointment, nose ointment and your combination of oil of garlic and B&B tincture, for swimmers ears all with equal success.

The Eyebright combination has brought good results for a very severe pain behind one eye. (I have had this for over two years and the doctors have been unable to find cause).

My greatest pleasure has resulted in freedom from pain for my seventeen year old daughter during her menstrual period. She has been hospitalized three times in the past year for vomiting which could not be stopped over a six hour lapse of time. The hormonal Estrogen Combination and Female Corrective Combination have truly given her a new lease on life.

Very truly yours,

Mrs. James F. Harder

*S. officinale used to treat fractures successfully:*

January 16, 1993

I thought that you might like to hear about a success we had with a pack that is recommended in your father's book.

A few weeks ago a member of our family became tangled in a dog chain as they were leaving the house. He flew from the second step of our porch which is about 20" off the ground for about 10 feet and landed with his full weight, and velocity, on his left arm. There were no broken bones but the arm was very painful.

We started treating with the wheat germ/Lobelia/Comfrey pack that Dr. Christopher describes in his book. In less than 30 minutes the pain had been relieved. We continued this treatment at night for a week. Although the sprain took several weeks to completely heal this person did not lose a days work and did not use any pain killers.

Sincerely,

E.W. Pendley

Cheyenne, Wy

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## A History of the Healing Chili

The Capsicums are ancient natives of the New World, the oldest known specimens coming from Mexico. From seeds found on the floors of caves that were ancient human dwellings and from ancient fossil feces, scientists have found the people were eating peppers as early as 7000 BC. Presumably originating as wild plants, hot peppers were cultivated between 5200 and 3400 BC. (Heiser: 18), among the oldest cultivated plants of the world. In South America, peppers recovered at the archaeological site of Huaca Prieta have been dated at 2500 BC, these specimens being larger than the wild peppers and therefore presumably cultivated (Ibid). Archaeological research in the Tehucan Valley revealed that among other crops, chilies were cultivated during the Coxcatlan era, around 4000 BC (Johnson, ed.: 150)

Capsicum was introduced to Europe by the historian who accompanied Columbus to the New World, Peter Martyr. He reported the use of these pungent peppers, and the ships physician, Dr. Chatica, reported their use as a condiment and as a medicine, an irony considering that Columbus was seeking the spices of the Far East (Heiser, op.. cit.)

Later, scholars sent from Spain to the New World, notably to Mexico and Central America, chronicle the extensive use of chili peppers in the diet of the Indians. Next to maize, a certain Cobo wrote, it was the foremost plant in the land; and a Garcilaso said that the Peruvian Indians valued chilies more than any other plant, never cooking a dish without them. The Jesuit Acosta noted that it was an item of considerable value for trade in areas where chili did not grow, that it "comforted the stomach" when taken in moderation, and that some of the Indians made offerings of peppers to their gods (Ibid.).

According to sixteenth century historians, South American warriors would burn peppers to use the smoke against the invading Spanish (Ibid.). Interestingly, during the Vietnam war, Buddhist monks armed themselves with spray guns filled with a mixture of lemon juice, curry powder, and Cayenne.

Cayenne peppers reached southeastern Asia a few years after the discovery of America, and today they are almost as important in tropical Asian cuisine and medicine as they are in tropical America. In fact, these peppers became so well established in India not long after their migration that early botanists thought they were indigenous. In India they are an indispensable part of curry, which is a universal ingredient in most Indian cuisine. Peppers are also widely used throughout Africa, and the African produce is thought to be the hottest in the world, perhaps due to climatic or edaphic factors, though it may be due to specialized breeding (Heiser, op. cit). In Ethiopia, the national dish, wort, or Cayenne portage, features this pungent powder. Salt and powdered Cayenne pods are mixed with a little pea or bean meal and made into a paste called dillock. This is kept in a gourd, often hung from the house roof, and used a little at a time, wort being made by adding water to the paste and then boiling the mixture (Ibid.).

Cayenne was introduced into Britain from India in 1548, and Gerard mentioned it as being cultivated in his time (Gri: 175). It is used in folk medicine in various parts of the world, notably Greece, Italy, and parts of Russia, where it is steeped in Vodka and drunk as a tonic in wine glassful doses (Hut:68). It grows and is used abundantly in the West Indies, where the Negroes value it as a certain remedy for many ailments (Klo:217). It is especially valued there for the deadly fevers, especially yellow fever, of which the native people have no fear as long as they have a goodly supply of Capsicum (Ibid.). As in Mexico, the children and adults alike snack on hot pepper pods, eating them one after another "as we would do so many doughnuts," said Kloss. Cayenne is one of the main foods of the Hunzas in Asia Minor, along with apricots and their pits, millet, and other such simple foods. They live to over a hundred years of age, sometimes play polo at the age of 150, and generally die not from diseases, but from falls or accidents (Herbalist:I:I:3 2 ).

# Cayenne

## History

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Capsicum was early cited as growing in the Hawaiian Islands, cultivated and escaped varieties noted as early as 1897, though the fruits were small and very pungent. It was known as “Hawaiian Chili Peppers.”

In Mexico today, Chilies of various kinds supplement the daily diet and, in addition to providing spice and essential nutrients to an otherwise bland and repetitious diet of tortillas, beans, squash, pumpkins, potatoes and the like, they perform important medicinal functions. Visitors to Mexico often suffer from “Montezuma's Revenge,” a particularly devastating kind of amoebic dysentery. However, if they will eat hot chili with their meals the way the native Mexicans do, they will not suffer this disease. Juliette de Bairacli Levy, when living in Mexico with her small children, did not hesitate to let them drink raw milk—a practice frowned upon by most because of the certainty of dysenteric infection. She spiked the milk with a generous dose of Cayenne and the children were never infected. She noted, too, that eventually the children came to relish the hot-tasting milk. It is reported that the Mexicans, who ingest such quantities of Chili that their bodies are infused with it, are not attacked by predatory birds, if they happen to perish by accident in the deserts; vultures won't touch the Chili-laden body.

Cayenne pepper is the name for the hottest form of Capsicum, which can take other forms. If its heat is 1 BTU, this mild Capsicum is called paprika; if it is from one to twenty-five BTU, it is called simply red pepper; but over twenty-five BTU rating is termed Cayenne. Therefore Cayenne is the strongest of the Capsicum family. In Mexico alone, many varieties (some claim fifteen or more) of peppers are grown, each with a distinctive flavor, and often very hot indeed. Other important varieties are grown in Japan (predominantly used, dried, in cooking), the United States, and Africa, the latter being valued as a high-quality medicinal Cayenne.

One of the United States varieties, imported from the Mexican state of Tabasco, has attained great renown. An American soldier, returning from the Mexican War of 1846-48, brought some pepper seeds to Edward McIlhenny, a banker, who grew plants from them in Louisiana. McIlhenny found that the peppers made a delightfully piquant sauce. During the Civil War, he left Louisiana, but when he returned, finding his plants still flourishing, was persuaded to market his sauce. Since the war had left him without an income, he thought this was worth a try, and the venture proved successful; Tabasco Sauce is a gourmet treat throughout the world (Heiser: 12).

Cayenne pepper was a mainstay of the Thomsonian School of Medicine, Samuel Thomson, the original Botanic Physician, having featured it along with Lobelia in his healing routines. It was an important ingredient in his Composition Powder, and he also used it as a stimulant and an assist to the emetic properties of Lobelia.

Joseph Smith, the Mormon Prophet, was said to have advocated the use of Cayenne. His successor, Brigham Young, eschewing the services of orthodox medical practitioners, encouraged the use of Cayenne and of Composition Powder, the latter even serving as a beverage in place of regular tea or other drinks. Many of the early Church members were well versed in botanic medicine, an interesting example being Priddy Meeks, who was a thoroughgoing herbal practitioner and whose journal we possess today. He gave Cayenne pepper to a young man who had attempted to journey from California back to the East. His feet were both frozen up to his ankles. Meeks felt, “as though by inspiration,” that he should try Cayenne internally for the case. Having given the man too much at first, Meeks reduced the dose as the frozen feet began to hurt terribly. When the dose seemed right, an unusual event occurred: the frozen flesh would rot and rope down from his foot, when it would be on his knee, then clear to the floor, and the new flesh would form as fast as the dead flesh would drop. It seemed to Meeks that the dead flesh was getting out of the way to make room for the new flesh. After sixteen days, the man was able to walk again, having lost only five toenails, instead of both feet—an unusual tale indeed! Meeks related many other cases he healed with Cayenne pepper; he was much in demand with these simple remedies.

In England, Cayenne was called “Ginnie pepper,” since it was purchased from “Guinea,” or the Indies. Being official in both the United States and British pharmacopoeias (even until the 1950's), Cayenne was an ingredient in many of the cure-all remedies of the last century; in fact, it was often the main ingredient, along with aloes and a little soap. The British pharmacopoeia requires that Capsicum should yield not more than six percent of ash, and this will detect any adulterants, which include ground fruit stone, linseed, ground cereal products, oxide of red lead, and colored sawdust (Gri: 176).

Cayenne or Capsicum derives its name from the Greek kaptos, I bite, an allusion to the pungent properties of the fruits and seeds. Although the origin of the species is obscured in antiquity, as

described above, experts believe that all the varieties of chilies originated in one species. For this reason the botanical classification of these plants is sometimes muddled, and *Capsicum annuum* is sometimes described as *Capsicum frutescens* (Stuart: 166). Some sources indicate that our valuable Cayenne is really *Capsicum fastigiatum* (Bar: 148), or *Capsicum minimum* (Hut:67). All of this confusion points to the point we made earlier, that the medicinal Cayenne is classed according to its BTU rating rather than its species.

Other names for Cayenne include African pepper, African red pepper, and African bird pepper, all alluding to the most pungent and superior product obtained from Africa, although this can be light brownish-yellow instead of red in color (Gri:176). It is also called American red pepper, Spanish pepper, and Guinea pepper, as it is obtained from these places. We are already familiar with its name, Chili, in Mexico; in French it is called Capsique or Poivre de Cayenne, and in German it is Spanischer Pfeffer or Schlotenpfeffer.

### **MOST CERTAIN STIMULANT—AND NEARLY A CURE-ALL**

One of the most important uses of (Cayenne is as a circulatory stimulant, an herb that feeds the necessary elements into the cell structure of the arteries, veins, and capillaries so that they, regain youthful elasticity and so that the blood pressure reduces itself to normal. When the venous structure becomes loaded with sticky mucus, the blood cannot circulate freely, so higher pressure is needed to force the blood through. Cayenne equalizes the blood pressure, influencing the heart immediately, and then extending its effects to the venous structure (SNH:407). It also works to cut the mucus in the venous system, and indeed in all the systems throughout the body.

Cayenne is a certain remedy for heart attack; as a stimulant, it can start the heart into action again, and as it facilitates blood flow throughout the body, it will keep the heart going. Used as a heart attack preventative, along with the mucusless diet and a healthful life-style, Cayenne can do wonders in toning and rebuilding the heart and keeping it in top condition. As we will discuss later, Cayenne is one of the richest and most stable sources of Vitamin E, which is known to be a heart builder.

The most common medical use of Cayenne is as a gastric stimulant and digestive aid. It rebuilds the stomach tissue and stimulates peristalsis, thus assisting in assimilation and elimination. In the West Indies, a preparation called Mandram is used for weak digestion and loss of appetite; this is made of thinly sliced, unskinned cucumbers, shallots, chives or onions, lemon or lime juice, Madeira, and a few pods of Cayenne well mashed up in the liquids. It can be used as a chutney or garnish (Gri: 176)

Cayenne is used as a diaphoretic-sweat inducing-herb, especially useful when combined with other powerful diaphoretics such as yarrow, blue vervain, bayberry, etc. It should be given when a chili is coming on, to offset a cold, or to help break a fever, as it sustains the portal circulation (Klo:220) and assists in the removal of mucus, as well as inducing perspiration.

If one believes in the use of emesis to cleanse the stomach, such as the Thomsonians did, large doses of Cayenne will certainly do the job without causing any harm to the patient. If combined with an emetic, such as Lobelia, Cayenne will help the emesis continue over a longer period and prevent bruising or other discomfort. If a person swallows a noxious substance or polluted food or drink, this Lobelia-Cayenne combination will work surely to bring it up. Be sure not to induce vomiting, however, if a corrosive substance has been ingested.

As related above, Cayenne works powerfully to arrest bleeding. You can place Cayenne powder or tincture directly upon an open wound, even one that is gushing blood, and by the count of ten, the bleeding will cease. If there is internal hemorrhaging, in the lungs, stomach, uterus or nose, have the person take a teaspoonful of Cayenne in a glass of quite warm water; the blood pressure will be equalized, taking the pressure off from the affected part, clotting will begin, and the hemorrhage will stop. For hemorrhage of the lungs, a vapor bath with warm Cayenne can do the same thing. In an external wound, even if the cut is so deep it goes to the bone you may fill it with Cayenne pepper and the bleeding will stop and the wound will heal beautifully. A woman fell while descending stairs to the basement and struck her head on the overhang above the staircase. She fell on her elbow and hip as well, but she had hit her eye so: badly that it was oozing blood down her face. She found her way upstairs, and “dumped a pile of Cayenne into her hand and pressed it against her wounded eye” (Herbalist:March, 1978:30). She also took Cayenne internally and applied an ice pack. By this time the bleeding had stopped, and she applied Dr. Christopher's Comfrey Poultice, made with wheat-germ oil and honey, to her eye wound and

other facial wounds. When she went to the doctor, he cleaned out the wound and told her that she would bruise very badly and that, if she wished, he would re-cut the wound and stitch it, as she had passed the eight-hour limit for stitches.

She kept taking the Cayenne and rubbing wheat-germ oil and other oils and herbs on the wound. She also applied wet hot packs for the itching associated with healing. After a few days, the marks of the accident were nearly cleared up, although the doctor had predicted many days of discolor and discomfort. This lady - who has teenage grandchildren—credits her quick healing to Cayenne (Ibid.)

Cayenne is used externally as a liniment as well, effective for wounds, bruises, scalds, burns, and sunburns, applied freely. You can rinse the mouth with the liniment for pyorrhea (Mal:84). It brings out toxic poisons and can be used to relieve lung congestion as well as external problems. It will bring relief for the sufferer of rheumatism. A simple liniment is made by simmering 1 tablespoonful of Cayenne in 1 pint of Apple cider vinegar; bottle, unstained, while still hot. You can also combine the Cayenne with other herbs, such as Golden Seal, Lobelia, etc., to obtain their beneficial effects in the liniment. A plaster of Cayenne, made with bran or hops and combined with Lobelia, is valuable in pneumonia, pleurisy, and other congestion's. Many famous commercial ointments sold by Rawleighs, Watkins, and others, are high in Cayenne.

Cayenne is extremely valuable as an emmenagogue. It will act as a carrier for uterine herbs such as Blessed thistle, taking them directly to the uterus. When expectant mothers go into labor, midwives commonly give them a drink made of Cayenne, apple cider vinegar, honey, and warm water. This stimulates good contractions, gives energy—and as an added benefit, circumvents any possible hemorrhage and acts as an anti-shock remedy, as labor often brings about shock. In fact, this combination is a most efficient anti-shock remedy and should be supplied in any case of shock. Cayenne in hot water alone will also work.

Cayenne will increase a persons feeling of vitality and activity—as it is a stimulant—without any bad aftereffects, such as do other stimulants. Combined with Lobelia, it is wonderful in cases of depression or low spirits.

Capsicum is an excellent antiseptic. For infectious sore throat, combine it with slippery elm and lobelia. It will kill germs when applied to wounds, and can be taken to ward off diseases one has been exposed to (Herbalist 1:1:33).

Since it works so effectively to eliminate mucus from the body, it is an excellent expectorant. Mixed with ginger, it does a wonderful job of cleaning out the bronchial tubes and sinus cavities and relieving immediately all problems of colds and congestion (Mal:85).

Cayenne is used as an accentuator with other herbs; it increases the value and healing properties of the herbs and carries them to the afflicted part of the body. Indeed, Cayenne affects every portion of the body through its marvelous action in the venous structure. It relieves cramping or pain throughout the system. It reduces inflammation and reduces hemorrhoids, even when they are serious and painful. It can help cleanse the system of alcoholism and even reduce the discomfort of a hangover, or worse, the miseries of delirium tremens. It has been said to be a sure assist in cases of diphtheria, used internally and externally as a fomentation of the tincture. It has been combined with other herbs to make an excellent eyewash-though the user needs a bit of courage the first time! It will relieve a relaxed throat, toning it up immediately. If you soak the oil in cotton, you can apply It to an aching tooth, and the relief will last a long time. Sprinkle a little of the powder into your socks at night if you suffer from cold feet; your toes will be warm all night. Rub it on if you have a sprain or a backache. Drink the tea if you have problems with flatulence. The American Indians used to say you could get rid of a wart if you bound on a fresh pepper pod every day.

Cayenne is rich in Vitamins C, A, B and G. It is an excellent source of Vitamin E. In Szent-Gyorgi's Nobel Prize winning research on Vitamin C in 1937, he had been using a substance, obtained from adrenal glands, that he suspected to be Vitamin C. When he could no longer obtain this substance, on a hunch he tried to use Paprika peppers for his work, and found them a rich source of this substance, later to be called Vitamin C. Capsicum also contains Calcium, Phosphorus, and Iron.

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## Cayenne as Medicine and Current Findings

### FROM THE MEDICAL WORLD

Most medical doctors eliminate hot foods such as capsicum from the diets of ulcer patients and others with delicate digestion; as we have shown, this is directly opposite to that which is recommended by herbalists.

Their actions are influenced from medical research showing hemorrhaging occurring after introducing (mechanically) capsicum into the stomachs of persons prone to hemorrhages. Their observations are fact but tend to be inconclusive. Perhaps any substance introduced mechanically into the system could have caused hemorrhaging. From personal experience, I was very uncomfortable taking capsicum for my bleeding ulcers, but after one day of taking capsicum, in water, I never again experienced passing dark blood through my stools. Perhaps the immediate bleeding observed, by the researchers, would have been corrected through continued herb care.

### FOOD AS MEDICINE

The most prominent non-medical use of Capsicum, of course, is culinary, a perfect example of the old maxim, "Let your food be your medicine and your medicine your food." In kitchens all over the world, Capsicums are used to prepare hot dishes, and are even featured as a vegetable themselves. The peppers are ground and mixed with other spices to make Chili Powder, a common seasoning almost everywhere.

If you are fortunate enough to grow or purchase your own chili peppers, you can preserve them yourself. You can pickle them as you would cucumbers, adding carrots, celery, onions or other vegetables as the Mexicans do. If you wish to can or freeze green chilies, you will need to roast and peel them. Roast them over an open flame or in a hot oven until the skins blister. Quickly put them into a plastic bag or damp cloth until the steam loosens the skins. You may then, with hands gloved in rubber gloves or well-oiled—to avoid blistering or burning—peel the peppers. Remove the seeds if desired, chop if desired, and freeze in plastic bags, well-sealed. If you wish to can them, follow directions included with your canning jars as to pressure needed in a pressure canner.

You may use green hot peppers to make your own taco or hot sauce. To two or three quarts of tomatoes, add salt and garlic pepper to taste, and two to three cups of chopped, peeled chills. Can as usual for tomatoes.

The Mexicans make a raw chili salsa, with chopped tomato, onion, garlic, and fresh chili pepper. This salsa is an excellent and garnish to any meal.

By far the easiest culinary use of Cayenne is just to sprinkle it upon your food, as you would use black pepper. Use a little at first, increasing as you become accustomed to the pungency. For everyday maintenance of good health, this is an excellent way to use Cayenne. Even children can

learn to enjoy foods thus seasoned.

As for other uses, the leaves are used extensively in the Philippines as a green dye. The powder can be sprinkled in primitive living sites to drive off bugs and vermin, as they detest Cayenne, and it can also be burned to fumigate against vermin. A room thus fumigated can be opened and used fight after the treatment, as the fumes are not poisonous to humans (Levy:43).

## CURRENT FINDINGS

Recent research has focused on the extraction and isolation of the constituents of Capsicum. Lee et al. devised a mass fragmentographic method for the quantitative microanalysis of Capsaicin, the major medicinal constituent of Capsicum (Journal of Chromatography, 21 July 1976). Salzer, noting that most industrially prepared quick foods are relying on seasoning extracts rather than the more easily deteriorated spices themselves, discovered that the main flavoring constituent of Capsicum is capsaicin (Critical Reviews in Science and Nutrition, 1977).

Of most interest medicinally, Frischkorn and Frischkorn researched the debilitating tropical disease, schistosomiasis, or snail fever, which is contracted through the skin by contact with snail larvae in fresh water. They estimate that up to half of the people in the third world are afflicted with this disease. Aside from chemotherapeutic treatment and water treatment, they discovered that the oil of Capsicum annum, which is high in capsaicin, kills the larvae, and that frequent ingestion of Capsicum can help treat the disease (Naturwissenschaften, September, 1978)

Of particular interest to herbalists who are interested in the reasons why Capsicum is so valuable in heart disease, Kanner et. al. analyzed Capsicum annum for tocopherol content. They found that of all the edible plants, Capsicum annum contained the most natural Vitamin E, which is in a peculiarly stable form. In fresh, ripe pepper fruits, they found 3-10 mg./100 grams, which shows that the vegetable could become a significant source of Vitamin E in the diet. Vitamin E is often used to treat heart conditions. Because there is also a goodly amount of ascorbic acid (Vitamin C) in the peppers, the two vitamins are well balanced naturally, which the authors considered a fact of great importance in nutritional and technological considerations (Journal of Agricultural and Food Chemistry, November-December, 1979, pp. 1316-8).

## DESCRIPTION

Capsicum belongs to the botanic family Solanaceae, commonly known as the Nightshade family and including potatoes, tomatoes, green peppers, eggplants, the deadly nightshade, henbane, Jimson weed, petunias, and tobacco (Heiser:1). They are not true peppers, but were misnamed by early Spanish explorers who confused their hot taste with the pepper to which they were accustomed.

Capsicum annum is a shrubby perennial plant two to six feet high. Branches are angular, usually enlarged and slightly purple at the nodes; petioles medium; peduncles slender, often in pairs, and longer than the fruit; calyx cup-shaped, clasping base of fruit which is red, ovate, and long; seeds small and flat, from ten to twenty nine. The cuticle of the pericarp is uniformly striated and in this particular is distinct from other species. The taste is pungent and the smell characteristic, though not disagreeable (Gri: 175-76).

The peppers, when dried, vary in lengths from 3/8 inch to 2 1/4 inches and in width from 3/16 to

1/2 inch. The shape is blunt and roundish at the base, tapering to a point; oblong-acuminate. The pods are shiny, flattish and somewhat wrinkled. The seeds are small, flat, reniform, and yellow.

The African varieties are smaller and more pungent than the American varieties, which are larger and more heart-shaped.

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## Cultivation and Usage

### CULTIVATION AND COLLECTION

Cayenne and the other Capsicums can be cultivated just like Green Peppers. Seeds can be purchased at garden stores or through seed catalogs. You can start them under glass or in the house in mid-February if you plan to set them in late May. Feed the developing seedlings manure tea and turn them so each side gets equal sun.

When you are ready to set the plants, protect them from cutworms with a tin-can or brown-paper collar and set them three feet apart, as they grow bigger than bell peppers. Harden the plants gradually—partially shading them—for about a week, and mulch them to preserve moisture. Do not over-fertilize them, or you'll get much leaf and little fruit.

When picking chilies, use rubber gloves to protect your hands. When they are ripe, their hotness is at a peak, and further reddenning will not make them hotter, but just a little sweeter. You can preserve them as described above, or string them up for drying, as is commonly done in Mexico.

### PREPARATION AND USAGE

The mature pepper pods are dried carefully and are either stored whole or ground for storage. You can purchase ground Cayenne pepper and store it with eider leaves or bay leaves in it to prevent insect infestation; sometimes, if you open a can of grocery-store Cayenne, it will be infested with large worms. Dr. Christopher said it was because worms know good food when they see it! Properly stored Cayenne will keep well for about a year. To keep it longer, you can make a tincture, and it will last as long as you could wish. Dr. Christopher stored some for twenty years, and when he unpacked it, it was as good as new!

The quickest and most efficient preparation of Cayenne is the tea, mixing a teaspoonful to a tablespoonful in warm water and drinking it. Many people, not wishing to suffer the pungency of the herb, take it in capsules, and this is all right, but the herb works much more quickly if taken in tea. It is usually not made into a decoction, as the medicinal factors are lost. Another method commonly employed to cut the hot taste is to eat a spoonful of peanut butter before taking the herb, but Dr. Christopher said he thought that was just for kids!

The tincture can be applied externally or taken internally. To make it, macerate two ounces of Cayenne in one quart of 90 proof alcohol for fourteen days.

For an excellent bath to be used in cases of aches and pains, influenza, apoplexy, etc., mix teaspoonful each of Cayenne and Ginger and add to a very hot bath. This will cleanse the pores and remove toxins.

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## Chemical Composition of Cayenne

The laboratory, at the request of Dr. Christopher, supplied the following analysis of Cayenne: CAYENNE Capsicum minimum (SOLANACEAE) pods, berries Capsicum Frutescens

### VITAMINS AND MINERALS:

Ca .26%  
 p .09  
 K .17  
 Na tr  
 Cl tr  
 Mg .31  
 Fe .0006  
 Mn tr  
 Cu tr  
 Zn tr  
 Carotene-various carotenoid pigment. no carotene  
 A 12,137 Mg/lb  
 B-1 78  
 B-2 12  
 C (ascorbic acid) 493

### OTHER:

albumen 2.4%  
 pectin 2.33  
 gums 1.3  
 starch 2.0  
 capsaicin .43  
 capsacutin oil 16.35  
 pentosans totaling 8.59 solaine  
 xanthenes .82  
 oleic acid  
 palmitic acid 1.85  
 steanc acid  
 fatty acids

In addition, the reader may be interested in the following research analyzing Capsicum:

Constituents. In 1876 Thresh extracted the drug with petroleum, treated the extract with aqueous alkali, and by passing carbon dioxide through the alkaline liquid precipitated crystals of an intensely pungent compound, capsaicin. As may be inferred from the method of preparation, capsaicin is of phenolic nature.

Capsaicin (Vanillyl amide of isodecenoic acid)

The pungent phenolic fraction of capsicum also contains a proportion of 6,7 - dihydrocapsaicin. The capsaicin content of fruits varies appreciably in a range up to 1.5 per cent and is much influenced by environmental conditions and age of the fruit. It occurs principally in the dissepiment of the fruits, for example, entire fruit 0.49; pericarp 0.10; dissepiment 1.79; seed 0.07. The pungency of capsicum is not destroyed by treatment with alkalis (distinction from gingerol, which also contains the vanillyl group) but is destroyed by oxidation with potassium dichromate or permanganate. Chilies also contain ascorbic acid (0.1-0.5 per cent), thiamine, red carotenoid such as capsanthin and capsorubin and fixed oil (about 4-16 percent). They yield about 20-25 per cent of alcoholic extract (capsaicin) and about 5 percent (official limit 8 percent) of ash. Hungarian capsicums or 'Paprika' are derived from a mild race of *C. annuum* and are a convenient source of ascorbic acid. According to Bennett and Kirby the pungent principle of *C. annuum* is composed of capsaicin 69 percent, dihydrocapsaicin 22 per cent, nordihydrocapsaicin 7 percent, homo-capsaicin 1 percent and homodihydrocapsaicin 1 percent. The presence of the three minor components was established by mass spectroscopy.

A number of colorimetric assays can be used for the quantitative determination of capsaicin (see p. 213); The B.P.C. utilizes ultraviolet absorption at 248 and 296 nm.

### Biogenesis of Capsaicin.

Work by Leete and Loudon on *C. frutescens* and by Bennett and Kirby on *C. annuum* has shown that phenylalanine is incorporated into the C6-C1 vanillyl unit of capsaicin, the C-3 of phenylalanine giving the methylene group of the vanillylamine residues; the incorporation probably proceeds via cinnamic, p-coumaric, caffeic and protocatechuic acids. Tyrosine did not appear to be a probable precursor. Leete's feeding experiments with <sup>14</sup>C have given incorporation consistent with the hypothesis that the C10 isodecanoic acid is formed from isobutyryl coenzyme A and three acetate units. (Treaxardevans).

The United States Department of Agriculture analyzed a raw chili pepper for nutritional content; their results follow.

	Immature green pods, excluding seeds	Mature Red pods, including seeds	Mature Red pods, excluding seeds	Mature red dried pods
WATER (percent)	88.8	74.3	80.3	12.6
FOOD ENERGY (calories)	37	93	65	321
PROTEIN (grams)	1.3	3.7	2.3	12.9
FAT (grams)	.2	2.3	.4	9.1
CARBOHYDRATES (grams)	9.1	18.1	15.8	59.8
FIBER	1.8	9.0	2.3	26.2
ASH (grams)	.6	1.6	1.2	7.4

CALCIUM (milligrams)	10	29	16	130
PHOSPHORUS (milligrams)	25	78	49	240
IRON (milligrams)	.7	1.2	1.4	7.8
SODIUM (milligrams)	--	--	25	373
POTASSIUM (milligrams)	--	--	564	1,201
VITAMIN A (I.U.)	770	21,600	21,600	77,000
THIAMINE (milligrams)	.09	.22	.1	.23
RIBOFLAVIN (milligrams)	.06	.36	.2	1.33
NIACIN (milligrams)	1.7	4.4	2.9	10.5
ASCORBIC ACID (milligrams)	235	369	369	12

—(U.S. Handbook No. 8, 1975)

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## Dr. Christopher's Formulas Containing Cayenne

As we might expect, since Cayenne is a superior carrier for other herbs, many of Dr. Christopher's Combinations contain Cayenne.

- Prospallate* - The combination used to heal and tone the prostate and related organs.
- Nu-Fem* - The female tonic.
- Naturalax* - The formula to heal and tone the bowel.
- Panc Tea* - The formula which heals the pancreas and helps in blood-sugar related diseases.
- BP* - The formula which regulates blood pressure.
- Herbal Composition Powder* - Used for colds, flu, and many other ailments.
- Adrenatone* - The formula to strengthen the adrenal glands.
- Herbal Eyebright* - The toning eyewash.
- Yucca AR* - The arthritis and rheumatism formula.
- Mem* - The formula to improve memory and strengthen brain functions.
- Relax-eze Tea* - The formula to rebuild frayed nerves.
- Professor Cayenne Penetrating Deep Heating Balm* - For minor aches and pains.
- X-Ceptic* - The best herbal antiseptic available.
- Professor Cayenne Hot Lemon Lip Balm* - Lip balm
- The Antispasmodic Tincture* - A formula for coughs
- Cayenne Extract* - A potent fourteen-day extract, is made of Japanese, African, and American peppers.

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## Newspaper Articles

This section includes a few Newspaper Articles on the topic of Fluoridation. One is from our own Master Herbalist, David Christopher.

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This is a recent article that clearly explains why the Salt Lake and Davis County officials in Utah want to rid themselves of any and all liability.

## Hundreds of Children Poisoned by Tap Water

**By Saidou Arji**

**14/01/2001**

**Inter Press Service**

NIAMEY, Jan 14 (IPS) - The Societe Nigerienne des Eaux (SNE), Niger's water company, is being sued because hundreds of children in Tibiri, 720 kilometres from Niger's capital, Niamey, were poisoned by grossly elevated rates of fluoride in the town's water.

The children, ranging in age from 15 months to 14 years, contracted skeletal fluorosis, a disease

which causes deformities of the bones, according to medical sources.

The children suffer symptoms ranging from stiffness of the joints, arthritic-like symptoms and chronic joint pain, to calcification of the vertebral column, crippling spine and joint deformities, muscle wasting, and neurological defects. Mottling of the teeth is a less serious form of the disease that comes from ingesting lower levels of fluoride (dental fluorosis).

According to Dr. Moussa Koini, who has written a medical dissertation on the topic, the disease is caused by drinking water containing too much fluoride.

Water samples taken in Tibiri from SNE facilities show that the water contains 4.77 to 6.6 milligrams per litre, instead of the maximum 1.5 milligrams recommended by the World Health Organisation (WHO).

Out of the 425 recorded cases of children with fluorosis in Tibiri, there are 262 boys and 162 girls, a proportion of 61.79 to 38.21 percent. The age bracket most affected is the three to seven-year-old group. There are 62 three-year-olds and 55 six year olds affected. Sixty-eight percent of the victims are five-year-olds.

According to Dr. Koini, crippling skeletal fluorosis affects mostly children. There have been no reported cases of adults in Tibiri contracting the disease. This is due, he said, to the fact that growing children absorb more fluoride than do adults. Adults can become ill with the disease, but they would need to have drunk heavily fluoridated water for more than 20 years.

Skeletal fluorosis is a very disabling disease. Hadjia Kande, a mother whose two youngest children are paralysed, says life is a daily burden.

"Look at my children. Neither one of them can even go to the toilet by himself. I need to provide them with constant attention, so I can't regularly get to my job at the cotton mill."

One of the children, 13-year-old Salissou, expressed how sad he is. "I'm afraid to drink water from any source, even well water. Look at the state I'm in, it's really a shame," he said. Although it disables both boys and girls, the disease is even worse for girls as it can have grave consequences for childbearing.

Dr. Koini explained that "if there are outgrowths around the pelvic area, girls can have difficulty giving birth and may have to have Caesarian sections because of an inability to deliver vaginally," he stated.

The origins of the Tibiri tragedy date back to 1983, when the first waterworks was built. The first cases of the illness appeared 10 years later, when many children fell ill.

The Tibiri children's tragedy has produced a hue and cry from the public, especially human rights groups who specialise in these types of issues.

The Nigerien Association for Human Rights (ANDDH) has recruited a panel of lawyers to defend the victim's interests. During a recent press conference, the ANDDH chairperson, Khalid Ikhiri, who is also a chemist at the University of Niamey, emphasised the importance of pursuing this matter through the courts so that the children can receive monetary compensation for the damages they have suffered.

"Fluoride poisoning is fatal. Those children will be disabled for the rest of their lives. Every movement they make is painful, and as a result, they cannot engage in the normal play and other activities of children their age," he added.

Ikhiri's intention in filing suit against the SNE is also to end the impunity that the company has always enjoyed. "The SNE needs to answer for this tragedy since it's their mission to provide the public with pure drinking water," he said.

Confronted by the indignation the Tibiri affair has aroused and by press condemnations, the director of the SNE, Seyni Salou, declared that the elevated fluoride rate uncovered in Tibiri's water cannot be pinned on his operation. He said that the standard tests for water purity are regularly performed on all samples.

However, Salou did acknowledge that fluoride is not normally tested for in the standard tests generally performed on drinking water. "There is rarely a high rate of fluoride in naturally occurring sources. The case of Tibiri is an exception."

Salou recalls that drilling for water in Tibiri's substratum took place in 1983 by the Water Office. The SNE did not yet exist at that time.

"At the time this operation was turned over to us, nowhere was it ever mentioned in the technical documents that there was fluoride in the water."

"Naturally, we continued to distribute water until the health services advised us in 1988 that there was an outbreak of bony lesions among Tibiri's children. We did every possible analysis of the water, even the most farfetched, and finally figured out that the tap water contained a great deal of naturally occurring fluoride," Salou stated.

The SNE director believes that more studies still need to be done to be sure that the only cause of the problem is the fluoride. He thinks that the evidence is not yet conclusive. Nevertheless, he acknowledged that the ANDDH is in its rights to pursue a suit since the laws of Niger allow for it.

More than compensation for the victims, the provision of healthy water for Tibiri's citizens is today's priority. The SNE has confirmed that they have taken steps to bring down the fluoride level to 1.6 milligrams per litre.

Salou indicated that there are permanent changes to be made. Among them is a new water project in the neighbouring town of Maradi. The technical studies have already taken place with help from the Chinese, and work on the new supply project is expected to begin in February 2001.

"Bringing in water from Maradi is the only possible solution because there is fluoride even in Tibiri's groundwater," Salou added.

The government has asked Niger's development partners, most notably UNICEF, to provide assistance to the victims. UNICEF says that a Finnish organisation is ready to finance a community assistance project for Tibiri's children.

The goal of this project, which should begin in the first quarter of 2001, is to provide therapeutic assistance to the sick children, which will be based on nutritional remedies, physical rehabilitation, and orthopaedic correction.

Salmeye Bebert, the director of child welfare, added that the project will help research the exact scope of the disease and will determine the source of pollution of Tibiri's water.

Niger's infant mortality rate of 274 per 1,000 in 1998 was one of the highest in the world.

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## Fluoridation Gets Flushed on Election Day

NEW YORK

Nov. 12, 2001

PRNewswire

*The following press release was issued today by the New York State Coalition Opposed to Fluoridation:*

Voters on November 6, 2001, rejected fluoridation in several U.S. cities despite hundreds of thousands of dollars spent by fluoridation proponents in public relations campaigns. This adds to a growing list of cities that rallied against adding the claimed cavity-fighting fluoride to their water supplies.

According to newspaper accounts:

\* On election day, Worcester, Massachusetts, residents renounced fluoridation for the fifth time since the 1950's. Fluoridation proponents refused to debate but spent \$400,000 trying to win this referendum. The victorious opposition spent only \$5,196.

\* Modesto, California, citizens rejected fluoridation for the second time, shunning a \$1 million

grant offered by Fluoridation 2000, a statewide group, to cover the cost of fluoridation equipment. Fluoridation proponents outspent opponents by over 10 to 1.

\* Flagstaff's, Arizona, electorate decisively turned down fluoridation for the third time via mail-in ballots.

\* Sixty two percent of Sutherlin, Oregon, voted against fluoridation on election day.

\* In Gilbert, Arizona, opponents of fluoridation, inspired by these victories, plan to attack fluoridation again, which is slated to start in Gilbert at the end of the month.

"People who study the issue, themselves, find out fluoridation's health risks far exceed any possible benefits and deprives individuals of their choice to be medicated," says Paul Connett, Ph.D., Coordinator, Fluoride Action Network and Professor of Chemistry, St. Lawrence University, N.Y. "If your community fluoridates and you want it stopped, call us. We can help you."

Some other places defeating fluoridation this year:

\* January 2001 -- Willamina, Oregon, City Council says "no" to fluoride.

\* March 2001 -- Norridgewock, Maine, votes down fluoridation.

\* April 2001 -- City residents of McPherson, Kansas, rejected a fluoridation proposal by a nearly 5-to-1 ratio. It was their third vote against fluoridation.

\* May 2001 -- Brewster, Massachusetts, said no thanks to fluoride in the town's water systems.

\* May 2001 -- Harper, Kansas, citizens successfully petitioned against fluoridation.

\* June 2001 -- Eureka Springs, Arkansas, city officials followed water customers' advice and rejected fluoridation.

\* August 2001 -- Woods Cross, Utah, City Council said no thanks to fluoridation after a citizens' group presented them with a petition to opt out of a countywide fluoridation plan.

\* September 2001 -- Goldendale, Washington, council members unanimously rejected any proposal to add fluoride to the city's water supply.

\* October 2001 -- Centerville, Utah, City Council decided against fluoridation.

\* October 2001 -- White Salmon, Washington, City Council rejected fluoridation.

In other countries:

\* March 2001 -- Japan's Assembly of Kanra-machi, Gunma Prefecture, rejected a fluoridation proposal.

\* April 2001, Onehunga, New Zealand, voted two to one against fluoridation.

\* October 2001 -- Voters in Kamloops, British Columbia, Canada, ended 40 years of fluoridation.

On election day, 2000, 14 communities voted down fluoridation.

SOURCE New York State Coalition Opposed to Fluoridation

CO: New York State Coalition Opposed to Fluoridation

ST: New York

IN: HEA

SU: LEG

11/12/2001 08:59 EST <http://www.prnewswire.com>

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## **Dentists to sue over continued fluoridation of drinking water**

**By Fionnuala Quinlan**

**October 22, 2001**

**[\*The Irish Examiner\*](#)**

A GROUP of Irish dentists are to sue the Minister for Health, Micheál Martin, for continuing to fluoridate drinking water.

The dentists, who are breaking ranks with the Irish Dental Association, plan to lodge papers with the High Court after handing a letter of protest into the Dáil on Friday.

The move comes as the Forum on Fluoridation — set up by the minister to examine both sides of the fluoride argument — completes its report, due to be published by the end of the month. The forum was branded a “rubber-stamping exercise” by the dentists planning to sue the Government.

The group of 20 — Irish Dentists Opposing Fluoridation — maintain that health authorities have not fulfilled their obligation under the 1960 Health Act to carry out regular surveys into the health effects of fluoridation.

Spokesman Dr Don MacCauley said the department had never carried out a comprehensive survey, although international research has linked fluoridation to cancer, irritable bowel syndrome, hip fractures and thyroid disorders. A study published in American medical journal NeuroToxicity found that fluoride exposure could produce lower IQ levels in children.

Up to 50% of Dr MacCauley’s teenage patients have dental fluorosis — which has been linked to fluoridation — which creates white spots or lines on teeth and causes tooth enamel to chip, he said.

The agent used, hydrofluosilic acid, is a waste component of the fertiliser industry and contains traces of chromium, mercury, arsenic and lead, according to Dr MacCauley.

Ireland is now the only country in Europe to insist that drinking water be fluoridated, although nine county councils, two corporations and seven urban district councils have voted to end fluoridation.

Dr MacCauley said the group opposed fluoridation because medication is being administered without consent, the public has not been fully informed of the risks and side effects and fluoridation causes dental fluorosis.

Kildare-based GP Andrew Rynne is taking a separate case against the Government and the Irish Medicines Board (IMB) on the grounds that, although fluoride is a medicine, it is not licensed by the IMB.

A Health Department spokeswoman said all the issues raised by Dr MacCauley had been covered by the Forum on Water Fluoridation. However, she declined to comment on the contents of the report in advance of its publication.

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# Utah a national leader by not fluoridating

Written by David W. Christopher M.H.

*[The Daily Herald](#)*, Provo, Ut.

Sunday, June 4, 2000

Utahns consistently reject fluoride because we cut through the enormous endorsements and weigh the facts. We are not behind the times, but ahead of the 60 cities that bucked the system and rejected fluoride in the 1990's. We're unique because we vote. Most cities are fluoridated by executive order.

The task of unmasking this fluoride farce is monumental. Utah being the least fluoridated state is pivotal. If we can withstand the onslaught of federal, state, industrial, and of course medical pressure, Utah can send a clear message to Washington that like Europe and the majority of the world we will not be a part of the biggest hoax perpetrated on America since its inception. One lemming bucking the crowd will be noticed by other States who then might finally call for congressional hearings ferreting out the perpetrators of this insidious practice of dumping toxic waste into our drinking water under an EPA loophole.

Is fluoride toxic? Science shows fluoride is more toxic than lead (Clinical Toxicology of Commercial Products-1984) The majority of fluoride is captured into ponds from EPA required smokestack scrubbers and sold untreated to municipalities. The technical name is fluorosilicic acid, and yes it is a toxic waste that can totally dissolve any cement barriers.

Is fluoride a cumulative toxin? Of course it is; that's how it's supposed to work. It attaches to the calcium in bones. That is why dentists apply it to your teeth. However, when you drink it in water it enters the blood stream and attaches to the first bones it comes in contact with. Does fluoride cause hip fractures? Yes. Hip fractures were caused inadvertently in a study designed to prove fluoride prevented osteoporosis. In the trials elderly women were given 75 mg. per day of sodium fluoride and compared to a control group. The study ended abruptly with the horrifying discovery that fluoride caused these fractures. In light of this study another study looked at low levels of fluoride in drinking water at the optimal level of 1 ppm. Hip fractures were 27% higher in women and 41% higher in men living in Brigham City, the largest fluoridated community in Utah, compared to non-fluoridated Logan and Cedar City. These studies were verified in five additional studies including the French study (JAMA 1995; 273:775) that showed an 86% increase in hip fractures in fluoridated communities. Additionally, Toronto which has been fluoridated for 35 years has twice the hip fractures as Quebec which has never been fluoridated.

Is fluoride absolutely safe? Of course not! There are more than 500 peer reviewed studies documenting adverse effects of fluoride ranging from cancer to brain damage. Tragically all of these studies will be dismissed as non conclusive by a medical system which has a predetermined mind set that fluoride is safe and effective.

Should we vote on it? By the initiative process, yes. If they can't get enough signatures? Then no, and quit wasting our time. How many times? I guess until they join our side!

David Christopher

Spanish Fork, Utah

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## Prominent researcher apologizes for pushing fluoride

By Barry Forbes,

*The Tribune*, Mesa, AZ

Sunday, December 5, 1999

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"Why'd you do it, Doe? Why'd you toss the fluoride folks overboard?"

I had just tracked down Dr. Hardy Limeback B.SC., Ph.D. m Biochemistry, D.D.S., head of the Department of **Preventive Dentistry** for the University of Toronto, and **president of the Canadian Association for Dental Research.** (Whew.)

**Dr. Limeback is Canada's** leading fluoride authority and, until recently, the country's primary

**promoter** of the controversial additive. In a surprising newsmaker interview this past April; Dr. Limeback announced a dramatic change of heart. "Children **under three should never use fluoridated toothpaste,**" he counseled. "Or drink fluoridated water. And baby formula must never be made up using Toronto tap water. Never."

Why, I wondered? What could have caused such a powerful paradigm shift?

"It's been building up for a couple of years," Limeback told me during a recent telephone interview. "But certainly the crowning blow was the realization that we have been dumping contaminated fluoride into water reservoirs for haft a century. The vast majority of all fluoride additives come from Tampa Bay, Florida smokestack scrubbers. The additives are a toxic byproduct of the super-phosphate fertilizer industry."

"Tragically," he continued, "that means we're **not just dumping toxic fluoride into our drinking water. We're also exposing innocent, unsuspecting people to deadly elements of lead, arsenic and radium, all of them carcinogenic. Because of the cumulative properties of toxins,** the detrimental effects **on human health are catastrophic.**" A recent study at the University of Toronto confirmed Dr. Limeback's worst fears. "Residents of cities that fluoridate have double the fluoride in the hip bones vis-à-vis the balance of the Population. Worse, we discovered that fluoride is actually altering the basic architecture of human bones."

Skeletal flourish is a debilitating condition that occurs when fluoride accumulates in bones, making them extremely weak and brittle. The earliest symptoms?

"Mottled and brittle teeth," Dr. Limeback told me. "In Canada we are **now spending** more money treating dental fluorosis than we do treating cavities. That includes my own practice."

One of the most obvious living experiments today, Dr. Limeback believes, is a proof-positive comparison between any two Canadian cities. "Here in Toronto we've been fluoridating for 36 years. Yet Vancouver-which has never fluoridated-has a cavity rate lower than Toronto's." And, he pointed out, "cavity rates are low all across the industrialized world including Europe, which is 98% fluoride free. Low because of improved standards of living, less refined sugar, regular dental checkups, flossing and frequent brushing. Now less than 2 cavities per child Canada-wide,' he said.

"I don't get it, Doc. Last month, theca Centers for Disease Control (CDC) ran a puff piece all across America saying the stuff was better than sliced bread. What's the story?"

"Unfortunately," he replied, "the CDC is basing its position on data **that is 50 years old, and** questionable at best. Absolutely no one **has done research on fluorosilicates, which is the junk they're dumping into the drinking water.**"

"On the other hand," he added, "the evidence against systemic fluoride intake continues to pour in."

"But Doc, the dentists"

"... have absolutely no training in toxicity," he stated firmly. "Your well-intentioned dentist **is** simply following **50 years of misinformation from public health and the dental association. Me, too. Unfortunately, we were wrong.**"

Last week, Dr. Hardy Limeback addressed his faculty and students at the University of Toronto,

Department of Dentistry. In a poignant, memorable meeting, he apologized to those gathered before him.

"Speaking as the head of preventive dentistry, I told them that I had unintentionally mislead my colleagues and my students. For the past 15 years, I had refused **to study the toxicology information that is readily available to anyone. Poisoning our children was the furthest thing from my mind.**"

"The truth," he confessed to me, "was a bitter pill to swallow. But swallow it I did."

South of the border, the paradigm shift has yet to dawn. After half a century of delusion, the CDC, American Dental Association and Public Health stubbornly and skillfully continue to manipulate public opinion in favor of fluoridation.

Meantime, study after study is delivering **the death knell of the** deadly toxin. Sure, fluoridation will be around for a long time yet, but ultimately its supporters need to ready the life rafts. The poisonous waters of doubt and confusion are bound to get choppy.

"Are lawsuits inevitable?" I asked the good doctor. "Remember tobacco," was his short, succinct reply.

Welcome, Dr. Hardy Limeback to the far side of the fluoride equation.

It's lonely over here, but in our society loneliness and truth frequently travel hand in hand.

Thank you for the undeniable courage of your convictions.

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## TODAY'S NEWS

[Tyrone](#)

Tyrone captain Peter Canavan celebrates with wing forward Brian Dooher after defeating Armagh in the All-Ireland SFC final at Croke Park yesterday. Pic Denis Minihane.

Plenty of cloud and outbreaks of rain. [More](#)

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By Catherine Shanahan  
HEALTH care facilities worth up to €150 million are lying idle around the country because of government funding shortages. [READ ARTICLE](#) ▶

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By Fionnán Sheahan, Political Reporter  
FIANNA FÁIL denied last night that pressure applied directly by the party leadership led disgraced tax evader Michael Collins to resign the party whip. [READ ARTICLE](#) ▶

[15,000 troops mobilised as US seizes Iraq weapons cache](#)

By Katarina Kratovac, Baghdad  
THE Pentagon mobilised 15,000 fresh troops for duty in Iraq as the US military announced yesterday it had found large caches of weapons, including missiles, near Saddam Hussein's hometown of Tikrit. [READ ARTICLE](#) ▶

[Blair launches passionate defence of war on Iraq](#)

By Jon Smith  
BRITISH Prime Minister Tony Blair yesterday launched a passionate defence of the war on Iraq and said there would be no turning back from controversial policies on foundation hospitals and university tuition fees [READ ARTICLE](#) ▶

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**Peter Canavan**

[Red Hand finally gets to grasp Sam](#)

By Mark Gallagher

CROKE PARK looked like it was frozen white as the GAA season came to an end yesterday.

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[Bank offers ATM overdrafts](#)

By Ian Guider

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[21:54 Temporary traffic lights and roadworks are in place](#)

[in Tallaght on the Greenhills Rd between Airton Rd and Old Tallaght Rd](#)

[21:54 There is NO left turn from Amiens Street into the IFSC until mid Dec 03 for LUAS works](#)

[21:51 Fingal Co Council have works in place on the Old Airport Rd near Kittyhawks, Santry near the Collinstown Cross](#)

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**BRAVE** Irish teenager Sarah Keogh has one wish in life - to find her long-lost father.

Can you help?

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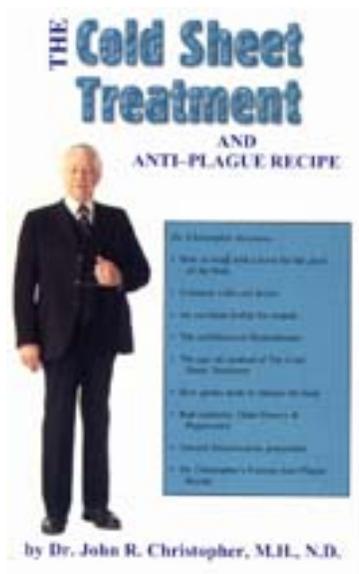


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# The Cold Sheet Treatment

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## The Cold Sheet Treatment

This booklet expounds step-by-step the most effective methods of using hydrotherapy and the body's own healing system to combat colds, flus and other viruses. By aiding a body's fever, one can quickly increase the immune system and easily overcome illness. This revised edition includes the Anti-Plague Formula recipe.

Paperback - 32 pages - #99107

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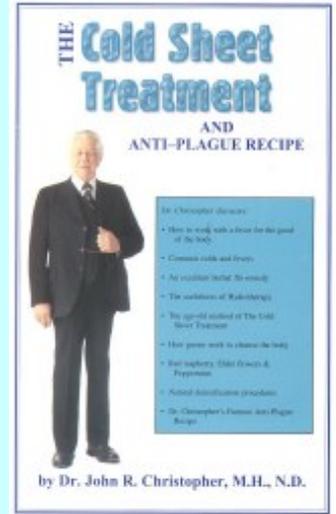
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## El Programa de los Tres Días de Limpieza y la Dieta sin Mucosidad

**del Dr. Christopher**

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### Introduccion:

El programa de limpieza interior se hace con el propósito de purificar el cuerpo preparándolo para su curación. Si está subido de peso, este programa le hará bajar a su peso normal; y si está bajo de peso, le hará subir hasta su peso óptimo. El propósito del programa es eliminar la mucosidad del cuerpo, con lo cual se obtiene una cura natural en una forma muy simplificada, con las menores molestias para el paciente.

Recuerde, no hay enfermedades incurables, solamente personas incurables. Este programa de limpieza interior lo bendecirá in cinco formas:

1. Eliminará el exceso de mucosidad del cuerpo, que es lo que origina el desarrollo de pólipos, tumores, quistes, etc; los cuales hacen que el cuerpo envejezca rápidamente. (Vease "Procedimiento de Purificación-Detoxificación del Cuerpo").
2. Le dará alimentos que son de las más alta calidad vibratoria (que son vivos, nutritivos y saludables), los cuales vigorizarán las partes vitales del cuerpo de tal forma que ellos no pierdan la salud sin aviso. La mucosidad es la causa de alergias, enfermedades, dolores y muerte, y por esta razón le estamos dando esta dieta anti-mucosa que mantendrá el cuerpo limpio de esas sustancias que causan el pronto envejecimiento de la persona.

3. Le proveerá de la ayuda correctiva para facilitar la cura y la regeneración del cuerpo humano. (Véase Ayudas Correctivas).
4. Disipará la electricidad estática del cuerpo, y de esta manera eliminará su resultado, que es la confusión y la frustración.
5. Le proveerá de fórmulas de plantas que le ayudarán a encontrar mejor salud y felicidad.

## **I. LOS TRES DIAS DE LIMPIEZA**

Para empezar este programa de limpieza se requiere que el paciente este bajo una terapia de 3 días de detoxificación (purificación de cuerpo), para entonces proceder con la dieta como se indicará después. El procedimiento de la eliminación de la mucosidad y el catarro y la detoxificación que recomendamos es tomado en parte del libro del Dr. N. W. Walker, "Raw Vegetables Juices": To Detoxicate,,: Phoenix, Arizona: Norwalk Press, Publisher, pp 58-71.

La limpieza suprema es el primer paso para la obtención de la salud. Cualquier acumulación o retención de materia residual de cualquier clase dentro de nuestro cuerpo retardará el proceso de recuperación. Los canales naturales de eliminación son los pulmones, los poros de la piel, los riñones y los intestinos.

La transpiración es la acción de las glándulas sudoríparas de eliminar del cuerpo las toxinas, las cuales podrían ser perjudiciales para nosotros si son retenidas en él. Los riñones excretan los productos finales de la comida y del metabolismo que vienen del hígado. Los intestinos eliminan no sólo los residuos de la comida, sino también materia residual en forma de células y tejidos muertos, que son resultado de nuestras actividades físicas y mentales; las cuales si no son eliminadas, causan putrefacción de las proteínas resultando en toxemia o acidosis.

La retención de estas materias residuales tiene un efecto mucho más perjudicial en nuestro cuerpo que lo que es generalmente sospechado, y su eliminación es uno de los primeros pasos hacia la obtención de progresos notorios.

Un método eficiente para efectuar dicha eliminación rápidamente, particularmente en el caso de adultos, ha sido encontrado a través del siguiente procedimiento: Lo primero que hay que hacer por la mañana, al levantarse, es tomar 16 onzas (1/2 litro) o más de jugo de ciruela seca. El propósito del jugo de ciruela seca no es sólo el de vaciar los intestinos (el cual se realizará de todas maneras), sino también el de atraer los despojos de todo el cuerpo, donde sea que éstos se encuentren, hacia los intestinos y eliminarlos a través de ellos.

Durante los tres días de limpieza, tome 1 o 2 cucharadas de aceite de olivo tres veces al día, para ayudar a lubricar los conductos del hígado y la bilis, etc.

Si la cantidad de volumen de materia eliminada no fuese reemplazada, en igual volumen por algo, entonces el cuerpo se deshidrataría en ese volumen. Por eso, tomando jugo de frutas reemplazamos las materias tóxicas o ácidas removidas o eliminadas. Este procedimiento traerá como resultado una reacción alcalina en nuestro sistema. Hay varios tipos de terapia por jugos - manzana, zanahoria, uvas, cítricos, tomate, etc., pero escoja sólo uno para los tres días, y "chupe" completamente cada bocanada que tome. La elección del líquido para el cuerpo debe ser hecha por experimentación individual y por preferencia.

No se debe comer nada sólido durante los tres días de limpieza, sin embargo, si llega a la noche con mucho hambre, puede comer apio.

**Terapia del Jugo de Manzana.** Como una de las más grandes plantas purificadoras de la sangre conocidas, tenemos la más común de las frutas: la manzana (orden natural: Pomaceae) con más de 2,000 variedades. El Dr. Edward E. Shook dice:

"No hay otro agente curativo o planta en el rango total de agentes terapéuticos conocidos, que puede compararse con el árbol de la manzana, y aunque sería difícil decir cual de sus muchas virtudes es la mejor, suponemos que su abundancia en compuestos de oxígeno naciente es probablemente la razón principal por la cual es una fruta tan apreciada, purificadora de la sangre e infalible remedio para muchas enfermedades." (Traducción)

El análisis químico de la manzana muestra el porqué de su gran valor curativo. Jugo de manzana fresca es lo mejor, si se puede conseguir; sinó, se puede comprar cualquier jugo de manzana embotellada que no tenga preservantes ni aditivos.

Empezar tomando 1/2 litro (16oz) de jugo de ciruela seca (prune juice), como la primera cosa en la mañana, y después de media hora 1/4 de litro (8 oz) de jugo de manzana sin diluir. Revuelva cada bocanada en la boca completamente (llamado "chupar") de tal forma que la saliva se mezcle con élla; de esta manera podemos obtener todo el valor nutritivo y curativo.

(Nota: Esta es la razón por la cual todos los alimentos deben ser comidos sin tomar líquidos, así la comida es masticada y "chupada" lo suficiente para ser convertida en líquido al ser mezclada totalmente con la saliva. Esta es la llave que abre la puerta de la digestión. El jugo no debe ser tragado. De esta manera todo su valor nutritivo será obtenido, y no habrá peligro de regurgitación o de que actúe como un emético para un estómago débil. Este procedimiento ayudará también al páncreas en casos de alto o bajo nivel de azúcar. Usando la saliva es esta forma, el programa curativo de limpieza interior es grandemente acelerado, ya que el resto de los jugos gástricos funcionarán apropiadamente en lugar de fortuitamente).

Entonces, media hora después, tomar un vaso de agua de preferencia destilada, seguido en otra media hora más tarde con más jugo de manzana. Aproximadamente 1 galón (4 litros) de jugo será consumido en un día, por un adulto de tamaño promedio, o una onza (una cucharada) por cada kg de peso de alguien si éste es más pequeño o más grande que el promedio. (Esto, por supuesto, es la dosis sugerida; la edad, la habilidad para asimilar líquidos, etc. determinará la capacidad para cada caso específico). Este procedimiento se recomienda como una "regla de dedo" y no como una ley específica; sin embargo, el procedimiento que estamos explicando ha demostrado ser el mejor.

El disolver la mucosidad durante la terapia de jugo, generalmente causa estreñimiento. Use nuestra fórmula para el intestino grueso (**Fen LB**, que se encuentra en la última sección de este libro), 2 o más cápsulas 3 ó más veces al día.

Repita este método de detoxificación por tres días consecutivos. De este modo aproximadamente 3 galones (12 litros) de toxinas linfáticas serán eliminadas del cuerpo y serán reemplazadas por tres galones de jugo. Esto traerá como resultado una acelerada realcalinización del sistema. Si aparece alguna condición de ictericia (resultado de la alteración del funcionamiento del hígado, que causa color amarillo en los ojos y en la piel) o dolor en la zona hígado-vesícula biliar usar la fórmula No. 3 (**Barberry LG**).

En el cuarto y siguiente días, empiece a tomar jugo de vegetales, y a comer verduras y frutas, preferiblemente crudas (ensaladas). Para el desayuno por ejemplo se podría comer frutas de la estación en rodajas, rayado o cortado, algo de miel para endulzar, y una o dos cucharadas de almendras finamente rayadas y sin echarle sal. Se podría tomar también uno o dos vasos de jugo de fruta fresca o de verduras 30 minutos antes o después de comer las frutas.

Para el almuerzo se podría comer más frutas y 1/2 litro de jugo de verduras frescas y alguna clase de ensalada de verduras.

No debemos alarmarnos si nos sentimos de alguna manera débiles durante o después de este programa de detoxificación. La naturaleza usa nuestras energías para efectuar la limpieza general de nuestro organismo. Pronto obtendremos mayor energía y vitalidad como resultado de este programa, además de obtener un cuerpo mas limpio y saludable. Es bueno hacer los tres días de limpieza mensualmente o varias veces al año.

(NOTA: Si existe la más ligera tendencia hacia apendicitis, podemos hacer uso de enemas con infusión de nebeda (catnip) o de una infusión hecha de tres partes de las hojas de la frambuesa roja (red raspberry) y una parte de las hojas de lobelia, 2, 3 ó más enemas al día por una semana o más, si es necesario. Creemos en el uso de enemas en casos de emergencia solamente, y no como apoyo para unos intestinos inactivos o "flojos").

**Terapia del Jugo de Zanahoria.** El mismo procedimiento que se usa con el jugo de manzana se usa con el jugo de zanahoria. Este puede ser usado directamente sin diluir, tomando un vaso de 1/4 de litro (8 oz) cada media hora, si desea, como con el jugo de manzana.

**Terapia del Jugo de Cítricos.** La mejor terapia de jugos usando cítricos es una combinación.

Estos son preparados frescos y en las siguientes proporciones: 4 a 6 toronjas o pomelos (de acuerdo con el tamaño), 2 o 3 limones y suficiente naranja para completar una mezcla total de 2 litros. Diluir con dos litros de agua para hacer un galon de este surtido. Luego proceda como en la terapia del jugo de manzana.

**Terapia del Jugo de Uva.** Aún si se vive en una zona de cítricos, es permisible substituir este surtido por el jugo de uva sin azúcar y sin aditivos. (Es mejor usar el tipo de frutas que crece naturalmente en la zona que vive de cada persona). Jugo de uva congelada no es recomendable porque son combinados con muchos aditivos inaceptables, en casi la mayoría de los casos. Las marcas de jugos vendidas en las tiendas naturistas que son obtenidas en suelos orgánicos y sin pesticidas son definitivamente superiores que los otros que son vendidos en tiendas regulares.

Diluir 2 litros de jugo de uva con dos litros de agua (de preferencia agua destilada). Se toma un vaso de 1/4 de litro (8 oz) empezando media hora después de haber tomado el jugo de ciruela seca en la mañana. Se sigue con 1/2 litro de jugo de uva diluído cada 20 ó 30 minutos de allí en adelante hasta que todos los 4 litros de jugo se termine. Entonces siga el procedimiento como en la terapia del jugo de manzana.

**Continuación del Ayuno.** Después de los tres días de limpieza, si la persona tiene el deseo y la habilidad de hacerlo, es siempre provechoso ayunar de 1 a 3 días, usando sólo agua destilada, y entonces un día de jugos antes de retornar a las ensaladas y otras comidas regulares. No coma ninguna comida pesada inmediatamente después del período de limpieza o después de un ayuno, sino que adicione éstos a su dieta gradualmente. Este es el mejor camino para retornar a las comidas sólidas.

**Síntomas de la Limpieza.** El inicio del proceso de la limpieza interior de nuestro cuerpo puede venir acompañado por dolores periódicos en las áreas donde la acción de limpieza es más aguda y los desperdicios están saturando el sistema de eliminación de nuestro cuerpo. Habrá momentos en que Usted se sentirá muy indispueto. No se asuste. De hecho, la acción de limpieza puede producir todos los síntomas y efectos de una enfermedad severa, pero la persona deberá actuar aquí con conocimiento y no quejarse del problema temporal creado por la limpieza que se está realizando; se requerirá mucha paciencia, y gran alivio resultará por el hecho de que el proceso de curación esta bien encaminado; y es mejor cuanto más pronto esas molestias vengan y se sientan.

Recomendamos el inicio de baños en tina con aceite de ricino (como se explicará después en este programa) durante los tres días de limpieza con jugos.

Esta eliminación y limpieza no será realizada instantáneamente, y uno no debería esperar que esas acumulaciones, que han sido "empaquetadas" en nuestro sistema durante toda nuestra vida, sean milagrosamente forzadas a salir fuera de los tejidos y órganos de un día para otro. Todo esto tomará tiempo: Llamado Tiempo Cíclico (trabajando con el funcionamiento cíclico normal del cuerpo). Por lo tanto, en el programa del Dr. Christopher usted tendrá días buenos y malos, y esto ocurrirá en ciclos. Estas "enfermedades por la limpieza" vienen en ciclos de 7 días, 7 semanas, 7

meses, y 7 años en la mayoría de los casos (puede variar dependiendo de la persona) y en cada uno de estos períodos cíclicos habrá lo que llamamos la Crisis de Limpieza y Curamiento. Cuando las toxinas venenosas se desprenden y descargan dentro de la corriente sanguínea para ser eliminadas, usted puede sentirse muy indispuosto, y frecuentemente durante una crisis usted puede sentirse peor de lo que pude haberse sentido antes de empezar el programa. Pero, nuevamente, no se asuste. Estas crisis son solamente toxinas venenosas tratando de salir del cuerpo (cargando pesadamente los intestinos) y le estan haciendo el favor de abandonarlo lo más rápido posible (causando dolor y molestia en el proceso de eliminación). Pero los malos días irán disminuyendo mientras que los buenos irán aumentando cada vez más, si usted tiene fé y sigue cuidadosamente el program.

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## Rápida Referencia Para los Tres Días de Limpieza

### **Cosas ha necesitar:**

54 onzas o 2 cuartos de jugo de Ciruela Seca (Prune Juice)

9 onzas de aceite de olivo

3 galones de el jugo seleccionado (manzana, zanahoria, cítrico o uva)

3 galones de agua (de preferncia destilada)

### **Pasos para la Limpieza:**

Paso 1: Jugo de Ciruela Seca

16 oz o más al levantarse en la mañana

Paso 2: Aceite de Olivo

Una o dos cucharadas tres veces al día

Paso 3: Jugo y Agua

8 onzas de fluído cada 30 minutos, alternando 8 onzas de jugo elegido con 8 onzas de agua destilada.

### **Tiempo Sugerido:**

7:00 a.m. .... 16 oz de jugo de ciruela seca y 1-2 cucharadas de aceite de olivo.

8:00 a.m. .... 8 oz o más de jugo elegido

8:30 a.m. .... 8 oz o más de agua destilada

9:00 a.m. .... 8 oz o más de jugo

9:30 a.m. .... 8 oz o más de agua destilada

Continúe alternando agua y jugo cada media hora hasta el mediodía.

12:00 p.m. .... 8 oz o más de jugo elegido y 1-2 cucharadas de aceite de olivo.

Continúe alternando agua y jugo cada media hora hasta las 5:00 p.m.

5:00 p.m. .... 8 oz o más de jugo elegido y 1-2 cucharadas de aceite de olivo.

Continúe alternando agua y jugo cada media hora hasta las 8:00 p.m.

8:00 p.m. .... 8 oz de agua cada hora hasta acostarse.

### **Recuerde:**

**Un tipo de jugo por tres días.** Seleccione cualquier jugo (manzana, zanahoria, cítrico, tomate, uva, etc.) Y úselo por los tres días completos.

**Solamente jugo.** No coma nada durante los tres días de limpieza, con excepción de la fruta o vegetal que se está usando con la limpieza.

**Chupe el jugo.** Asegúrese “chupar” totalmente cada bocanada.

**Estreñimiento.** Use más jugo de ciruela seca o tomar Fen LB si se desarrolla estreñimiento durante la limpieza.

**3 días de limpieza.** Repita esta detoxificación por tres días consecutivos.

**Cuarto día en adelante.** Después de 3 días de limpieza empieza a tomar jugo de vegetales y frutas, preferible crudas.

**Sintiéndose débil.** Usted probablemente se va a sentir un poco débil durante o después de la detoxificación ya que su cuerpo usará muchas energías para limpiarse.

**Enema.** Si existe la más mínima tendencia hacia apendicitis, use enema alta, pero sólo úselo en casos de emergencia y no como una “muleta” para unos intestinos flojos.

**Continúe el ayuno.** Una vez que a completa varios programas de limpieza, Usted puede ayunar 3 días más usando solamente agua destilada.

**Síntomas de la Limpieza.** Mientras su cuerpo se empieza a limpiar, Usted probablemente experimentará dolores periódicos en todo su cuerpo debido a la eliminación de toxinas, pero esto brinda una limpieza y un curamiento más rápido.

## II. DIETA SIN MUCOSIDAD

El segundo paso para el curamiento del cuerpo es eliminar de la dieta las comidas que forman mucosa (dieta es definida como la comida diaria de cada persona). No debemos ingerir mucosa en nuestro cuerpo más rápido que lo que éste toma para eliminarlo.

Con este procedimiento preventivo no sólo los sinusoides, los bronquios y los pulmones son despejados sino también la mucosa que produce el estreñimiento. El programa de comidas que dará este maravilloso resultado es conocido como la "dieta sin mucosidad".

**Comidas Peligrosas que Forman Mucosa.** Sustancias artificiales o inorgánicas en la comida deben ser eliminadas de la dieta del paciente:

1. **Sal.** Para aquellas personas que están acostumbradas a usar mucha sal, ésto podría sonar difícil pero, si usted lo sustituye con pimienta molida y condimentos de hierbas, adicionando kelp en polvo, encontrará que el deseo por la sal irá desapareciendo rápidamente. La pimienta es una planta muy nutritiva que ayuda a regenerar el cuerpo cuando es usado en su estado natural. Pero cuando la pimienta es cocinada, su estructura molecular cambia, y se convierte en un irritante inorgánico, y es éste el único momento en que tiene resultados dañinos. El uso de sales que están hechos a base de potasio o de vegetales son buenos, teniendo cuidado de no exagerar.

2. **Huevos.** No deben ser comidos en ninguna forma.

3. **Azúcar y todos los productos derivados.** Usted puede usar miel de abeja, melaza de zahina, pero no azúcar, ni sus aplicaciones.

4. **Carne.** Eliminar todas las carnes rojas de la dieta. Un poco de pescado de carne blanca una vez por semana, o un poco de pollo (que no ha sido alimentado con fines comerciales o inoculados con formaldehído o suero para evitar la descomposición) podría estar

bien (ya que éstas son las mejores formas de carne comestible) pero no los use muy seguido.

5. **Leche.** Eliminar la leche y todos sus derivados, los cuales incluye mantequilla, queso, queso cortado, yogurt, etc. Todas éstas son sustancias que forman mucosidad y en la gran mayoría son de alto contenido de colesterol (especialmente la mantequilla). Como un sustituto para la mantequilla o la margarina usted puede entrenar su gusto y gozar de un buen, fresco y suave aceite de olivo en las ensaladas y verduras, y descubrirá que éste es uno de los mejores alimentos que existen.

6. **Harinas.** La razón para eliminar la harina es que cuando es calentada y horneada a altas temperatura cambia a ser una sustancia formadora de mucosidad. Ya no es una comida, lo que significa que no hay "vida" en ella. Toda comida saludable es orgánica, mientras que la comida que no es saludable, o "comida muerta" es inorgánica. Esta es la clave de todo nuestro programa de eliminación de mucosa.

**Suplementos: Rehabilitación y Ayudas Curativas.** Nuestras recomendaciones suplementarias aumentarán la fortaleza de nuestro cuerpo, empezarán a eliminar la mucosidad de los tejidos y removerán el catarro fuera del sistema.

1. **Cayenne.** Tome una cucharadita de cayenne 3 veces al día. Empieze gradualmente con 1/4 de cucharita en un poco de agua fría (agua destilada preferible). Aumente 1/4 de cucharadita más a la dosis cada 3 días (1er día 1/4 de cucharita. 4to día 1/2 cucharita, etc.) hasta lograr una cucharadita 3 veces al día (el aumento gradual de la dosis acostumbra a su sistema a lo picante de la planta).

2. **Miel y Vinagre de Cidra de Manzana.** Ponga una cucharada de miel y una cucharada de vinagre en agua tibia, tal que la miel se derrita. Tome esta cantidad 3 veces al día. Este debe ser Vinagre de Cidra de Manzana. No use malta u otro tipo de vinagre ya que éstos son dañinos para el cuerpo. El Vinagre de Cidra de Manzana es medicinal y muy beneficioso.

3. **Kelp (Alga Marina).** Cada paciente debería tomar entre 10 a 15 cápsulas diarias, si es que hay alguna indicación de problemas con la tiroides; de otra forma, 2 ó más mantendrán al cuerpo en buena condición como nutrición preventiva. Este se puede tomar en lugar de la sal y ayudar a reconstruir una nueva glándula tiroides. Kelp en polvo puede ser usado en ensaladas o en otras formas.

4. **Miel de caña (Melaza).** Tome una cucharada de melaza de zahina 3 veces al día.

5. **Aceite de germen de trigo.** Tome una cucharada de este aceite 3 veces al día.

**Sugerencias para la Dieta: Alimentos Regenerativos.** Si la dieta es seguida al pie de la letra, le aseguramos que después de un tiempo muy corto usted tendrá una mayor satisfacción de las comidas que recomendamos (debido a la mejor salud que usted alcanzará) que con su dieta anterior. Usted inclusive llegará a su peso normal. Si está con kilos de más, los perderá con esta dieta, y si está bajo de peso, usted ganará peso después de haber pasado por su "nuevo bajo peso", debido a la mucosidad expelida fuera del cuerpo, antes que "carne buena" sea restaurada.

No se preocupe de que esta dieta omita carnes y los tipos de proteínas comerciales, y no se preocupe de adicionarlas a su dieta, ya que usted obtendrá todo lo que su cuerpo necesita de estas comidas. El cuerpo del gorila esta formado en el mismo orden biológico que el cuerpo humano, y él consigue todas las proteínas que necesita de las frutas, nueces y semillas (y para el hombre, las verduras y hortalizas reúnen todo lo que el cuerpo requiere.) Usted puede probar la efectividad de este programa por si mismo.

### **En las mañanas**

Es mejor no "romper el ayuno" (desayuno) hasta por lo menos al mediodía, excepto en casos de personas jóvenes o muy activas. Usted encontrará que ésto no será difícil hacerlo si usted usa las plantas que le recomendamos (como el cayenne, aceite de trigo, etc.). Estos le disminuirán el apetito, y le proveerá de la nutrición necesitada, tal que usted se sentirá satisfecho y habrá tomado estas plantas por la segunda vez durante la mañana antes del tiempo de la comida del mediodía.

Pero si después de tomar los tónicos para el intestino grueso (aceite de germen de trigo, cayenne, vinagre de cidra de manzana, miel de abeja, melaza, te de hierbas, etc.) usted está aún con hambre y quiere comer, la mejor comida para empezar el día es un buen y saludable cereal calentado a baja temperatura. Este debe ser cereal en su estado saludable (con "vida"). O se puede comer frutas frescas.

El cereal es preparado primero remojando en agua el grano sin partir de 8 a 20 horas, y entonces calentando al baño maría (en doble olla de acero inoxidable) a muy baja temperatura de 130 grados F o menos (55 grados C o menos) el que puede ser hecho echando agua caliente sobre el grano y entonces aplicando baja temperatura. Como un sustituto, ésto puede también ser preparado en botellas thermos para una o dos personas, como sigue: Tome un thermo (una pinta, un cuarto o el tamaño que necesite para su familia o sólo para usted), llene 1/3 de ella en la tarde o en la noche, con trigo rojo turco, que es de alta calidad proteínica, entonces termine llenando el thermo con agua hirviendo, (ponga la botella boca abajo una o dos veces, tal que durante la noche el agua circule completamente por la base y no deje nada del trigo sin tratar). Cuando usted abra el thermo en la mañana, después del calentamiento a baja temperatura durante toda la noche, el trigo estará listo para su consumo. El trigo se ha reventado, esta suave y delicioso (ya que nada de su sabor se ha perdido al cocinarse); este proceso se puede mejorar si se remoja el trigo anteriormente. Con un poco de mantequilla fresca y miel de abeja añadida, ésta es una comida deliciosa. Algunas personas les gusta agregar canela, pimienta de jamaica (allspice), etc.

El Trigo contiene todo el potencial de los valores nutritivos que necesita el cuerpo humano. La planta del trigo o hierba del trigo, especialmente, es una comida completa ya que le provee de proteínas, calcio, y todas las enzimas necesarias, vitaminas, minerales, etc., para reconstruir y regenerar la estructura celular de su cuerpo. El grano permanece "vivo" hasta que es "matado" en algún procedimiento de almacenaje químico o por la aplicación de altas temperaturas. La prueba para saber si el germen de trigo tiene "vida" es plantarlo y ver si todavía crece. Este procedimiento es válido inclusive para trigo cocinado y cuando es calentado a baja temperatura en olla de acero inoxidable; retendrá su poder vital y crecerá. Las comidas preparadas en esta manera son orgánicas; por lo tanto, ésta es la manera en que los granos deben ser preparados para su uso. Se nos ha dicho en las Santas Escrituras que "todos los granos 'saludables' y plantas son para el hombre, y el grano es la vara de vida", pero esto no quiere decir que es permitido molerlos a una apariencia de polvo sin finesa, o calentarlos a temperaturas mayores de 100 grados C y cambiar su estructura molecular de orgánico a inorgánico y por lo tanto hacerlo un formativo de mucosidad. El resultado de las invenciones del hombre indica lo contrario. Haga germinar los granos si usted desea, de preferencia remójelos, y revíentelos con calor húmedo (baño maría).

Los granos de trigo germinados son excelentes y nutritivos, pero si usted le dá un plato de éstos a un niño en crecimiento para el desayuno, el estará con hambre al poco tiempo; por lo tanto, un buen plato de granos de trigo, enjuagado y calentado a baja temperatura "le llenará el estómago" por horas. Alternar el trigo con cebada, mijo, trigo macho, centeno, avena de sémola (entero).

Usted puede preparar deliciosas casseroles con cebada, centeno, mijo trigo remojado, como se explicó anteriormente y mientras se está calentando a baja temperatura se puede agregar frutas o legumbres, plantas de buen sabor, etc. Todas las lentejas, frijoles, soya, preparados de esta manera son "vivos" y buenas para comer. La soya y la mayoría de los frijoles pueden ser remojados por dos o tres días y entonces cocinados a baja temperatura por 12 a 20 horas, agregando cebolla, ajos, pimienta, etc. durante el calentamiento.

La mejor manera de ver si su comida esta viva y saludable, es hacer un pequeño surco en su jardín y sembrar algunos granos que sobraron del desayuno, alguna casserola del almuerzo y lentejas de alguna otra comida; y en una segunda fila sembrar alguna wheaties, granola (tipos de cereales comerciales) y un pedazo de pan. Cúbralos y eche agua a cada fila y vea en cual de ellas hay crecimiento.

## **Al mediodía**

Si usted prefiere sólo un almuerzo ligero, entonces prepare una buena ensalada mixta de legumbres en la cantidad que usted desee, usando salsa de aceite de olivo hecho en casa:

1 taza de aceite de olivo

2 cucharadas de vinagre de cidra de manzana

1 pizca de hierbas, pimienta, etc.

(Haga esta salsa o aderezo a su gusto, ya que hay muchas variedades que usted puede hacer: de palta, cebolla, ajos, etc. pero no use las salsas procesadas de las tiendas comerciales.

Jugos pueden ser tomados durante la tarde: de zanahoria, de uvas, de manzana, etc. Frutas secas y un poco de nueces son muy nutritivos y beneficiosos, y los últimos son mejores como proteínas saludables cuando es usado en combinación con las verduras. Si una persona tiene cáncer o inclinación al cáncer no se debe exceder en comer proteínas coma las nueces, almendras, etc. Esto es algo que daña el páncreas si se come en exceso, y en estos casos, coma las nueces sólo en las mañanas. Pero permanezca alejado del maní o cacahuete y concéntrese en las almendras. Una persona con cáncer deberá comer entre 8 a 10 almendras en la mañana y la misma cantidad en el mediodía. Pero no debe tomar ninguna proteína desde la tarde hasta la mañana del siguiente día, permitiendo 16 a 18 horas al páncreas para limpiarse y empezar a trabajar en las enzimas otra vez. Toda proteína debe ser tomada temprano en la mañana, y por supuesto, en casos de cáncer, ninguna clase de proteína secundaria como la carne.

Proteínas son una moda y son altamente sobre-publicitados. Todas las frutas, vegetales (verduras), granos nueces y semillas tienen proteínas en ellas. Si usted está comiendo una buena dieta sin mucosidad y se pregunta por comidas con proteínas, entonces "Pregunte a cualquier gorila". Los órganos de su cuerpo son semejantes a los del hombre, y ellos viven más años que el hombre. Ellos son unos de los animales más fuertes, por su peso, en la faz de la tierra. Ellos se alimentan de frutas, y comen todo lo que crece sobre la tierra: frutas, granos, nueces semillas. Nosotros podemos gozar de las raíces y tuberculos que crecen debajo de la tierra, pero ellos no cavan como nosotros lo hacemos; por lo tanto, con zanahorias, papas, betarragas, etc. agregados a las plantas "arriba de la tierra", nosotros deberíamos ser más fuertes que los gorilas.

Nosotros matamos la vaca para comer la carne por las proteínas que ella consigue por comer pasto. Consigamos nuestras proteínas frescas y naturales y no de "segunda mano" a través de la carne del animal. No usemos algo preparado y mezclado por el hombre en su estado muerto. Las proteínas "comerciales" trabajarán en el efecto y darán rápido alivio para ciertas dolencias, pero el uso exagerado de estos tipos harán trabajar mucho al páncreas y otras glándulas, causando la hipoglucemia (bajo nivel de azúcar en la sangre) o diabetes (alto nivel de azúcar en la sangre). Las proteínas naturales vivas de la comida en el programa de la dieta sin mucosidad, serán usadas así como se necesiten y el exceso será descargado fuera del cuerpo en una forma natural cuando sea necesario. Las proteínas de tipo comercial son de baja vibración y las sedimentaciones permanecerán en las glándulas del cuerpo causando problemas posteriores.

La comida natural es muy importante. El trigo es un grano específicamente para el uso del hombre y si es usado regularmente, éste reconstruirá dentro del cuerpo todos los básicos e importantes elementos requeridos para su salud, además de todas las variedades de vitamina B.

Las comidas regulares pueden empezar con una buena taza o tazón de caldo de verduras. Las verduras deshidratadas en la forma de potasio en polvo (broth), puede ser preparado por usted mismo.

Hay miles de combinaciones para hacer ensaladas, con la cual puede empezar las comidas regulares, y con cierta investigación y experimentación, a usted nunca le faltará algunas ensaladas

interesantes. Después de eso, sirva los vegetales cocinados a baja temperatura (muchos tipos pueden ser preparados con varias hierbas sazonadoras, sacados del calor bajo justamente antes de servir). Estos siempre serán deliciosos y beneficiosos siempre y cuando se mantengan a baja temperatura y en su estado saludable. (Por lo menos, 5 a 6 verduras se debería comer por día, de las cuales 2 deberían ser las hojas de las verduras). Una pequeña cantidad de aceite blando (como el aceite de olivo) adicionado a las papas al horno, zapallo al horno, etc. es muy bueno. Con un poco de intrepidez e imaginación, usando alimentos saludables, usted puede preparar algunos platos muy interesantes y deliciosos. No necesita preocuparse por comer bastante para sentirse satisfecho y tendrá toda la nutrición necesaria para obtener suficiente fortaleza física; haga casseroles con granos enteros, etc. No tome líquidos durante las comidas, mezcle la comida completamente con la saliva. Espere 1/2 hora después de la comida para tomar líquidos.

## **En las noches**

Esta es generalmente la comida principal del día, pero usted puede cambiarlo como lo desee; la comida principal puede ser al mediodía, y la comida ligera con una ensalada, en las noches. Si usted prefiere una comida caliente, empiece con una taza de caldo de verduras. El caldo deberá ser seguido con una ensalada de verduras cocidas que han sido preparadas a fuego lento (baja temperatura). Asegúrese siempre de cocinar en acero inoxidable, pyrex o algún recipiente apropiado, pero nunca en aluminio, NUNCA!

Jugos o nueces, frutas secas o frescas son todas excelentes. Cada vez que use fruta fresca, úsela sola (monodieta). Cuando usted quiere comer otro tipo de fruta, espere 1/2 hora o más, por lo menos, antes de hacerlo (y ésta será asimilada mucho más fácil por su sistema digestivo). La monodieta es para personas en una rutina de curamiento. Si usted se siente bien y saludable, una ensalada mixta de frutas de vez en cuando es permitido.

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## **Algunas Recetas The Granos Cocinados a Baja Temperatura**

2 ½ tasas avena o trigo integral remojados en agua destilada suficiente para cubrirlos hasta una pulgada encima de ellos..

3 1/4 tasas agua destilada para cocinar.

1/4 cucharita sal marina.

Preparación:

**Remojarlo:** Lavar la avena dos veces. Cubra los granos lavados con agua hasta una pulgada por encima de ellos. Remojarlo por aproximadamente 5 a 6 horas en un lugar frío (la refrigeradora) para prevenir la fermentación.

**Método del FOOD WARMER:** Calentar el agua para cocinar en la cocina hasta casi hervir (160a 180 grados F). Bote el agua que estaba remojando los granos y eche los granos en el FOOD WARMER. Agregue el agua para cocinar calentada y sal marina a los granos. Esto debería bajar la temperatura de la olla a 120-130 grados F. Cocinarlo toda la noche (de 8 a 10 horas) a bajo calor de tal forma que la temperatura no suba más de 130 grados F. Si desea más o menos jugo en los granos, simplemente ajuste la cantidad de agua usado durante el cocinado.

**Método del Horno:** Siga las instrucciones de arriba y ponga los granos toda la noche en el horno con la luz del piloto prendido, o calentando el horno de 150 a 180 grados F de tal forma que la temperatura de la olla se mantenga cerca de 120 a 130 grados F. Este método es más difícil para regular la temperatura que el método del FOOD WARMER.

**Método del Thermo:** Llene la tercera parte del thermo con grano entero. Agregue una pizca de sal marina. Llene lo que sobra con agua hirviendo. Selle el thermo y déjele asentarse toda la noche. Los granos estarán listos para consumirlos la mañana siguiente. Este método tampoco es tan seguro como el método del FOOD WARMER.

**Secretos:** Los tiempos para remojar y cocinar variarán dependiendo en que lugar y altura se encuentra viviendo.

**Para servir:** En la mañana, todo lo que tiene que hacer es servir los granos directamente en los platos, o puede colarlo ligeramente hasta que obtenga una consistencia de harina de avena. Los granos son fáciles de digerir una vez que son licuados y tienen mejor sabor. Trigo licuado tiene un sabor rico en germen de trigo. Para comer en la mañana agregue manzana cortada, pasas, grocellas o bayas, y miel o jarabe de arce (Maple Syrup) para endulzar. Si usa una licuadora, usted puede encontrar los granos más sabrosos sin fruta, sólo con miel y un poquito de canela.

**Trigo:** El procedimiento para el trigo es el mismo que cuando preparamos la avena excepto por el tiempo de remojado y cocinado. Para el tener el trigo listo a las 7:00 a.m. hay que empezar a remojarlo el día anterior como a las 8:00 de la mañana y empezar el cocinado lento a partir de las 7:00 de la noche. Puede también substituir el trigo por centeno o cebada.

**Food Warmer cooker:** Este es un tipo de calentador de comida que usan los restaurantes que puede mantener la temperatura a valores de hasta 120 a 130 grados Fahrenheit. Puede comprarlo en tiendas que venden equipos para restaurantes. Asegúrese en comprar uno que la temperatura de calentamiento no exceda los 120 a 130 grados Fahrenheit.

## Caserola de grano vivo

2 tazas      cebada                      ½      green pepper  
remojar en agua (una pulgada      2 dientes      ajo  
sobre el nivel del grano)      2 cucharadas      aceite de ajo

2 ½ tazas	agua cocida	1 onza	salsa de tamari
1/4 cucharita	sal marina	½ cucharita	savory (ajedrea)
6	zanahorias medianas	3/4 cucharita	marjoran (mejorana)
3/4 to 1 tasa	arverjas	½ cucharita	Vege-Sal
½	Cebolla	1/8 cucharita	cayenne

Para caserola de cebada con zanahoria y tallito de brocoli, reemplace las arevrjas con: 1 tasa de tallitos de brocoli y reemplaze el savory and majoram por 2 hojas de bay (laurel) y 3/4 de cucharita de sweet basil (albahaca dulce) y 3/4 de cucharita de thyme (tomillo).

### Preparación

Enjuage la cebada dos veces en agua y dejelo remojar por 3 a 5 horas. Mientras la cebada se está remojando, manténgalo en un lugar frío, preferiblemente en el refrigerador para prevenir fermentación. Lave y prepare los vegetales. Pele y rebane las zanahorias, corte apio en rebanadas de 1/4 a ½ pulgada. Adelgace los tallitos de brocoli. Corte pimienta verde (green pepper) y desmenuze el ajo. Antes de empezar a cocinar los granos, algunos de los vegetales duros (como zanahorias, cebollas, los tallitos de brocoli y el apio) necesitan ser cocinados. Si usa hojas de laurel (bay leaves) pongalo en la cocina con los vegetales cocidos. Arverjas, green pepper, ajo y otros sasonadores van en la caserola sin pre cocinarlos. Aproximadamente 12 horas antes de servir, caliente el agua para cocinar hasta casi hervir (160 a 180 grados). Vaciar el agua de enjuage del grano y coloque el grano en un warmer-cooker. Agregue el agua caliente y sal al grano. La temperatura del grano debe ser aproximadamente de 110 a 126 grados. Agregue todos los vegetales y los sasonadores. Cúbralo y cocínelo a fuego lento. Antes de servir la caserola, pruebe la sazón a grege cayenne, Vege-Sal, u otros sasonadores. Usted puede substituir el trigo.

Los granos requieren muy poca atención mientras se cocinan, pero la preparación empieza el día anterior para dar el tiempo necesario para el enjuage y el calentamiento a fuego lento. Por ejemplo, empezar a enjuagar la cebada a las 3:00 p.m., empezar a cocinarlo y agregar los vegetales y los sasonadores entre las 6 a 8 p.m. La proporción de grano con vegetales es aproximadamente 50/50. Esta listo para la mañana siguiente.

### Caserola de grano vivo

2 tazas	centeno	2 dientes	ajo
	remojar en agua (una pulgada	2 cucharadas	aceite de ajo
	sobre el nivel del grano)	1 onza	salsa de tamari

2 tazas	agua (destilada)	2 cucharitas	perejil cortado (fresh parsley)
1/4 cucharita	sal marina	1/2 cucharita	salvia (sage)
5 a 6	zanahorias	3/4 cucharita	tomillo (thyme)
1 tasa	arverjas	1/2 cucharita	Vege-Sal
1/2	Cebolla	1/8 cucharita	cayenne
1/2	pimienta verde (green pepper)		

### Preparación

Use el mismo procedimiento usado para preparar la caserola de cebada con la diferencia que el centeno necesita más tiempo de enjuague y un poquito más de tiempo de cocinado.

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## III. AYUDA CORRECTIVAS

**Fomentación con aceite de ricino.** Para deshacernos de la mucosidad endurecida en nuestro cuerpo, la que puede generar quistes, tumores o pólipos, la siguiente fomentación es recomendada:

Remoje un pedazo de franela o pañal de bebe en aceite de ricino, exprímalo un poco de tal manera que no gotee mucho y aplíquelo sobre el dorso frontal del cuerpo (desde el cuello hasta la ingle, y de lado a lado). Coloque una bolsa de agua caliente sobre la aplicación del aceite de ricino en el área del hígado (el hígado se encuentra en el lado derecho, bajo la cintura). Nótese que parches calientes no son altamente recomendados aquí, a no ser que una toalla mojada sea colocada entre éste y la franela con el aceite de ricino; aún así, calor húmedo como el que provee la bolsa de agua caliente es lo mejor. Mantenga esta fomentación en las zonas por 1/2 o 1 hora. La bolsa de agua caliente debe ser llenada varias veces ya que el agua en ella se enfría rápidamente.

Los siguientes tres días y sobre la misma zona cubierta por fomentación, masajee con aceite de olivo, en forma circular y dirigido hacia el corazón, durante 5 a 10 minutos.

El séptimo día es de descanso, no sólo para la aplicación de la fomentación, sino para cada parte del programa, tomando sólo agua durante todo el día (cada séptimo día de allí en adelante se realizará lo mismo). En el octavo día, empezar nuevamente con el aceite de ricino por tres días y repetir nuevamente el proceso, juntamente con la dieta sin mucosidad, las hierbas, etc. hasta que el curamiento sea obtenido.

En el uso de la fomentación, el aceite de ricino va a través de la piel hasta el área del hígado y las

glándulas linfáticas y empieza a captar las sustancias venenosas y las elimina a través de los poros; mientras que el aceite de olivo penetra en la piel y cura reconstruyendo nuevos tejidos. Este procedimiento puede durar entre 6 a 8 semanas para limpiar propiamente el sistema, dependiendo, por supuesto, de cada caso.

**Ejercicios.** Es necesario que todos los pacientes hagan algo de trote lento ("jogging"). Esto ayudará a mejorar la circulación, entonar los órganos, y eliminar con mayor rapidez la acumulación de células muertas. Cada persona debería hacer 1 1/2 Km de jogging diario, pero debería empezar con 400 metros o menos. Nunca corra hasta el punto de quedar exhausto porque lo bueno que ha hecho en un día será inútil como resultado del sobre-ejercicio. Si por alguna razón el jogging no puede ser hecho afuera, hágalo en casa frente a una ventana abierta o en su jardín interior. Esto, especialmente, hará vibrar los músculos peristálticos del colon dándole tono, regenerando el útero en un estado prolapso en las mujeres, y ayudando a curar la próstata en los hombres.

**Respiración profunda.** Para no ser complicados, no le daremos aquí el procedimiento científico de respiración yoga o algo semejante. La idea principal es el inhalamiento profundo de aire fresco por la nariz y el exhalamiento a través de la boca. Inhalar lo suficientemente profundo que realmente duela cuando se lo hace. Hágalo cada mañana y cada noche, no menos de 5 o 10 minutos, y usted empezará y terminará el día con vigor y energía; y hacerlo antes de acostarse le ayudará a dormir como nunca antes lo ha hecho. La respiración profunda es el "soplo de vida", y la única forma que usted puede conseguir suficiente elemento de este "dador de vida" es a través de la inhalación del oxígeno del aire por la nariz. Este principio es muy importante pero aún muy subestimado. Una persona puede vivir 110 días sin comida y 16 días sin agua, pero sólo unos cuantos minutos sin respirar. Esto es algo al que prestamos muy poca atención y la respiración superficial, poco profunda es de lo más normal en estos días, y esto es porque ignoramos completamente que la respiración profunda es el "soplo de vida".

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## IV. EL CIRCUITO VITAL

Otro punto importante para vigorizar la salud de cada paciente en el programa del Dr. Christopher es el descargo de la electricidad estática del cuerpo mediante el caminar sin zapatos y medias en el jardín o césped durante 10 o 15 minutos cada día. Concerniente a la creación de esta electricidad estática en nuestro cuerpo, lo que sucede es lo siguiente: en el proceso de dar vida al cuerpo físico, los cabellos actúan como antena y absorben energía eléctrica de la atmósfera. Esta fuerza eléctrica penetra a través de la parte superior de la cabeza y distribuye muchos amperios y/o ohmios a cada célula, órgano, glándula, etc., y entonces el resto de la electricidad se supone que pasa y sale fuera del cuerpo hacia la tierra a través de los pies; pero cuando usamos zapatos con planta de jébe o sintética y usamos medias, esa electricidad no puede "hacer tierra" apropiadamente,

entonces ésta se acumula como electricidad estática en el cuerpo y como resultado nos convertimos en personas mentalmente confusas y frustradas.

Lo mas importante, piense positivamente, piense en SALUD! Sepa que usted tiene un grado de salud en este momento; agradezca a Dios por esta salud, y agradézcale en este momento con una oración positiva, agradézcale por la perfecta salud que usted tiene ahora. Recuerde que Jesus dijo: "El campo es blanco, listo para la cosecha." La buena salud es suya ahora si usted piensa positivamente en esta forma.

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## V. EXTENSION DE LA LIMPIEZA

Cuando trabajamos con problemas crónicos de salud no podemos esperar limpiar o curar el cuerpo completamente con una o dos rutinas de limpieza. Por lo tanto para eliminar las condiciones crónicas del cuerpo o prevenir que ocurran, se recomienda una extensión en la limpieza como un buen camino a seguir. Esto se debe realizar siguiendo la ya mencionada dieta sin mucosidad.

Al levantarse se toma 1 ó 2 cápsulas (o más si es necesario) de nuestra fórmula para los intestinos (Fen LB). Esto será repetido 1 hora antes del almuerzo, y antes de retirarse a dormir en las noches.

Entonces, 20 minutos antes del desayuno tomar 2 cápsulas de nuestra fórmula para el hígado y la vesícula (Barberry LG), lo cual se repetirá antes de cada comida.

Lo siguiente que se toma es 2 cápsulas de la fórmula para los riñones y la vejiga (Juni Pars) a la mitad de la mañana y a la mitad de la tarde.

Se seguirá esta rutina por 6 días, descansando en el séptimo. Volveremos a tomar estas fórmulas en la segunda semana, agregando 2 cápsulas de nuestra fórmula para purificar la sangre (Red Clover Combination) 1 hora antes de cada comida. Seguiremos nuevamente esta rutina por 6 días descansando en el séptimo. Este procedimiento continuará cada semana por el lapso de 6 semanas, después del cual se descansará una semana. Se repetirá estos intervalos por 6 meses descansando el séptimo mes. Al final de este programa de 7 meses, evaluaremos nuestro progreso y determinaremos si sería beneficioso repetir otro programa de siete meses.

La demora de una semana para agregar la fórmula purificadora de la sangre a este programa es absolutamente esencial por la eficiencia extrema de esta fórmula. En la primera semana estamos abriendo los canales de eliminación del cuerpo, permitiendo así un camino para eliminar las toxinas que serán desprendidas de la sangre por la fórmula purificadora.

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## VI. UNAS CUANTAS COMBINACIONES DE PLANTAS

En todas las formulas básicas de limpieza y rehabilitamiento provistas aquí (a menos que exista una condición particular de enfermedad y se necesite una específica combinación de plantas), el programa y procedimiento que sigue son para el promedio de personas y reúne casi todos los requerimientos para resolver problemas generales; esto es a menos, como decimos, que haya una necesidad de prescribir ayuda específica con fórmulas para un tipo de problema específico.

**1. Fórmula para tonificar el intestino grueso.** Tome la cantidad de cápsulas que usted necesite. Como no hay dos personas iguales en año, talla o estructura física ( y los intestinos mismos difieren en personas así como las huellas digitales lo hacen), en la mayoría de los casos se empezará con 2 cápsulas 3 veces al día y regular la dosis desde allí; pero si es difícil conseguir movimiento en los intestinos y el excremento es duro y toma mucho tiempo para eliminar, entonces incrementa la dosis hasta que la deposición se vuelva suave y bien formada (y aquí, en algunos casos difíciles, usted podría tomar hasta 40 cápsulas por día, ya que las plantas que forman estas cápsulas son solamente comida que no pueden hacerle daño). Entonces, después que el material duro se ha aflojado y eliminado, disminuya la dosis gradualmente (éstas son duras incrustaciones de materia fecal que han sido acumuladas en los intestinos por mucho años que se están aflojando y refregando con los líquidos intestinales), pero no disminuya la dosis de este tónico intestinal demasiado hasta el punto de perder la ventaja de "momentum" y continuidad en la eliminación. En muchos casos, la inapropiada alimentación ha causado que los músculos peristálticos de la mayoría de las personas dejen de trabajar, y tomará de 6 a 9 meses, con la ayuda de este tónico (**Fen LB**), para que una persona promedio, pueda eliminar la materia fecal incrustada y reconstituir la estructura intestinal lo suficiente para tener a los músculos peristálticos trabajando por si mismos. Esta combinación es hecha con berberis, cascara sagrada, jengibre, cayenne, etc.

La mayoría de las personas tiene kilos de vieja materia fecal almacenada en el colon, el cual toxifica el sistema y no permite que la comida sea asimilada correctamente, y es por la causa de esta condición de putrefacción, que muchas personas comen mucho más de lo que su cuerpo requiere.

En este proceso, ellos fatigan sus cuerpos tratando de nutrirse suficiente y aún así están siempre con hambre y comiendo; mientras que, después que el intestino es limpiado, la comida es fácilmente asimilada y una persona puede sostenerse con aproximadamente una tercera parte de la cantidad de comida que actualmente consume con 4 o 5 veces más fortaleza, vitalidad y vida. En este momento, el cuerpo limpio está apto para asimilar normalmente los simples valores nutritivos a través de la estructura celular del colon en lugar de ser atrapado en una masa de desperdicio e inhibido por la dura capa fecal formada en las paredes del intestino, donde la mayor parte de las sustancias nutritivas son empujadas y eliminadas antes que pueda absorberse. Cuando el cuerpo está absolutamente limpio, estas ayudas no serán necesarias, entonces "su comida será su medicina y su medicina será su comida". Nombre: **Fen LB**

**2. Formula purificadora de la sangre.** La corriente sanguínea es la "vida misma", y es nuestra misión mantenerla limpia y pura de tal forma que podamos tener un buen sistema circulatorio que lleve la comida (los nutrientes) a todo el cuerpo y que transporte las materias residuales para su futura eliminación.

Una buena purificación de la sangre junto con la limpieza del colon, forman una maravillosa combinación. Estos dos, con una buena dieta sin mucosidad, puede revitalizar el cuerpo y agregar muchos años de vida saludable.

Este reconstituyente de la sangre es hecho a base de trebol rojo, gobernadora, regaliz, la corteza de durazno, etc., algunas son hierbas que limpian y dan astringencia, otras que remueven el colesterol, matan infecciones, o edifican elasticidad en las venas y fortalecen las paredes de las venas y las arterias. Use dos cápsulas 3 veces al día, 6 días a la semana, semana tras semana hasta que la corriente sanguínea fluya como debe, brindando salud y energía. Nombre: **Red Clover Combination.**

**3. Fórmula para el mal funcionamiento del hígado y la vesícula.** Para acelerar el proceso de purificación de la sangre, es bueno tener el hígado y el área de la vesícula bien limpios. Cuando el hígado no funciona apropiadamente, la bilis no es escretada libremente en la región intestinal, y ésta circula dentro del torrente sanguíneo y a través del resto del sistema, causando una condición tóxica llamada "Colemia", que causa indigestión, inactividad, fatiga, estreñimiento, escalofríos, vómitos y fiebre. Porqué esperar hasta estar en esta condición? Esta combinación es a base de berberis, camote silvestre, jengibre, menta, etc. Dosis sugerida: 1-2 cápsulas 15 a 20 minutos antes de las comidas. Nombre: **Barberry LG**

**4. Fórmula para el mal funcionamiento de los riñones.** Aproximadamente 80% de nuestro cuerpo es líquido, y mucho de este fluido debe ser bombeado, filtrado, etc. a través del sistema urinario de la persona. Generalmente no tomamos el mejor cuidado de esta delicada parte de nuestro cuerpo. A través de este sistema circula materias irritantes y del tipo de materias que obstruyen la circulación como el té, el café, las bebidas gaseosas, el agua dura, el alcohol, etc.

Por años hemos usado esta fórmula de plantas con personas que tenían miedo estar en público, por causa de la falta de control del sistema urinario y que les hacia orinar sin su conocimiento. Después de usar esta fórmula, muchas personas han encontrado alivio y están viviendo vidas normales nuevamente. Esta compuesta por perejil, nebrina, malvavisco, entre otros. Dosis sugerida: 2 cápsulas en la mañana y en la noche con una taza de té de perejil (preferiblemente). Nombre: **Juni-Pars**

**5. Para más severos casos de incontinencia.** Esta fórmula es específicamente para la incontinencia y para fortalecer el entero canal de la uretra, los riñones, la vejiga, etc. Dosis sugerida: 2 cápsulas en la mañana y en la noche con una taza de té de perejil (Preferiblemente).

Al retirarse a dormir ajuste una bola de 6 a 8 pulgadas de pita o tela en su ropa de dormir en el

medio de la espalda. Esto es con el propósito de evitar que la persona duerma recostado en la espalda (boca arriba), ya que es así cuando se abren las válvulas que permiten el orinar. Nombre: **DRI, Kid-e-Dry.**

**6. Fórmula para el corazón.** El corazón es el motor que nos dá la vida, que cuando no está propiamente alimentado (con alimentos naturales) sufre de mal funcionamiento (debilidad y ataques cardíacos) causando fallas en el corazón, que es uno de los mas grandes "asesinos" en el mundo. La dieta sin mucosidad usado por un buen período de tiempo rehabilitará el corazón recuperando su fortaleza, pero si éste, sus válvulas y otras partes se encuentran en una condición débil y necesita una ayuda rápida, use el fantástico "tónico para el corazón" para ayudar a su restablecimiento. Esta comida es la fruta del espino blanco (*Crataegus oxycantha*, linn.). Tomando como referencia el libro "Potter's Cyclopaedia of Botanical Drugs and Preparations," una de las antiguas impresiones hechas en Inglaterra (publicado por Potter and Clarke, Ltd., 60 Artillery Lane, London), encontramos que ésta lista a la fruta del espino blanco como un tónico "cardíaco". Esta planta es aclamada como un remedio muy curativo para los desórdenes orgánicos y funcionales del corazón, como la arritmia, el rápido o débil trabajo del corazón, la hipertrofia (insuficiencia valvular) y opresión en el corazón.

El jarabe de la fruta del espino blanco es hecho con esta fruta concentrada usando brandy de uva y glicerina como ayuda y preservante. La dosis recomendada es 1/2 cucharita 3 veces al día. Si sufre repentinamente de todos los síntomas del inicio de un ataque cardíaco o, durante éste, una cucharita de cayenne en una tasa de agua caliente y tomado rápidamente, ha salvado muchas vidas. Nombre: **Hawthorne Berry Syrup.**

**7. Ayuda para el páncreas.** Esta fórmula ayuda al páncreas y otras glándulas afiliadas que a través de su mal funcionamiento causa el alto o bajo nivel de azúcar en la sangre (diabetis o hipoglicemia). Esta combinación ha ayudado a muchos que han tenido hipoglucemia, después de 6 ó más meses de tomar 2 ó 3 cápsulas 3 veces al día, 6 días a la semana. (Todas las plantas medicinales dan resultados más rápidos en 6 días a la semana en lugar de siete, usando el mismo día de la semana para descansar). Aquellos que han usado esta fórmula han tenido un test de tolerancia de la glucosa obteniendo un claro reporte de salud del páncreas.

Hay reportes de personas que usaban alta dosis de insulina, que aunque continúan usándola, la dosis ha decrecido considerablemente, y muchos, después de usar la fórmula por un año, siguiendo la dosis sugerida anteriormente, han conseguido una cura completa. Por supuesto, cuanto más cerca se permanezca de la dieta sin mucosidad y se elimine de las comidas el azúcar refinado, bebidas gaseosas, caramelos, pasteles, etc., los resultados se notarán más rápidamente. Name: **Panc Tea.**

**8. Fórmula de Calcio.** Maravillosa cápsula de calcio natural a base de horsetail (cola de caballo). Como se explica en el libro "Transmutación Biológica", la sílica en la cola de caballo se convierte en calcio y las otras plantas de la fórmula trabajan en combinación con ésta que es "master" en calcio. Necesitamos calcio para la capa que cubre los nervios, para las paredes de las venas y las

arterias, huesos, dientes, etc. esta combinación es de puras plantas naturales. Niños con dientes torcidos y apiñados que más tarde tienen que sacarle la muela del juicio por tener la mandíbula muy angosta, están necesitando calcio en el cuerpo. La mujer embarazada aumenta su capacidad de captar la cantidad de calcio necesaria, ahora para dos personas, así como para edificar en el bebé una buena mandíbula y un buen material para los dientes. Azúcar, pasteles, gaseosas y bebidas alcohólicas, caramelos, etc. roban el calcio del cuerpo, causando varices, calambres, dientes flojos, nerviosismo, etc. Nombre: **Calc Tea, Kid-e-Calc.**

**9. Fórmula para la alergia, sinusitis, alergias al polen y fiebre del heno.** Esta fórmula es una gran ayuda para el aclaramiento de estas enfermedades, una "natural ayuda herbolaria" que trabaja como un descogestionante y antihistamínico que limpia la zona sinusoidal, eliminando de la cabeza, los tubos y pasajes broncopulmonares los molestos obstáculos y mucosa. Esta fórmula consiste de té mormón, malvavisco, gobernadora, perejil, etc.

Para acelerar el proceso de limpieza, use la siguiente combinación en adición a la anterior,: corte la raíz de un rabano picante fresco en pequeños pedazos y licúelo con vinagre de cidra de manzana formando una pulpa espesa, y "chúpelo" completamente antes de pasarlo. Tome 1/3 de cucharita 3 veces al día. Cada 3 días aumente esta cantidad desde 1/3 hasta 1 cucharita, incrementando la cantidad 1/3 de cucharita cada 3 días. Nombre: **SHA Tea**

**10. Fórmula para la circulación de la sangre.** Esta fórmula es dada para ayudar a los purificadores de la sangre a trabajar más eficientemente y también para ayudar a curar alergias, etc. Este grupo de plantas alimentan el sistema circulatorio con cayenne y jengibre (estimulantes) donde el cayenne trabaja en el torrente sanguíneo desde el corazón y las arterias saliendo hacia las venas. Las otras plantas de la fórmula ayudan a estas dos a trabajar juntas para normalizar la presión de la sangre (si es alta o baja) y para obtener una buena lectura del sístole sobre el diástole. La corriente sanguínea es vida misma. Nombre: **BPE.**

**11. Fórmula contra la obesidad.** Combine esta fórmula con la dieta sin mucosidad y usted será un triunfador seguro. Este no es un programa espectacular de rápida pérdida de peso, sino, que sus resultados serán graduales y precisos, sin robar al cuerpo las sustancias nutritivas que necesita, como muchas de otras dietas de moda en estos días lo hacen. Esta fórmula actúa como un purificador de la sangre que ayuda a los riñones a aliviar el exceso de líquido, alimenta al cuerpo para el alivio de las tensiones nerviosas generalmente causadas por las dietas, apacigua el excesivo apetito, alimenta la tiroides y otras glándulas que no están funcionando bien y, además, logra una condición más saludable del cuerpo por el hecho de mantener un buen control del peso. Tome 2 a 3 cápsulas en las mañanas y en las noches con una tasa de té de morgalina (chickweed). Esta fórmula esta compuesta de morgalina, bardana, regaliz, perejil, kelp, etc. Nombre: **CSK.**

**12. Fórmula para el mal funcionamiento de los ganglios.** Debido a la acumulación de residuos tóxicos en el cuerpo por la impropia alimentación, al pobre torrente sanguíneo y a la lenta

circulación de la sangre, los ganglios se congestionan y llegan a inflamarse e infectarse causando mucho dolor. (Hay ganglios en el cuello, pecho, ingle, axilas, etc. que pueden llegar a inflamarse).

Esta fórmula puede ser usada para curar mastitis, mal funcionamiento de la tiroides, etc. Dosis sugerida: 2 cápsulas con una tasa de agua destilada. Nombre: **Mullein and Lobelia**.

**13. Fórmula para los nervios.** Esta es una fórmula que hemos usado con mucho éxito por cerca de 30 años y es recomendada para curar la tensión nerviosa e insomnio. Es un estimulante suave que reduce la irritabilidad y el excitamiento del sistema nervioso, y también reduce o elimina dolores.

Esta fórmula contiene plantas que alimenta y revitalizan el nervio motor en la base del cerebro (área medular y cervicales superiores) y también contiene plantas que ayudan a reedificar y alimentar la espina dorsal. Esta fórmula reedificará también las capas protectoras de los nervios que se encuentran desgastadas, el nervio mismo y sus capilares. Hecha en base de valeriana, lupulo, etc.

Dosis sugerida: 2-3 cápsulas 3 veces al día en una tasa de jugo de apio o de agua destilada.

Nombre: **Relax-Eze**.

**14. Fórmula para el dolor y la pérdida del oído.** Cuando esta fórmula es usada como se explica aquí, puede ser una gran ayuda para curar la falta de equilibrio, problemas para oír, para ayudar al nervio motor, etc. Usando un gotero, por las noches, echarse de 4 a 6 gotas de aceite de ajo y 4 a 6 gotas de B&B a cada oído y taparlos con algodón. Hacer esto 6 días a la semana, de 4 a 6 meses o cuanto se necesite. En el séptimo día lavar los oídos con una pequeña jeringa usando vinagre de manzana tibia y agua en proporciones iguales. Esta fórmula es hecha a base de lobelia y escutelaria entre otras plantas. Nombre: **B&B extracto y Oil of Garlic**.

**15. Fórmula para los pulmones y el sistema respiratorio.** Esta combinación es usada como una ayuda para curar la irritación en el sistema respiratorio, pulmones y bronquios. Es una ayuda para curar enfisemas, así como para otras congestiones de los bronquios y pulmones como bronquitis, asma, tuberculosis, etc. Esta fórmula es muy valiosa para el fortalecimiento y curación del sistema respiratorio completo. Ayuda a la descarga de las secreciones mucosas de los pasajes bronco-pulmonares. La dosis sugerida para adultos: 2 a 3 cápsulas 2 ó 3 veces al día con una tasa de consuelda (comfrey).

Esta fórmula es a base de consuelda, verbasco, lobelia, etc. Nombre:

**Resp-Free**.

**16. Fórmula para los resfríos e infecciones.** Esta fórmula es una combinación de ajo, perejil, berro, etc. que actúa como una ayuda para los tiempos de resfrío o para cada vez el ajo sea necesitado para detener cualquier infección. La dosis para un adulto varía de 2 ó más cápsulas 6 ó más veces por día tomado con una tasa de agua destilada. Nombre: **Garlic, Rosehips & Parsley**.

**17. Fórmula para ayudar a la eliminación los parásitos intestinales.** Esta combinación es a base de ajeno, hinojo, y papaya entre otras plantas. Actúa como un vermífugo (combinación que

causará la expulsión de gusanos y parásitos del cuerpo) y/o como vermícida (agente que destruye los gusanos y parásitos dentro del cuerpo). La dosis sugerida es tomar una cucharadita cada mañana y cada noche por 3 días. En el cuarto día tomar una tasa de té de sena y menta. Descansar dos días y repetir el proceso dos veces más. Nombre: **VF syrup**.

**18. Fórmula para ayudar a las encías.** Esta combinación consiste de encina blanca, consuelda, cola de caballo, lobelia, etc., y es usada para fortalecer las encías (encías sangrantes y el tipo de infecciones causadas por piorrea), y ayuda al fortalecimiento de dientes flojos. Este tipo de polvo dará más brillo a los dientes promoviendo una boca más saludable. Para casos severos coloque esta combinación en polvo entre los labios y las encías (superior e inferior) en el área de los dientes y déjelo allí cada noche durante 6 días a la semana (así como el cepillado regular de los dientes) hasta que el mejoramiento sea evidente. Entonces continúe con el cepillado regular de los dientes usando esta combinación. Nombre: **Herbal Tooth Powder**.

**19. Composición de plantas en polvo.** Consiste de arrayán, clavo de olor, pino blanco, etc. Como es mencionado por el Dr. Nowell, nuestro instructor en Dominion Herbal College, Ltd of Vancouver, British Columbia, en nuestro libro de texto:

"Nosotros hemos hecho y usado esta composición de plantas en polvo por más de 40 años. Cuando decimos que regularmente mezclábamos estas plantas en lotes de 60 libras (aprox. 28 kilos) los alumnos rápidamente verán que, al menos hemos tenido cierta experiencia en esto. Es un remedio para resfríos, principios de fiebre, gripe, ronquera, circulación lenta, cólicos, retorcijones, etc. Creemos que esta fórmula ha hecho más bien al género humano que cualquier otra preparación conocida de plantas individuales.

"Si esta combinación se tuviera en cada hogar, y se usara cada vez que la ocasión se presentara, habrían mucho menos personas enfermas en este mundo. Ofrezca esta composición libremente y sus pacientes le bendecirán. Observe los ingredientes y considere como éstos limpiarán las llagas ulcerosas y grangenosas, relajará los retorcijones y calambres y dolores de estómago e intestinos, subirá el calor del cuerpo equalizando la circulación, y removiendo congestiones. Esto es seguro. Este es efectivo. Nosotros, en innumerables ocasiones, hemos dado una tasa de esta composición cada hora, tan caliente como el paciente puede tomar, hasta que ha empezado a transpirar libremente, y después de 4 a 5 dosis hemos visto a nuestros pacientes con una libre transpiración y, de este modo, removiendo gripes, resfríos y problemas de fiebre." (Traducción). Nombre: **Herbal Composition**.

**20. Combinación para el enjuague de los ojos.** Esta fórmula es excelente para mejorar el brillo y curar los ojos, y es conocida porque remueve las cataratas y gruesas capas de carnosidad. Está compuesto por arrayán, cayenne, eufrasia, etc. Haga esto en forma de té y póngalo en una pequeña tasa de vidrio para enjuagar los ojos. Habrá una ligera sensación de ardor al principio, debido al cayenne, pero no hay nada que temer. Tire su cabeza hacia atrás y aplíquelo en el ojo. Abra el ojo cuando haga esto, como si estuviera bajo el agua. Hágalo 3 a 6 veces al día. Tome 1/2 tasa de

este té en la mañana y en la noche. Puede tomar también 2 cápsulas 3 veces al día para un resultado más rápido. Nombre: **Herbal Eyebright**.

**21. Combinación para ayudar al órgano reproductivo femenino.** Esta es una asombrosa combinación que ayudará a reconstituir a un sistema reproductivo que no esté trabajando apropiadamente (útero, ovario, trompas del falopio, etc.). A través de los años de herbalistas y los pacientes han sido testigos de dolorosas menstruaciones, pesado fluido, retorcijones, espasmos, irregularidad, etc. que han sido curados. El paciente tiene ahora una menstruación sin dolor, regular y una nueva perspectiva de la vida, gracias a la ayuda de esta combinación que reajusta las áreas que no funcionan debidamente. Esta ayuda correctiva para las mujeres es hecha a base de sello dorado, cardo bendito, jengibre, unicornio falso, etc. El uso sugerido es: 2 cápsulas en las mañanas y en las noches ó 3 veces al día si se desea, 6 días a la semana, por el tiempo necesario para obtener el resultado requerido. Nosotros hemos visto muchos casos severos con muchos años de sufrimiento, aliviarse en 90 a 120 días. Algunos se curan mas rápido, otros mas lento. Nunca se encontraran dos casos iguales. Nombre: **Nu-Fem**.

**22. Combinación para ayudar a la próstata.** En casos de mal funcionamiento, sugerimos esta combinación de cayenne, jengibre, ginseng, nebrina, entre, otros. Esta ayudará a disolver las piedras en los riñones, así como limpiará otras sedimentaciones e infecciones en la próstata. Tome dos o más cápsulas en las mañanas y las noches, con té de perejil si es posible. Nombre: **Prospallate**.

**23. Combinación para ayudar a las hormonas masculinas y femeninas.** Estas son comidas de hierbas naturales que son necesitadas por hombres y mujeres de todas las edades. Siendo hierbas "naturales" el cuerpo puede aceptar, asimilar y usar estos materiales que son necesitados para producir estrógenos y otras hormonas en una forma natural. Esta fórmula ayudará a reconstruir las áreas débiles de mal funcionamiento y ayudará a mantener los órganos saludables de tal forma que puedan abastecer la apropiada cantidad de hormonas y estrógenos por ellos mismos. Los tiempos críticos cuando esta fórmula es necesaria son en los tiempos del inicio de la pubertad, durante el embarazo, durante las semanas y a veces meses despues de dar a luz, y durante la menopausia. Las plantas son alimentos naturales, por lo tanto ellos no crean "efectos secundarios" ni "efectos retardados" como evidentemente sucede en los casos de las drogas sintéticas hechas por el hombre. Esta fórmula contiene entre otros el cohosh negro, ginseng, sarsaparilla, unicornio falso, etc.

Cada vez que un mal funcionamiento se presenta tanto en la mujer como el hombre, es bueno usar las siguientes fórmulas juntas, No.21 y No.23 para las mujeres y No.22 y No.23 para los hombres. Nombre: **Changease**.

**24. El bolo vaginal o rectal.** Esta es otra excelente ayuda para la mujer (o bolo rectal para el hombre) que tienen problemas en las areas reproductivas. Los bolos son hechos con plantas curativa que (1) eliminan las toxinas y venenos del cuerpo, (2) ayudan a convertir las áreas de mal fundionamiento en áreas saludables, de tal manera que quistes, tumores y condiciones cancerosas no

tendrán despojos o materia decadente en los cuales puedan vivir, ya que todos ellos son "animales de carroña." Herbalistas que usan esta fórmula han encontrado que estas "rapiñas" serán descargados dentro del sistema sanguíneo para ser luego eliminados, si el programa es seguido con fe. (3) Los bolos extienden la influencia de estas plantas ampliamente desde la vagina o intestinos a través de todo el sistema urinario y órganos genitales. La fórmula consiste entre otros de consuelda, squawvine, barba amarilla, malvavisco, etc. Todas estas plantas son en forma de polvo. Mantequilla de cocoa deberá ser derretida de tal forma que sea mezclada con nuestra combinación en polvo. Mezcle una pequeña cantidad de este polvo con la mantequilla de cocoa derretida hasta darle consistencia. Entonces amase la masa entre sus manos hasta darle la forma de un lápiz de un grosor aproximado del de un dedo medio y de 2.5 cm. largo. Endúrelo en el refrigerador. Entonces esto debe ser introducido en la vagina o en el recto en la misma forma que los supositorios. Será necesario usar una toalla o papel sanitario para mantener el bolo en la vagina o el recto. Inserte el bolo al retirarse a dormir y déjelo allí toda la noche, 6 noches a la semana. La mantequilla de cocoa se derretirá a la temperatura del cuerpo, dejando las plantas solas, la cual será fácil de lavarse. La siguiente mañana use la rutina de la fórmula No. 25. Nombre: **VB**.

**25. Combinación de la tabla inclinada.** Para dar alivio en casos de úteros prolapsados, intestinos y otros órganos, haga un té concentrado (caliente la combinación hasta que se obtenga la mitad de la cantidad inicial) de esta fórmula a base de pino blanco, consuelda, malvavisco, lobelia entre otros. Inyéctelo con una jeringa (mientras se está con la cabeza hacia abajo en una tabla inclinada) dentro de la vagina, 1/4 ó 1/2 de tasa o más; o una tasa o más en el recto, para problemas de prolapso o hemorroides, manteniéndolo dentro todo el tiempo que sea posible antes de evacuarlo. La dosis sugerida es 1/4 a 1 tasa una o más veces al día, y tome 1/4 de tasa de la combinación en tres cuartos de agua destilada 3 veces al día. Cuando el té es inyectado dentro del área abdominal y mientras se encuentre en la tabla inclinada, sobar y masajear la pelvis y el abdomen para ejercitar los músculos, de tal forma que el té sea asimilado por los órganos. Nombre: **Yellow Dock Combination**.

**26. Combinación para evitar la pérdida en el embarazo.** Esta consiste de dos hierbas (Unicornio falso y lobelia). A menos que se indique de otra forma, el té son siempre preparados con una cucharadita de hierba en una tasa de agua destilada. Si se presenta hemorragia durante el embarazo entonces use 1/2 tasa de este té cada media hora hasta que la hemorragia desaparezca, entonces use 1/2 tasa cada hora de vigilia durante todo el día, tratando de permanecer en cama lo máximo posible; y luego 3 veces al día durante tres semanas. Si la hemorragia continúa en lugar de decrecer, vea a un doctor. Nombre: **False Unicorn & Lobelia**.

**27. Fórmula pre-natal.** El uso de 2 ó 3 cápsulas en las mañanas y en las noches ayudará a dar elasticidad a la pelvis y el área vaginal, y fortalecerá los órganos reproductivos para un más fácil alumbramiento. Esta fórmula debe ser usada solamente en las últimas 6 semanas del embarazo. Las plantas usadas son entre otras, squawvine, cardo santo, unicornio falso, lobelia, etc. Nombre: **Pre-Natal Tea**.

**28. Combinación para los huesos, piel y los cartílagos.** Esta es una ayuda para el mal funcionamiento de los huesos, la carne y los cartílagos, y es excelente para venas varicosas, torceduras, curvatura de la espina dorsal, erupciones en la piel, coágulos de sangre, protuberancias producidas por calcio, etc. Haga un té de esta combinación hecha de pino blanco, malvavisco, consuelda, ajeno, etc. Ponga la combinación en una olla con agua destilada (a la proporción de 1 oz de la combinación por cada 16 oz de agua destilada) y déjelo remojar por 4 a 6 horas, caliéntelo a fuego lento por 30 minutos, cuélelo y entonces caliéntelo nuevamente, también a fuego lento, hasta que obtenga la mitad de la cantidad inicial del líquido y agregue 1/4 de glicerina vegetal (si desea).

Remoje una tela de algodón o franela en la mezcla (nunca use material sintético) y aplique la fomentación alrededor de la zona en problema y cúbralo con plástico para evitar que se seque rápidamente. Déjelo allí cada noche 6 veces a la semana, semana tras semana, hasta que se obtenga el alivio deseado.

Para casos severos: Tome 1/4 de tasa de este té concentrado con 3/4 de tasa de agua destilada tres veces al día. También puede tomar 2 cápsulas tres veces al día o usar en forma de unguento. Nombre: **BF&C**.

**29. Fórmula para el acondicionamiento del cabello.** Cada día como una ayuda para reestimar el crecimiento del cabello y durante 2 días, masajee el cuero cabelludo profundamente con aceite de ricino tibio, aplicando sobre la cabeza una toalla mojada con agua caliente por el espacio de 30 ó más minutos. Permanezca con el aceite durante toda la noche. Al día siguiente lávese la cabeza con un buen jabon bio-degradable y enjuégese. Repita el lavado y enjuégese nuevamente con esta combinación (que contiene entre otros gobernadora, salvia, etc.). No se enjuague esta vez, sino déjelo en el cabello y el cuero cabelludo (y masajee bien). Las siguientes dos noches use aceite de germen de trigo. Descanse una noche y repita el proceso por 6 días a la semana cuantas veces necesite. Tome 1 ó 2 cucharadas de aceite de germen de trigo en las mananas y en las noches, y además tome 1/4 de tasa de té de esta combinación hecha con agua destilada, 2 veces al día. Nombre: **Desert Herb Combination**.

**30. Combinación para artritis y reumatismo.** Esta fórmula consiste de hortencia, té mormón, yuca, gobernadora, entre otras plantas, y es una combinación que desintoxica; actúa como un solvente para los aceptados, pero no asimilados depósitos de calcio, plantas que alivian el dolor, ricas en nuevo y aceptable calcio orgánico que puede ser asimilado y usado útilmente; plantas que matan los hongos y la infección y que tiene la habilidad de dar un maravilloso alivio. Este alivio no es inmediato porque aquí se requiere un largo trabajo de reconstitución; el alivio vendrá gradualmente hasta lograr una total curación, pero sólo si usted sigue el programa con fé: 2 cápsulas con una tasa de té mormón 2 o 3 veces al día. Use como una fomentación caliente sobre las zonas tullidas y de extremo dolor (además de esta fórmula) la fórmula No. 28 llamada BF&C. O usarla en forma de unguento. También tome 2 o 4 tasas de la cascara del frejo, diariamente. Además, para un alivio del dolor mas rápido, recomendamos la aplicación externa de la fórmula #44 (Profeso Cayenne). Sin embargo, si Usted continúa con una dieta inapropiada, estas ayudas no darán efecto en la misma forma que si usted sigue las recomendaciones dadas en este libro. Recuerde que las enseñanzas que hemos recibido por años han sido "No hay cura para este caso..." Nosotros estamos

dándole esperanzas, pero sólo si Usted sigue con la dieta sin mucosidad y usa estas combinaciones de plantas. Nombre: **AR-1**.

31. **Fórmula para las infecciones.** Esta fórmula es hecha con llantén, malvavisco, lobelia, nogal negro, etc. Esta maravillosa fórmula mata la infección, elimina las toxinas del sistema linfático, y es un agente natural contra las infecciones. Nombre: **INF**.

32. **Combinación de kelp (alga marina).** Este es una ayuda para las tiroides y los ganglios. Este grupo de plantas ayuda a controlar el metabolismo y alimenta a la glándula tiroides para hacer su trabajo más eficiente. Es una ayuda glandular muy fina y eficiente. Está compuesta entre otros por perejil, berro, kelp o alga marina, etc. Uselo con la fórmula No. 11. Nombre: **Kelp-T Comb**.

33. **Extracto Antiespasmódico.** Consiste de escutelaria, lobelia, cayenne, valeriana, mirra, entre otros. Es para ser usado en casos de convulsiones, desvanecimientos, calambres y retortijones, temblores por delirio, histerias, etc. Es también bueno para piorrea, llagas en la boca, infecciones a la garganta, amigdalitis, etc. La dosis es 1/2 a 1 cucharita en un vaso de agua destilada para hacer gárgaras hasta que el dolor en la garganta desaparezca, también tome una cucharita en agua destilada hervida en las mañanas y en las noches. Nombre: **ANTSP**.

34. **Extract hecho de escutelaria, verbena azul, cohosh negro, entre otros.** Esto es usado en condiciones de nervios alterados, dolor de garganta, hipo y es una gran ayuda para restaurar el mal funcionamiento del nervio motor y asistir en el arreglo de pobre equilibrio y capacidad de oír, y además es una gran bendición para los epilépticos. Masajée este extracto en la médula (la base del cráneo) y en las cervicales superiores, siga las instrucciones en la formula 14, y tome de 6 a 10 gotas en un poco de agua o jugo 2 a 3 veces al día. Nombre: **B&B**.

35. **Fórmula para el alivio de dolores menores.** Esta es una fórmula que consiste de lechuga silvestre y valeriana. Es para ser tomado oralmente o masajeadó externamente para aliviar el dolor. Este es un sedante natural, suave y calmo para los nervios. Nombre: **Wild lettuce & Valerian**.

36. **Fórmula para el asma.** Puede ser usado para dolores de garganta y mucosidad. Excelente para luchar contra las toxinas. Es hecha de verbasco y ajo en base de glicerina vegetal. El uso recomendado es una cucharita o más, tantas veces como se necesite. Nombre: **CMG Syrup**.

37. **Antigua combinación para la tos.** Hecho con cebolla fresca, miel y glicerina vegetal. Uso sugerido: una cucharita o más, tantas veces como se necesite. Nombre: **Cough Syrup**.

38. **Unguento "Negro"**. Un excelente unguento que saca el problema hacia la superficie. Para el uso externo en llagas antiguas, tumores, ebulliciones, verrugas, cáncer a la piel, hemorroides, excelente para quemaduras y como agente curativo. Es hecho con gobernadora, consuelda, trébol rojo, raíz del carmín, etc. Nombre: **Black Ointment**.

39. **Unguento curativo**. Hecho de consuelda, malavisco y aceites, es antiséptico que se usa en lesiones, eczema, hiedra venenosa, para aliviar superficies inflamadas, raspaduras, quemaduras, hemorroides, torceduras e inflamaciones. Bueno para tenerlo a la mano todo el tiempo. Nombre: **CMM Ointment**.

40. **Unguento de morgelina**. Esta hecho a base de morgelina y aceites. Excelente para eczema y/u otras infecciones en la piel, llagas, quemaduras, picazón en la piel o en los genitales, testículos inflamados, acné, urticaria, y también para ulceraciones en la boca y la garganta. Este es un maravilloso y curativo unguento. Nombre: **Chickweed Ointment**.

41. **Unguento para la nariz**. Hecho con yerba buena, menta y baselina, es un antihistamínico natural. Aplicar en la parte interna de la nariz cuando ésta esté congestionada, seca, sensitiva o rajada. Nombre: **Nose Ointment**.

42. **Extracto de nebeda e hinojo**. Una bendición para los niños. Una fina combinación para cólicos, biliosidad, flatulencia, espasmos, etc. Use unas cuantas gotas, o cuanto se necesite, cuando lo desee. Nombre: **Catnip & Fennel Extract, Kid-e-Col**.

43. **Extracto de nogal negro**. Este es uno de los mejores remedios para hongos. Use externamente y frecuentemente. Nombre: **Black Walnut Extract**.

44. **Unguento del Profesor Cayenne**. Este penetrante unguento contiene aceite de olivio, cayenne, aceites, menthol, etc. Es excelente para torticollis, músculos doloridos, dolores de cabeza, dolor en las coyunturas, artritis, etc. Nombre: **Deep Heating Balm**.

45. **Extracto antiséptico**. Este extracto es bueno para infecciones externas e internas. Es a base de roble blanco, mirra, sello dorado, consuelda entre otros en base de alcohol. Nombre: **X-ceptic**.

46. **Combinación para eliminar minerales pesados**. Contiene lobelia y bardana amarilla. Esta es una fórmula para combatir contaminación, externas e internas. Esto ayuda a eliminar minerales

pesados, drogas, y otros contaminantes atrapados en nuestro sistema. La dosis es tomar 2 cápsulas diarias juntamente con cápsulas de gobernadora, 3 veces al día. Nombres: **Bugleweed Combination, Bugle Dock.**

47. **Fórmula para las suprarrenales.** Contiene verbasco, lobelia, ginseng, jenjibre, etc. Esta fórmula corrige cualquier desbalance en las glándulas suprarrenales y también compensa cualquier presión ubicada en el corazón. Nombre: **Adrenetone.**

48. **Fórmula para la colitis.** Contiene malvavisco, consuelda, lobelia, jenjibre, etc. Esta fórmula es para elivio de la colitis, y puede ser usado juntamente con la fórmula para el intestino grueso (Fen LB) y la dieta sin mucosidad. Nombre: **CC.**

49. **Fórmula para las úlceras.** Contiene arrayán, morgelina o pamplina, verbasco, etc. Esta fórmula es usada para aliviar las disconformidades causadas por las úlceras en el estómago y debería ser tomada con té de lúpulo o manzanilla. Tome nota de lo siguiente: para curar las úlceras, tome 3 cucharitas de cayenne al día. Este cayenne puede ser mezclado con agua o jugo de tomate. Es recomendado empezar con 1/8 de cucharita 3 veces al día, y entonces aumentar hasta lograr una cucharita 3 veces al día. Nombre: **ULC.**

50. **Fórmula para los gases.** Contiene hinojo, camote silvestre, jenjibre, menta, etc. Esta fórmula es designada para aliviar la flatulencia. Nombre: **AT-GS.**

51. **Unguento de BF&C.** Esta es la fórmula No.28 en forma de unguento. Es hecho usando aceite de olivio en una base de cera de abeja. Nombre: **BF&C Ointment.**

52. **Anti-Plaga.** El mejor remedio para resfríos, gripe o cualquier enfermedad contagiosa. Esta fórmula fortalece y estimula el sistema inmunológico y puede ser usado como tónico preventivo usando 1 cucharita de este jarabe por día. Si existe infección cambiar la dosis a una cucharada cada hora. Este jarabe contiene ajo fresco, raíz de consuelda fresca, berro, malavisco, escutelarias. entre otros. Nombre: **Anti-Plague.**

53. **Fórmula para aliviar llagas en la boca.** Esta fórmula en extracto es tomado oralmente en la cantidad de 2 goteros llenos 3 veces al día, aplicado localmente. Contiene ajo, escutelaria y sello dorado en base de alcohol. Nombre: **CSR.**

54. **Formula para estimular el sistema inmunológico.** Esta fórmula está diseñada para incrementar la habilidad del cuerpo de prevenir la propagación de bacterias y virus. Consiste de Echinacea, calendula y la flor del trebol rojo (obtenible en base de alcohol o glicerina para niños). Nombres: **Imunacea** extract, **Kid-e-Mune**.

55. **Formula para calmar el sistema inmunológico.** Está diseñada para calmar y fortalecer las respuestas inmunológicas del cuerpo. Muchas veces creemos que somos alérgicos a ciertos alimentos, plantas o animales, pero en realidad, es nuestro sistema inmunológico que está sobreactuando. Esta simple combinación de la raíces del malvavisco y el astrágalo ha ayudado a muchos que sufren de alergias, fiebre del heno, asma, artritis reumática o cualquier enfermedad que muestre una hiperactividad en la respuesta del sistema inmunológico. Nombres: **Immucalm**, **Kid-e-Soothe**.

56. **Fórmula para la Memoria.** Una gran combinación de yerbas muy reconocidas, usadas para limpiar, edificar e incrementar la circulación en el cerebro. Consiste de: Vervena azul, Gotu kola, Te Mormón, el cardo bendito, la cayena, el jengibre y la lobelia. Nombre: **Mem**.

57. **Fórmula fuente de vitaminas y minerales.** Balanceado por la naturaleza, suplemento alimenticio integral y altamente nutritivo. Esta combinación de diente de león, kelpo, purple dulce, espirulina, irish moss, bulbo de la rosa, remolacha, cayena, entre otros, está suplementada con el jugo deshidratado y pulverizado de la alfalfa, la cebada y kamut (trigo no híbrido) bajo el proceso llamado "Quick Dried" para concentrar las vitaminas y minerales de estos tres super alimentos. Al final tenemos una fuente de vitaminas y minerales fácilmente asimilable, ya que esta compuesto de elementos orgánicos científicamente balanceados por nuestra madre naturaleza. Nombre: **Vitalerbs**, **Kid-e-Mins**.

58. **Fórmula para sinusoides congestionados.** Esta poderosa fórmula consiste de Te Mormón, rábano picante y cayena. Para un alivio inmediato de presión senovial debido a resfrios o alergias, usar 20 gotas (1/4 de cucharita) en 1/4 de tasa con agua caliente. Debe tomarse cada media hora. Nombre: **Ephedratean**.

59. **Unguento rubefaciente.** Como lo indica su nombre, este unguento produce circulación en la superficie de la piel causando un color rojo en éste. Usado para aliviar tensión y presión. Excelente para dolor de cabeza por tensión o presión senovial. Uselo poco a poco ya que esta fórmula es muy potente. Contiene: Aceite de Olivo y aceites naturales de canela, eucalipto, cajeput y cristales de mentol puro y alcanfor y otros aceites de fragancias naturales. Nombre: **Sen Sei Balm**.

60. **Combinación verde:** Una mezcla de Alfalfa, paja de cebada y de Kamut (trigo no híbrido) que

han crecido orgánicamente en un terreno virgen separados de los agentes contaminantes urbanos y agrícolas por las mismas montañas que proveen su fuente de agua. Estas yerbas reducen acidez, proveen de la necesitada clorofila, así como de los nutrientes integrales que el cuerpo necesita.

Nombre: **Jurassic Green**.

61. **Combinación para Energía.** En lugar de ser una fórmula que provoca un súbito y no natural golpe de energía, esta combinación de Ginsén Siberiano, pólen de abeja, la raíz del regaliz, gotu kola, yerba mate y la raíz del jengibre, provee energía y vitalidad a través de nutrición integral. La energía adquirida será más constante y duradera. Nombre: **Bee Power**.

62. **Fórmula para Claridad Emocional.** Esta combinación de escutelaria, extracto de valeriana, Uva de Oregon, Jurassic Green (Alfalfa, Cebada y Kamut), extracto de Hiperico (St. John's Wort), Verbasco, Lobelia, Gotu Kola, Sarsaparilla y Diente de León, provee de los nutrientes necesarios para ayudar al cuerpo y a la mente a reaccionar equilibrada y saludablemente en momentos de tensión emocional como depresión, ansiedad y trauma. Nombre: **MindTrac, Kid-e-Trac**.

63. **Fórmula para la Glándula Pituitaria.** Esta fórmula es para el mal funcionamiento de la glándula pituitaria. Consiste de las hojas de la zanahoria para la estimulación de la glándula, gotu kola para nutrir, ginkgo para incrementar la circulación, el verbasco para purificar, oregon grape para influenciar tanto en la pituitaria como en el hígado, y lobelia como un catalítico general. Nombre: **Master GL**.

64. **Fórmula para la circulación en el ojo.** Esta fórmula promueve circulación de sangre en el ojo ayudando a reparar vasos capilares dañados, mejorando la visión nocturna, limpiando los tejidos y brindando antioxidantes a los ojos. Contiene: Bilberry, Eufrasia, Ginkgo y cayenne. Nombre: **Bilbrite**.

65. **Ayuda para la próstata.** Esta combinación asiste al cuerpo en reducir la inflamación de la próstata. Ayuda también a fortalecer y tonificar la próstata mientras lo limpia con antioxidantes nutritivos. Esta fórmula contiene: Saw Palmetto, Mullein y Ginkgo. Nombre: **Prospalmetto**.

66. **Fórmula para fortalecer el Sistema Inmunológico.** Estas plantas han sido usadas por miles de años como tónicos y como elementos preventivos para la salud. Usando este tónico diariamente ayudará a fortalecer el sistema inmunológico y proteger contra los agentes invasores. Los tónicos trabajan mejor en cantidades pequeñas por largos períodos de tiempo. La echinacea en esta fórmula también actúa como un tónico. Contiene: Astragalus, Ginseng Siberiano, Echinacea purpurea (planta y raíz) y el hongo Reishi. Nombre: **Immutone**.

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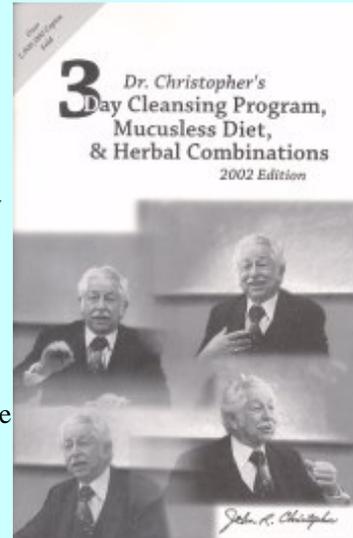
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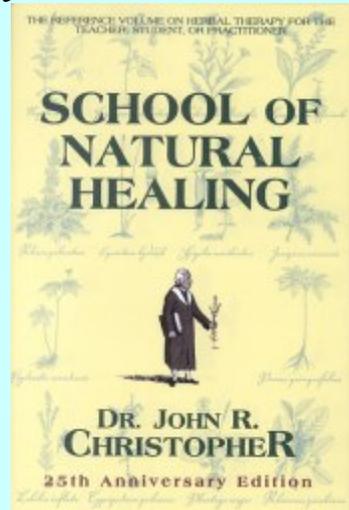
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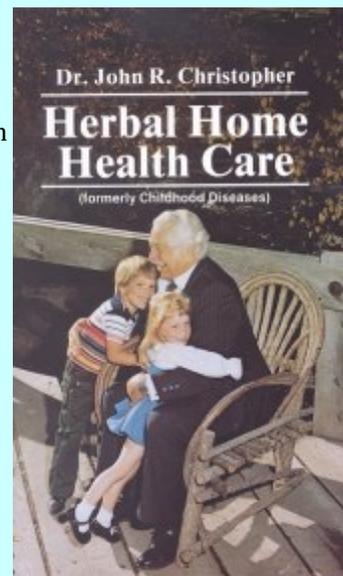
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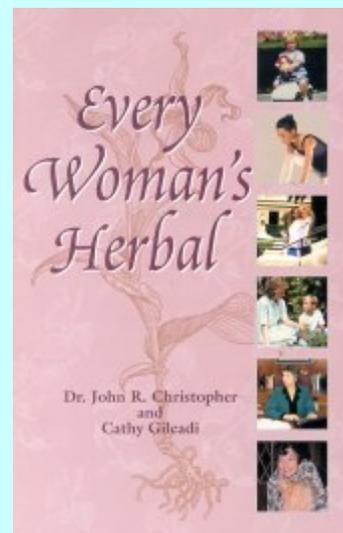
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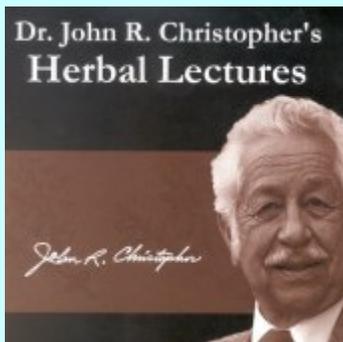


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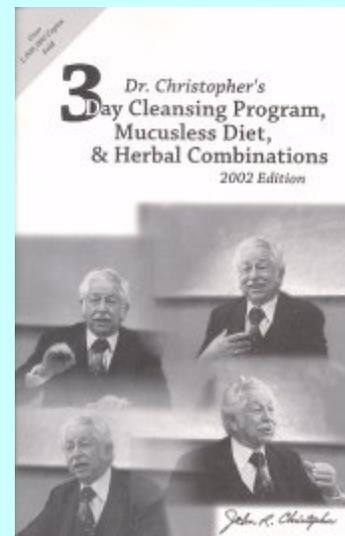
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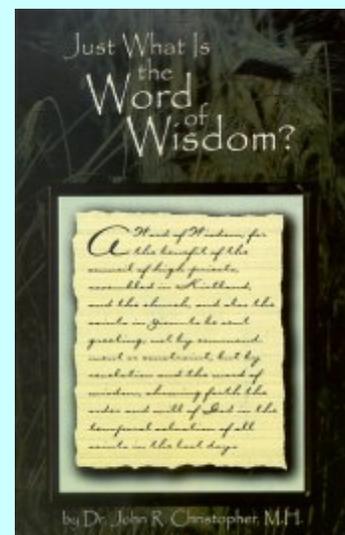
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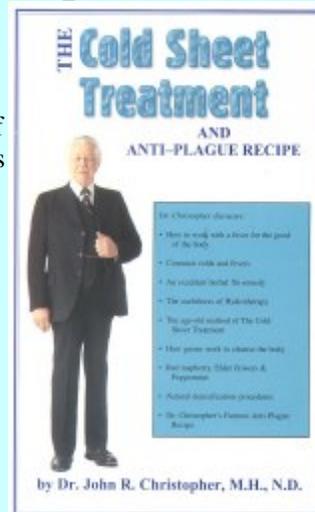
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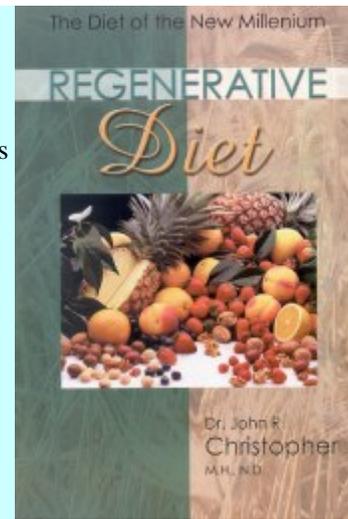
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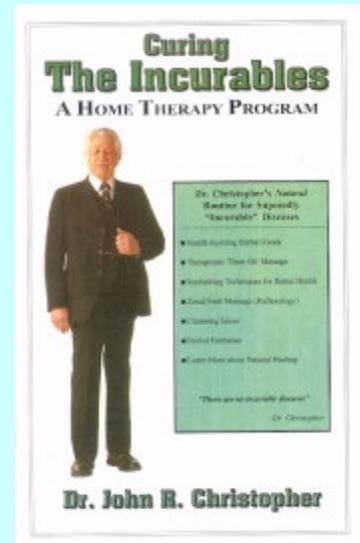
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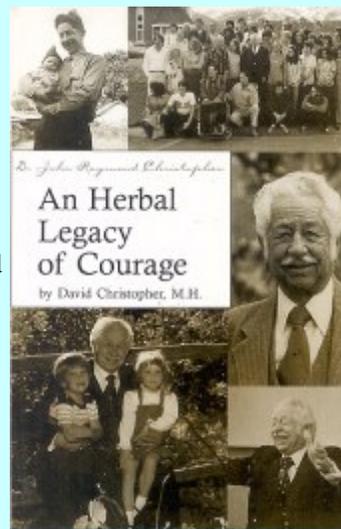
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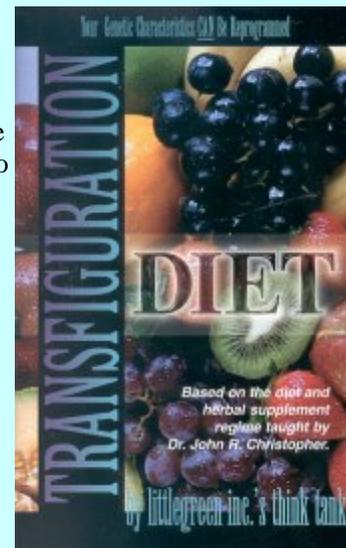
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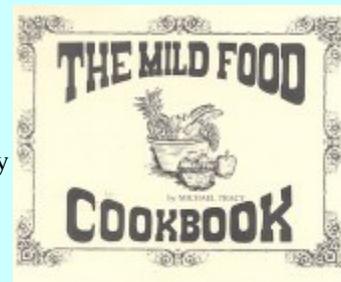
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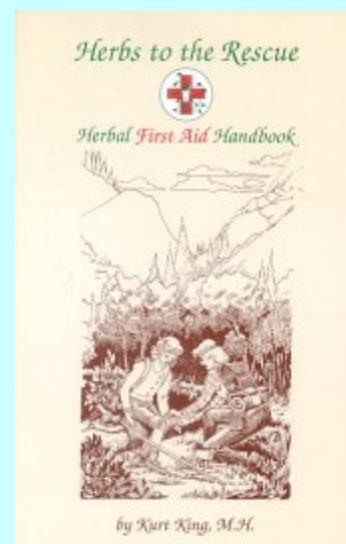
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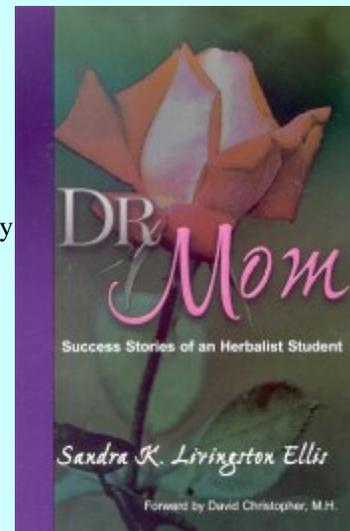
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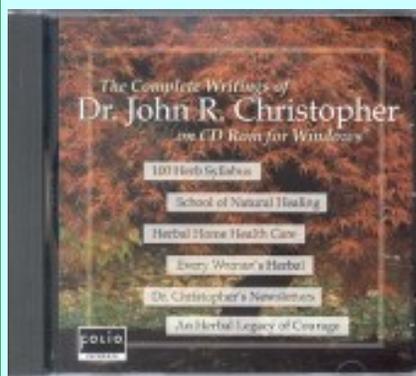
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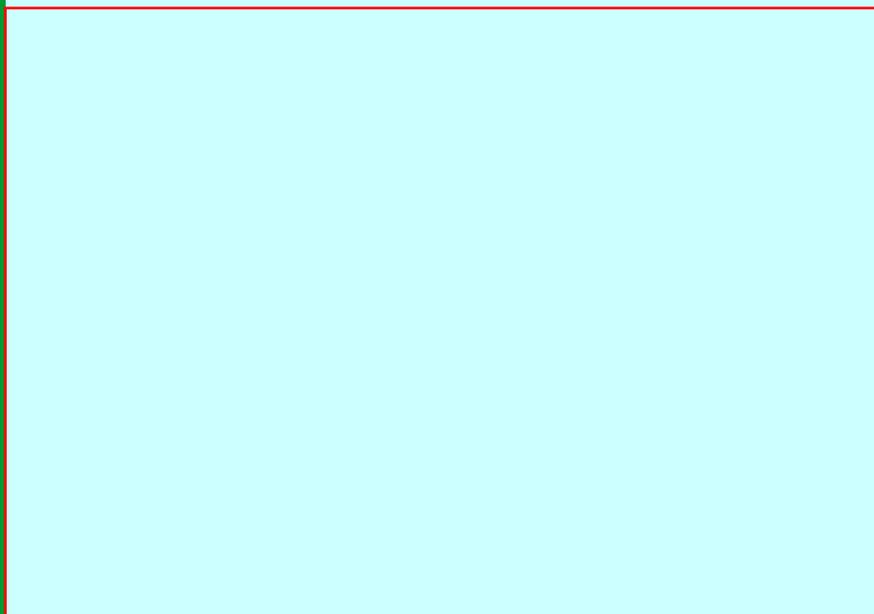
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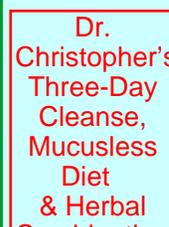
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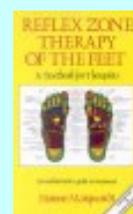
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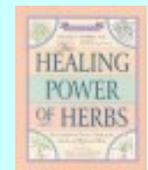
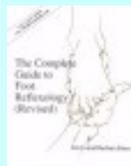
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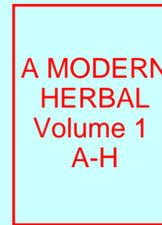
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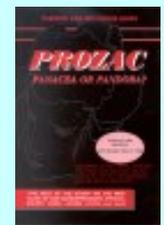
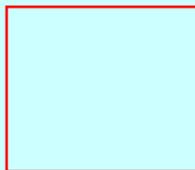
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## Related Material

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[Buy now.](#)

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[Master Herbalist](#)

[Iridology](#)

[Reflexology](#)

## School of Natural Healing > **Family Herbalist Program**

What is the key to great health for you and your family?

The answer is all around you.

Medicinal plants have been used for centuries to keep us healthy. These healing herbs are all around us everyday--in our spice cupboards, refrigerators, gardens, and lawns.

The art of using herbs as medicine has stood the test of time and continues today with The School of Natural Healing. The School of Natural Healing is dedicated to offering excellence in herbal education through high quality materials and assignments that not only tell you, but show you how to use herbs.

The School's **Family Herbalist Course** is designed to empower you with the knowledge and confidence needed to tackle almost any health issue. The Family Herbalist Course is essential for anyone who wants to take charge of their own health and become more informed, educated, and independent. This course explores important concepts in natural medicine that even the most experienced natural healers need to know for success. At the completion of this course the student receives a certificate as a Family Herbalist.

---

The Family Herbalist program is the first section in the Master Herbalist program and is a prerequisite to any other course offered by The School of Natural Healing. You will have 3 months to complete the program. It is also part of [Iridology Part I](#), [Reflexology](#), and [Aromatherapy](#).

The Family Herbalist Course helps you to:

- Feel confident in taking care of yourself and your family
- Become more self-sufficient
- Save thousands of dollars by being your own primary health provider
- Become a great resource for family and friends who want to be healthy
- Understand which foods help the body fight infection
- Maintain a healthy lifestyle
- Understand how fevers work and how to treat them naturally

Master the healing power of water and hydrotherapy

**Materials included:**

*Herbal Home Health Care* text by Dr. Christopher

Study guide for *Herbal Home Health Care*

*An Herbal Legacy of Courage* text by David Christopher [\(Read Online\)](#)

*Fundamentals of Herbology* (2 hour video)

*Simple Home Remedies* (1 hour video)

Study guide for *Fundamentals of Herbology* and *Simple Home Remedies*

*Internal Cleansing* (1 hour audio CD)

*Safety of Herbs* (1 hour audio CD)

*Master Herbalists Speak* (1 hour audio CD)

**Services**

Services provided during your study include toll-free phone access to a Student Advisor for answers to your herbal questions, herbal phone tutorials, grading of assignments, transcript mailings and shipping of courses. You pay postage to turn in completed work and we pay return postage of graded work.

**Registration**

Register for any of these courses by using one of the following methods.

**Securely Online:**

[Enroll now.](#)

**E-mail:**

[registration@snh.cc](mailto:registration@snh.cc)

**Phone:**

1 (801) 489-4254 • Utah

1 (800) 372-8255 • Toll-free

1 (801) 489-8341 • Fax

**U.S. Mail:**

The School of Natural Healing

P.O. Box 412

Springville, UT 84663

Please include your phone number and physical shipping address with your registration.

## **Payment Methods**

### **Credit Card:**

Visa, Master Card, Discover & American Express

### **Check or Money Order**

Payable to:

The School of Natural Healing

P.O. Box 412

Springville, UT 84663

## **Shipping**

Shipping and handling costs are included with tuition for students living in the Continental US International students pay all shipping and insurance costs. Materials are shipped within 3 working days from receipt of registration. Express service and other carriers are available for additional fees.

Prices and materials are subject to change without notice.

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Many people are beginning to understand the importance and safety of having the wisdom to care for their own health, but they do not always know where to seek out the information.

## Available Courses



### [The Master Herbalist Home Study Program](#)

If you have ever watched or listened to the commercials about prescription drugs and marveled at the number of common side effects, and thought "That's not for me", then this is the course for you. It teaches you every aspect of Herbology, including *identification, horticulture, preparations, herbal chemistry, botany, nutrition, and More.* When you complete, you will be a **Certified Master Herbalist** through The School of Natural Healing.

### [Reflexology Home Study Program](#)

This Program helps you develop the powerful tools needed to assess health conditions and stimulate the body to heal itself. Reflexology is the study of reflex points found throughout the body and how they can be used to enhance health. This course covers basic Herbologist, anatomy, physiology, and beginning to advanced reflexology techniques. Once you understand the basics of Reflexology, your own two hands will be the tools you use to help yourself and your family on the road to great health.

### [Iridology: A Holistic Approach Home Study Program](#)

Traditional Iridology dates back at least 3,000 years in recorded history. It is based on the study of the iris of the human eye. The color, fiber structures and various other features seen in the iris reflect the individual's health condition and tendencies. This is the perfect study for those who want to become independent of the modern health care system.

### [Aromatherapy Home Study -- New --](#)

The art and science of aromatherapy has been practiced for thousands of years. Aromatherapy is a fun and exciting way to improve your family's health as well as your own.

### [Earn CEUs!](#)

If you belong to the AMMA (American Medical Massage Association) or ABMP (Associated Bodywork and Massage Professionals) you can now apply for up to 88 credit hours. Chiropractors, nurses, and naturopaths need to check with their state boards in order to use this herbal course for CEUs.

[Master Herbalist](#) | [Iridology](#) | [Reflexology](#) | [Aromatherapy](#)

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As the problems of health care grow each year, so does the need for knowledgeable and qualified herbalists.

## About Us

The School of Natural Healing was founded in 1953 by Dr. John R. Christopher. For 44 years the School has been the means for thousands of students to begin and further their herbal knowledge and wisdom. Students are brought together with some of the world's greatest herbalists and natural healers via the medium of books, audio and video cassette and live seminars. Students who complete the Master Herbalist Program are prepared to take care of both themselves and their families, and to share their knowledge and wisdom in the service of educating others.

As the problems of health care grow each year, so does the need for knowledgeable and qualified herbalists.

Many people are beginning to understand the importance and safety of having the wisdom to care for their own health, but they do not always know where to seek out the information.

The education field for Herbalists is increasing steadily, and herbal teachers are in demand.

### Our school curriculum and philosophy is built upon the understanding and practice of four fundamental principles:

- Preventative Nutrition
- Eradicating the Cause of Disease
- Healing the Body through Natural Methods
- Education

Master Herbalist training from the School of Natural Healing offers you firsthand, personal experience with herbs growing in your own area. Through correspondence, you will become a backyard herbalist--able to identify and use herbs growing close to your home. You will study materials especially selected for your geographical region in addition to the specialized instruction emphasizing the Christopher method of natural healing. You will also receive tutoring from qualified herbalists by telephone (toll free

in the U.S.).

Whether your interest is in a particular skill or in certification, the School of Natural Healing has courses and programs to fit your needs.

The School of Natural Healing is Registered Under the Utah Post Secondary Proprietary School Act (Title 53B, Chapter 5, Utah Code Annotated 1953)

Registration under the Utah Post Secondary Proprietary School Act does not mean that the State of Utah supervises, recommends, nor accredits the institution. It is the student's responsibility to determine whether credits, degrees, or certificates from the institution will transfer to other institutions or meet employers' training requirements. This may be done by calling the prospective school and employer.

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**Live Classes**

[SLC Workshops](#)

## Live Classes

Each year The School teaches supplemental classes that coincide with our correspondence courses. This year we will not be teaching the Nutritional Herbologist program live in Springville, Utah.

We are holding stand-alone herbal workshops at Dave's Nutrition in Salt Lake City, Utah.

For more information on these classes, follow the link below, or call the office at 1-800-372-8255, or 1-801-489-4254, Monday through Friday from 9 AM to 4 PM MST.

### [Salt Lake City Workshop Classes](#)

By popular request, we are holding a series of workshops in the Salt Lake City area. Learn about Herbal First Aid, Natural approaches to Contemporary Health Issues, Emotional Well-Being and much more. . .

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School of Natural Healing > **Scholarships**

The School of Natural Healing's Dr. John R. Christopher Memorial Scholarship

## Scholarship Application

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone: Home (\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_

A limited number of Scholarships are awarded from The Dr. Christopher Memorial Scholarship Fund on a yearly basis. These are Partial and Half Tuition Scholarships. Scholarships are awarded based on the applicant's service to his/her fellow men and according to the applicant's financial needs. These scholarships can be utilized for a full or partial program.

Scholarship recipients are required to pay all remaining tuition to begin the course and must finish the correspondence program one year from the date of registration.

### PART ONE

**Please answer the following questions as completely and concisely as possible. Type your response to each**

**question on separate sheets of paper. Attach each response to this information sheet.**

1. Describe a circumstance(s) in which you have offered out-of-the-ordinary service to your fellow men. This should be service you have done outside of your job description--service beyond the call of duty.
2. What service will you render once you have met your educational goals with The School of Natural Healing? Please be specific.
3. Describe any financial situation that would keep you from attaining your educational goals.

*Optional Questions:*

1. Describe any occasion where you have donated to increasing health awareness in underprivileged populations (any aspect of health).

2. How have you defended herbs? (i.e.: writing editorials, getting involved in government decisions, etc.)

**PART TWO**

A. Attach current copies of both your W-2 and 1040 forms to this application. If you are married, attach copies of your spouses W-2 and 1040 forms as well.

- OR - If you are a dependent with no income, attach current copies of your provider's W-2 and 1040 forms.

Currently Employed \_\_\_\_\_ Currently Unemployed \_\_\_\_\_

(Fill out the following information if you are Currently Employed)

Name of Company \_\_\_\_\_

Position \_\_\_\_\_ Supervisor \_\_\_\_\_

Time Employed \_\_\_\_\_ Part time or Full Time? \_\_\_\_\_

Phone Number \_\_\_\_\_

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## School of Natural Healing > **Payment Plan**

### The School of Natural Healing's Payment Plan

This Payment Program is designed to enable students of any income level to enroll in The School of Natural Healing's Correspondence Courses. This program allows students to make monthly payments towards their tuition. The student receives the first set of materials after the application has been processed and the first payment has been received. After this, the student will receive materials after every third payment.

To take advantage of this program, please fill out and return this [application](#) to:

#### **The School of Natural Healing**

PO Box 412  
Springville, UT 84663

#### **Payment Program Policies**

1. A separate application is required for each section of the program. For example, if you are planning to take the entire Master Herbalist Program, you would fill out an application for the Family Herbalist Program. After you have completed that program, you would fill out an application for the Nutritional Herbologist, followed by the Herbalist Program, and then the Advanced Herbalist program.
2. The Master Herbalist Certification Seminar and the Iridology programs are not part of the Payment Plan Program.
3. After your application is processed and approved, the first set of materials will be shipped to you. Payment Plan courses are processed and debited on the fifth day of each month. If the fifth day of the month falls on a weekend or a holiday, the charge will go through on the next business day. A statement reflecting your payment status will be sent to you each month for the duration of your contract.
4. If you wish to have the next set of materials shipped before they are scheduled, you can do so by sending in a payment equal to the outstanding amount still owed. Contact a representative for more details.
5. If payment is declined, The School will make every attempt to contact you to make payment arrangements. If we are unable to contact you, the responsibility to take care of the missed payments and become reinstated in the program falls to you. Utah Code requires a \$20 bounced check fee for each check that is returned to us. If your payments have not gone through for more than two months, your status in the Payment Program will be put on hold. There is a reinstatement fee of \$50 to become an active

student.

6. The School has the right to deem disagreement in default. It is our decision to determine what is default. Utah Code: If the purchaser defaults against these credit terms, purchaser is liable to pay all costs of collection, including court costs and reasonable attorney fees, whether or not suit is actually filed. Purchaser agrees that any legal action brought hereunder may be brought in Utah County, Utah.

7. It is the responsibility of the student to inform the School of any address, phone number, credit card, or bank changes. If the School is unable to locate the student, we will stop your course material shipment and you may be required to pay a reinstatement fee in order to continue the program.

8. If you wish to opt out of the payment program you may do so at any time. The fee to cancel the payment program is equal to two months payments (\$130). Previous payments will not be refunded, and returned materials will not be accepted.

9. There is no penalty for paying the program off early.

10. This program is exempt from Sales tax.

To apply for our payment plan, [click here](#). To view the School's Privacy Policy, click [here](#).

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## Contact Us

Before you contact us, please see our [Frequently Asked Questions](#) (FAQ's) section to see if your questions have already been answered.

If you would like to request *any information* about one of The School of Natural Healing Home Study Courses or ask for a Catalogue, Please use our [SNH Information Request Form](#)

For registration information, send an E-mail to [registration@snh.cc](mailto:registration@snh.cc). To get a catalog of our books and videos, E-mail us at [publications@snh.cc](mailto:publications@snh.cc) or call us at 1-800-372-8255 for either.

If you find any dead or broken links, or if you have any suggestions on how to improve this site, please contact [The webmaster@snh.cc](mailto:The_webmaster@snh.cc).

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The education field for Herbalists is increasing steadily, and herbal teachers are in demand.

## Frequently Asked Questions

### **Q: When do classes start and how do I enroll?**

**A:** *Because we have a correspondence course, people enroll every day at The School of Natural Healing. You can [Enroll online](#) or visit the [Contact Us](#) page to get in contact with a registrar.*

### **Q: What happened to the Be Your Own Doctor course?**

**A:** *The Be Your Own Doctor course was discontinued June 1, 2003. It was replaced with the Family Herbalist Program, which has more materials and comes with a certificate.*

### **Q: How long does it take to complete the course?**

**A:** *It takes about 1 ½ years if the student works on the course 1 hour a day. Some students finish in as few as 6 months while others take as many as 3 years to complete the entire program.*

### **Q: Can I call The School of Natural Healing if I have a question on the course material?**

**A:** *Yes, The School of Natural Healing has full-time student advisers trained to assist the student as they work through the course.*

### **Q: Can my spouse or a family member take these classes along with me?**

**A:** *Yes, family members living in the same house can share materials and enroll for half the cost of tuition.*

### **Q: What sets The School of Natural Healing apart from other herbal schools?**

**A:** *Our school invites leading experts from around the country to teach at our campus. This expert instruction is part of our correspondence course in the form of videos and audio tapes. Students graduate from our course with a library of course material, including 22 books, 34 videos and 26 audio cassettes... more than any other course.*

### **Q: What can an Herbalist legally do in the United States?**

**A:** *Herbalists can educate and instruct in the historical usage of herbs, whether by writing books and magazine articles, talking to clients at a clinic or health food store, lecturing or working with family. Herbalists do not diagnose illness or prescribe medicine.*

**Q: Are the videos available in PAL Format? (*International Students*)**

**A:** *Yes, you can get the videos in PAL Format. There is an additional \$300 charge for these videos, due to the increased cost of duplication. Many of our students have opted to purchase a VHS VCR, as a typical player costs between \$60 - \$100, which is a savings of \$200 - \$240.*

**Q: Will I have to pay a customs charge? (*International Students*)**

**A:** *That depends on the country that you live in. If you have to pay customs charges on other items, you will have to pay them on your school course.*

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## Herbal Reference Links

These are some sites that we feel are worth a look. The School of Natural Healing is not affiliated with them in any way and makes no claims as to what material they have on their web sites. We just felt that they have good information to offer.

The Herbal Legacy of the Great Man, Dr. John R. Christopher, M.H., N.D.

<http://HerbalLegacy.com>

Students of The School of Natural Healing are eligible for membership in the American Herbalist Guild. See their site for more information.

<http://www.americanherbalistsguild.com/>

Learn about foraging with Naturalist "Wildman" Steve Brill. Steve can teach you about edible and medicinal wild plants and mushrooms, nature, ecology, and more.

<http://www.wildmanstevebrill.com>

The University of Natural Medicine is a partner of The School of Natural Healing. The University uses the The School's Master Herbalist program as a part of their holistic and naturopathic training programs. Check them out to see what other programs they offer.

<http://www.universitynaturalmedicine.org>

There are many great Herbal information sites out on the World Wide Web.

Herb Research Foundation "Improving World Health and well being through herbs"

<http://www.herbs.org/>

The School of Natural Healing does not endorse any of the sites that are mentioned here.

Herbal Materia Medica HealthWorld On-line

<http://www.healthy.net/clinic/therapy/herbal/herbic/herbs/index.asp>

Find out more about our friend the dandelion

<http://www.herbalalternatives.com/dandelion.html>

Fyfe's Materia Medica from 1903

<http://chili.rt66.com/hrbmoore/ManualsOther/Fyfe.html>

The International Coalition For Drug Awareness

<http://drugawareness.org/home.html>

Research Abstracts of various herbs listed by Latin name from Michael Moore

<http://chili.rt66.com/hrbmoore/Abstracts/Abstracts.html>

Eclectic Materia Medica (Felter) from 1922

<http://chili.rt66.com/hrbmoore/FelterMM/Felters.html>

Guilford Intellectual Development, Corp. does testing for people with learning disabilities, and have programs set up to help them learn in new ways.

<http://jpguilford.com/>

Global Vaccine Institute

<http://www.thinktwice.com/>

More useful information from Michael Moore

<http://chili.rt66.com/hrbmoore/ManualsMM/MansMM.html>

Herbalist's Charter of Henry the VIII

<http://www.teleport.com/~howieb/treats/charter.html>

James Duke's excellent Phytochemical and Ethnobotanical Databases

<http://www.arsgrin.gov/duke/>

Search M. Grieve's Modern Herbal Volumes I & II On line

<http://www.botanical.com/botanical/mgmh/mgmh.html>

Michael Moore's Medical/Herbal Glossary

<http://chili.rt66.com/hrbmoore/ManualsMM/MedHerbGloss2.txt>

Native American Ethnobotany Data Base

<http://www.umd.umich.edu/cgibin/herb/>

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## School of Natural Healing > **Newsletter Archive**

You asked, and we delivered. The School of Natural Healing is now sending out a bimonthly e-mail newsletter. Every two months we will be sending you herbal and health information, news from the school, and special offers for members only.

[Sign Up Now](#) to receive the bimonthly newsletter.

### **Past Issues:**

[August 2003](#)

[March 2003](#)

[January 2003](#)

[November 2002](#)

Contact Us > **SNH Information Request Form**

Use this form to ask us for more information on any of our services.

Items with the \* are required fields.

**Your Name: \***

**Street Address:**

\*

**Street Address:**

**City: \***

**State: \***

**Zip Code: \***

**Country: \***

**Phone #: \***

**Fax #:**

**Email address:**

**Which Item(s) are you interested in? Check all that apply.**

Master Herbalist Home Study Program

Iridology: A Holistic Approach Home Study Program

Publications Catalogue

A Healthier You Audio Program List

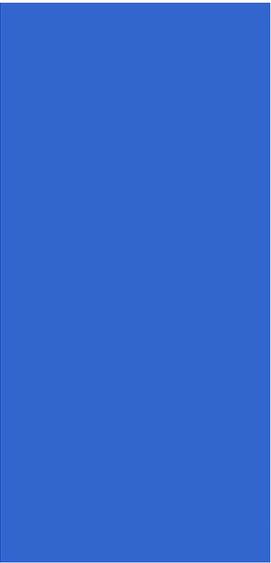
**How did you hear about us?**

**Referral or Other:**

**Comments**

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## Master Herbalist

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[Nutritional Herbologist](#)

[Herbalist](#)

[Master Herbalist](#)

[M.H. Certification Seminar](#)

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## Available Courses > **The Master Herbalist Home Study Program**

Master Herbalist training from The School of Natural Healing offers you firsthand, personal experience in identifying and using herbs growing in your area. Study materials selected for your geographical region compliment instruction in the Christopher method of natural healing. You will also receive tutoring from qualified herbalists by telephone (toll free in the U.S.). Whether your interest is in a particular skill or in certification, The School of Natural Healing has courses and programs to fit your needs.

Our home study curriculum consists of 22 individual course levels. These course levels are divided into 3 progressive programs: The Nutritional Herbology Program (Levels 100 - 500), The Herbalist Program (Levels 600 - 1300) and The Master Herbalist Program (Levels 1400 - 2200). Students seeking certification as a Master Herbalist must complete all the courses and attend six-days of intensive training at our annual Master Herbalist Certification Seminar.

The Master Herbalist Home Study Program includes an in-depth study and information on the following subjects:

- |   |  |
|---|--|
| <input type="checkbox"/> Simple Home Remedies                   | <input type="checkbox"/> History of Natural Healing          |
| <input type="checkbox"/> Vitalistic Principles of Health        | <input type="checkbox"/> Teaching the Art of Natural Healing |
| <input type="checkbox"/> Nourishment and Cleansing              | <input type="checkbox"/> Anatomy                             |
| <input type="checkbox"/> The Dr. Christopher Method             | <input type="checkbox"/> Botany                              |
| <input type="checkbox"/> Herb Identification                    | <input type="checkbox"/> Chemical Constituents of Herbs      |
| <input type="checkbox"/> Horticulture and Herb Gardening        | <input type="checkbox"/> Applications for Master Herbalists  |
| <input type="checkbox"/> Creating and Preparing Herbal formulas | <input type="checkbox"/> Herbal Pharmacognosy                |

Take a Tour by [Clicking here](#) to learn about The Master Herbalist Home Study Program, starting with the [Curriculum Overview](#).

or jump in anywhere you would like by clicking on any of the following:

[Curriculum Overview](#) · [Family Herbalist](#) · [Nutritional Herbologist](#) · [Herbalist](#) · [Master Herbalist](#) · [M.H. Certification Seminar](#) · [Tuition & Fees](#)

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## School Of Natural Healing Courses

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Click on the Name of the Program to Enroll in any of The School of Natural Healing Courses. After you have done this and you are at the Shopping Cart page, you **MUST use your Browser's BACK Button** if you want to enroll in any other courses at this time. This is very IMPORTANT!!!

We hope you will enjoy your journey towards a healthier lifestyle, and look forward to working with you as a student of The School of Natural Healing.

 **Shopping Cart**

### The Master Herbalist Home Study Program

	<b>Tuition</b>	<b>You Save:</b>
<a href="#">Level 100 - Family Herbalist</a> (Prerequisite to all other levels)	\$ 495.00	
<a href="#">The Nutritional Herbologist Program w/ Family Herbalist</a> (Levels 100-500)	\$1,125.00	<b>\$ 100.00</b>
<a href="#">The Nutritional Herbologist Program (Levels 200-500)</a> (Prerequisite Family Herbalist)	\$ 700.00	<b>\$ 80.00</b>
<a href="#">The Herbalist Program (Levels 600 - 1300)</a>	\$ 1,400.00	<b>\$ 160.00</b>
<a href="#">The Master Herbalist Program (Levels 1400 - 2200)</a>	\$ 1,575.00	<b>\$ 180.00</b>
<a href="#">Complete Master Herbalist Home Study Course (Levels 100 - 2200)</a>	\$ 4,090.00	<b>\$ 500.00</b>

### Reflexology Home Study Program

<a href="#">Reflexology Home Study Program</a>	\$ 1000.00	<b>\$ 80.00</b>
<a href="#">Reflexology 200-400</a> (Prerequisite Family Herbalist)	\$ 525.00	<b>\$ 60.00</b>
<a href="#">Reflexology 300-400</a>	\$ 350.00	<b>\$ 40.00</b>

### Iridology: A Holistic Approach Home Study Program

<a href="#">Level One - Basic Iridology</a>	\$ 595.00	
<a href="#">Level Two - Intermediate Iridology</a>	\$ 595.00	
<b>Discount Program Enrollment</b>		<b>Savings:</b>
<a href="#">Level 1 &amp; 2 Together</a>	\$ 990.00	<b>\$ 200.00</b>

### Aromatherapy Home Study Program

<a href="#">Aromatherapy Home Study Program</a>	\$ 1,125.00	<b>\$ 100.00</b>
<a href="#">Aromatherapy 200-500</a> <i>(Prerequisite Family Herbalist)</i>	\$ 700.00	<b>\$ 80.00</b>
<a href="#">Aromatherapy 300-500</a>	\$ 525.00	<b>\$ 60.00</b>

## Courses

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## Reflexology

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## Available Courses > Reflexology Home Study Program

The School of Natural Healings Reflexology Home Study Program helps you develop the powerful tools needed to assess health conditions and stimulate the body to heal itself. Reflexology is the study of reflex points found throughout the body and how they can be used to enhance health.

Learn how to deal with any health problem naturally and without side effects.

### Topics include:

- Heart Disease
- Arthritis
- Sciatic Pains
- Back Problems
- Sinus Infections
- Diabetes
- Kidney Stones

Students of the Reflexology course also receive instruction in basic herbology, anatomy, and physiology.

Reflexology is one of the most useful techniques to increase the health and wellness of your family. Once you understand the basics, your own two hands will be the tools you use to help yourself and your family on the road to great health.

The School of Natural Healings Reflexology Home Study Course is ideal for Licensed Massage Therapists, Naturopaths, Midwives, Chiropractors, and other health care professionals who want to offer more to their clients and patients.

In order to practice reflexology as a profession in most states, one must be a licensed massage therapist. The purpose of this reflexology course is to prepare you to practice reflexology on your family members and yourself without charging for your services.

The certificate awarded after completing this course does not entitle you to practice reflexology professionally, teach reflexology, or use the title reflexologist in ads or endorsements. In most states, licensed massage therapists may use the title reflexologist after taking this course. State laws may vary.

Take a Tour by [Clicking here](#) to learn about the Reflexology Home Study Program starting with [Home Study Course](#).

or jump in anywhere you would like by clicking on any of the following:

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## Iridology

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## Available Courses > **Iridology: A Holistic Approach Home Study Program**



### What Is Iridology?

Learn the ancient practice of assessing current health conditions in the body in your own home through correspondence.

This comprehensive home study program offers a fully informative and detailed look at the science and practice of Iridology. Beginning at basic levels and moving forward to advanced understandings of this art, the student will gain a wonderful knowledge of revealing levels of health, inflammation and degeneration within the human body.

Through the medium of video, Dr. David Pesek enlightens and entertains as he shares his vast understanding of the analysis of the iris. With over 20 hours of video at your disposal, books and workbooks, you can quickly and effectively learn to use the combination of Iridology, Nutrition and Tissue Cleansing to promote harmonized well-being: physically, emotionally, mentally and spiritually.

You must complete each course before starting the next.

### Special Offer:

When you order the Iridology course on-line, we include a free iris chart. This freebie is only given to students who enroll via the Internet.

Take a Tour by [Clicking here](#) to learn about Iridology: A Holistic Approach Home Study Program starting with [Level One - Basic Iridology](#).

or jump in anywhere you would like by clicking on any of the following:

[Basic Iridology](#) · [Intermediate Iridology](#) · [Advanced Iridology Seminar](#) · [Tuition & Fees](#)

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## Aromatherapy

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## Available Courses > **Aromatherapy Home Study Program**

Aromatherapy has been practiced in one form or another since the beginning of civilization. Aromatherapy is the art and science of using oils extracted from aromatic plants to enhance health and beauty. Everyone has used aromatherapy sometime in their life, but most people don't realize it. Vicks Vaporub® is actually aromatherapy, so is Listerine® and so are most cough drops.

In The School of Natural Healing's Aromatherapy Home Study Program, essential oils will fill your home with vibrant fragrances from around the world. This course not only teaches you the fundamentals of natural health care, but also gives you experience making your own essential oil formulas to try out on yourself and your friends. Once you know how to make your own essential oil crafts, you might find yourself giving them away as gifts or even starting your own business. This one of a kind correspondence course includes thirty-two essential oils, seven text books, four study guides, four videos, and two audio cassettes. Every aspect of basic aromatherapy is covered as well as detailed information on anatomy, and making simple home remedies with common herbs and spices you probably already have in your home.

Take a Tour by [Clicking here](#) to learn about the Aromatherapy Home Study Program starting with [Home Study Course](#)

or jump in anywhere you would like by clicking on any of the following:

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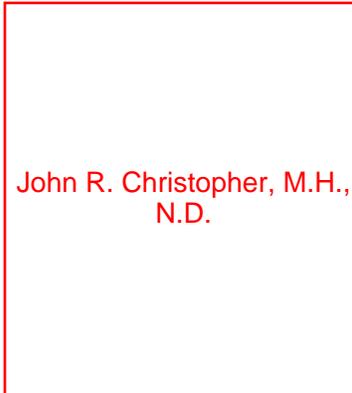
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About Us > **Founder & Director**



John R. Christopher, M.H.,  
N.D.

**John R. Christopher, M.H., N.D.**

*Founder*

In his youth, Dr. Christopher began his own study on natural healing when he saw its positive results in healing his mother of dropsy. His enthusiasm increased when he cured himself of cancer using natural methods. Dr.

Christopher, after his experience as a supervisor of a medical dispensary during World War II, decided to become an herbal practitioner. In 1946, he graduated with a Master of Herbology under Dr. H. Knowles at the Dominion Herbal College in Vancouver, British Columbia. Two years later he received his Naturopathic Doctor degree from the Institute of Drugless Therapy in Tama, Iowa. He received an Herbal Pharmacist degree under the renowned Dr. Edward Shook.

Hailed as America's foremost herbalist, Dr. Christopher developed a program to pass on his methodology and founded the School of Natural Healing in 1953. His published works include Herbal Home Health Care, Every Woman's Herbal, and his most renowned work, School of Natural Healing. Prior to his death in 1983, Dr. Christopher received the Agnes Arber Distinguished Service Award for his long-suffering devotion to the cause of herbal practice and his contribution to public health.

# David W. Christopher, M.H.

## *Director*

David W. Christopher, M.H.

Having been raised in the simple ways of natural health, David's interests grew beyond his university study and in 1974 he focused on the discipline of Herbology. In 1979 he became a Master Herbalist and the director of The School of Natural Healing. Today, thousands safely apply the Christopher methodology thanks to his directorship. David is an international lecturer and was instrumental in

establishing England's College of Herbs and Natural Healing. He is the author of [An Herbal Legacy of Courage](#) and various articles on herbs and nutrition have been published in many magazines. David and his wife Fawn host a weekly radio program, "[A Healthier You](#)", that is now in its seventh year.

[Click here](#) to meet some of the [Other School of Natural Healing Master Herbalist Instructors](#).

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## About Us > **Other School of Natural Healing Master Herbalist Instructors**

### **Master Herbalist Instructors**

#### **James A. Duke, Ph.D. - Economic Botanist (Ret.)**

With over 32 years experience in the U.S. Dept. of Agriculture (USDA), Dr. Duke became the leading medicinal plant specialist in the federal government and is an expert in ethnobotany . He is the author of over 300 educational and scientific articles and 15 books. As an active member in the American Herb Association, Dr. Duke devotes his time to reestablishing respect for herbal alternatives in modern medicine.

#### **Christopher Hobbs, O.M.D.**

Christopher is a fourth generation herbalist and botanist with over 22 years experience and is an expert in herbal pharmacology. Christopher has written extensively on the medicinal as well as the edible use of plants. His titles include Foundations of Health and a number of single herb publications. He teaches internationally on herbal medicine and has taught at the School of Natural Healing since 1984.

#### **Richard Schulze, M.H.**

Richard has taught at the School of Natural Healing for more than 17 years. As an experienced herbal practitioner, Richard emphasizes the simple and effective art of herbal cleansing. His instruction reflects nature's success when dealing with "incurable" diseases. He stimulates students through creative teaching and hands-on demonstrations.

#### **Sandra Ellis, M.H.**

Sandra has had ample opportunity to discover the miraculous healing power of herbs as an herbal student and mother of 13 children. She is the author of Dr. Mom and has been teaching with The School of Natural Healing for seven years.

## **Dianne Bjarnson, C.M., C.P.M., Q.E.**

For over 12 years, Dianne has been an instructor for The School of Natural Healing. As a NARM certified midwife, Dianne counsels women in the use of nutrition, herbs, and natural procedures for healthy pregnancies and safe childbirth. Dianne is founder and director of the Utah School of Midwifery.

## **Nathan Jaynes, M.T., M.H.**

For the past 6 years Nathan has been a full-time student advisor for The School of Natural Healing. He is a trained Massage Therapist and Master Herbalist graduate of The School of Natural Healing. Nathan has helped develop the current curriculum and teaches local classes for The School as well as for the Utah School of Midwifery.

## **Dr. Ahmed Warfa, Ph.D.**

Dr. Warfa has studied throughout the world receiving degrees in botany, plant systematics and agriculture. He taught for 17 years at the University of Somalia, served as Somalia's Council Chairman of Agricultural Research, and was one of 5 senior advisors to the United Nations. He is currently employed in botanical research at Brigham Young University and is an advisor to the herb industry.

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## **Iridology Instructor**

### **David J. Pesek, Ph.D.**

Dr. Pesek has earned five degrees from five universities, including Ph.D.'s in psychology and iridology. He is a Clinical Nutritionist and a member of Iridologists International, an honorary association. David is also a psychotherapist and a member of PSI CHI, the National Honor Society in Psychology.

Dr. Pesek has studied various teachings of iridology from around the world and has blended them into one dynamic system. David has practiced complimentary medicine for the past 21 years. He has given expert witness testimony in a court of law regarding the validity of iridology as a means of health assessment. Further, Dr. Pesek is the first American iridologist ever invited to speak at the prestigious International Course for Iris diagnosis in Germany.

Dr. Pesek is listed in the Who's Who Among Human Service Professionals. He is the Founding Director of the Center for Effective Living, which was established in 1976. This institution is one of the first holistic health care centers in the United States.

Dr. Pesek is an international lecturer and seminar leader on the subjects of Iridology, Clinical Nutrition, and natural forms of healing. David serves on the advisory council and the education certification faculty for the National Iridology Research Association. His pioneering work is helping to bring the holistic health concept for healing into focus. He is dedicated to the wellness of mankind and planetary transformation.

[Click here](#) to learn about the [History & Overview of the School on Natural Healing](#).

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## About Us > **History & Overview of the School on Natural Healing**

The School of Natural Healing was founded in 1953 by Dr. John R. Christopher, and has been the means for thousands of students to begin and further their herbal knowledge and wisdom.

Taking charge of your family's health is safe, rewarding and satisfying. However, many people become overwhelmed at the prospect of engaging in herbal study.

At The School of Natural Healing we will show you that you can become your own doctor. In the comfort of your own home, you can become a qualified healer and teacher in less than 2 years by studying only one hour per day .

Our courses are designed to teach herbalism from the ground up. We begin with foundational understandings of natural methodologies and progress through the many aspects of herbal healing, including herb identification, horticulture, medicinal usage's, methods of preparation and more. Students who complete the Master Herbalist program are prepared to take care of themselves and their families, and educate others in natural healing methods.

Our School curriculum and philosophy is built upon the understanding and practice of four fundamental principles:

1. Preventative Nutrition
2. Eradicating the Cause of Disease
3. Healing the Body through Natural Methods
4. Education

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Many students of The School of Natural Healing enroll simply for personal enrichment; others use their education in the alternative health field. All of our students become a great help to their family, friends and neighbors by applying the concepts of natural healing taught in our course. Through The School of Natural Healing's Graduate Teaching Program, graduates have the opportunity to lecture in their own area. If students choose to take part in this one-of-a-kind program they will not only gain notoriety as an instructor but also earn income as a Master Herbalist.

### *Graduates of The School of Natural Healing are doing many things such as:*

- Developing and marketing their own herbal preparations
- Consulting for major supplement manufacturers
- Working as nutritional consultants in health food stores
- Free lance writing for health magazines
- Authoring herb and health books
- Instructing at alternative medical schools
- Operating health food stores
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The School of Natural Healing is registered as a Post Secondary School by the State of Utah. Currently, there is no nationally recognized accreditation for herbal schools. Furthermore, accreditation or being licensed is not a requirement for a Master Herbalist diploma. Schools that offer fully accredited courses leading to being licensed must require a 4 year residency at a college (costing as much as \$17,000 per year plus living expenses).

### **REGISTERED UNDER**

### **THE UTAH POST SECONDARY PROPRIETARY SCHOOL ACT**

**(Title 53B, Chapter 5 Utah Code Annotated 1953)**

Registration under the Utah Post secondary Proprietary School Act does not mean that the State of Utah supervises, recommends, nor accredits the institution. It is the student's responsibility to determine whether credits, degrees, or certificates from the institution will transfer to other institutions or meet employer training requirements. This may be done by calling the prospective school or employer.

We do not provide placement assistance.

Seminar attendance is subject to administrative approval.

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The AMMA (American Medical Massage Association) and the ABMP (Associated Bodywork and Massage Professionals) will now recognize the training from our courses for Continuing Education Units credit. Our curriculum has been reviewed by these organizations and found to meet their continuing education requirements for members.

The AMMA requires 10 CEUs every year to maintain membership in their organization. The ABMP requires 16 CEUs every year. Below is a breakdown of the CEUs we can offer for each level, program, and entire course.

Individual levels (22 levels in the MH Program)	68 (approx) hours of study each	<b>4 credit hours each</b>
Nutritional Herbologist Program levels 100-500	340 hours of study	<b>20 credit hours</b>
Herbalist Program levels 600-1300	546 hours of study	<b>32 credit hours</b>
Master Herbalist Program levels 1400-2200	614 hours of study	<b>36 credit hours</b>
Complete Master Herbalist Course	1500 hours of study	<b>88 credit hours</b>

After a student massage therapist completes a level or program he may request a letter of completion. We only give credit for completed levels (assignments must be turned in for that level).

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Welcome to the home of Christopher Publications on the World Wide Web. It is our goal to help educate everyone that wants to gain a herbal education. We are the home of all the writings of Dr. John R. Christopher, M.H., N.D.

We have our store organized into 4 parts. The first is *Items Published by Christopher Publications*, the second is items Published by *Other Publishers* and the third is *Newsletters*, both current and past. The *Damaged Books* area is the 4th. Whenever items become damaged, we are able to sell them at a discounted price.

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There is a special price of The Complete Works of Dr. Christopher CD-Rom. Until September 30, 2003 you can order it for \$88.95, a savings of \$10! Order your copy today! [Click here](#) to order.

Rejuvenation through Elimination by Dr. John R. Christopher is out of print. It is being reprinted and expanded, and will soon be available under a new name. To receive a notice when this book is available, please [click here](#).

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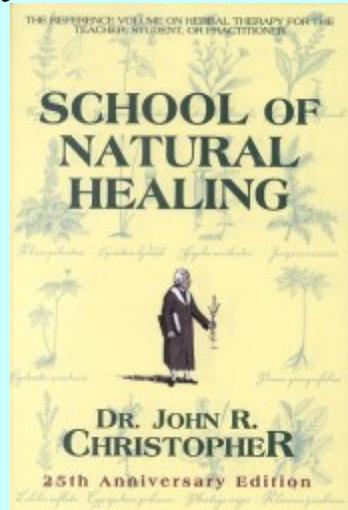
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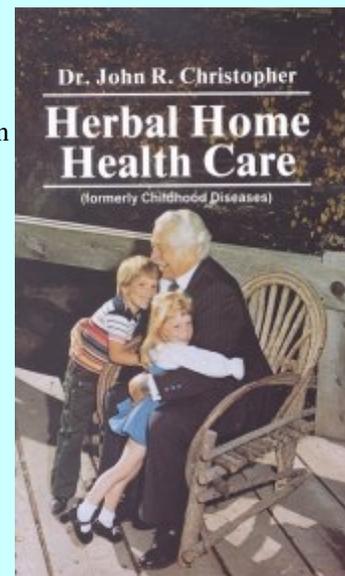
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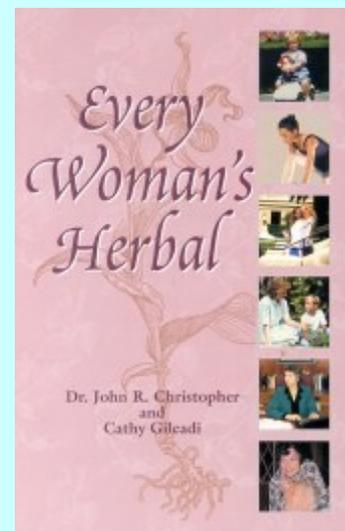
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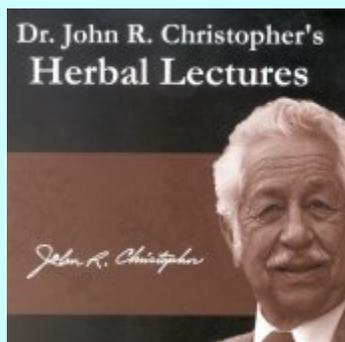


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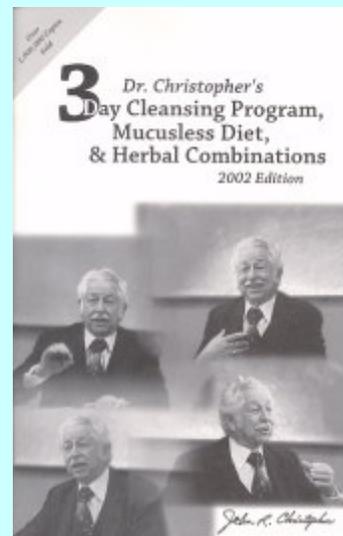
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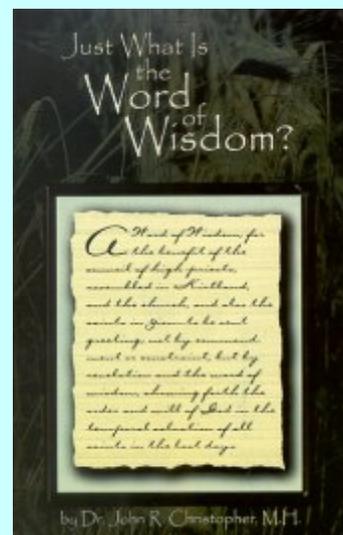
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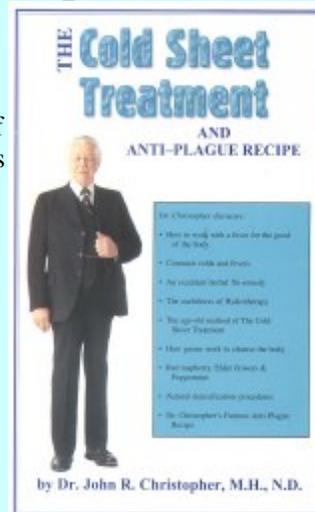
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This booklet expounds step-by-step the safest and most effective methods of using hydrotherapy and the body's own healing system to combat colds, flu's and other viruses. By aiding a body's fever, one can quickly increase the immune system and quickly overcome illness. This revised edition includes the Anti-Plague formula recipe.

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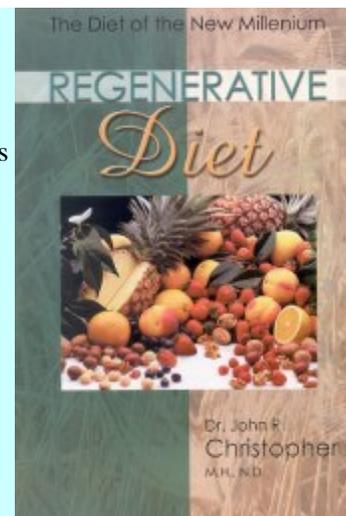
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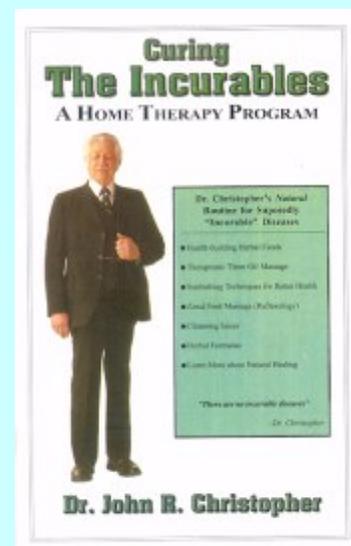
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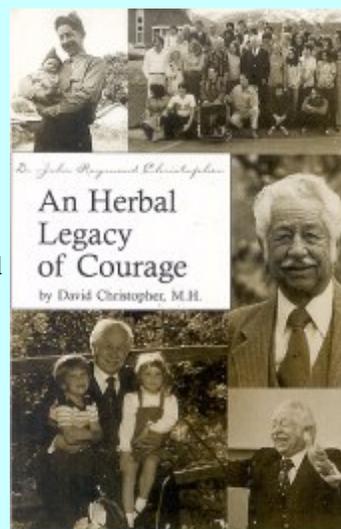
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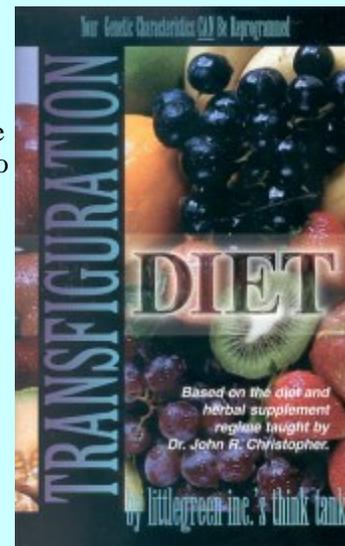
## *Transfiguration Diet*

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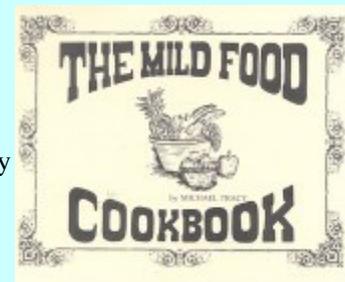
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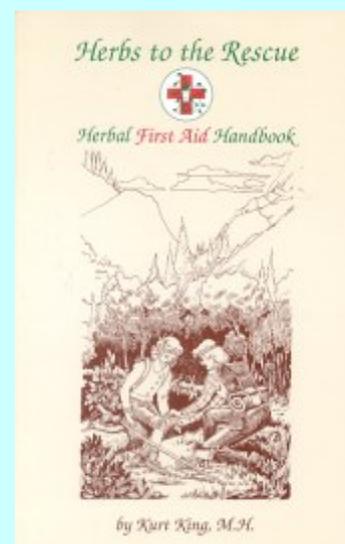
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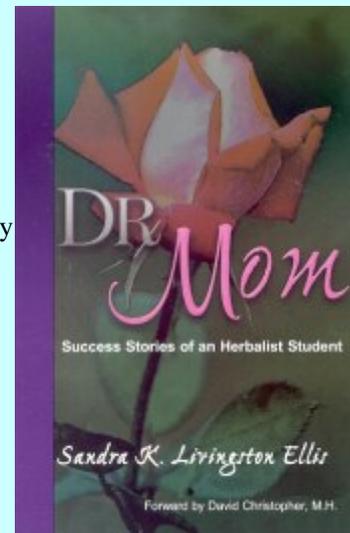
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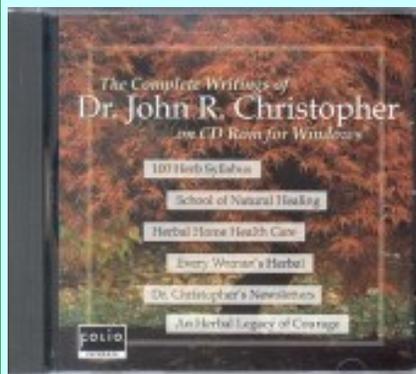
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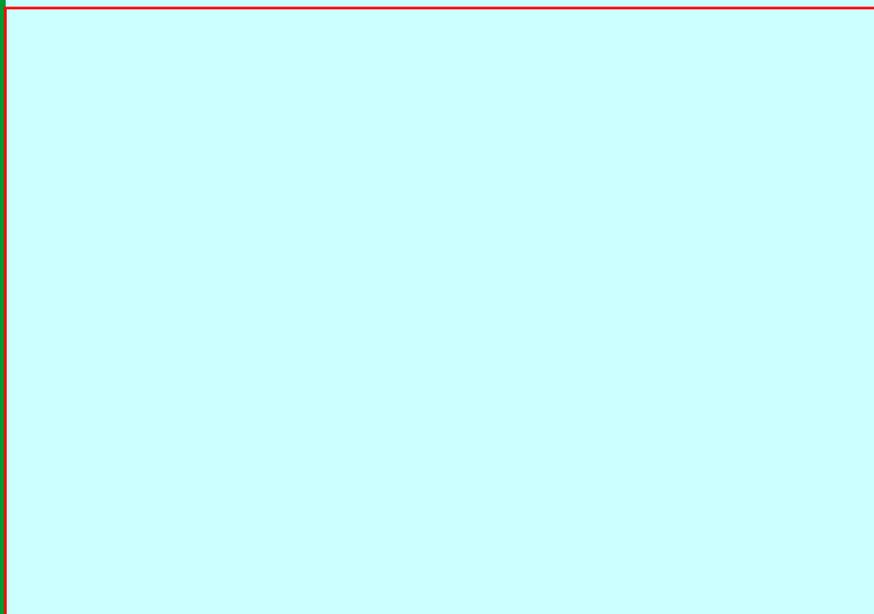
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The newsletters contain:

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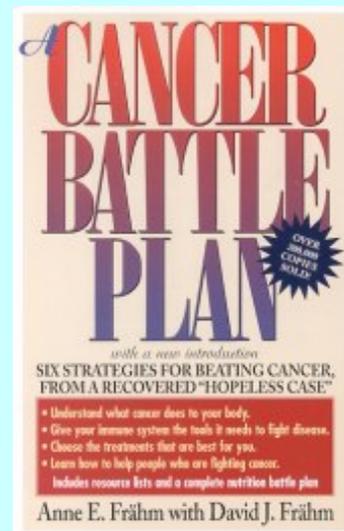
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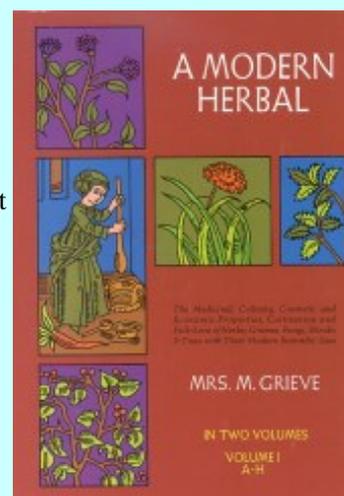
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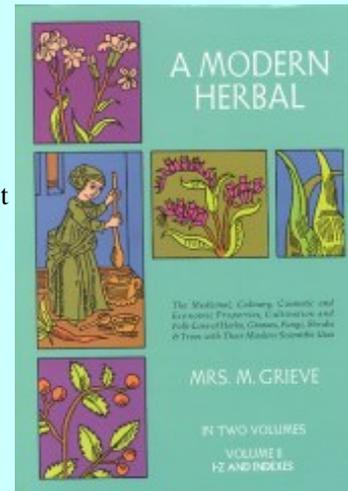
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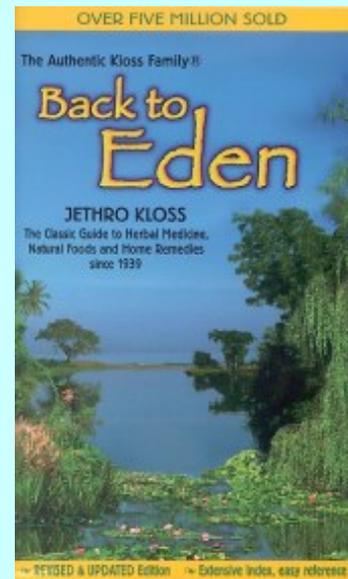
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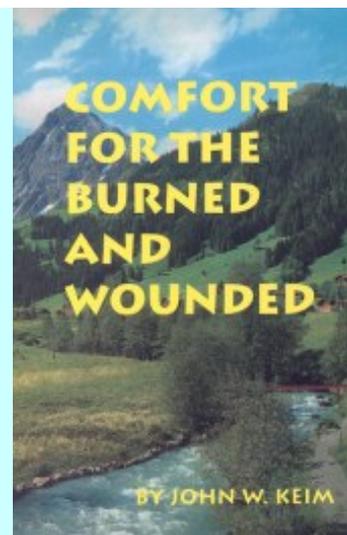
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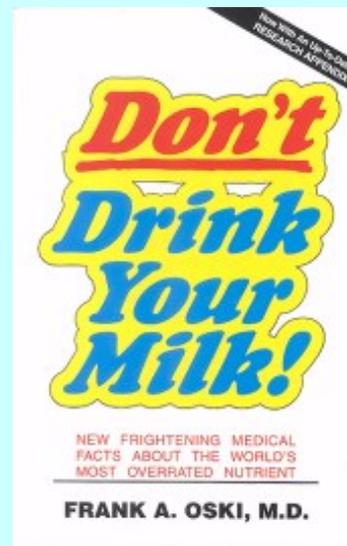
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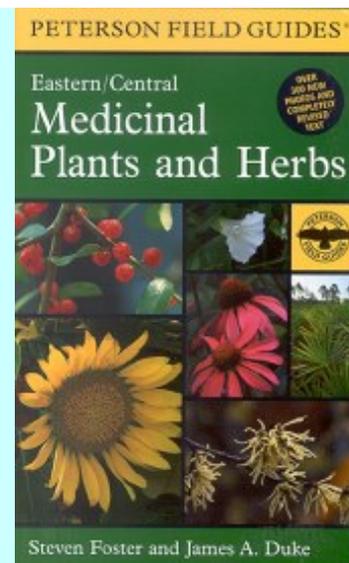
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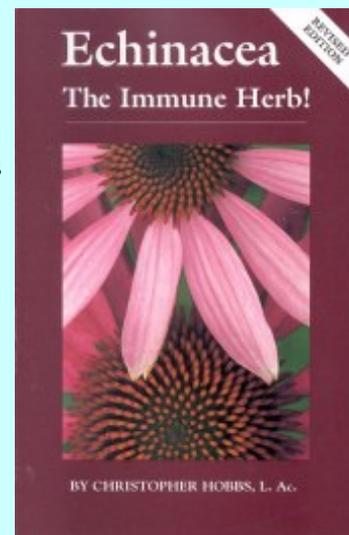
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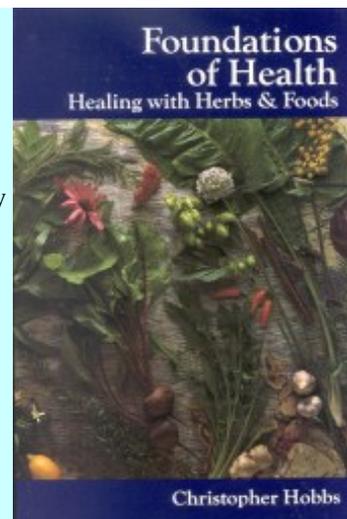
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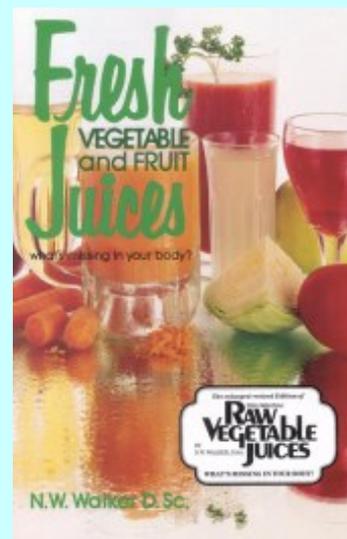
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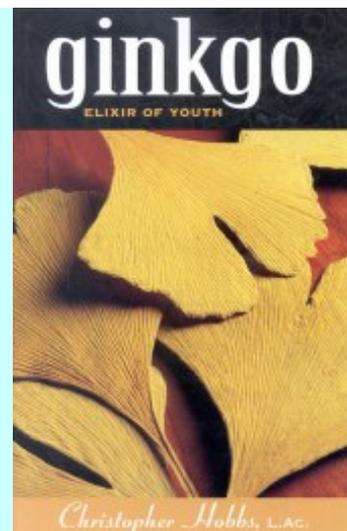
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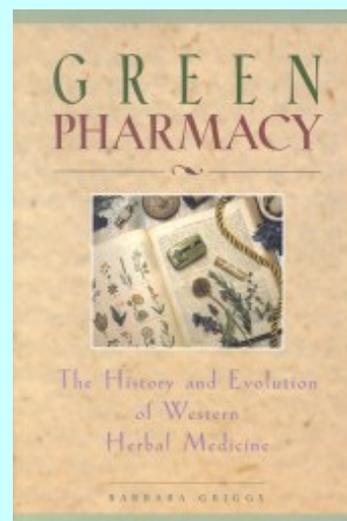
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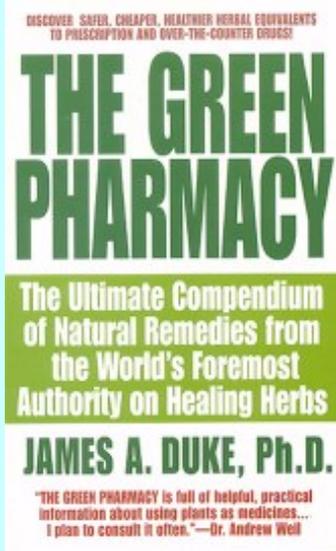
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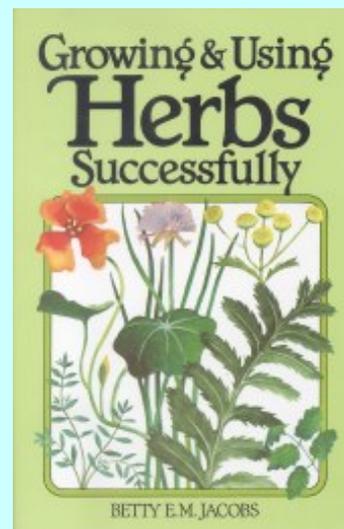
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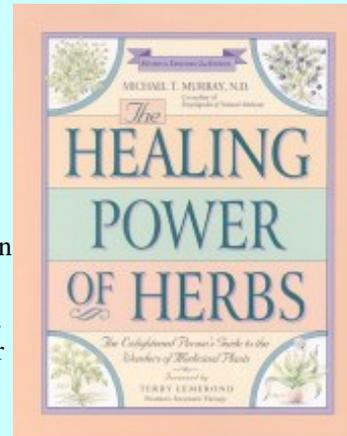
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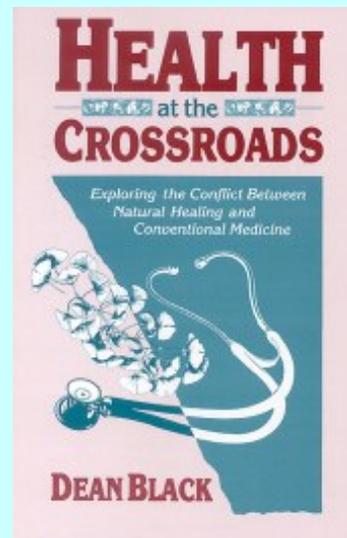
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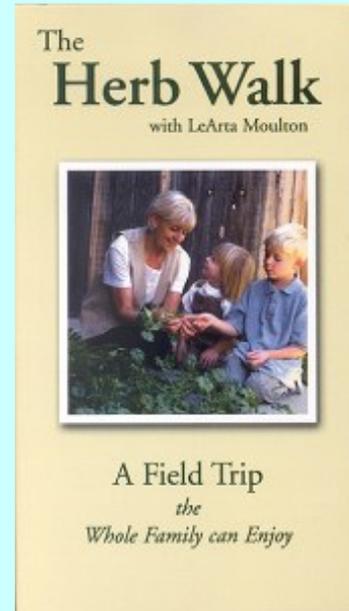
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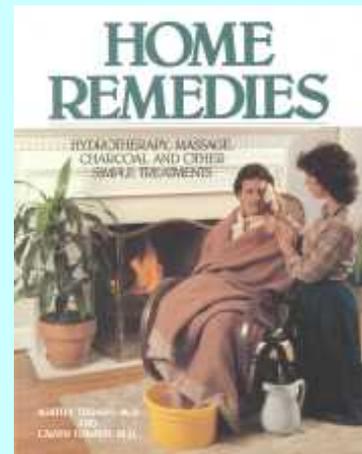
## *Home Remedies*

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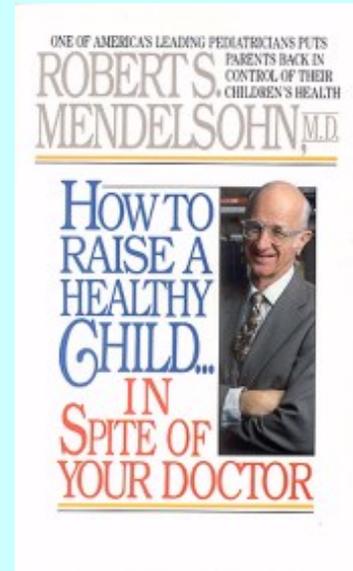
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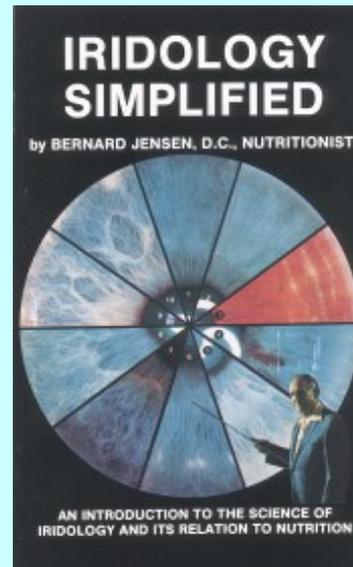
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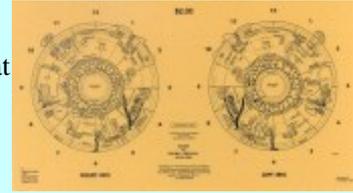


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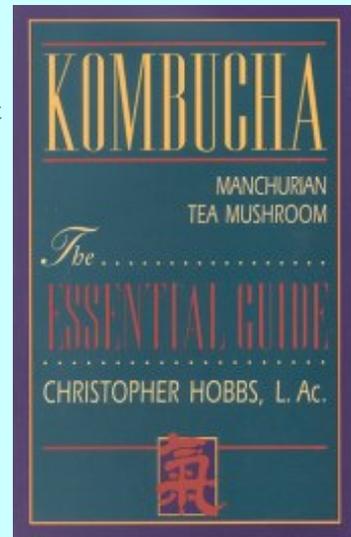
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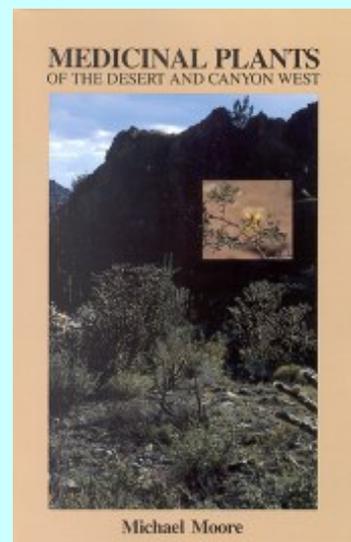
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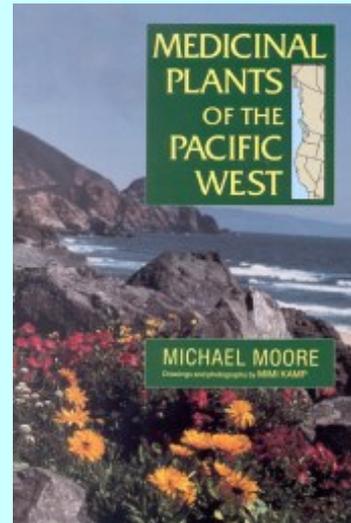
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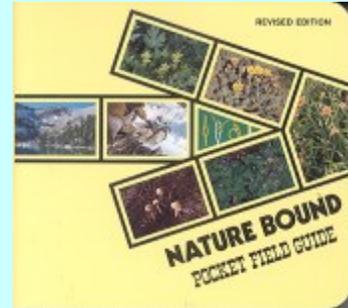
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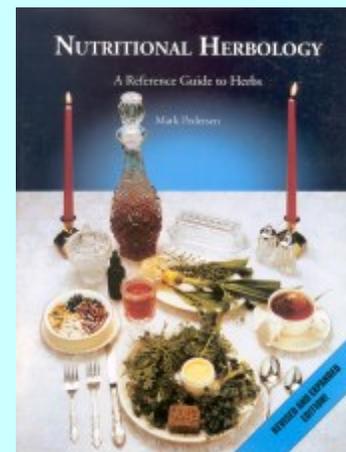
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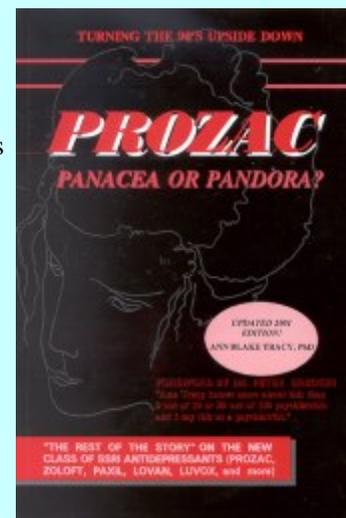
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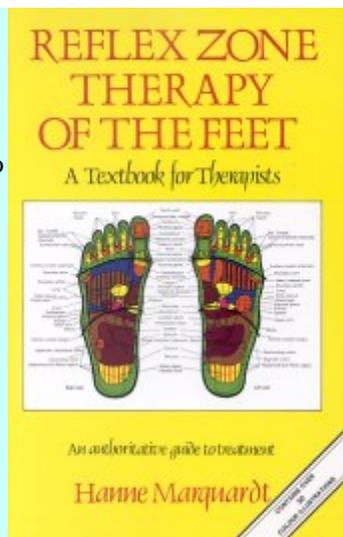
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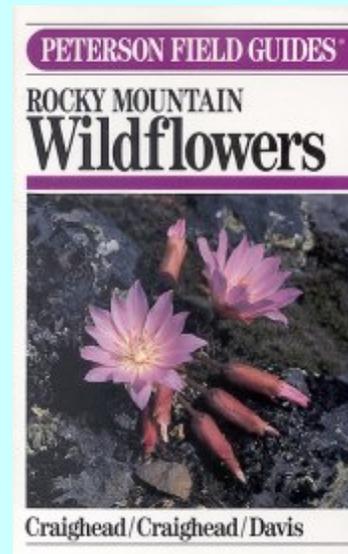
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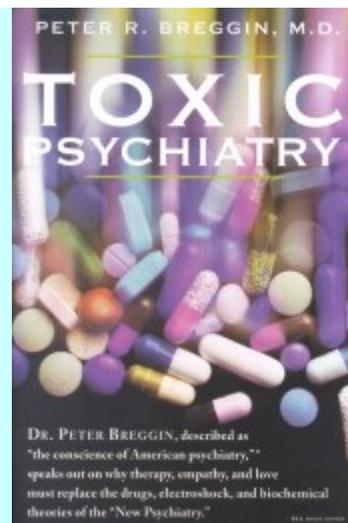
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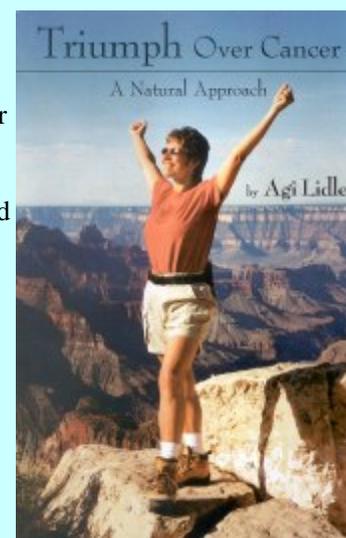
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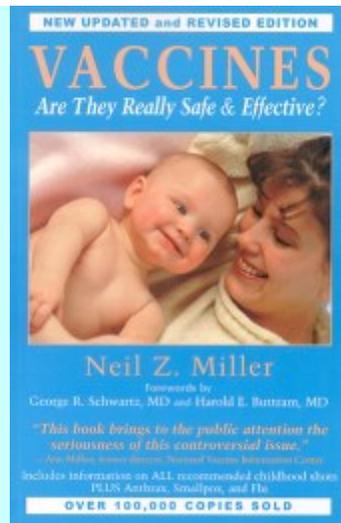
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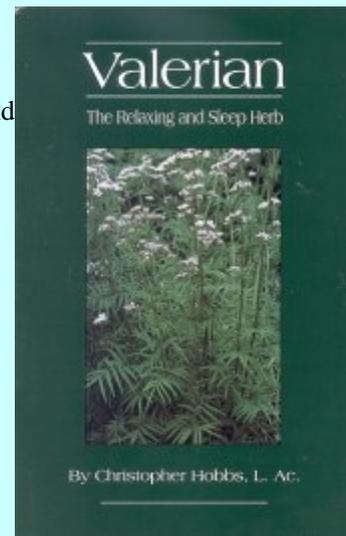
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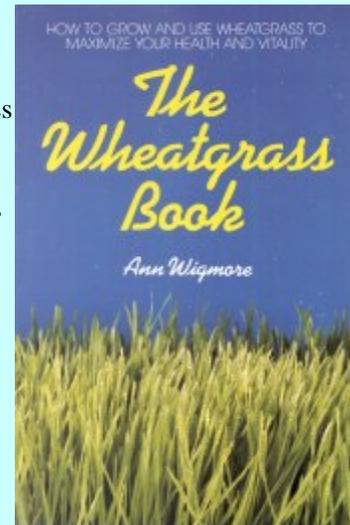
From the juice bars of California to the health spas of New York, wheatgrass is fast becoming one of the most widely used supplemental health foods.

Loaded with natural vitamins, minerals, chlorophyll and enzymes which feed your cells and help rid them of toxins, wheatgrass is perfect for dieters, athletes, people on the go, and anyone who suffers from pain or illness.

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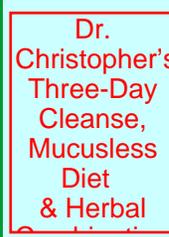
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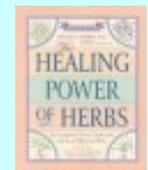
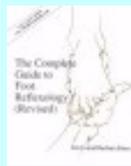
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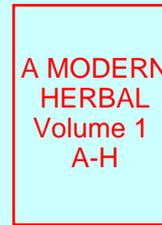
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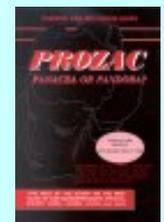
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## *Regenerative Diet*

by *Dr. John Christopher*

A healthy, invigorating life depends on a harmonious blend of many things, including sunshine, fresh air, exercise, work, play, song, prayer, meditation and recreation. But one of the most vital keys to good health is a proper diet. What, when, and how we eat directly affects our body's ability to withstand illness and disease.

Too many people have become creatures which "live to eat" rather than eat to live. They blindly follow the harmful and deceiving inclinations of their eyes, nose, and taste buds. As a result, more Americans have died of malnutrition, suffocation and constipation of bodily organs and systems than from all the wars, automobile accidents, earthquakes, and fires to date.

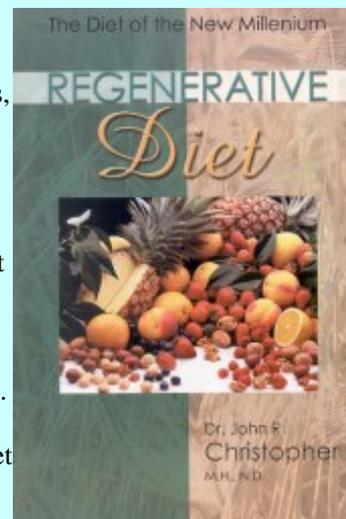
An endless selection of seemingly sophisticated medical terms is used to describe their ills, but what it all boils down to is that years of improper diet have sent mucus, waste and poisons into arterial structures, the digestive system, and even tissues and cells—a great poisoning throughout many parts of the body which eventually brings everything to a standstill.

The Regenerative Diet is designed to regenerate the health of the individual following it. The Regenerative Diet introduces you to the benefits of healthful fasting and points you in the direction of permanent proper eating habits—habits which when faithfully sustained, revitalize and regenerate your entire being for the rest of your life.

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Welcome to the home of Christopher Publications on the World Wide Web. It is our goal to help educate everyone that wants to gain a herbal education. We are the home of all the writings of Dr. John R. Christopher, M.H., N.D.

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Rejuvenation through Elimination by Dr. John R. Christopher is out of print. It is being reprinted and expanded, and will soon be available under a new name. To receive a notice when this book is available, please [click here](#).

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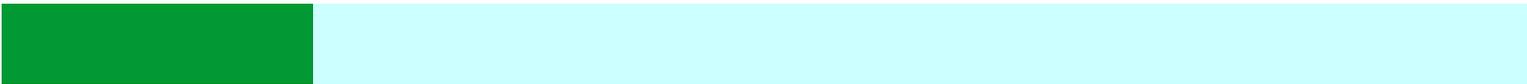
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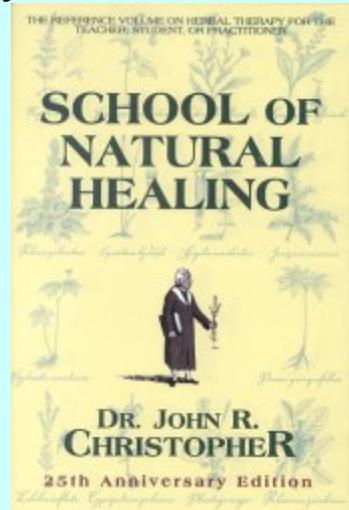
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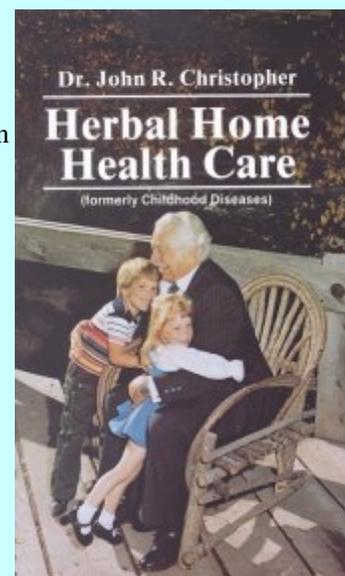
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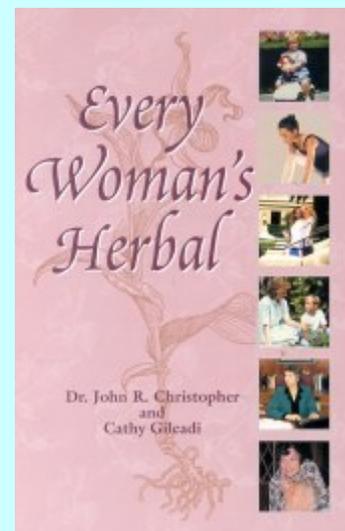
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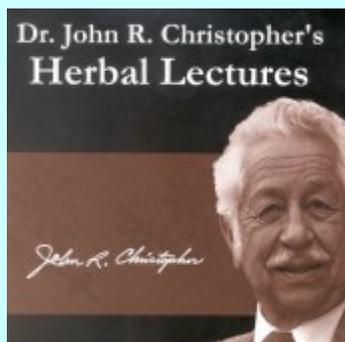


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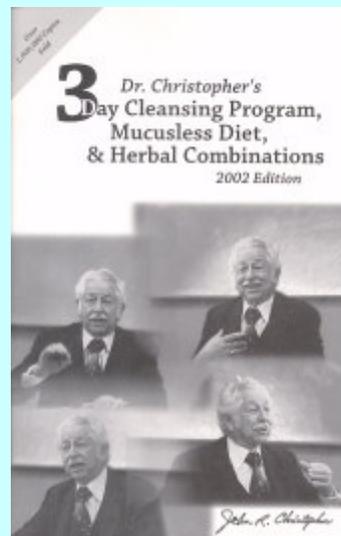
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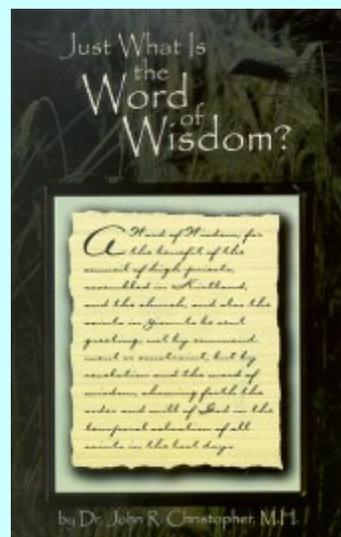
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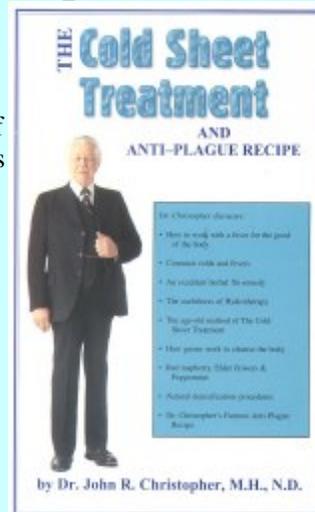
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by Dr. John Christopher

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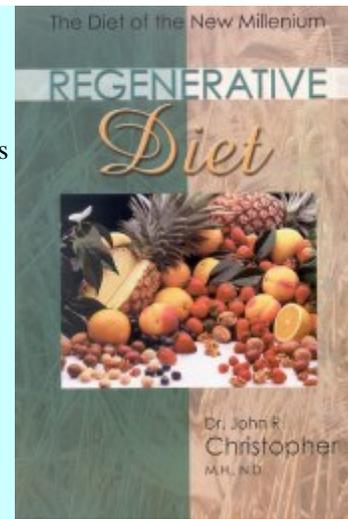
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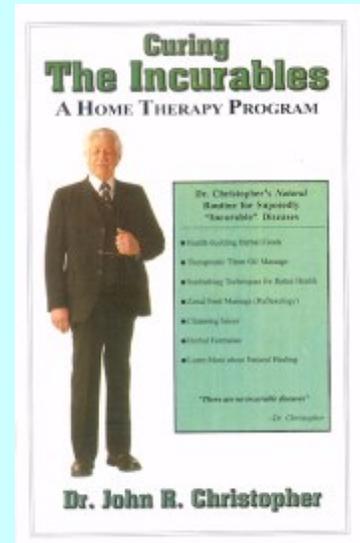
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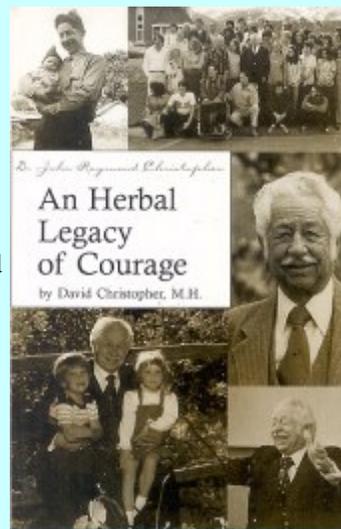
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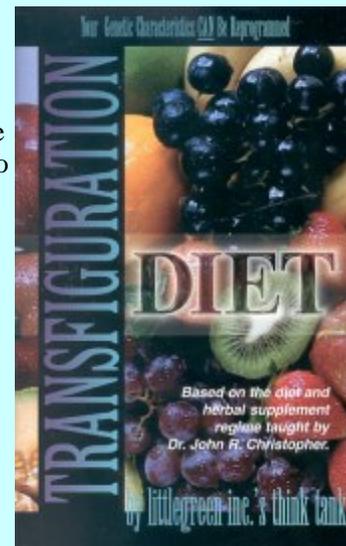
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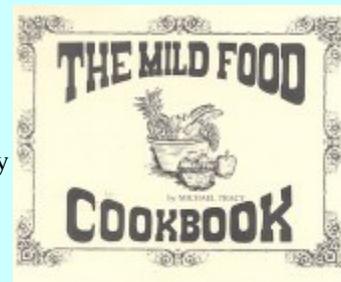
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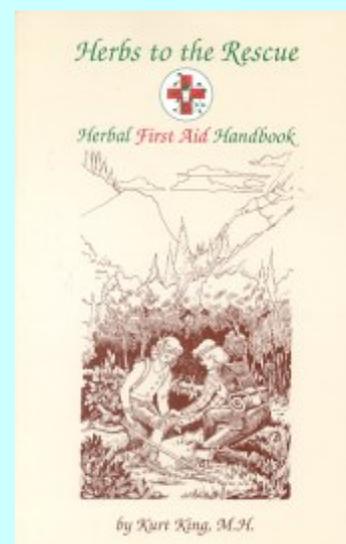
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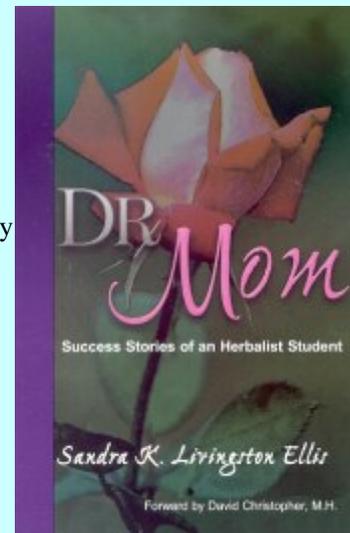
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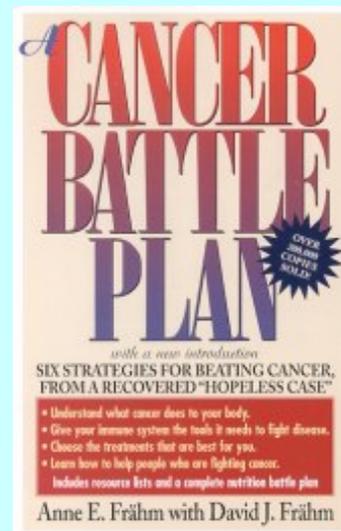
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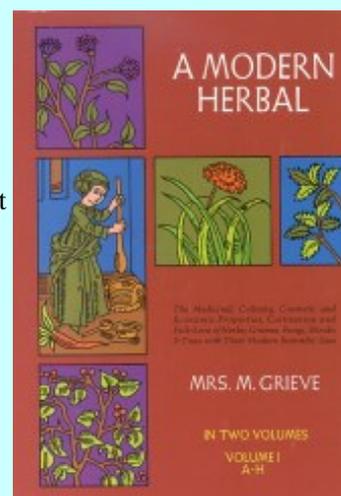
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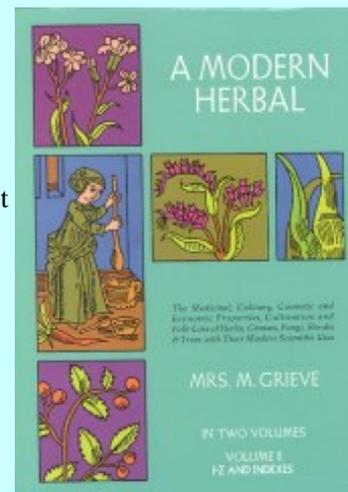
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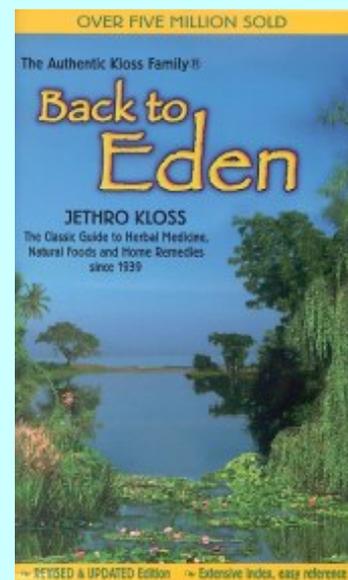
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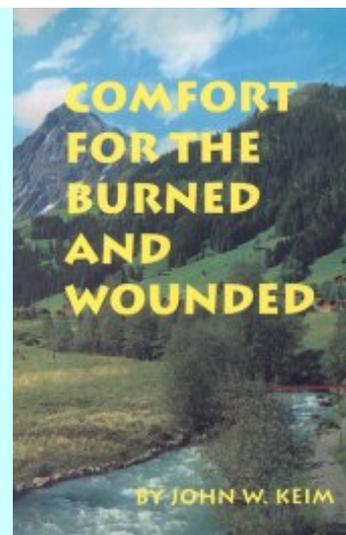
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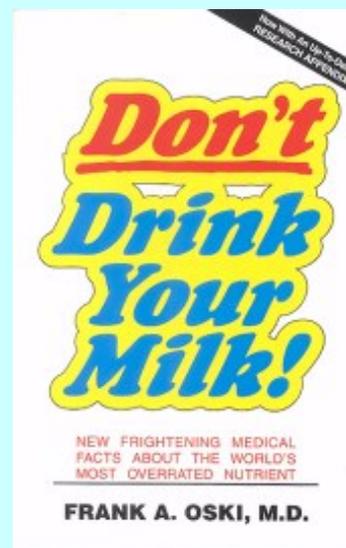
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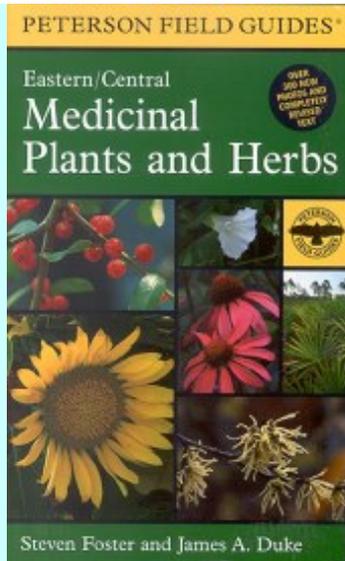
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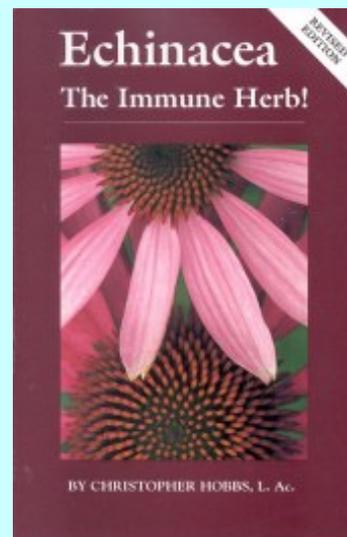
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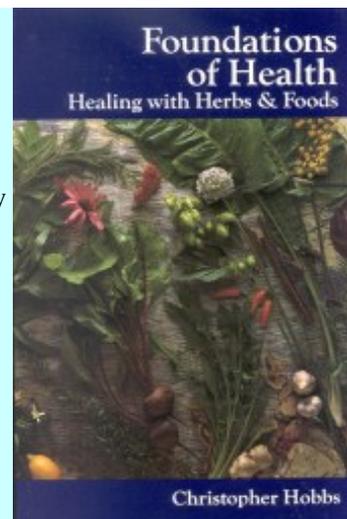
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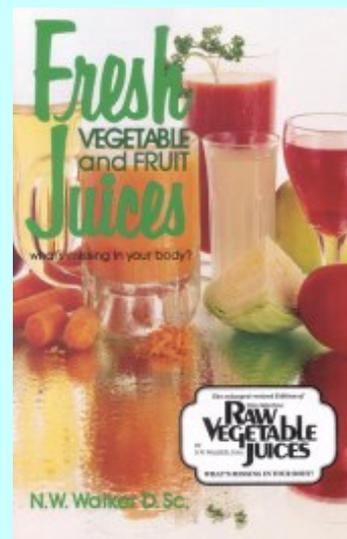
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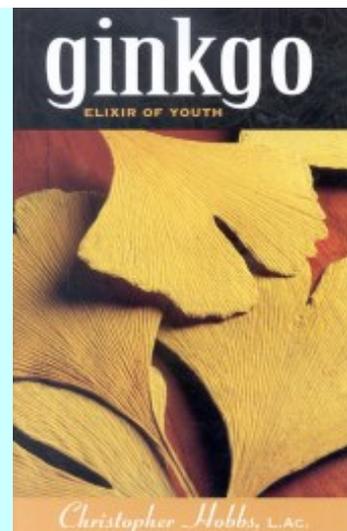
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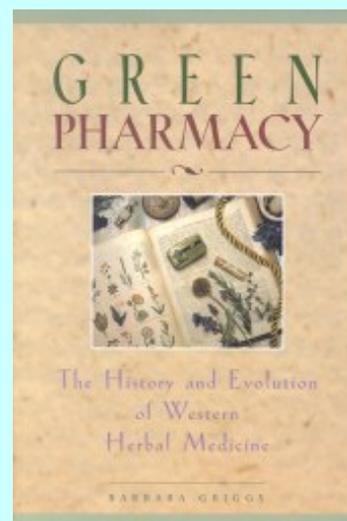
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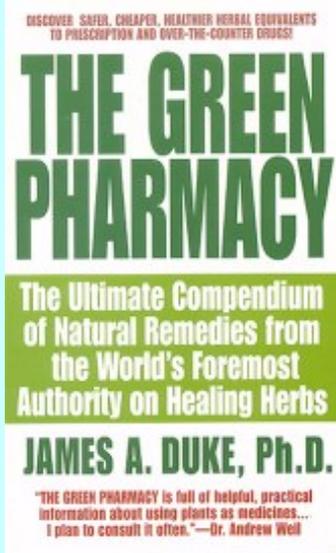
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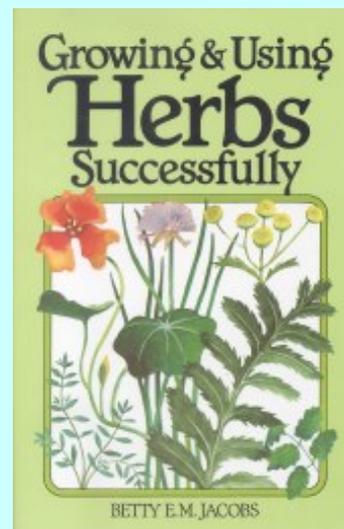
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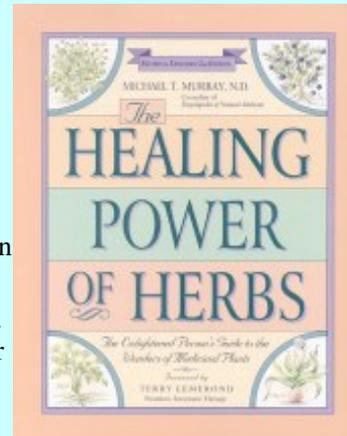
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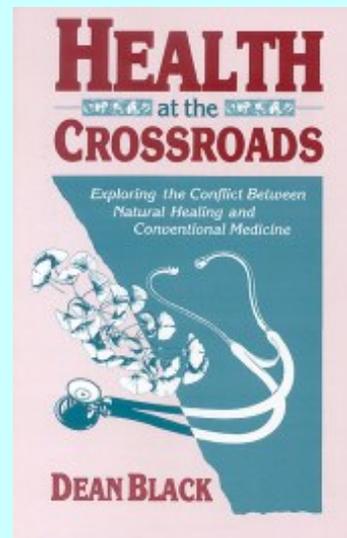
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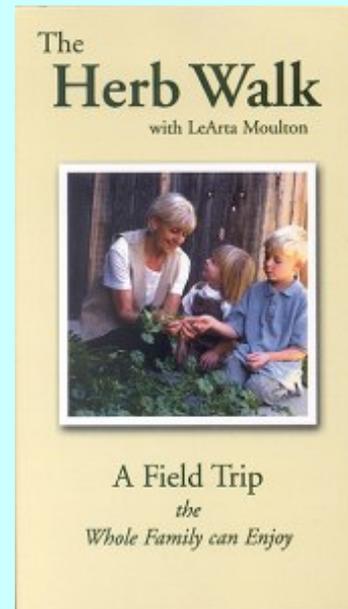
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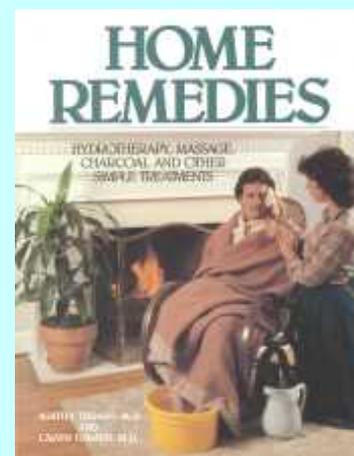
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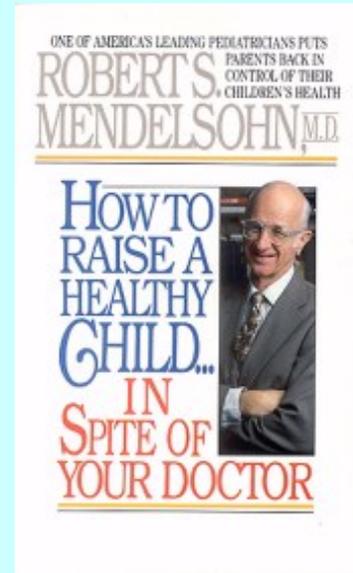
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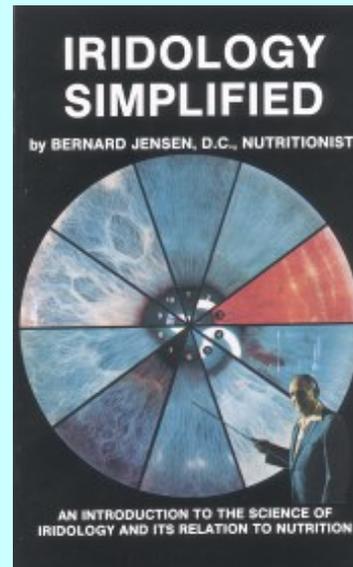
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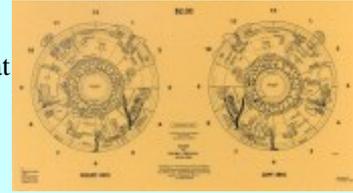


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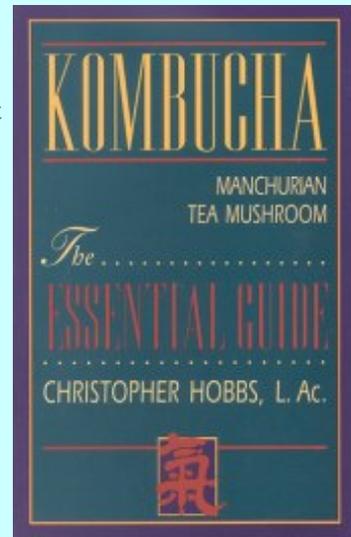
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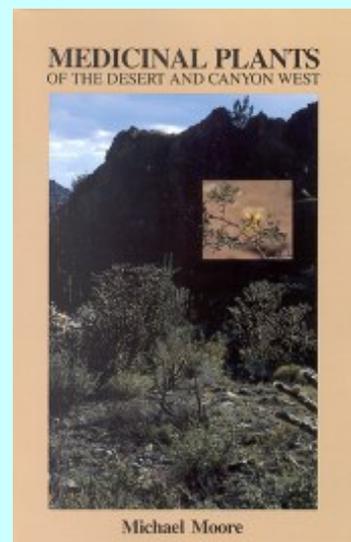
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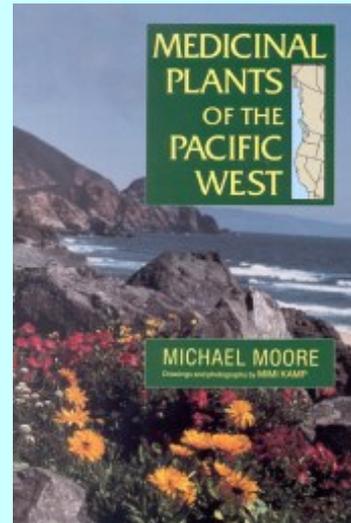
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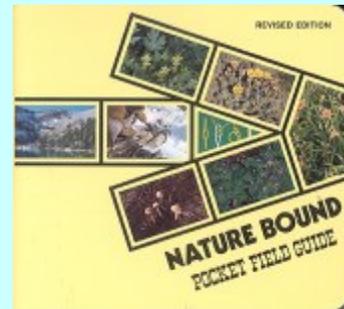
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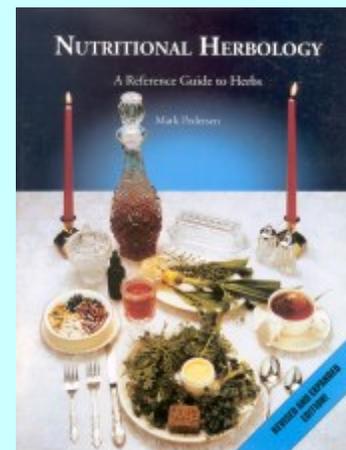
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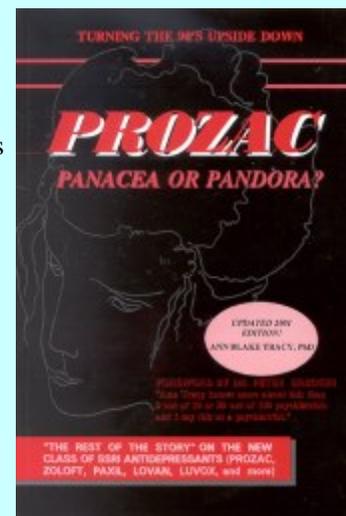
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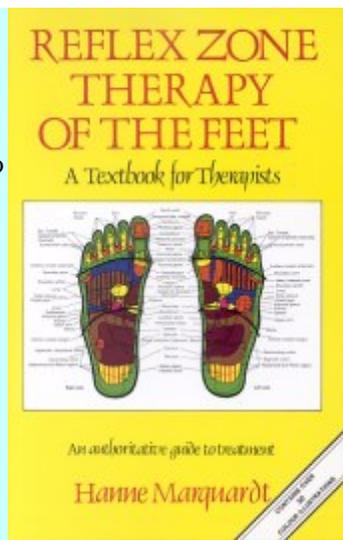
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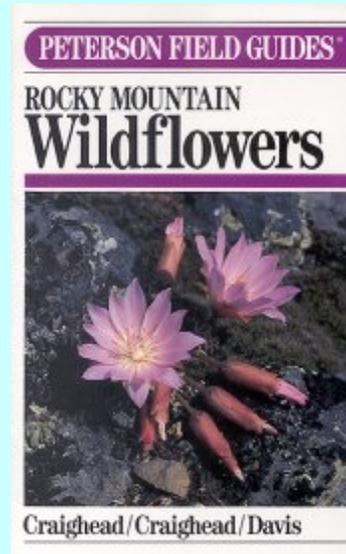
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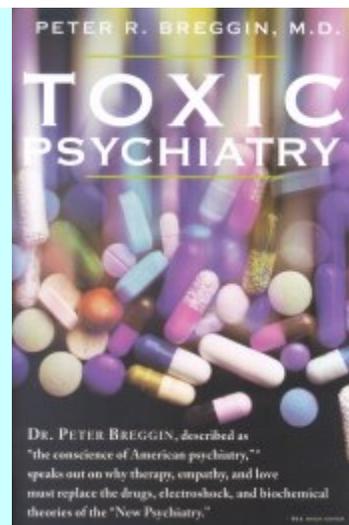
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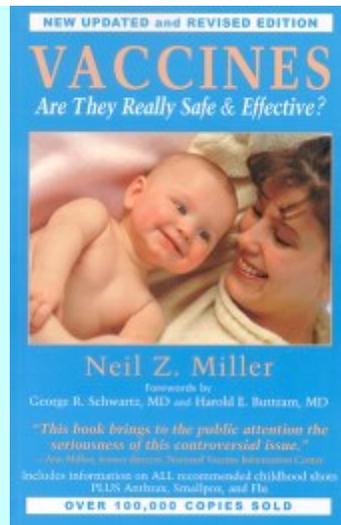
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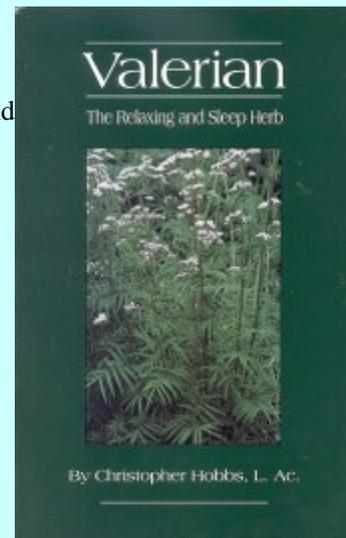
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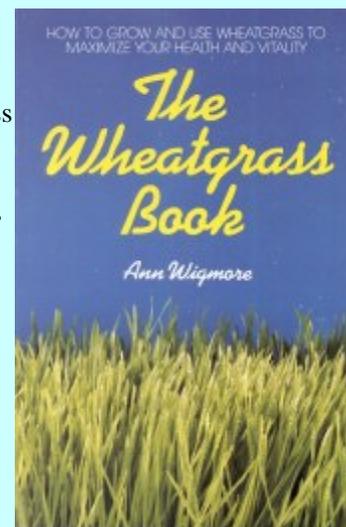
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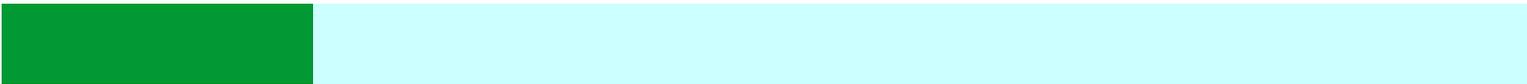
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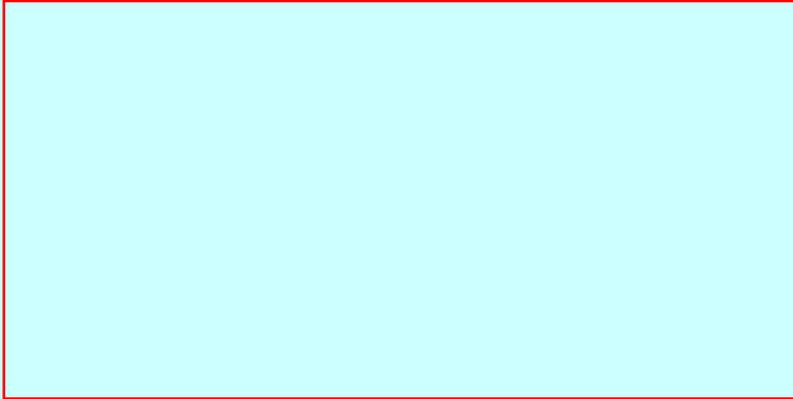
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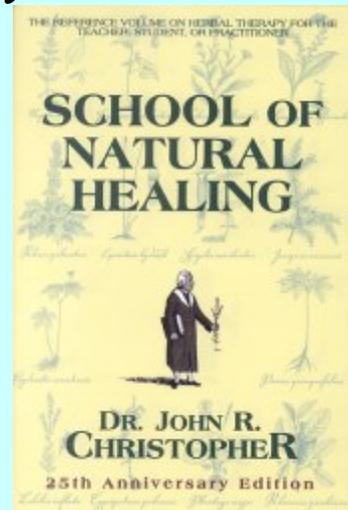
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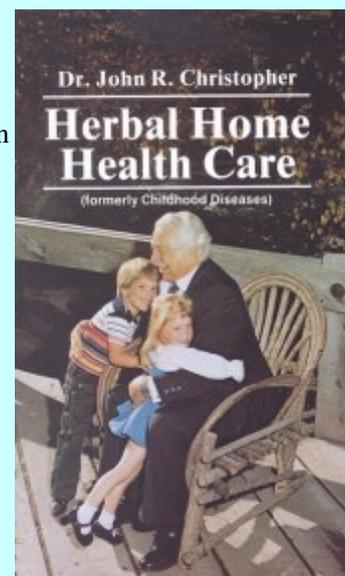
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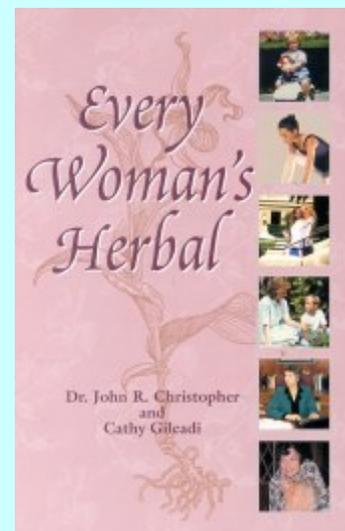
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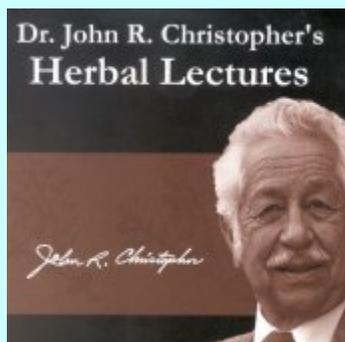


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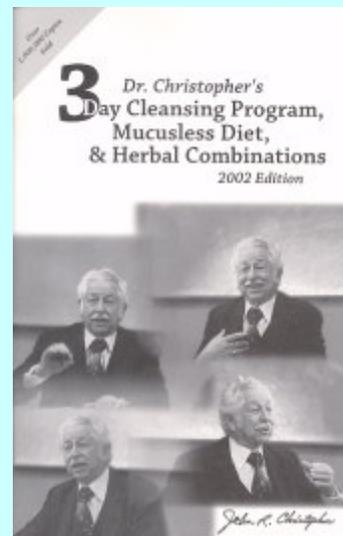
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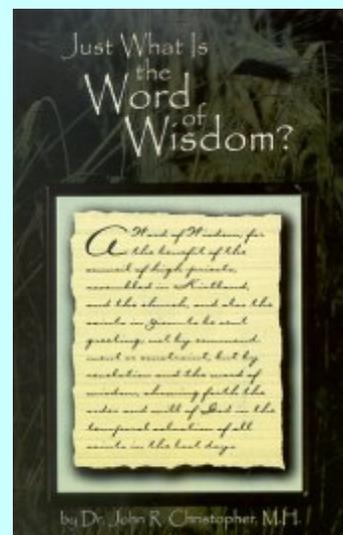
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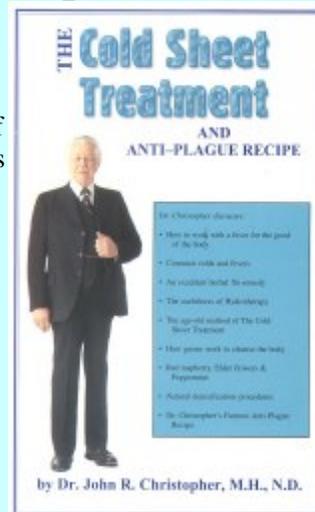
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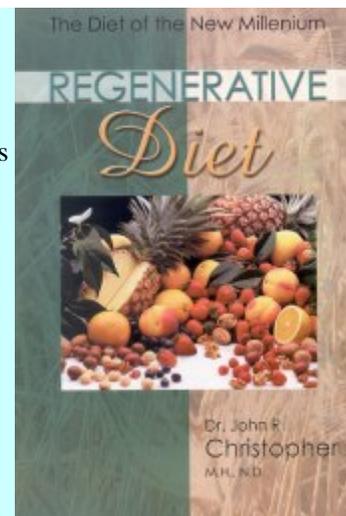
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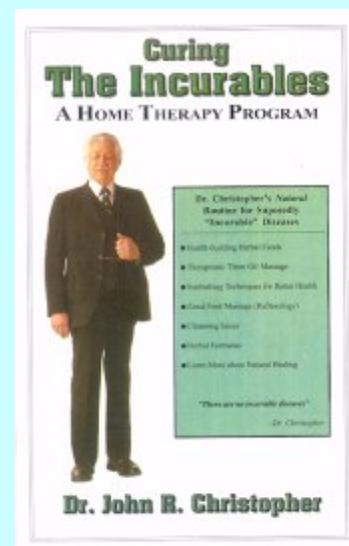
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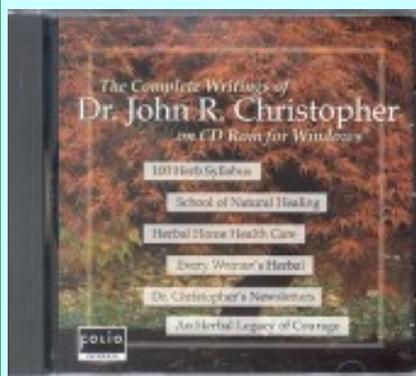
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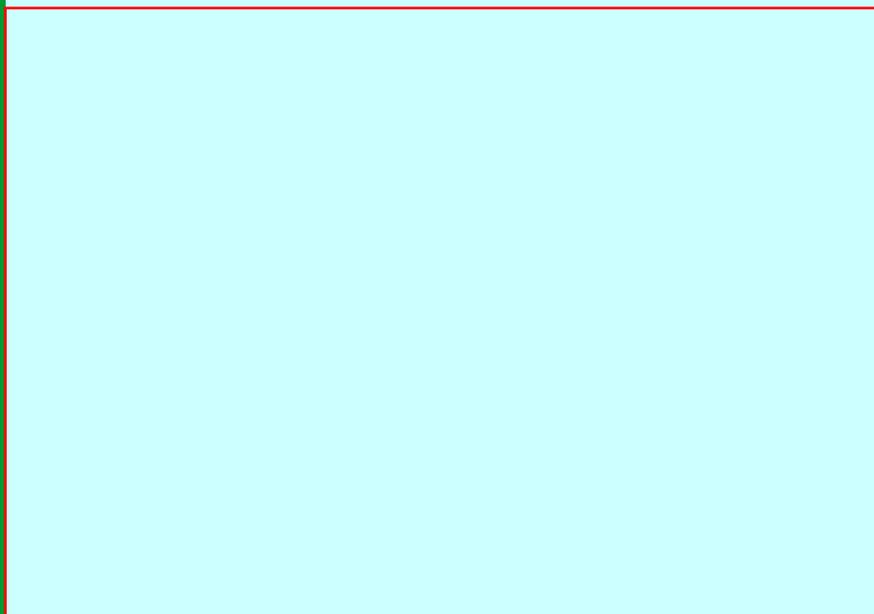
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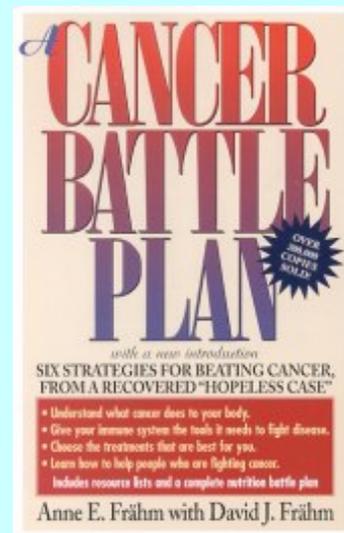
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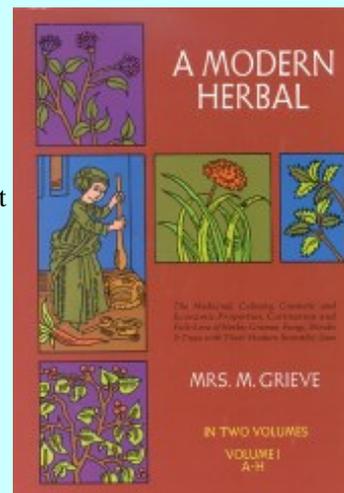
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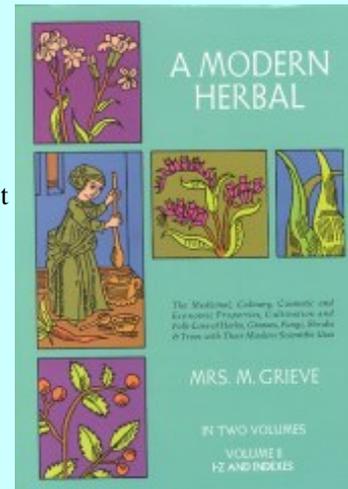
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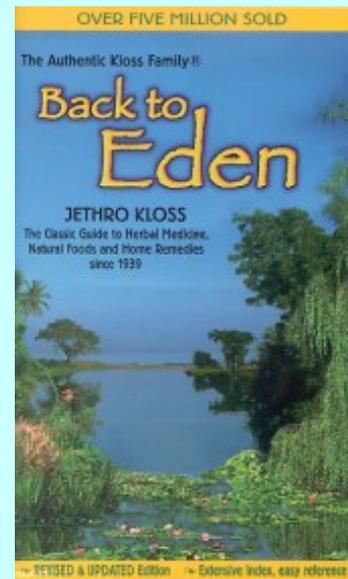
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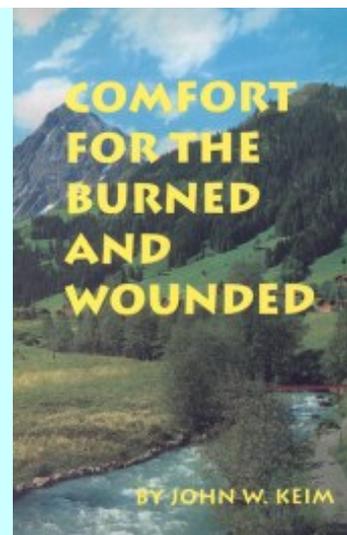
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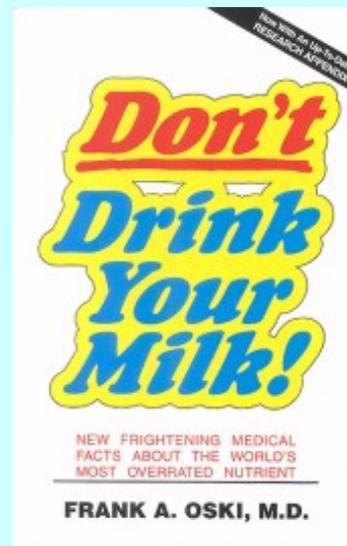
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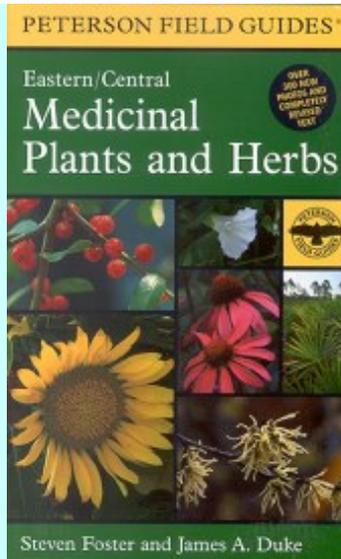
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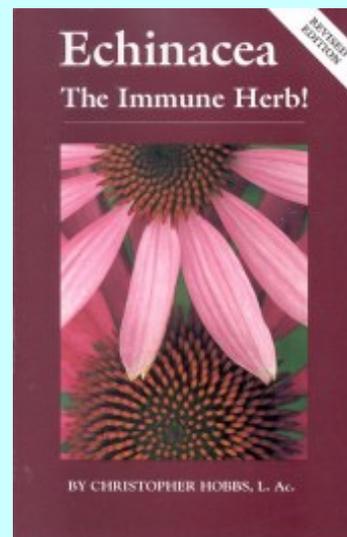
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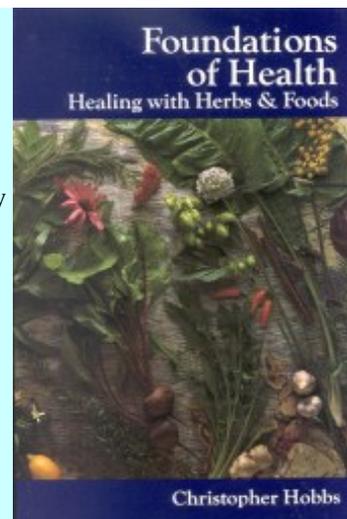
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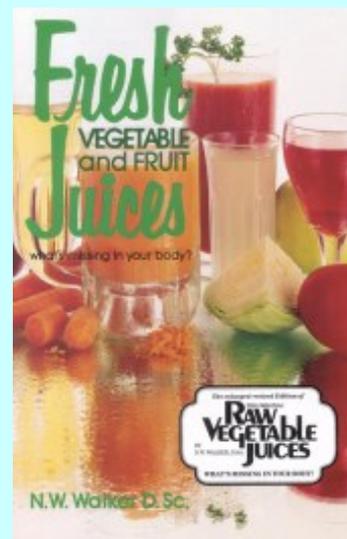
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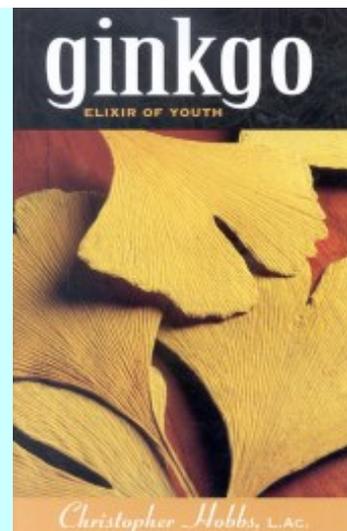
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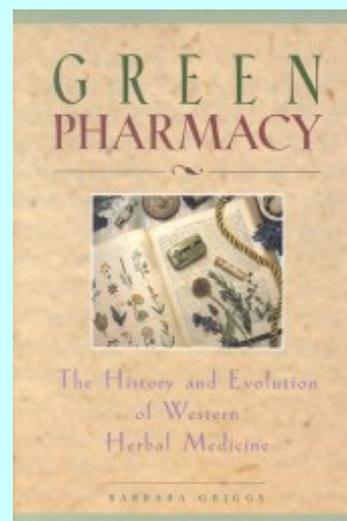
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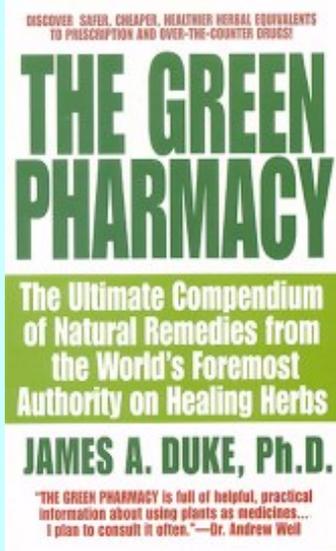
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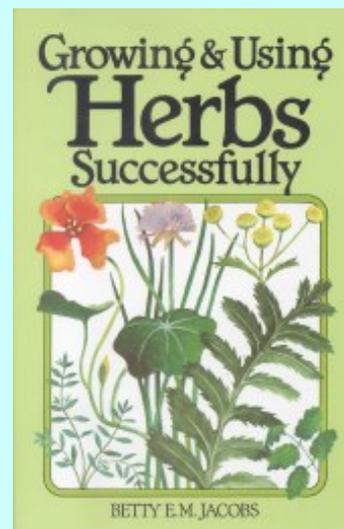
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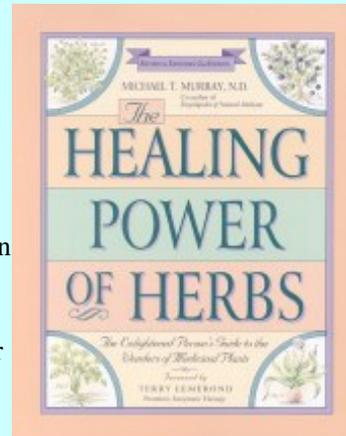
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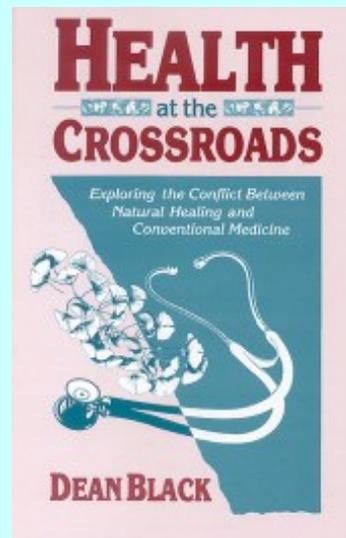
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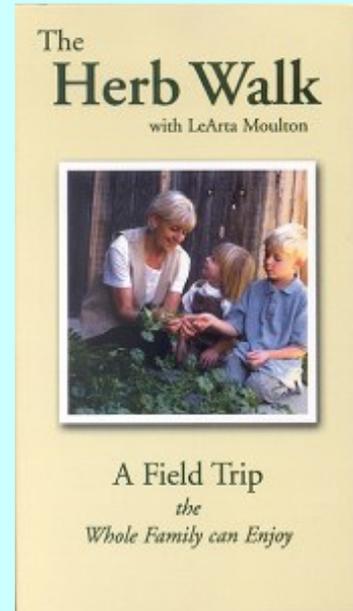
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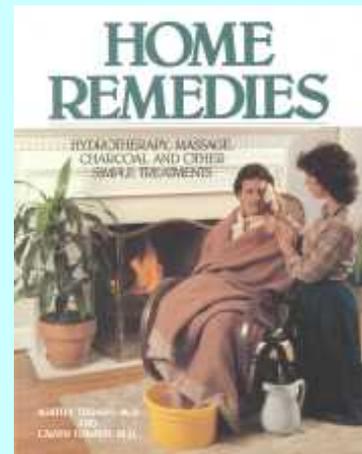
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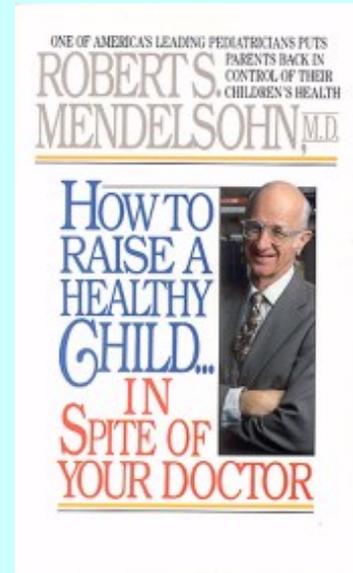
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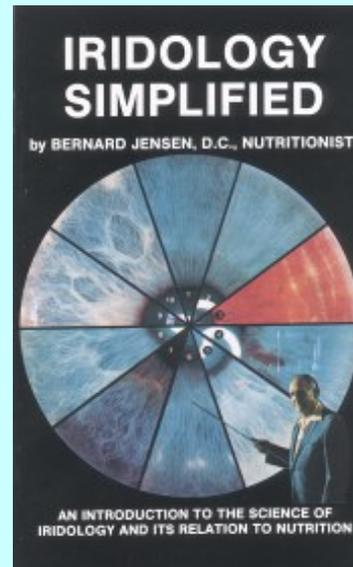
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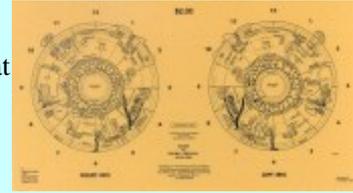


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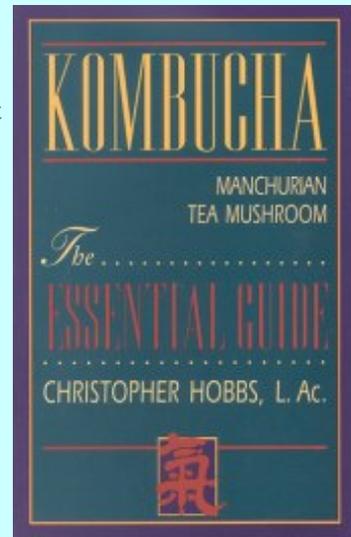
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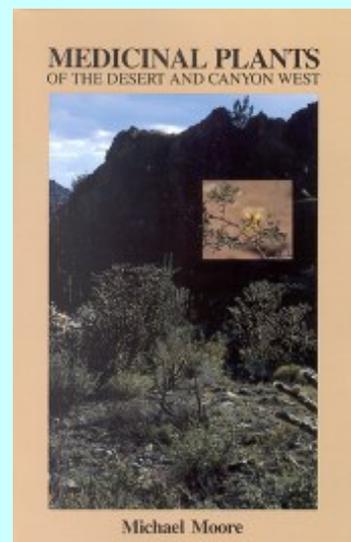
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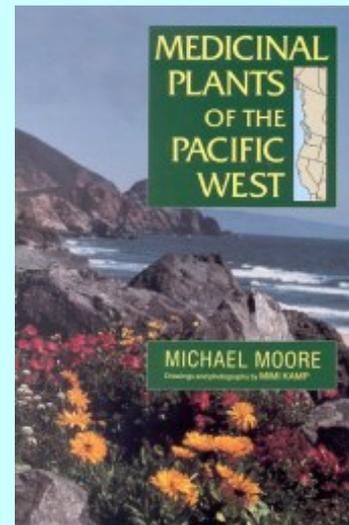
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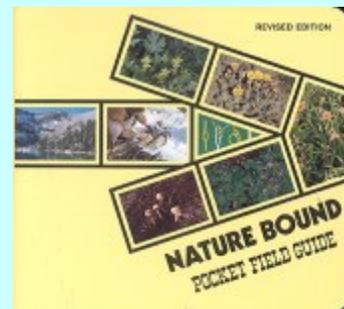
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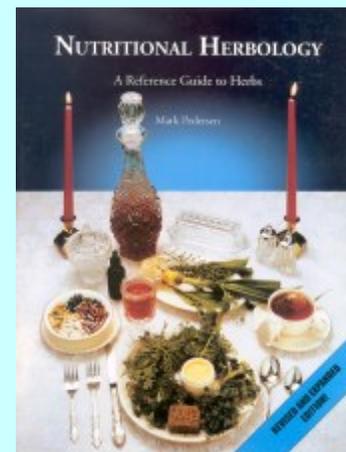
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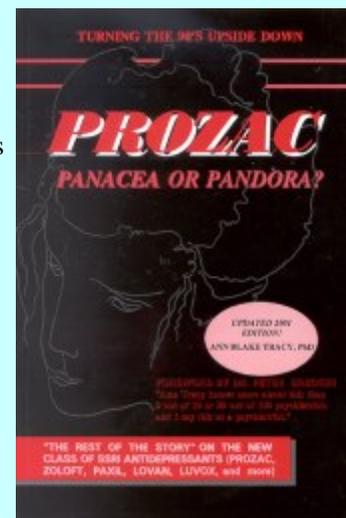
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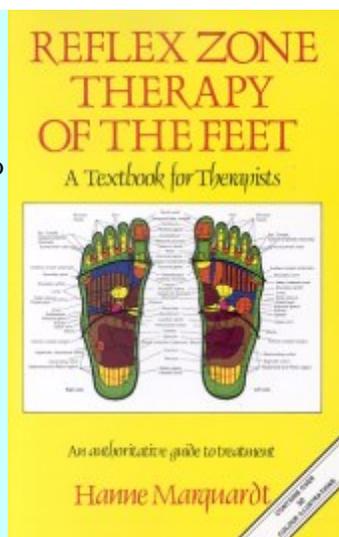
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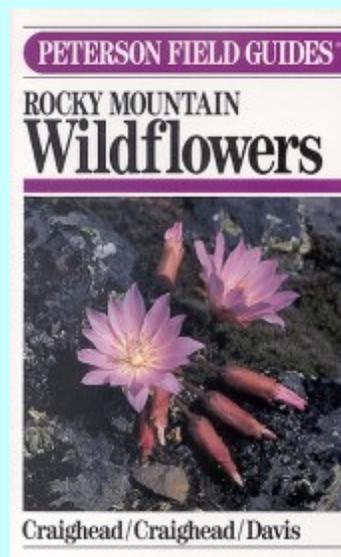
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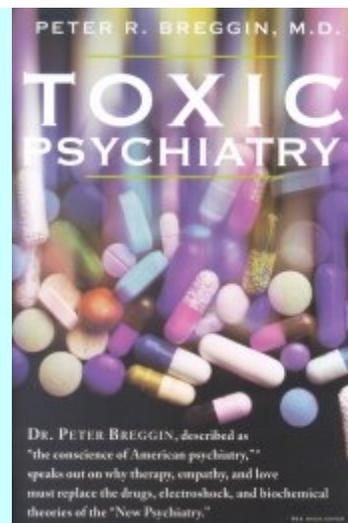
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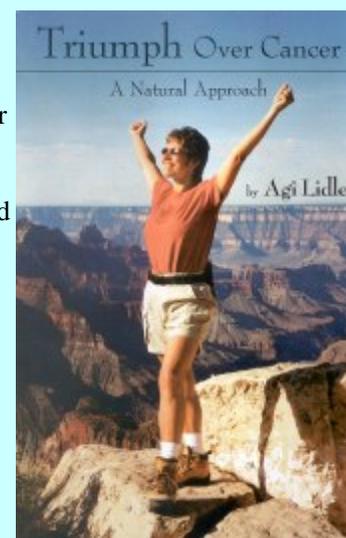
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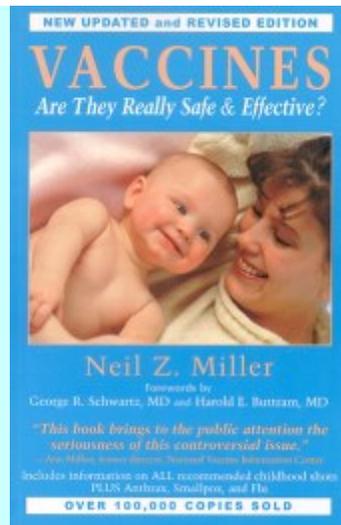
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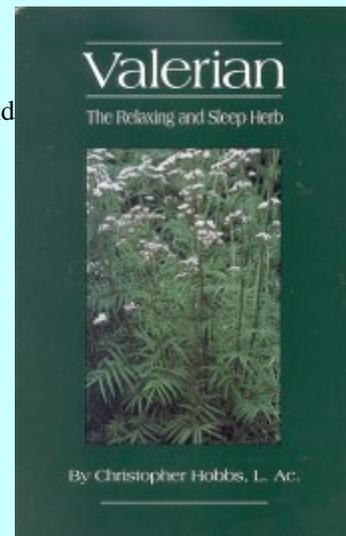
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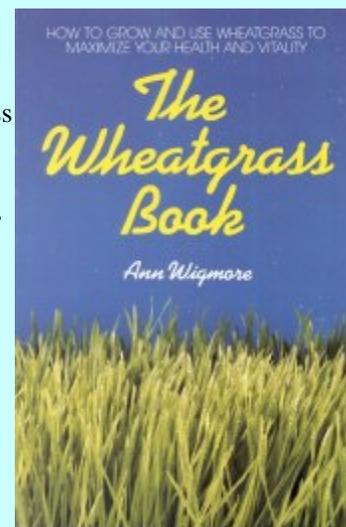
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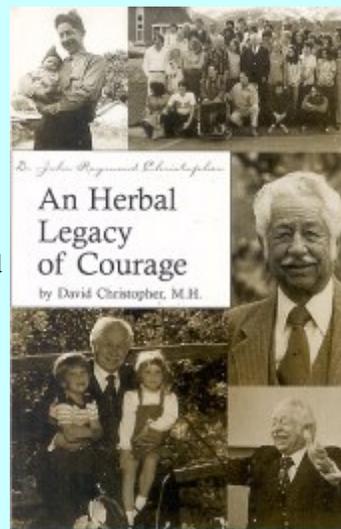
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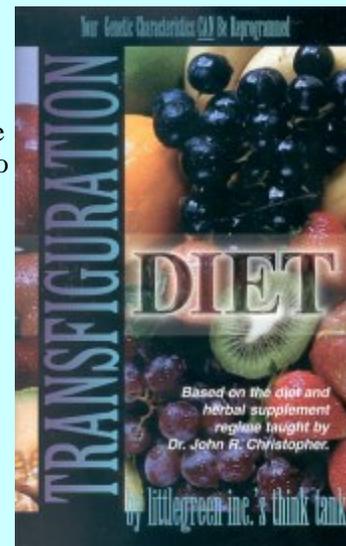
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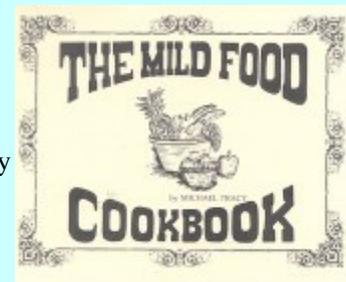
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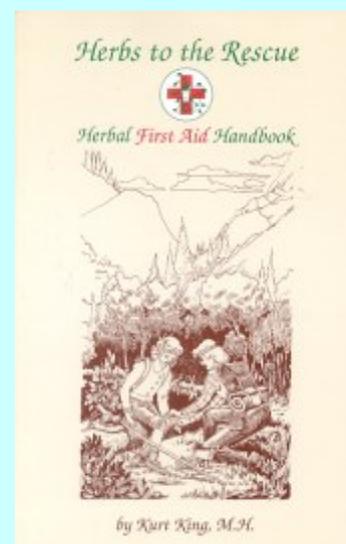
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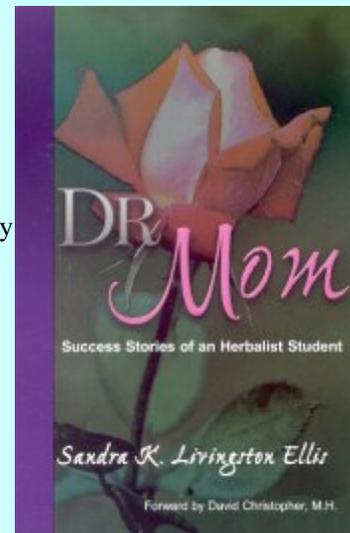
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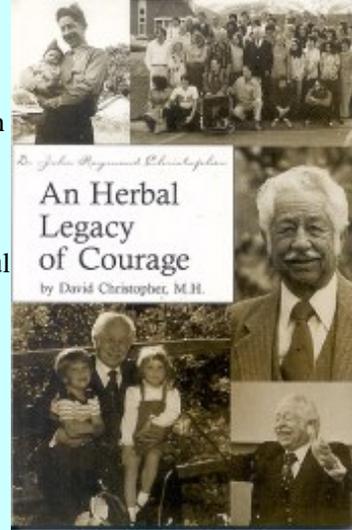
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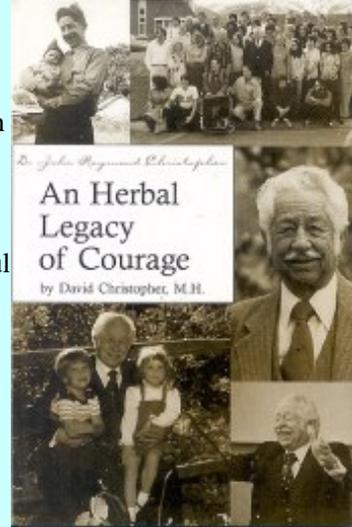
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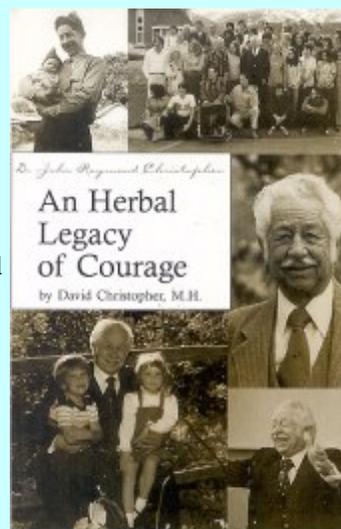
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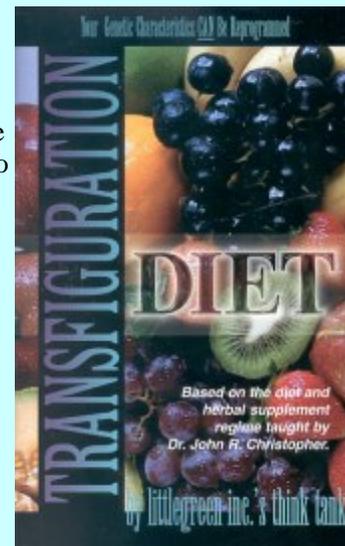
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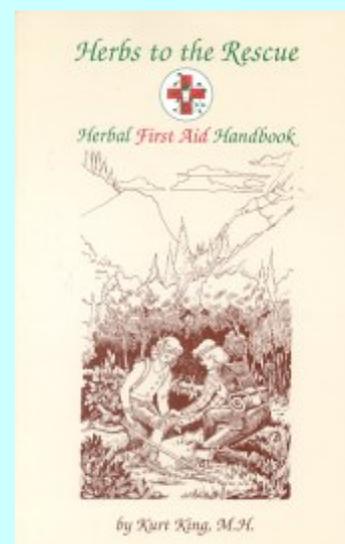
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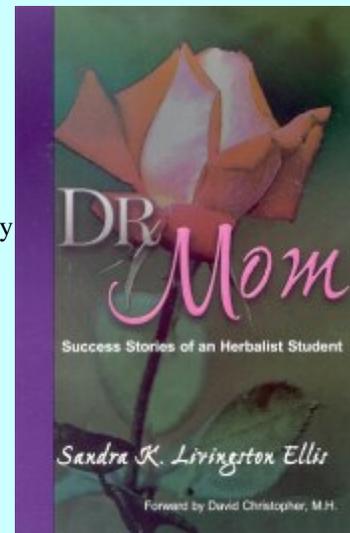
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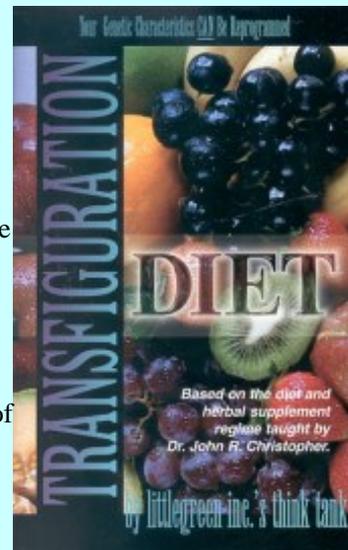
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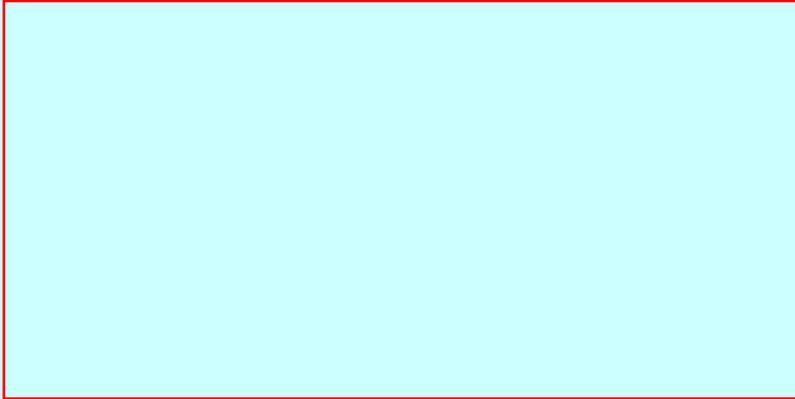
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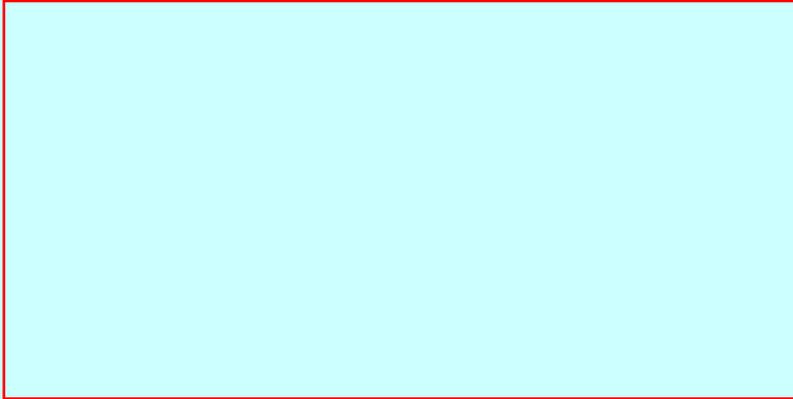
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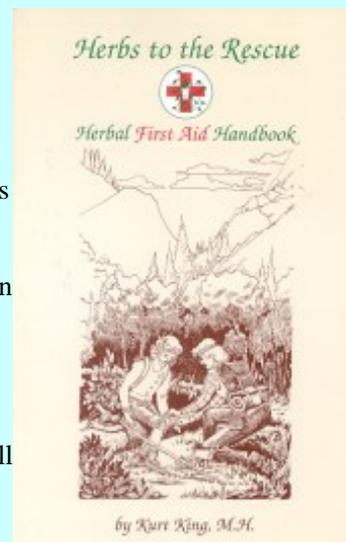
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At the age of 16, he first studied natural health and how it related to his studies of the Martial Arts. Kurt holds several degrees in Karate including a black belt and was a professional kickboxer taking several championships throughout the Intermountain West. In 1978, Kurt met Dr. John R. Christopher and studied under him, receiving his Master Herbalist Degree.

He was worked with Dr. Christopher and his family for the past 11 years in one way or another involving herbs. Kurt now lives on a piece of God's good earth in a log cabin in the wild Montana mountains with his loving, supportive wife and seven beautiful, healthy children.

*Herbs to the Rescue* is a visionary's book to help us all not only to survive...but to evolve. Highest recommendations for all Herbalists, as well as anyone who loves life on the Earth.



-Jeanine Parvati Baker, Author of *Hygieia*

Kurt's book *Herbs To The Rescue* is a first of its kind. I know it will provide solutions for numerous health-related complaints, with its easy Herbal First Aid Remedies. I recommend it to everyone that values good health.

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*"It was a delightful surprise to see this presentation. It has long been needed, and everyone in the natural health care field should become acquainted with it. We must all become more aware of the beauty and abundance with Nature has provided us in the form of these useful plants. I truly endorse the ideas and efforts which resulted in this wonderful video."* Dr. Bernard Jensen, PhD, Nutritionist

**Debra Nuzzi St. Claire, M.H.**, holds Master Herbalist degrees from Dominion Herbal College and The School of Natural Healing. She has worked in the field of herbal medicine for 25 years and has taught classes in herbal preparation techniques since 1984. Debra has formulated over 270 herbal products for the natural health care industry. She is the US Director of the Ethno-Medicine Preservation Project, which is dedicated to the preservation of the medicinal plant knowledge of indigenous peoples on an international scale.

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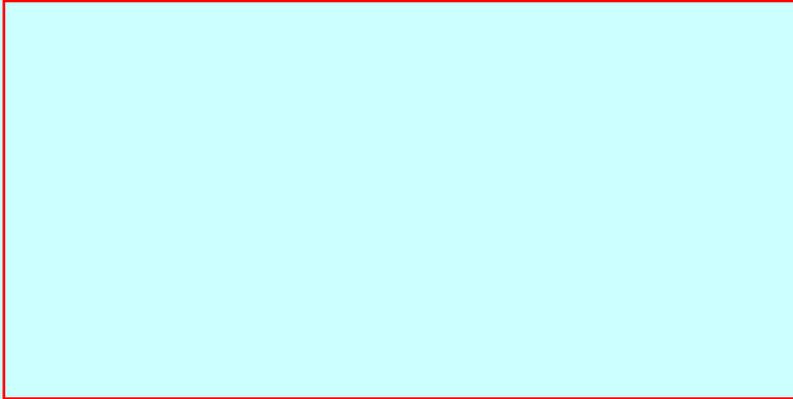
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## Dr. Mom

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As my sixteen year old son held his dying ferret, which was bleeding from the nose, ears and eyes after a fall from a second story balcony to a tile floor, and said "Mom, isn't there anything you can do?" We administered cayenne extract and within ten seconds the hemorrhaging stopped and she became very much alive.

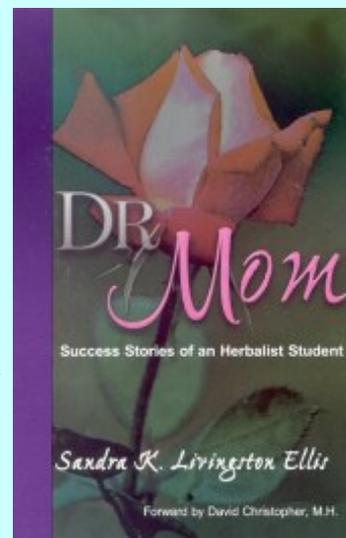
When the doctor look at the x-rays of Nathan's foot, he said, "You have a spiral break of the fifth metatarsal and the bone has rotated. You will need to see an orthopedic surgeon to have it set and possibly pinned." Nathan thanked him for the x-ray and went home. We treated the problem with herbs and four weeks later he was back on the basketball court.

As Jennifer laid on the couch in intense pain with appendicitis, I struggled with what I had been taught about this disease. *What if I wasn't doing enough? What if it ruptured? What if she died?* As Donna took her vital signs, her countenance lit up. "You are on top of this," she said. "There is no fever. If there is no fever, there is no infection, and the infection is what kills you."

By exercising faith and using the knowledge of herbs to take responsibility for her family's health, she was able to turn possible tragedies into miracles. Sandra and her husband, Steve, reside with their family in Springville, Utah.

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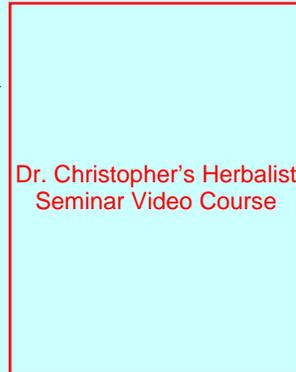
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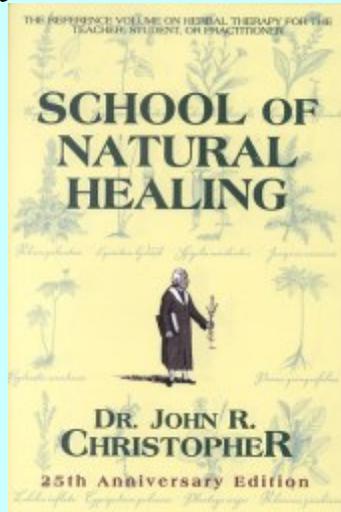
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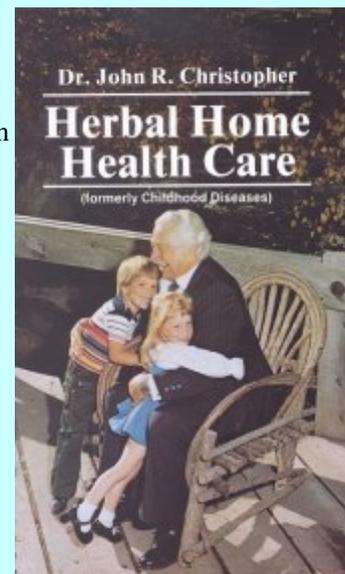
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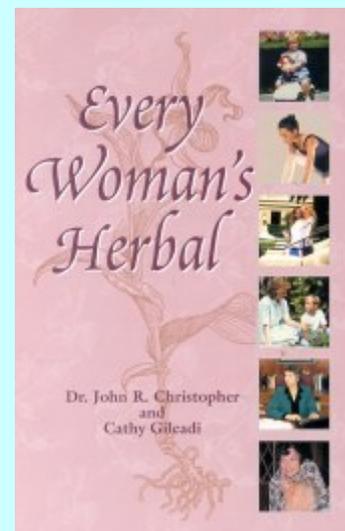
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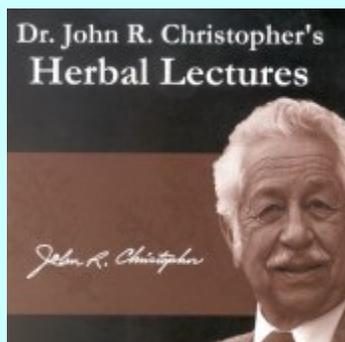


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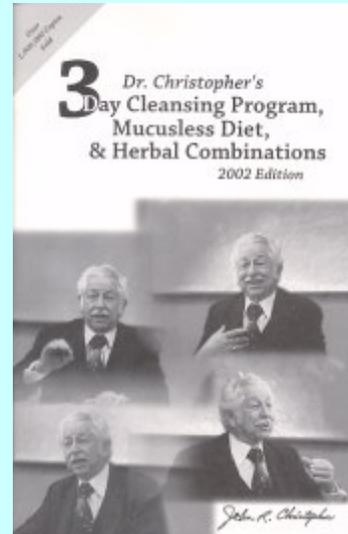
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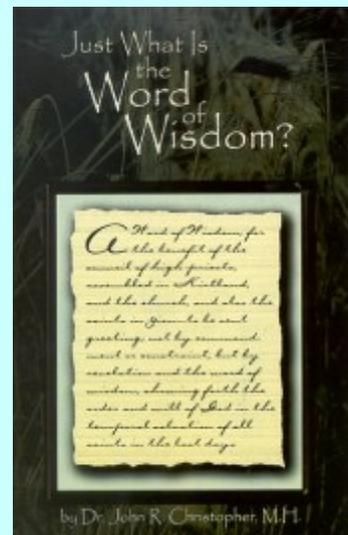
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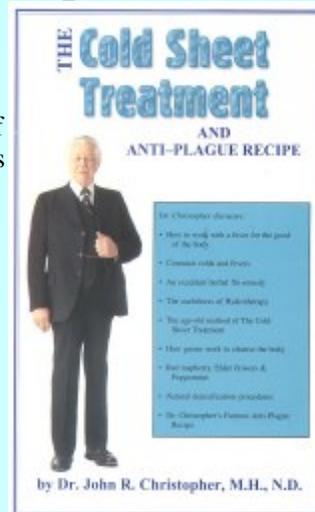
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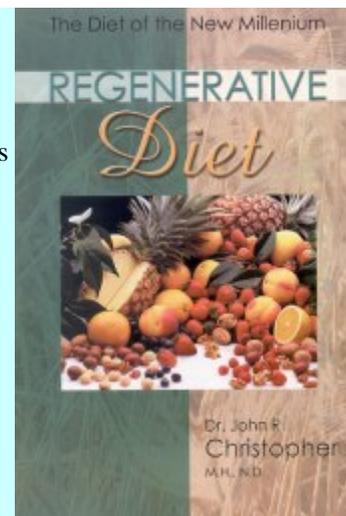
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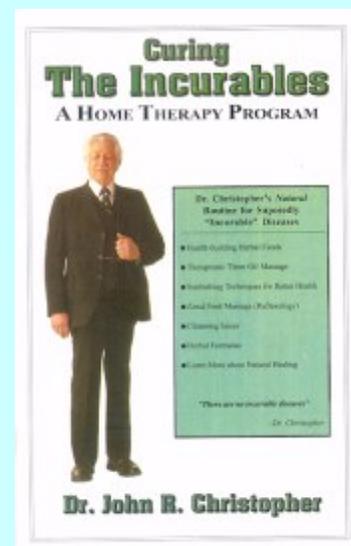
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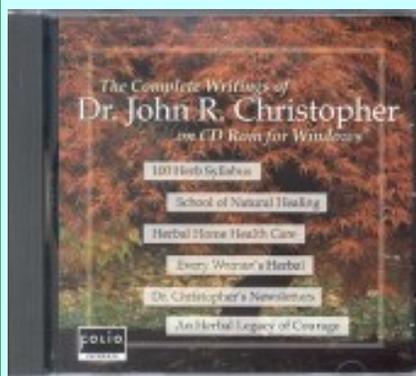
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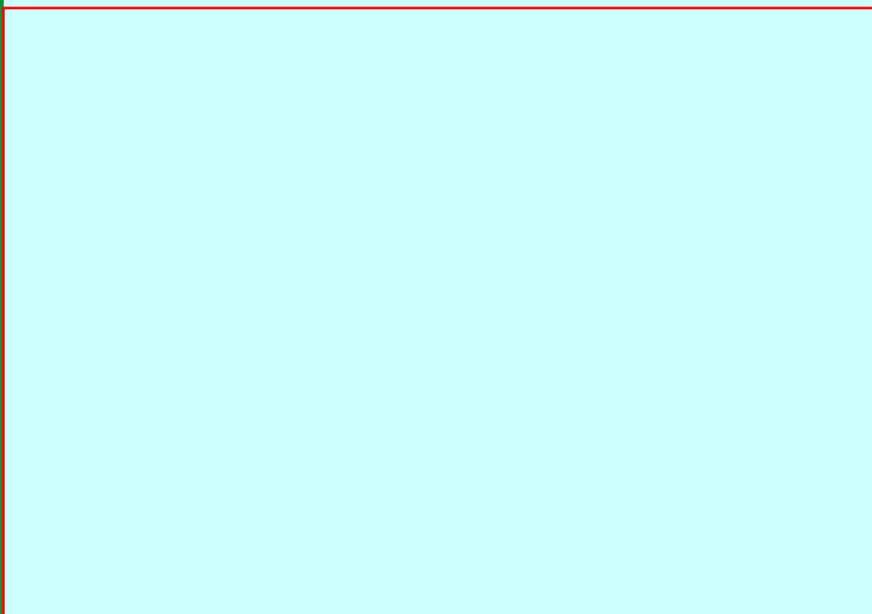
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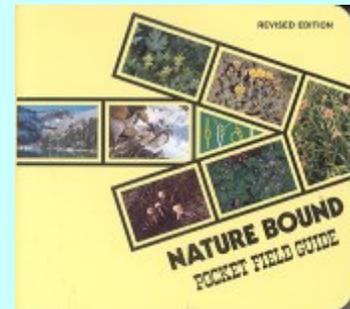
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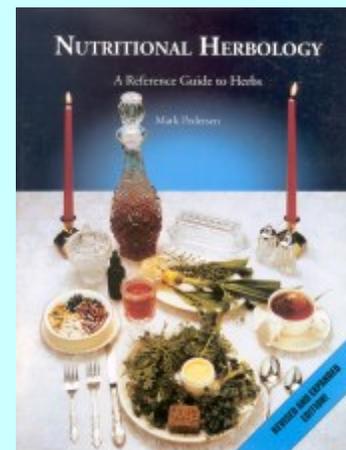
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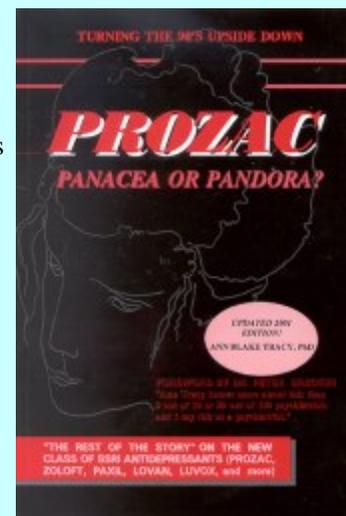
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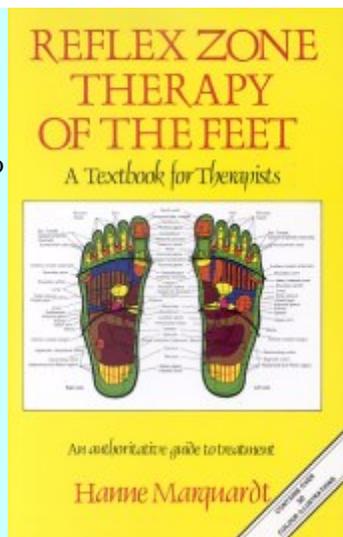
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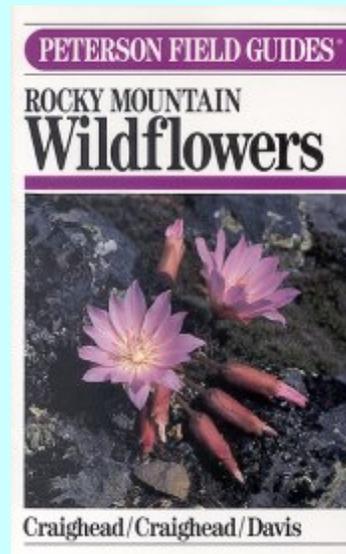
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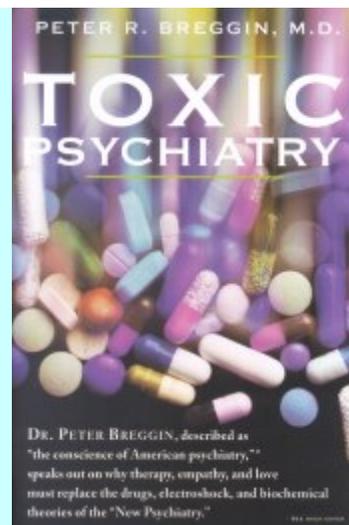
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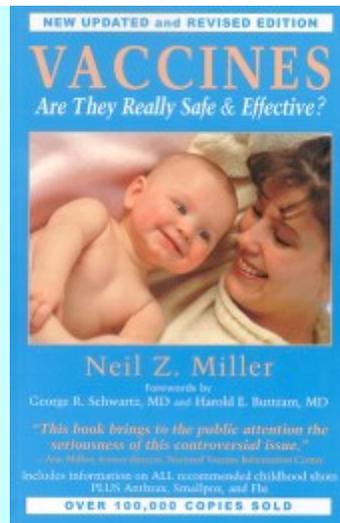
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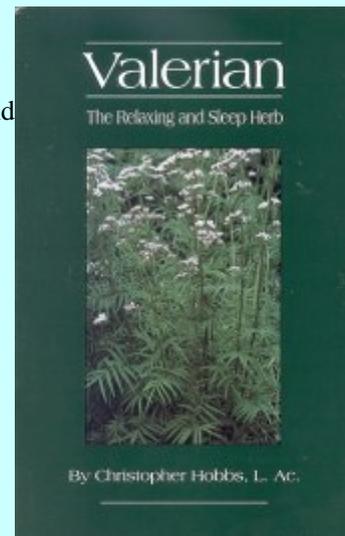
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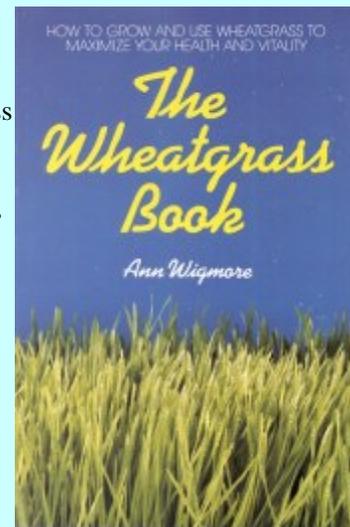
From the juice bars of California to the health spas of New York, wheatgrass is fast becoming one of the most widely used supplemental health foods.

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The human body is very complex. Although each person is similar in general structure and function, each is also uniquely different, responding differently to similar stimuli, therapies and conditions. What may help one person in a certain circumstance or condition, may not help another. This is also true with foods. A particular food that may be nourishing to a healthy person may cause an allergic reaction in another. Each condition may also be unique. Although thousands have had help from the natural methods described here, there have been and will be cases where destructive pathological changes are so severe, and the bodies own healing mechanisms so weakened, that the process of healing could be an extended process. Persevere, and your hard work will be amply rewarded.

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We offer this information along with suggested programs to those who want to, and are willing to, share responsibility for their own health with their health care provider.

Even though Herbs First herbal remedy processes contain no drugs, you should use them only as directed by your health care provider. Do not self-diagnose.

Do not attempt to treat yourself for any serious condition. Consult your health care provider. Show him or her this material and undertake a program of treatment under supervision. However, if your health care provider says that nutrition is not important and attempts to treat you only with drugs, we suggest that you obtain a second opinion from a diet conscience health care provider who is more aware of the natural methods of biological medicine, because--after all, it is your health!



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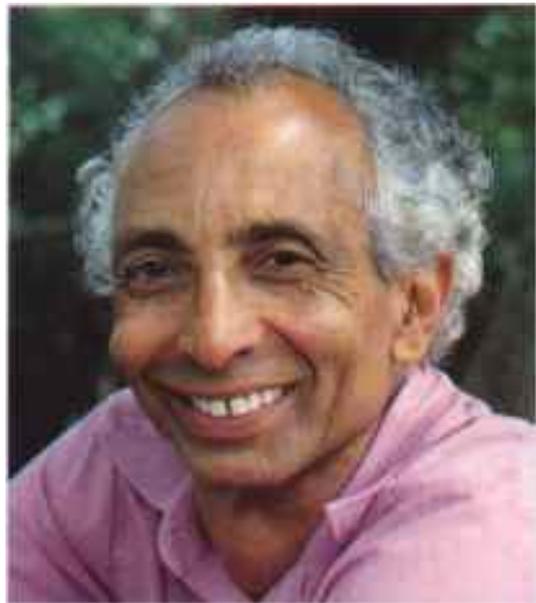
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# The Quintessence of Natural Living for health & happiness

essays & talks  
on  
the art of natural  
hygiene lifestyle



by Keki R. Sidhwa ND. DO. D.NH.

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*Do you know how to get well without drugs? How soon you can get well? What the signs of health are? How to overcome depression without drugs? Why it is so hard to change to a healthier lifestyle? What is 'toxins', 'detoxify' and 'sludged blood'?*

**Find out from Dr. Keki Sidhwa - British Natural Hygiene physician, teacher, scientist, philosopher, visionary and poet**

**"My people are destroyed for the lack of knowledge" - Hosea 4:6**

*Dr Sidhwa has never been complacent. He has never taken knowledge for granted. He has always attempted to seek, to investigate, to question. The numbers of people in Britain and abroad who have been influenced by Dr. Sidhwa's essays has been significant. Many of his essays were reprinted in Dr. Shelton's "Hygienic Review".*

*Dr. Sidhwa has withstood a great deal of persecution and vilification from opponents within the natural therapies. He has suffered much criticism for his vociferous opposition to the "curing superstition". Despite this he has earned an unusual respect from many of his disjoiners. (Dr. Alec Burton)*



## ARTICLES:

### SOME PRACTICAL DO'S AND DONT'S IN NATURAL HYGIENE

Can Natural Hygiene give some practical guidelines to maintain and preserve good health? What are the guidelines in cases of illness?

### HOW TO RECOGNISE HEALTH IN YOU

Many people are able to recognise the signs of ill health within them. We have been conditioned to look for signs of ill health rather than health.

### HOW SOON CAN YOU GET WELL?

People are so used to seeing their symptoms vanish with the prick of a needle, that they also expect instantaneous relief when they embark on a Hygienic way of life. They forget that the speedy relief they had was only temporary.

### LIVING BEYOND YOUR MEANS

Husbinding one's resources is a sure sign of good investment. But how many of us fail to realise that what is true of economical strength is also true of bodily and mental wellbeing.

# Health, Longevity and the Art of Living

The Quintessence of Natural Living is that which provides physical health, mental and emotional poise and spiritual integrity to the human organism to suffuse it with joy and happiness.

Natural Hygiene is the art and science of living in such a way that it provides all these qualities abundantly.

The primordial needs of the human individual to supply vigour and dynamic health and longevity are as follows:

1. Pure Air (unpolluted, without fumes, smog, etc.)
2. Pure water (unpolluted by man's chemicals)
3. Wholesome food grown on unpolluted soil to which mankind is biologically suited to as a frugivore, i.e. The natural diet of man is basically a total vegetarian diet. Man is not a flesh eating animal according to comparative anatomy and physiology, although he has over centuries adapted himself to eat flesh foods.

"The natural diet of man is basically a total vegetarian diet. Man is not a flesh eating animal, although he has over centuries adapted himself to eat flesh foods".



Biologically being in the same class as the primates and the big apes like gorillas. Ideally man should eschew all flesh foods at least. If dairy products and eggs are taken they should not be more than 1-2% of the total diet.

Those who are not able to partake of a total raw diet of fresh fruits, fresh raw vegetables, nuts and seeds should see that at least 70-85% of their total diet is composed of raw fruits and vegetables, nuts and seeds or other protein food 10% and the remaining percentage as complex carbohydrates composed of

### WHAT IS THIS TOXAEMIA?

Toxaemia and toxins are words commonly used in the Natural Hygiene field but many people are still in ignorance of what they are and what they imply.

### SOME PRACTICAL HINTS FOR A DETOXIFYING REGIME

Not many people have the time to undertake a fast. For those who want to detoxify themselves the following practical suggestions will go a long way in helping them to detoxify.

### VEGETARIANISM IS NOT ENOUGH - FOR GOOD HEALTH

Many people make the mistake of choosing a fragment and building a total way of life around it. Vegetarianism is one of them.

### OVERCOMING DEPRESSION WITHOUT DRUGS

The Hygienic practitioner's first duty is to make the person with depression realise that it is within his or her own power to get well, without resort to drugs

### DO "HEALTH FOODS" GIVE YOU HEALTH?

Many people have no idea that the modern day "Health Food Store" has very little in common with the one opened 50 years ago.

### FOOD & LIFE

What is the natural diet of man?  
- How much, when, how to eat?  
- Speaking of food as "medicine" is to transfer to food all the misconceptions about drugs.

cooked whole grains and their products, steamed green vegetables and finally some steamed starchy vegetables as potatoes, yams, beetroot, carrots, parsnips, turnips etc.



4. Sunshine
5. Physical activity and exercise
6. Rest and sleep
7. Relaxation and creative activity to express his creative instincts.
8. Mental and emotional poise with which to meet the stresses and grains of life.
9. The ability to express love and receive love essential for his spiritual growth and reproductive instincts.
10. Faith in mother-nature and the life-force which has shaped his environment to augment his own self-esteem.
11. The need to express humour and laughter, tears of joy and tears of sadness.

"Either mankind stops, looks and listens to his inner voice and conscious awareness or he will end up in a headlong rush - namely his own destruction."

Over the years mankind has instinctively abided by these precepts to go on evolving as a Homo-Sapiens for over 40,000 years.

However in last few centuries mankind has gradually moved away from his instinctive natural

living habits and succumbed to the vagories of the machine orientated technological age whereby he is over the verge of annihilating himself and becoming as much extinct as the plants and animals he has already made extinct by his unnatural behaviour of destroying the very hand that sustains his life - namely his environment.

Either mankind stops, looks and listens to his inner voice and conscious awareness or he will end up in a headlong rush - namely his own destruction. That this is the trend, is observed in the rapid rise in sickness and diseases, in crime and violence, in injustices and cruelty, in greed and possessiveness on one hand and despicable poverty and suffering on the other, and last but not the least, with no foresight and formulation as to the direction we must take, not only to avoid the inevitable end but to reverse the present trend so that our immediate future generations have something to look foreword to instead of disaster.

To that end, i.e. the reversing our foot-steps to that natural life-style that the art of Natural Hygiene is dedicated to. Healing, all healing is a biological process, but Natural Hygiene is the art by which we can enhance the life force in its attempt to cleanse and heal the gaping wounds we have inflicted, not only on our physical, mental and emotional bodies, but on our planet mother-earth.

Over the years I have written extensively on the various facets

### EDUCATE - NOT MEDICATE

In the past Dr Shelton was chastised by Hygienists for his strong language in criticising the medical profession - modern day Hygienists are still sitting on the fence.

### WHAT PRICE - "THE REMEDY MENTALITY"

Ill health is so prevalent that doctors are beset with a mass of people who are seeking relief from their aches and pains and their disabilities.

### NATURAL HYGIENE IDEAS ARE BEING STOLEN!

Many Natural Hygiene adherents would probably be greatly surprised to learn that there is undoubted evidence that Natural Hygiene ideas are gradually being purloined ...

of Natural Hygiene, trying to formulate and make clear in my own mind the only way that is open to us. My field has always been the philosophical and psychological means whereby each individual tries to meet his primordial physical needs as well as emotional needs.

I am of the opinion that in Natural Living, unless we look at the problem with the heart and not just with the head, we will end up in the same mess as the so called scientist and technologist have led us into. That does not mean to say one is superior to the other, but to me the human organism is a Holy Trinity: mind, body and spirit, and that the heart and the head must walk hand in hand as bride and groom on the path of one's salvation.

"...in Natural Living, unless we look at the problem with the heart and not just with the head, we will end up in the same mess as the so called scientist and technologist have led us into".



## Who is Dr. Keki Sidhwa?



Keki Sidhwa was born in Bombay, India of Parsi, Zoroastrian parents. After studying in Bombay University, he graduated from the Edinburgh College of Natural Therapeutics and the British College of Naturopathy and Osteopathy.

He has been in private practice since 1952; co-founder and president of the British National Hygiene Society and ex-president of the International Association of Professional Natural Hygienists (now IAHP), founder and director of Shalimar Health Home, where he has helped over 25,000 people to overcome their ailments by fasting and following a Hygienic life style.

He has lectured extensively in Europe, India, America and Great Britain where he now resides. His interest in primitive cultures, anthropology and comparative religions has helped him to formulate his views on natural living. He is the Editor of the magazine The Hygienist, the oldest magazine currently of its kind. He has authored six books: The Problem of Ill-health, Medical Drugs On Trial Verdict Guilty, Fit For Anything,

First Aid the Natural Way, Words and Music and All Alone (Poems on Health, Love and Life). [The Quintessence of Natural Living](#) is his opus magnum culled from his writings over 35 years and lecturing over the same period.

## Contact

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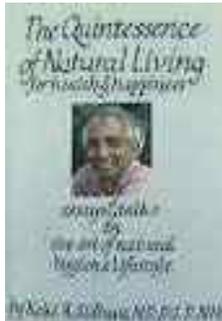
Nowadays Dr. Sidhwa only accepts 2-3 people at a time, so apply at least one month in advance.

The cost is UK£ 250.- per week.

Write or call Dr. Sidhwa. (No e-mail!)

Note: if nobody answers - Dr. Sidhwa may on a travel & lecture tour, and can be gone for weeks at a time. So make arrangements in good time!

## The Quintessence of Natural Living



Some of the articles at this website come from Dr. Sidhwa's book The Quintessence of Natural Living.

[Click here](#) for a list of the articles in the book. (620 pages, published by the British Natural Hygiene Society).

To obtain a copy of The Quintessence of Natural Living contact the [British Natural Hygiene Society](#). (Same address as the author. Price w. postage: £16 in UK, \$27 abroad - payable by UK check, US check or international money order - note that checks must be made out to BNHS).

Or the [American Natural Hygiene Society](#).

"In the wilderness of rubbish to be found in today's "health" literature, here is a jewel to be cherished and shared with all one's ailing friends" Dr. William L. Esser, N.D., D.C.

Find Keki Sidhwa's poem "[The Fast Complete](#)" here.

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# Herbert Shelton DC

## [Smallpox](#)

"On May 14, (1930) news came from Germany, of the death of 8 babies, in the Luebeck home for infants, and serious illness of 24 others, caused by inoculation with a tuberculosis serum from cows. Deaths continued to occur until on June 4, the news from Luebeck stated that: "Two infants died today, bringing the toll from administration of anti-tubercular serum to twenty-eight persons. Many others are not expected to live." On June 18, news came from Luebeck that "deaths from inoculation with anti-tuberculosis serum here have reached a total of 41, eighty-five infants are ill." On June 26 the death-toll had reached 44 and eighty-two others were ill.....The serum employed was that concocted by the notorious Calmette, of France, the B. C. G. vaccine that is said, though falsely, to prevent tuberculosis. "--[Shelton](#)

"Under conventional medical treatment, patients were drugged heroically, bled profusely, were smothered in blankets, wallowed in dirty linen, were allowed no water, fresh air and stuffed with milk, brandy or wine. Antimony and Mercury were medicated in large doses. Physicians kept their patients bundled up warm in bed, with the room heated and doors and windows carefully closed, so that not a breath of fresh air could get in, and given freely large doses of drugs to induce sweating (Sudorifics), plus wine and aromatized liquors. Fever patients were put into vaporbath chambers in order to sweat the impurities out of the system. Given no water when they cried for it and when gasping for air were carried to a dry-hot room and after a while were returned to the steam torture. Many must have died of Heat Stroke!"--[Dr Shelton DC](#) <http://www.whale.to/vaccine/shelton.html>

"In 1926, 130 members of the Dallas (Tex.) Chamber of Commerce cancelled their trip to Mexico because vaccination was required as a precedent to entrance. Nearly a 100 medical men, at a conference in Dallas, went to Mexico, after they obtained permission to enter without being vaccinated. Think this over before you submit your child to this evil and superstitious rite."--Dr Shelton DC

"[Dr. Russell T. Trall](#), the eminent Natural Hygienist, considered smallpox "as essentially . . . not a dangerous disease." He cared for large numbers of patients afflicted with smallpox and never lost a case. Under conventional medical treatment, patients were drugged heroically, bled profusely, were smothered in blankets, wallowed in dirty linen, were allowed no water, fresh air and stuffed with milk, brandy or wine. Antimony and Mercury were medicated in large doses. Physicians kept their patients bundled up warm in bed, with the room heated and doors and windows carefully closed, so that not a breath of fresh air could get in, and given freely large doses of drugs to induce sweating (Sudorifics), plus wine and aromatized liquors. Fever patients were put into vaporbath chambers in order to sweat the impurities out of the system. Given no water when they cried for it and when gasping for air were carried to a dry-hot room and after a while were returned to the steam torture. Many must have died of Heat Stroke!"--[Dr Shelton DC](#) <http://www.whale.to/vaccine/shelton.html>

## [Smallpox by Herbert Shelton](#)

**The Hygienic Care of Children by Dr Shelton, Herbert M. . San Antonio, Texas: Dr, Shelton's Health School, 1931.**

<http://www.soilandhealth.org/index.html>

## [Smallpox death rate by Dr Shelton DC](#)

**CHAPTER XXVIII SERUM POISONING (same as chapters 2 & 3 of Vaccines and Serum Evils)**

## [Vaccines and Serum Evils by Herbert Shelton \(c1940's\)](#)

Yet our medically controlled Health Boards cook up fake epidemics, create panics for profit, such as the ones in Kansas City in 1921, Pittsburgh in 1924, Philadelphia, Baltimore, Washington in 1925. An effort was also made to create a panic in New York in 1925, but due to the open fight against it by the *New York Evening Graphic*, the Commissioner of Health called it off.

You are vaccinated and have smallpox. The vaccine was of "insufficient potency," although this was discovered too

late—that is, after you have the smallpox. You are vaccinated and do not develop smallpox—it is assumed that the vaccine was potent. It is like the old test for mushrooms—eat them and live they are mushrooms; eat them and die, they are toad stools.

"In 1926, 130 members of the Dallas (Tex.) Chamber of Commerce cancelled their trip to Mexico because vaccination was required as a precedent to entrance. Nearly a 100 medical men, at a conference in Dallas, went to Mexico, after they obtained permission to enter without being vaccinated. Think this over before you submit your child to this evil and superstitious rite."--

The whole purpose of this propaganda is not to secure the health and welfare of children, but to guarantee the steady inflow of profits to the physicians and manufacturing drug houses.

In 1924 at Concord and Bridgewater, Mass., other groups in schools suffered severely. The white-wash in these cases was that the serum had been allowed to freeze before using. In 1926 when the famous publicity stunt was pulled off, whereby, a dog team carried serum over land to Nome, Alaska, which did not have an epidemic of diphtheria and which knew nothing of the Herculean efforts to save it, it was explained that freezing the serum does not damage it.

Bitten on the hand by a dog on Aug. 3 anti-rabies shots were started the following day. These are said to have been followed by a "mild reaction," that is, mild symptoms of poisoning. He was sent home and then "trouble struck hard." He was rushed to the post hospital where he died. The fact that they thought he was out of danger and sent him home reveals how little they know.

"The serum employed was that concocted by the notorious Calmette, of France, the B. C. G. vaccine that is said, though falsely, to prevent tuberculosis. This vaccine has left a trail of disaster behind it wherever it has been used. It does not and, of course, cannot protect from tuberculosis. The only prevention of tuberculosis is scrupulous hygiene. Given this and no one need fear the disease. Not even children of tubercular parents, though in constant association with them, will develop tuberculosis, if they are cared for hygienically."

"The *American Medical Journal*, March 16, 1929 tells us that two Chicago physicians sent out a questionnaire to 4,426 picked medical men, asking their opinions on vaccine and serum therapy. Some 1,261 physicians replied. Their replies are described as "exceedingly unfavorable," while over 90% of those replying state that they do not employ vaccines and serums. They say: "Of the 396 physicians in the list who answered as members of the Congress of American Physicians and Surgeons, not one considered the use of vaccines a superior method of treatment of infectious diseases."--[Dr Shelton DC](#)

Norway suspended vaccination because of hoof and mouth disease being spread by the practice. In this country our Department of Agriculture traced the epidemics of foot and mouth disease in 1902, 1908 and 1914 to smallpox vaccine.

Lockjaw is a comparatively rare disease except where a vaccination epidemic rages. In his *Principles and Practice of Medicine*, Sir Wm. Osler says of tetanus as a disease transmitted by vaccination: McFarland collected 95 cases practically all American. Sixty-three occurred in 1901, in which R. W. Wilson demonstrated the tetanus bacillus. Most of these cases occurred about Philadelphia."

*The States Public Health Report*, March 20, 1925 says that several fatal cases of tetanus in vaccinated individuals has recently occurred in the United States" The *Report* for June 26, 1925, contains accounts, in its first six pages, of eleven cases of tetanus following vaccination. Boys are more susceptible than girls to post-vaccinal tetanus.

In a letter dated Aug. 9. 1929, and addressed to Senator Robt. F. Wagner, Dr. Hugh S. Cummings. Surgeon General of the U.S. Public Health Service, says the figures which his letter shows are incomplete, for deaths due to post-vaccinal tetanus are as follows: 1925---29; 1926---15; 1927---17, 1929---1. As most of these deaths occur after school opens in September, at which time the great orgy of vaccination begins, the apparent reduction in 1929 is probably very deceptive.

In the early part of 1925, while the whole of the East was in the throes of a vaccination epidemic, the *New York Evening Graphic* uncovered at least two deaths from post-vaccinal tetanus, and many other cases of vaccinal injury in Baltimore. After they published the accounts of these cases, the hospitals in Baltimore established a rigid

ensorship and suppressed the horrid truth about this criminal practice. But a truce with tetanus; the newspapers carry frequent reports of such deaths and I can only touch the high spots here. Everyone can know of these cases who cares to investigate.

In the *Brooklyn Times*, March 21, 1929, Health Commissioner Wynne, New York, is reported to have said in an address to the Optometrical Club: "Here is the answer (to the physician's economic problem). Let them take in 20 children an hour, one hour a day, 3 days a week at a charge of \$5 for each anti-diphtheria inoculation. That will bring a revenue worth while to the doctor."

These various organizations collect many millions of dollars yearly from a generous and well meaning, but uninformed people, spend the major portion of the money in fat salaries and overhead or administration costs, spending much of it to pay for cruel and futile experiments on animals (research) and precious little of it for the purposes for which it is given. Like all organized charity, these things are soulless rackets.

[\[Vaccination\]](#)

# Smallpox Vaccine critics

[Smallpox](#) [Vaccine critics](#)

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## Quotes:

[Charles Campbell MD](#)

[W. J. Collins, M.D.](#)

[Dr Hadwen MD](#)

[Alfred Wallace](#)

[Charles Creighton M.A., M.D.](#)

[JNO. PICKERING, F.S.S., F.R.G.S](#)

[William Tebb](#)

# Serum Poisoning

## CHAPTER II

Parents are frightened into having their babies and children "immunized" against a whole series of diseases, having them inoculated with vaccines, serums, anti-toxins and toxoids of all kinds. The constant stream of propaganda carried on by the pharmaceutical houses and commercial medicine to keep this profitable business alive is filled with manufactured and "doctored" statistics, lies, distortions and statements designed to frighten parents. The whole purpose of this propaganda is not to secure the health and welfare of children, but to guarantee the steady inflow of profits to the physicians and manufacturing drug houses.

In *Red Book Magazine*, Aug. 1952, Edward T. Wilkes, M.D. presents a "New Immunization Schedule for Infants." It is the schedule announced by the Michigan State Health Department and is similar to the one recommended by the American Academy of Pediatrics. Here it is:

"Injections against whooping cough, diphtheria and tetanus are to be started at three months instead of six, as formerly prescribed. The reason for this is that more than half the deaths from whooping cough occur in infants under six months of age (I wonder what this death rate under six months in whooping cough has to do with tetanus and diphtheria?)

"Smallpox vaccination should be given at five months.

"Booster shots for protection against whooping cough, diphtheria and tetanus are recommended at the age of two or three years.

"Immunization against diphtheria, tetanus and smallpox should be renewed at five or six years of age and again at nine or ten years."

Vaccines and serums are given on the theory that they "act" in the same way as one "attack" of an "infectious" disease in immunizing the patient against a second "attack." Years ago, in my *Regeneration of Life* I proved this theory, that one "attack" immunizes against a second "attack," to be illogical, unscientific and contrary to the facts. I showed that one may have smallpox, for instance, five times following immediately upon the heels of five successful vaccinations. Cases are on record of patients who had pneumonia as much as fifteen to fifty times. Think this over and answer the question: *What kind of serum will ever be found to immunize us against pneumonia?* But if not against pneumonia, how about other so-called infectious diseases? Suppose we study diphtheria.

Quain's *Dictionary of Medicine*, (1902 edition) says: "One attack of diphtheria confers no prolonged immunity upon its subject. Even during convalescence the patient has been known to develop the disease afresh, and this may be repeated more than once."

Coodall and Washbourn, in *A Manual of Infectious Diseases*, state: "It is uncertain how far one attack of this disease (diphtheria) protects against a second. Certainly relapses and second attacks are not very rare."

It is certain from these facts that toxin-antitoxin can no more immunize a child against diphtheria than against burning by fire. In this connection, physicians tell us that babies are immune to

diphtheria, inheriting their immunity from the mother, but that they lose their inherited immunity at about six to nine months. The mother must have lost hers at about that same age. Where and how did she reacquire her immunity in order that she might transmit it to her child?

A substance called, "diphtheria toxin" is mixed with antitoxin to make toxin-antitoxin. J. W. Hermetet, M.D., in an address published in the *Illinois Medical Journal*, Nov. 19, 1929, p. 368 says of this toxin, which he refers to as a "deadly toxin," that "toxins are the most concentrated forms of poisonous material. ... One ounce of diphtheria toxin will kill 600,000 guinea pigs or 75,000 large dogs."

In the *Annals of Internal Medicine*, Jan. 1929, C. D. Mercer, M.D., says that "Toxin-antitoxin is not a harmless preparation and should not be given to school children in a haphazard way."

The United States Public Health Service gives the ideal mixture of "antitoxin" and "diphtheria toxin," (forming toxin-antitoxin), as of such a poisonous character that when five doses are inoculated into each of five guinea pigs two shall die acutely in four to ten days and the other three shall die of diphtheria paralysis in from fifteen to thirty-five days. Only a thoroughly dishonest Health Board or school physician can ever represent this poisonous mixture as harmless.

Jesse R. Gersterley, M.D., reported a case of sudden death from nephritis (inflammation of the kidneys) in a child, following inoculation with toxin-antitoxin. This report was published in *The Medical Clinics of North America*, March 1926. This report caused C. D. Mercer, M.D., F.A.C.P., of West Union, Iowa, to investigate the dangers of this serum.

He reports, *Annals of Internal Medicine*, Jan. 1929, p. 668 that, out of 125 children, between the ages of six and twenty who were inoculated 27, or 20% of them, showed albuminuria after the third toxin-antitoxin inoculation, compared to only 13, or 10%, presenting this symptom of kidney destruction prior to the inoculation. He says that "a great many apparently healthy children have albuminuria" and that "administration of T-A (toxin anti-toxin)' doubled that percentage in 120 school children."

E. Gatewood, M.D., and C. C. Baldrige, M.D., say in the *Journal of the American Medical Associations* April 2, 1927: "A multiplicity of untoward sequelae have been observed in patients treated with immune serum. The common symptomatology includes fever, urticaria, erythema, oedema, lymphadenoma, (malignant tumor of the lymph glands), arthralgia (pain in the joints), smothering sensations, headache, nausea and vomiting. Occasionally there are more serious and lasting manifestations such as peripheral neuritis, epididymitis (inflammation of the epididymis, a small body attached to the testicle), and orchitis." (inflammation of the testicles).

I may add that paralysis, convulsions, inflammation of the heart, heart failure, and sudden death are also more frequent results than the general public is aware of. For a convincing array of such cases, taken from standard literature of the subject, I must refer the reader to my *Serum Poisoning a Medical Crime*.

On Jan. 27, 1928, in Bundaberg, Australia, 8 children received their second inoculations of toxin-antitoxin and thirteen received their first inoculations. The Report of the Royal Commission of Inquiries into Fatalities at Bundaberg, published by the Parliament of the Commonwealth of Australia, June 13, 1928 says: "Of these twenty-one children, eighteen became ill with symptoms of significant similarity during the night of the 27th January or the early morning of the 28th January.

Eleven died during the 28th January, and one on the 29th January."

"My little darlings; they are all gone" was the heart wringing cry that came from one poor mother as they lowered her 3 sons, victims of this medical slaughter, into their little graves. One father was at the burial where his two daughters were buried, while the mother was at the hospital with her two sons, who, with more than a score of others, were seriously ill. Efforts were made to whitewash this "accident," as it was called, but well-informed people are not blinded by such efforts.

At Baden, near Vienna, Austria, in an infant's home, in September 1923, seven children died as a result of toxin-antitoxin inoculations. As a result the Austrian government outlawed the use of this serum: *The British Medical Journal*, Sept. 26, 1925, page 578, says:

"On the advice of professor Piruquet, active immunization of school children against diphtheria with toxin-antitoxin has been forbidden in Austria.

In 1919 a similar thing happened in Dallas, Texas. Forty "severe reactions" with ten deaths from acute myocarditis (heart disease), resulted in the H. K. Mulford Company paying damages to the extent of \$78,000 in 69 suits. This case was also white-washed as an "accident."

In 1924 at Concord and Bridgewater, Mass., other groups in schools suffered severely. The white-wash in these cases was that the serum had been allowed to freeze before using. In 1926 when the famous publicity stunt was pulled off, whereby, a dog team carried serum over land to Nome, Alaska, which did not have an epidemic of diphtheria and which knew nothing of the Herculean efforts to save it, it was explained that freezing the serum does not damage it.

In July 1929, little ten-year-old Anna Voight, New York City, died a few hours after having received an injection of anti-lockjaw serum for a slight wound she had received. In his report, the Assistant Medical Examiner, Benjamin Vance, M.D., gave the cause of death in these words: "Sudden death following administration of antitoxin."

An article in the *Daily News* (New York), of Aug. 15, 1953, lies about the killing of Pfc. John Moccia, of New York City, when it says in an effort to shield the serum, that "it was a dog bite which got Johnny." This twenty-three year old soldier died on the morning of Aug. 14 of encephalitis caused by anti-rabies shots. It was the medical profession that "got Johnny," as they get thousands of others with their damaging and killing methods of preventing and curing disease."

Bitten on the hand by a dog on Aug. 3 anti-rabies shots were started the following day. These are said to have been followed by a "mild reaction," that is, mild symptoms of poisoning. He was sent home and then "trouble struck hard." He was rushed to the post hospital where he died. The fact that they thought he was out of danger and sent him home reveals how little they know.

The *Daily News* story says that "an examination showed that Johnny had died of encephalitis. 'Only one person in 5,000 who takes rabies injections gets encephalitis, and only one victim in 1,000 of encephalitis dies,' an Army medical man said, shaking his head at the improbable thing which happened to Johnny."

It was not an improbable thing which had happened to Johnny, although these venders of pus and putridity always offer statistics to show that such killings are rare. John Moccia was killed as certainly as if he had been shot down in Korea. He did not die "of a dog bite" as the *Daily News*

said, but of vaccine poisoning. Had he never had the anti-rabies shots he would still be alive and as sound as the Army permits its men to be. Why the shots? Is there a physician in the U.S. today who does not know that rabies is a myth? Is there a physician in the whole world who does not know that all vaccines and serums are dangerous, frequently very damaging and sometimes fatal? Do they not all know that every vaccine and serum is without value? Do they not all know that the vaccine and serum practice is as great a racket as the blood-transfusing racket that is still being farmed by the Red Cross, "to save a fighting man's life" after the Army has discontinued using blood? Rabies! Hydrophobia! Mad dog! Myths that are kept alive for the money that is to be made out of them. How long will a misinformed and cowed public continue to permit itself to be exploited by soulless scoundrels in this manner?

Did I but have the space, I could give the reader accounts of numerous such cases, since it has become the custom to inoculate everyone with tetanus antitoxin for every pin scratch, nail prick, burn, and to do the same for parturient mothers.

Death and damage comes from all serums. On May 14, (1930) news came from Germany, of the death of 8 babies, in the Luebeck home for infants, and serious illness of 24 others, caused by inoculation with a tuberculosis serum from cows. Deaths continued to occur until on June 4, the news from Luebeck stated that: "Two infants died today, bringing the toll from administration of anti-tubercular serum to twenty-eight persons. Many others are not expected to live." On June 18, news came from Luebeck that "deaths from inoculation with anti-tuberculosis serum here have reached a total of 41, eighty-five infants are ill." On June 26 the death-toll had reached 44 and eighty-two others were ill.

Killed them to save them! And the process goes on. Parents are indifferent or apathetic. Law makers wink their eyes and grant licenses to more men to carry on the same practices, while aiding in persecuting Christian Scientists, Chiropractors, Naturopaths, *Hygienists* and others.

The serum employed was that concocted by the notorious Calmette, of France, the B. C. G. vaccine that is said, though falsely, to prevent tuberculosis. This vaccine has left a trail of disaster behind it wherever it has been used. It does not and, of course, cannot protect from tuberculosis. The only prevention of tuberculosis is scrupulous hygiene. Given this and no one need fear the disease. Not even children of tubercular parents, though in constant association with them, will develop tuberculosis, if they are cared for hygienically.

In St. Louis, Mo. in the Fall of 1901, eleven children were killed and scores injured, by prophylactic doses of diphtheria anti-toxin. This is the serum that is supposed to cure diphtheria. It has never saved a single case. On the contrary, as I have shown in *Serum Poisoning A Medical Crime*, it increased the death-rate; and it is only by skillful juggling of statistics that it can be made to appear to have lowered the death-rate.

When wholesale deaths follow an orgy of inoculations, it is customary to blame the deaths on faulty serum. As an example of this, there was the large number of deaths reported in Japan in December, 1949 following inoculation with diphtheria anti-toxin. On Dec. 30, the press reported 64 deaths and 900 ill from the inoculations. The inoculations were halted, while the serum was being investigated. I do not know how many more of the 900 who were ill also died, nor how many of them were left with serious after effects. The press did not find this matter to be "news."

But all deaths from inoculations and all serious disease resulting from these inoculations are not due to "faulty serums." On the contrary, in every orgy of inoculation, as in the army, many serious troubles arise and deaths are often reported. In these instances, "faulty serum" is not blamed—only when several deaths and much serious sickness follow do they find the serum to be "faulty." But all inoculations give rise to troubles ranging all the way from slight, transient trouble to instantaneous death from *anaphylaxis*. In many instances, serious permanent organic impairment has resulted.

Despite all of this injury and danger, parents might be justified in taking a chance with the health and life of their children, did the inoculations actually prevent the diseases against which they are directed. But there is not a shred of unequivocal evidence that any vaccine or serum will or can prevent any disease or render it milder.

The *American Medical Journal*, March 16, 1929 tells us that two Chicago physicians sent out a questionnaire to 4,426 picked medical men, asking their opinions on vaccine and serum therapy. Some 1,261 physicians replied. Their replies are described as "exceedingly unfavorable," while over 90% of those replying state that they do not employ vaccines and serums. They say: "Of the 396 physicians in the list who answered as members of the Congress of American Physicians and Surgeons, not one considered the use of vaccines a superior method of treatment of infectious diseases."

In Oct. 1925 an effort was made to introduce toxin-antitoxin into the public schools of London, England, as it has been introduced over here. The London County Council referred the matter to their "Public Health and Education Committee." This Committee rejected the proposal, saying, among other things, "it is not advisable" because "these lines of investigation (of toxin-anti-toxin) should be thoroughly explored before further consideration is given to the immunization of school children."

That toxin-antitoxin does not immunize against diphtheria is certain from many facts. Sir George Newman, Chief Medical officer of the British Ministry of Health, says in his 1927 *Annual Report*, page 188: "Owing to the few months which must elapse from the time of inoculation until the child is sufficiently protected to resist an attack of diphtheria, this type of inoculation has no immediate effect in checking an epidemic. How long immunity lasts cannot be determined. Three doses will produce full immunity in 80 or 90 per cent of the children."

Not over 15% of children ever have diphtheria, even during an epidemic. If the inoculation only "immunizes the 85% to 90% who would not have diphtheria anyway, why give it?"

Dr. Peters, lecturer on infectious diseases, University of Bristol, says that one of his fever hospital nurses, who was not allowed in the diphtheria ward until six weeks after the last two or three doses of toxin-antitoxin, developed diphtheria, and two other nurses developed diphtheria while being immunized, but who were not in contact with any known case of the disease. His opinion, based on his hospital experience, he states as follows:

"1. You can have diphtheria after you have given a negative Schick test." (Proving the test to be unreliable).

"2. You may not be particularly susceptible even if you give a positive Schick test." (Proving the test to be utterly worthless).

"3. You can have the disease even if you have been immunized." (Proving that the immunization process does not immunize.)

Dr. Joe, of Edinburgh, states that he personally knew of 33 children who had diphtheria after they had been immunized—*immunized!* Hundreds of such examples have been reported.

Compare this with the fact that the cities of Lasalle, Peru and Oglesby, Ill., were reported, in *The Illinois Medical Journal*, Nov. 1929, p. 337, by Arlington Ailes, M.D., Health Director of these three cities, aggregating 30,000 people, not to have had a case of diphtheria in two and one-half years and not a death from this disease in three and one-half years, with the use of toxin-antitoxin 'practically nil." Their neighboring city, Chicago, where toxin-antitoxin has been lavishly used showed a rise in both the case rate and death rate. "In 1928 it (diphtheria in Chicago) again increased over 60 percent and nearly 100 percent in mortality." Let them find an alibi for these facts if they can. But you save your children from the dangers of all serums and vaccines.

[Chapter 1--Vaccinia](#)

[Chapter 3--Commercial Medicine](#)

[[Vaccination](#)] [[Herbert Shelton](#)]

## RT Trall MD

### [THE TRUE HEALING ART Or, HYGIENIC vs. DRUG MEDICATION--Trall MD](#)

"I have myself, through Natural Hygiene, over 16 years, treated all forms and hundreds of cases of typhus and typhoid fevers, pneumonia's, measles and dysentery's, and have not lost a single patient. The same is true of scarlet and other fevers. No medicine whatever was given."----Dr Trall, 1860.

## Smallpox by Herbert Shelton

From: The Hygienic System, Dr. Herbert M. Shelton, Orthopathy, Vol. VII, 1941

.....just as before the time of (Dr.) Sydenham, all cases of measles, chickenpox and scarlet fever were diagnosed as smallpox. Today if a case of chickenpox has no vaccination scar, it is smallpox; if a case of smallpox has a vaccination scar, it is chickenpox. Few cases now reported as smallpox are ever sick enough to go to bed. The mortality from VACCINATION is much higher than that from smallpox.

Smallpox, along with measles, scarlet fever, etc., is commonly referred to in medical works as a "disease of unknown origin." It is assumed to be due to germs, but the supposed causative germs have never been found. Epidemics occur chiefly in winter when germs are less active. Protein excess, foul air and inactivity seem to be its chief causes.

Sydenham, who saw more of the old virulent variola vera than all the now living physicians in this country together have seen, says: "As it is palpable to all the world how fatal smallpox proves to many of all ages, so it is clear to me from all the observations that I can possibly make, **THAT IF NO MISCHIEF IS DONE, EITHER BY PHYSICIAN OR NURSE, IT IS THE MOST SAFE AND SLIGHT OF ALL DISEASES.**" Under hygienic care recovery is rapid with little or no pitting.

The "disease" is as **CONTAGIOUS AS INGROWING TOENAILS**, and every case must be quarantined. Fear of the disease **MUST** be kept up in the public, for it is only thus that the present farce can go on.

Note: For more Shelton info: [www.getwellstaywellamerica.com](http://www.getwellstaywellamerica.com)

# Soil And Health Library

Health begins in the soil; Healing begins with hygiene; Liberty begins with freedom.

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This is a free public library offering a tightly focused collection of books about holistic agriculture, holistic health, self-sufficient living, and personal development. Most of the titles in this library are out of print. Some can be quite hard to find; many of these books are old enough to be public domain materials.

The titles on this website are here because one person, Steve Solomon, intensely believes that when grasped as an inter-related whole these books can constitute a self-guided course of study or curriculum that connects agricultural methods to the consequent health of animals and humans, shows how to prevent and heal disease and increase longevity. There are also smaller collections about homestead-based lifestyles and about why globalized society is resistant to changing its food and health systems.

The Soil and Health Library has four major sections and a clipfile:

**Radical Agriculture.** Here, the underlying theme is how to create physical health through nutrition. This section's interest is far wider than organic gardening and farming. Other health-determined approaches to food-raising are also included. Go to the [Agriculture Library](#)

**The Restoration and Maintenance of Health.** Here, the focus is nutritional medicine, primarily on methods that maintain health with proper diet and heal illness by limiting or reducing nutrition. There are also selections concerning longevity and nutritional anthropology. Go to the [Health Library](#)

**Achieving Personal Sovereignty.** Physical, mental, and spiritual health are interlinked--holistic. This collection focuses on liberating achievements, especially homesteading and the skills it takes to do that: small-scale entrepreneuring, financial independence, frugality, and voluntary simplicity. There is also a collection on social criticism, especially from a back-to-the-land point of view. Go to the [Personal Sovereignty Library](#)

**Achieving Spiritual Freedom.** There are many seemingly-different self-betterment roads leading to the same place. Most spiritual seekers choose a path that aligns with their own predispositions. My preferences are for methods that empower a person to self-determinedly handle their own development in an independent manner. Go to the [Spiritual Freedom Library](#).

**Clippings and Miscellaneous.** Since inception of this library in 1996, patrons have sent information and URLs where I would find interesting bits of information and viewpoints. I hope you will continue to do so. Until December, 2001 these were viewed without making permanent reference. Then it was realized that a file of these items might be well worth sharing. Here you will find articles and essays and etc. that support and enhance the information found in our book collections. [Go to the Clipping File.](#)

Please help build it.

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## The Purpose of Soil And Health (dot) Org

I prefer to learn by going back to the originators of a body of knowledge because those who follow in the founders' footsteps are rarely trailblazers of equivalent depth. Even when the earliest works in a field contain errors because their authors lacked some bit of data or had a fact wrong, their books still contain enormous wisdom. If nothing else, study of older books lets us discover that the conditions that prevail today aren't the way things always were--while on some levels, some things hardly ever change at all.

There are powerful tendencies on Earth causing the foundations of knowledge to be lost in obscurity. That would be okay if there were better knowledge and wiser wisdoms coming on line to replace them. But usually the opposite is the case. I have observed this tendency in every area of study I've taken up seriously: history, agriculture, natural medicine, even investing. As the sort of person Sir Albert Howard called "the laboratory hermit . . . someone who knows more and more about less and less" increasingly dominates ever-wider areas of scholarship, the focus of scholarship gets ever narrower and less wise.

Here's an example. Despite all the recent advances of so-called "scientific" agriculture, the nutritional qualities of our basic foodstuffs have been declining during this century. That's largely because most agronomists focus on bulk yield and profitability of the crop, while knowing next to nothing about animal/human nutrition. However, there's a little-appreciated "law" about this area: nutritional value usually drops in direct relationship to the increase in bulk production. Or, in agriculture at any rate, "quality" seems the opposite of "quantity."

Industrial agriculture has also devastated the self-sufficient, independent lifestyles. Take the U.S. for an example. In 1870, something like 90 percent of all Americans lived on free-and-clear farms or in tiny villages. And in consequence, enjoyed enormously greater personal liberty than today. The current decline in personal rights in America is NOT the result of there being more people dividing up a fixed and limited amount of total possible liberty into smaller and smaller slices. It is a consequence of financial insecurity, financial dependency and wage slavery. Only free persons can forthrightly demand their liberties. A similar degredation has occurred in Australia and Canada.

I think what has happened since 1870 was, as the industrial food system became ever more "efficient" it also made the price of basic agricultural commodities move lower and lower as their quality also moved lower. Consequently most country folk rejected their self-sufficient-farm birthright for a paying job in town, and soon became wage-enslaved. Wage slaves, like all other kinds of slaves, feel insecure and think that they have to shuck and jive in order to survive.

The global industrial system's focus is on efficiency in all areas, including farming, but the apparent cheapness of economically-rational agriculture does not reflect a true accounting of costs. Despite the statistical increase in average lifespan, our average health and feelings of wellness have been declining. Consider as an example the large proportion of your neighbors whose mental awareness seems wrapped in fat. Americans especially are disdained world wide for being hugely obese. Australians and Canadians are going the same way. I cannot testify about other parts of Earth, not having travelled extensively. Americans, Canadians and Australians spend ever-larger portions of their productivity on the treatment and cure of disease. This whole area of "health" care is not really a productive use of effort, but really constitutes enormous waste, pain, and suffering, whose source is almost entirely unappreciated.

Dr. Isabelle Moser, who spent 25 years conducting a clinical practice using holistic approaches, told me that what she termed the "constitution" of her older patients was typically much stronger than the constitution of her younger ones. Each generation got a poorer start than the one before it as each generation built the foundation of their health from foods produced on ever-more degraded soils grown ever-more "scientifically," and more and more consisting of processed, denatured fodder. (The full text of Dr. Moser's book [How And When To Be Your Own Doctor](#), is in the Health Library.) (For a good discussion of the concept of "start," read Wrench's [Wheel of Health](#) in the Longevity Library. *See also*: Shelton's *Orthotrophy*, [Chapter 36](#).)

Maybe someone will write in and tell me who the sage was that so wisely quipped, "if they can stop you from asking the right questions, you'll never come up with the right answers." In this library you will encounter individuals who DID ask the right questions and even came up with some of the answers.

I've observed that modern higher education points people's attention away from the Truth and toward an ever-increasing confusion created by too much data. In consequence, many can no longer recognize evil, even when it is in front of their eyes. So I am making it my personal work to restore the availability of key books written by amazing individuals, *books that offer major illumination to those who can already see, books that speak the truth to those who can already hear.*

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# Vaccines and Serum Evils

by Herbert Shelton (c1940's)

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# VACCINE AND SERUM EVILS

BY

HERBERT M. SHELTON

## Vaccinia

### CHAPTER I

*Vaccinia* is an acute infectious disease caused by *vaccination*. *Vaccination* is the inoculation of child or adult, well or sick, with septic matter (pus) derived from suppurating (festering) sores on the abdomen of a previously infected cow. I think this definition is incomplete in an important respect—I should have said that it is a criminal operation.

The disease dates from about the year 1774 when an ignorant and superstitious English farmer, Benjamin Jesty, vaccinated his wife and three children with matter taken from sores on cows suffering with cow-pox," using a darning needle with which to make the incisions. Jesty believed a superstition, then prevalent among the milk-maids, that, one who had had cowpox was immune to small-pox.

Notes of this daring experiment were made by a doctor Nash who died in 1785. At his death these notes passed into the hands of Mr. Thomas Nash who was acquainted with Edward Jenner, a notorious charlatan, who is credited with having "discovered" vaccination. In 1789 Jenner inoculated his eighteen month's old son with swine-pox matter. He followed this with other inoculations of other children and the filthy practice of vaccination was definitely launched.

An English writer, Arthur Wollaston Hutton, M. A., says of Jenner's framing and qualifications: "But his professional acquirements were but slender; *his* medical degree was the outcome of no examination or scientific work, but merely of a fee of fifteen guineas paid to the University of St. Andrews; while his other and more important distinction, his Fellowship in the Royal Society, was obtained by what even Dr. Norman Moore, his latest biographer and apologist, is constrained to admit was little else than a fraud."

Thus we have a filthy practice, born out of the ignorance and superstition of the past and fathered by an ignorant imposter and fraud, palmed off on the world today as a scientific procedure. It is really remarkable, the number of instances in the history of medicine, of practices and theories now in vogue, that owe their origin to ancient customs, traditions and superstitions.

It is not known how remote was the belief among the cow hands and dairy maids of England in the immunizing potency of cow-pox; but it is thought to have come out of the practice of inoculation which was introduced into England from the East, by Lady Mary Wortley Montague, wife of the British Ambassador to the Ottoman Court, in 1717. The practice was abolished by act of Parliament in 1840, due to its evils. In 1754 the Royal College of Physicians issued the following manifesto, which reads strangely like the statements made by physicians today about vaccination:

‘The College, having been informed that false reports concerning the success of inoculation in England have been published in foreign countries, think proper to declare their sentiments in the following manner, *viz.*: That the arguments which at the commencement of this practice were urged

against it have been refuted by experience, that it is now held by the English in greater esteem, and practiced among them more extensively than ever it was before, and that the college thinks it to be highly salutary to the human race."

Despite this evident lie by this august body, the practice was not successful; it was not highly salutary; and experience did not refute the arguments used against it. It was a very damaging practice which caused an increase in small-pox in England and was finally abolished by law. Edward Jenner, following Benjamin Jesty, grafted the old inoculation practice onto the milk-maid's creed and vaccination (from vacca—cow) was born.

I mentioned that the inoculation practice was introduced from the east. The date of the origin of this superstitious practice is hidden in the darkness of pre-history. Savage and barbaric peoples, in various parts of the world, practiced inoculation. It is thought to have started in India. where so many of our superstitions originated, and spread from there to Africa and Europe.

From time immemorial the Negroes and Arabs of Nubia practiced inoculation against smallpox. The Ashantees and the Moorish and Arab tribes in Northern Africa practiced arm to arm inoculation from ancient times. Savage tribes of the Upper Congo practiced it to prevent "syphilis." The Baris of Lado inoculated themselves over the left breast. The Negroes in Senegal inoculated their children on the arms. The Moors and Pouls of Senegambia practiced inoculation against pleuro-pneumonia. A practice of this kind was in vogue in Berne, Switzerland in the 18th century.

The first record of smallpox seems to be in India, where also is the first record of inoculation, where the practice was in vogue over three thousand years ago. Dhanwantari, the Vedic father of medicine, and the earliest known Hindu physician, supposed to have lived 1500 B. C., is said to have been the first to practice inoculation and it is also stated that the Hindus employed a vaccine. For over a thousand years inoculation has been practiced in China.

The practice is so mixed up with the religious superstitions of various peoples that its origin may not be difficult for students of religious history to guess. In India, in Malaba and in other sections of the world, inoculation was mixed up with the worship of the smallpox goddess. Inoculation seems to have been nothing more than a superstitious rite designed to placate and appease the wrath of an irascible deity. People who imagined all their sufferings were sent upon them because they had offended some of their gods or goddesses originated the filthy rite to get the goddess into a good humor again.

According to a Mr. Porter, who was English Ambassador at Constantinople in 1755 (*Gentleman's Magazine*, Oct. 1755): "It is the tradition and opinion of the country that a certain angel presides over this disease. That it is to bespeak his favor and evidence their confidence that the Georgians take a small portion of variolous matter, and, by means of scarification, introduce it between the thumb and fore finger of a sound person. The operation is supposed to never miss its effect. To secure beyond all uncertainty, the good will of the angel, they hang up scarlet clothes about the bed, that being the favorite color of the celestial inhabitant they wish to propitiate."

I cannot imagine St. Paul, who refused to eat meat that had been offered up to idols, baring his arm for pus that is being offered up to the goddess of smallpox. I cannot imagine Moses, whose Kosher laws, in most of their essential particulars, are excellent, commanding the Jews to have this trefe stuff inoculated into their bodies.

*Symptoms:* Vaccinia begins after inoculation with slight *irritation* at the site of vaccination. On the third or fourth day the *eruption* appears in the form of a red papule, surrounded by a red areola. On the fifth or sixth day the papule becomes a vesicle, being filled with a watery substance or a clear substance, with a distinct central depression (umbilication). By the eighth day the vesicle is perfected and is then surrounded by a wide reddened zone of *inflammatory edema*, which is the seat of *intense itching*. By the tenth day the contents are purulent (pus) and the vesicle has become a *pustule*. The surrounding skin is now much *inflamed* and *painful*. About this time the reddened areola begins to fade and *dessication* sets in with the gradual formation of a thick brown *crust* or *scab*, which becomes detached and falls off about the twenty-first to twenty-fifth day, leaving an ugly *scar*. The scar is at first red but gradually becomes paler than the surrounding skin having a *punched-out* appearance and is *pitted*. The evolution of this pathology is accompanied with *fever* and *constitutional symptoms*, *malaise*, and *enlargement of the adjacent lymph nodes or glands*.

Notice the symptoms above described (and this description is gathered from standard medical works) and you will at once realize that we have been describing an acute disease—really the acute symptoms of septic infection. Vaccinia will be found classified in medical books as an acute infectious disease. The infectious matter is pus taken from pustules on a cow which has previously had pus from the pustules of a smallpox patient rubbed into incisions in her skin. It is a morbid product, a virus, and is not and never was "lymph from the calf". Vaccine is pus—it is the fluid product of suppuration. To vaccinate a person is to produce disease in that person. It is an effort to prevent disease by producing disease. It does not always "run true to form." The above description of the disease does not fit all cases.

*Complications and Sequelae:* *Irregular and atypical pocks* may form; several vesicles may *coalesce*, a general *pustular rash*, covering the whole arm or large parts of the body, and called *generalized vaccinia*, may develop, about the eighth to tenth day.

Abscess, sloughing, cellulitis, erysipelas, general septic infection, urticarial eruptions, syphilis, leprosy, tuberculosis, actinomycosis (big jaw), mental disease, tetanus (lock jaw), paralysis, meningitis, sleeping sickness, etc, may follow. In rare cases the pock may reappear in the same place after it is apparently healed. In some instances the abscess that may form refuses to heal. I saw one case of this kind where the abscess continued to discharge pus after fourteen years. Speaking of generalized vaccinia, Sir Wm. Osler says: "In children the disease may prove fatal." Osler quotes Ackland's arrangements of the dates on which possible eruptions and complications may be looked for as follows:

"1. During the first three days: Erythema; urticaria; vesicular and bullous eruptions; invaccinated erysipelas.

"2. After the third day and until the pock reaches maturity: Urticaria, lichen urticatus; erythema multiforme; accidental erysipelas.

"3. About the end of the first week: Generalized vaccinia; impetigo; vaccinal ulceration; glandular abscesses; septic infections, gangrene.

"4. After the involution of the pocks: In vaccinated diseases, for example syphilis."

Under the heading "Transmission of Disease by Vaccination," Osler says: "Syphilis has

undoubtedly been transmitted by vaccination." Under the heading, "Influence of Vaccination upon other Diseases," he says: "A quiescent malady may be lighted into activity by vaccination. This happens with congenital syphilis, occasionally with tuberculosis . . . At the height of the vaccination convulsions may occur and be followed by hemiplegia." (Paralysis of one side of the body.)

Norway suspended vaccination because of hoof and mouth disease being spread by the practice. In this country our Department of Agriculture traced the epidemics of foot and mouth disease in 1902, 1908 and 1914 to smallpox vaccine.

It is the medical alibi, when these evils follow vaccination, and they are far more common than the uninformed may imagine, that they are due to "carelessness" or to "secondary infections." Dr. Richard C. Cabot says: "The other thing that bothers people is the fact that vaccination sores get septic, sometimes when the vaccination is clumsily done, and sometimes when it is correctly done. We need not necessarily blame the doctor because the patient has a bad arm. In spite of all precautions, if the patient is in a bad condition, the break in the skin may become septic."

This is only a half truth. The vaccine sore is septic from the start. Vaccine is septic matter. Vaccination is deliberate and forcible septic infection. We do blame the physician, because he introduced the septic matter into the arm.

This picture of vaccination is a black one, but it is by no means the whole picture. It is almost impossible to exaggerate the evils of this filthy, superstitious practice and any physician or vaccine propagandist who asserts that vaccination is harmless is either an ignoramus or a liar. I shall make this quite clear before I am done with this subject.

"I wish we had known sooner what an awful thing vaccination is," wrote Mrs A. Kyles, in a letter to the editor of the *St. Louis Times*, of Nov 1926, after her boy had died of lockjaw following vaccination. He was vaccinated Oct. 15 and died Nov. 8. 1926; the lockjaw developing about Oct. 31. Thousands of other fond mothers have cried. "I wish we had known sooner what an awful thing vaccination is." Why be so willing to believe the sales talks of those who make money out of vaccines?

On Oct. 7, 1926, little Elmer Perry, four-years-old son of Mr. and Mrs. John Perry. of 35 Schalk St., Newark. N. J. was vaccinated by order of the Health Authorities. Fifteen days later he become sick, and on Oct. 27 they carried him to the hospital suffering with lockjaw. A few hours later he died. "They killed my boy, they killed him," cried the grief stricken father. "They have taken the sunshine from my life," wailed the frantic mother. This was but one more of thousands of such tragic scenes. Medical men kill them to save them.

The authorities in this case hastily denied all responsibility for the boy's death. They blamed the boy. It is a fair sample of the cowardly manner in which physicians always disclaim responsibility for their deeds. They are the only class of criminals of which I know who can escape the penalties for their crimes by placing the blame on their victims.

On June 20, 1926 little Geraldine Creamer, age 4, 611 John St., Peekskill, N. Y.. died of lockjaw, following vaccination during a cooked up smallpox scare—a case of ivy poisoning having been diagnosed as smallpox. The culprits in this case explained that the girl, who had been vaccinated on the leg, received the lockjaw infection from garden soil, while playing in the garden. In a full page article in the *New York Evening Graphic*, I challenged them to give me lockjaw by wounding me in

a dozen places and rubbing the soil from the garden in every wound, The Commissioner of Health made a weak reply in the local paper, but ignored my challenge. He did not want his alibi exposed by a test,

Lockjaw is a comparatively rare disease except where a vaccination epidemic rages. In his *Principles and Practice of Medicine*, Sir Wm. Osler says of tetanus as a disease transmitted by vaccination: McFarland collected 95 cases practically all American. Sixty-three occurred in 1901, in which R. W. Wilson demonstrated the tetanus bacillus. Most of these cases occurred about Philadelphia."

*The States Public Health Report*, March 20, 1925 says that several fatal cases of tetanus in vaccinated individuals has recently occurred in the United States" The *Report* for June 26, 1925, contains accounts, in its first six pages, of eleven cases of tetanus following vaccination. Boys are more susceptible than girls to post-vaccinal tetanus.

In a letter dated Aug. 9. 1929, and addressed to Senator Robt. F. Wagner, Dr. Hugh S. Cummings. Surgeon General of the U.S. Public Health Service, says the figures which his letter shows are incomplete, for deaths due to post-vaccinal tetanus are as follows:

1925---29; 1926---15; 1927---17, 1929---1. As most of these deaths occur after school opens in September, at which time the great orgy of vaccination begins, the apparent reduction in 1929 is probably very deceptive.

In the early part of 1925, while the whole of the East was in the throes of a vaccination epidemic, the *New York Evening Graphic* uncovered at least two deaths from post-vaccinal tetanus, and many other cases of vaccinal injury in Baltimore. After they published the accounts of these cases, the hospitals in Baltimore established a rigid censorship and suppressed the horrid truth about this criminal practice. But a truce with tetanus; the newspapers carry frequent reports of such deaths and I can only touch the high spots here. Everyone can know of these cases who cares to investigate.

Within recent years other troubles have been definitely traced to vaccination. I have already quoted Dr. Osler's statement that "at the height of vaccination convulsions may occur and be followed by hemiplegia." Paralysis is a more frequent result of vaccination than has heretofore been suspected. Dr. Osler says: "Cerebro-spinal meningitis has a curious predilection for soldiers." Captain Sheffield Neave, of England, says, "meningitis is a disease of soldiers and babies." During World War I there was a great mortality and invalidism among soldiers due to cerebro-spinal meningitis. Anti—vaccinationists declared it to be due to vaccination. This brought vigorous protests and loud denunciations from the devotees of pus and the smallpox goddess.

In the "Lancet" the leading British medical Journal, of September 4. 1926, is set forth accounts of seven cases of encephalo-myelitis (inflammation of the brain and spinal cord and their membranes), following vaccination in two London hospitals within recent years. Prof.. H. M. Turnbull and Prof. Jas. McIntosh who painfully and carefully investigated these cases stated in the *British Journal of Experimental Pathology*, from which the "Lancet" quotes, that: "*There can be no doubt that vaccination was a definite causal factor.*"

The *Lancet* declares that the account in the Journal: "includes summaries of clinical histories and necropsies and descriptions of the pathological changes, gross and minute in the central nervous system as well as in the vaccinated areas, regional lymphatic glands, and other tissues. Beautifully

clear drawings illustrate the histological lesions found in the spinal cord at lower levels. The evidence of aetiology (the science of cause) derived from clinical and histological manifestations is shown to be strong, and is confirmed by the results of biological experiments (experiments on animals made independently by Dr. Paul Fildes and Prof. McIntosh). Inoculation of material from the brain and spinal cord of three of these cases showed the presence of vaccinia virus, no other virus being obtained."

The suspicions of these physicians were first aroused in 1912 when a post-mortem on a recently vaccinated boy of 15 years revealed encephalo-myelitis. In December, 1922, a 9 year old girl came to necropsy with a diagnosis of tubercular meningitis. However the microscope revealed no lesions except recent vaccination scabs, glandular inflammation, in the region of vaccination and slight changes in the central nervous system. Brain and cord presented the same peculiar changes as those found in the boy ten years previously.

"Other cases," says the *Lancet*, "were now quickly recognized one in a man of 21, and 'the rest in girls of 7, 12, 15, and 22 respectively. All these patients except one girl died in the course of an acute attack of encephalo-myelitis complicated by broncho pneumonia."

As an example of how these seven cases proceeded the case of the woman 22 years of age will suffice. She was vaccinated while an infant and again on November 29, 1922. Seven days thereafter she developed a severe headache and other symptoms. On the 10th and 12th days she was drowsy and had high fever, On the 13th day she became semi-comatose and on the 14th day she died.

The *Lancet* for October 9, 1926, states that in Holland, during the period from January 1, 1924, to July 1, 1925: "35 cases, of which 15 were fatal, occurred of Encephalitis following vaccination after an interval of 10 to 30 days," had elapsed.

he *Lancet* further declares in the article previously quoted from: "Investigation of the possible path of infection gave negative results—Close examination of the vaccinal areas and regional glands yielded but little information, since the histological changes appeared to be essentially similar to those in a control case, a recently vaccinated boy killed in an accident."

This means that the ordinary and regular course of mischief pursued by vaccination may easily result in the production of these diseases. The *Lancet* further says: "Though the path of infection cannot be traced, the authors would appear to have ample justification for concluding, in view of the close resemblance between the clinical histories, the uniformity of the pathological findings, and the *absence of similar cases independent of vaccination that vaccination was a definite causal factor and no chance coincidence.*" (Italics mine).

In the year 1927 when Mr. Marky and Senator Love debated on vaccination, we exhibited on the platform, a little girl whose body was frightfully twisted, greatly emaciated and paralyzed as a result of vaccination. With the smooth sagacity of the suave politician and with resort to the ancient medical subterfuges of "secondary infection" and "intercurrent malady," Dr. Love attempted to make the audience believe the child's troubles were due to something other than vaccination. But an "intercurrent affection" is mere bunk. It never existed outside the medical mind. The *Lancet* had formerly held to the same theory with regard to such cases as cited above. Referring in its issue of August 1, 1925, to the numerous cases on the continent, it declares: "Experiment and pathological research have shown that this form of the disease is not due to the virus of Jenners

vaccine" .... "There was latent infection" and "vaccination merely hatched it out."

"Latent infection" is another subterfuge that has long served the blundering medical profession when tuberculosis, syphilis and leprosy follow vaccination. But the end of this subterfuge is drawing near. The *Lancet* has unsaid what it declared in the quotation above. It declares: "Similar cases independent of vaccination were not observed at the same time nor any other time. The authors give cogent reasons against the assumption that the post-vaccinal cases described by them and by workers abroad are merely examples of poliomyelitis, (inflammation of the gray matter of the spinal cord) or encephalitis lethargica (sleeping sickness), in which vaccination was an immaterial accident." It declares that encephalo-myelitis following vaccination always exhibits more extensive lesions than those of sleeping sickness and that "histologically, the inflammation in ordinary cases of poliomyelitis (infantile paralysis) differs conspicuously from that following vaccination." In 1923, 1924 and 1925 great efforts were made in England to have everybody vaccinated. Thousands of vaccinations were performed. There occurred a great increase in the cases of Encephalitis-Lethargica. In 1924, there were 6,296 cases of this and similar affections reported in England and Wales, with a population of 38,746,000; or 162 cases per million of population. In Liverpool, with a population of 836,000 there were reported 257 such cases; or 306 cases per million of population. Liverpool was fifty per cent better vaccinated than the average of England and Wales, and had almost 100% more Encephalitis. I presume this was due to an "intercurrent affection," or a "latent infection," or to a "secondary infection."

*The New York State Journal of Medicine*, May 15, 1926, carried two articles from foreign Journals discussing similar cases on the European continent. In one of these Carl Leiner, (Vienna) is said to have discussed encaphilitis and meningitis developing in nine to fifteen days after vaccination. He admits that in a generalized infec

tion, like generalized vaccinia, there may be intracranial complications. The article also states that Dr. Lucksch saw three cases and knew of four more and of the seven children, five died. In two autopsies, which he obtained, he was able to show beyond doubt that "death had been due to encephalitis." Bastianse, of the Hague, collected notes of 34 similar cases which occurred in Holland during 18 months of 1924-25, with a mortality of forty per cent—"deadlier if anything than ordinary epidemic encephalitis." "In addition several cases of serious meningitis have been reported."

Three cases reported, by the author of the article, in Austria, showed that "not only the encephalon but the cord and peripheral nerves may be involved, s that the affection may be spoken of broadly as a meningoencephalitis polyneuntis."

The other article is a brief of an article by Dr. W. F. Winkler, chief of the University Clime of Rostock. It says: "Quite recently isolated cases of cerebral symptoms, suggesting encephalitis, following vaccination have been reported from Holland, Czechoslovakia, and Germany and from Switzerland there have been reported two cases of serious meningitis."

The Netherlands, and other countries, for instance, France, have also reported cases of this kind. *In the Journal of the American Medical Association*, July 3, 1926, p. 45, is an article by its Berlin correspondent discussing "Nervous disturbances and Smallpox Vaccination." In it are these words: "In regions in which there is no organized vaccination of the population, general paralysis is rare. In patients with general paralysis he (Dr. Daraskwiewicz), has never seen smallpox scars, but

vaccination scars were always present." Physicians of Holland declared: "It is impossible to deny a connection between vaccination and the encephalitis which follows it." It is noted that, whereas, boys are most susceptible to post-vaccinal tetanus, girls are most susceptible to post-vaccinal encephalitis.

It would be idle to assert that all cases of local or general paralysis are due to vaccination. There are cases due to other causes also. But these other cases must not be made a basis for denying the evil influence of vaccination, as some vaccine apologists attempt.

How new is the phenomenon? Who knows? Dr. Pierre Baron, Ancien Intern of the Hospitiaux of Paris, prefaces his work on post-vaccinal encephalitis (1929), in which his conclusions are based on his own observations, with a case he found after searching through medical annals and unearthed a report of a case in the *"Archives de Medicine des Enfants,"* in 1907. Dr. Combay of the Medical Society of the Hospitals of Paris, reported a case which had occurred in his practice in 1905. Dr. Comby tells of a baby girl, in excellent health when vaccinated at four months of age, who developed convulsions on the eighth day, followed by strabismus and other troubles. She did not die but was left with an "important sequel." She no longer recognized her surroundings; almost forgot how to nurse; had a vague look; "veritable intellectual obnubilation," developed idiocy with progressive cerebral sclerosis (hardening of the brain), and nearing her eighteenth month died. Her death went into medical "statistics" as due to pneumonia—an old trick in hiding their crimes.

Dr. Baron's book discusses 255 cases of post-vaccinal encephalitis, avowedly discussed as such in medical works. His list is far from complete, for he credits the United States with only four cases, all of these before 1927.

Great Britain appointed two committees to investigate this matter—the Andrews Committee, appointed Nov. 1923, which made its report May 1925; and the Rolleston Committee appointed Feb. 1926, which made its report Feb. 1928. These two committees were composed of eminent medical men all of whom supported vaccination.

The Andrews Committee reported 62 cases of post-vaccinal encephalitis with 36 deaths—40 females and 22 males; average age 10 1/2 years. Four cases were under one year, one case fifty years, and forty-eight cases were from six to sixteen years. Government vaccine had been used in 53 of these cases, of which 30 were fatal. The Rolleston Committee reported 30 cases with 16 fatalities. Government vaccine was used in 18 of these with 8 deaths. This committee also reported the subsequent history of 10 non-fatal cases under 15 years, showing that 4 were permanently injured in some way—in mind, memory, temper, vigor, relapse.

Since vaccination was made compulsory in England and Wales one million infants have died (to 1930) of convulsions, tetanus, encephalitis, meningitis, and other nervous ailments. How many of these were due to vaccination there is now no means of knowing, but in the light of present facts, we are safe in assuming that a large proportion of them died from this cause.

In 1924 there were recorded in England and Wales 5,039 cases of encephalitis lethargica, 397 of cerebro-spinal fever, 777 acute poliomyelitis, 83 of polio-encephalitis—a total of 6,296 cases, with 2,200 deaths, 2,520 permanently injured brains (insane), and 1,575 complete recoveries. The cases in 1924 were three times as great as the yearly average for the nine preceding years. In 1922-23-24 the physicians of England and Wales cooked up a number of smallpox scares causing 288,000

revaccinations. "Extra vaccination was followed by this extra crop of sleepy sickness."

A case of post-vaccinal encephalitis was reported in Ireland in 1930 in a baby boy of 10 pounds. He was vaccinated on May 3 and became ill on May 10, "being cross and very restless with vomiting. Next day he was quiet and apathetic and on admission to the hospital his condition resembled tetanus."

The League of Nations in its Report of Aug. 27, 1928 mentions 139 cases and 41 deaths in Holland. This resulted in Holland stopping compulsory vaccination during 1928-29. The total number of vaccinations in Holland in the first half of 1928 was less than one-third of those for the first half of 1927 and the deaths from encephalitis were reduced to less than one-third.

Germany modified her compulsory vaccination law. She adopted an optional clause, such as the one England had. *The International News Service*, Feb. 27, 1930 informs us: "The change of attitude of some medical experts towards vaccination in favor of a less rigid enforcement of the law has been brought about mainly through a considerable number of post-vaccinal diseases observed in Holland and England and in sporadic cases in Germany.

"Vaccinated people developed a sort of cerebral inflammation (encephalitis post-vaccinalis) which resulted in a number of deaths and in several cases of a mild form of mental derangement."

Here is part of an item which appeared in the *Journal of the American Medical Association* for April 5, 1930: "Reisch reports that following the vaccination of 233 children aged between 5 and 10 years, several cases with encephalitic symptoms were observed. Two were especially severe and ended fatally. The necropsy revealed the changes characteristic of encephalomyelitis. Six other children also developed encephalitic symptoms from six to twelve days after the vaccination."

The Report of the Commission of Smallpox and Vaccination of the Health Organization of the League of Nations, Geneva, Aug, 27, 1928, says: "The post-vaccinal encephalitis with which we are dealing has become a problem in itself mainly in consequence of the events of the last few years in the Netherlands and England and Wales. In each of these countries the cases which have occurred have been sufficiently numerous and similar to require them to be considered collectively. Their occurrence has led to the realization that a new, or at least a previously unsuspected or unrecognized, risk attaches to the practice of vaccination."

Now what of America? Do such cases ever occur here? They do. But they are seldom reported and, it seems, are never investigated. In 1930 Julia Motley, age 12, of Irisburg, Va., died of acute infantile paralysis which "seized" her 3 weeks after she had been vaccinated. Her parents attributed her death to vaccination, whereupon the State Health authorities came to the rescue of vaccination. *The News Leader*, Richmond, March 28, 1930 says: "While the parents gave vaccination as the cause of death, Dr. J. V. Shackelford, the physician, states that the death certificate (made out by him, of course), shows that the little girl died of acute infantile paralysis, with which she was seized three weeks after she had been vaccinated."

And that's that! The physician who vaccinated the girl makes out the death certificate to shield himself and the vaccine and the matter is settled. The girl is now immune to smallpox and the smallpox goddess has been appeased. This reminds me very much of a statement contained in the memorandum, of Professor Jorge, to the Committee of the International Office of Public Hygiene (published in the monthly bulletin of that organization, for Jan. 1927) where he refers to "the

*motives which weighed with us not to noise abroad in the great press the news of this complication of a prophylactic operation hitherto looked upon (sic) as innocuous . . ."* (Italics mine.)

The press probably would not have published the news had they given it out, for, it always protects the medical profession. The press is as good about suppressing the truth as Professor Jorge and his coworkers. The mediums of intelligence (?), our newspapers, magazines, movies, churches and schools, play a vast part in the continual bunking of our more or less brainy public, while every subsidized press or scientist, professor or preacher, is entirely a political organ, at the beck and call of the exploiters. Of course, when it is all said and done, the class of nincom-poops who take any stock in the stuff dished out, do not really count. They are like the defenders of any kind of "it-works-one-day-a-week" philosophy: in that when the tide rises, they will be found to be without a bathing suit.

Surgeon Chas. Armstrong, in *Public Health Reports*, Aug. 23, 1929, says in an article on post-vaccinal encephalitis: "In so far as the age factor is concerned, the custom in this country of performing primary vaccinations at the sixth or seventh year would seem to predispose our population to the complication. Cases have, moreover, occurred. Wilson and Ford, and Fulgham and Beykirk have reported 3 cases in this country which were confirmed by pathological studies. Other possible cases based on clinical and epidemiological grounds have been reported from Connecticut, Rhode Island, New York, Maryland, Illinois, California, Washington, and the District of Columbia."

The *Weekly Bulletin* of the Dept. of Health, of New York City, Sept. 7, 1929 devotes several pages to a discussion of post-vaccinal encephalitis and says: "Although only a few cases have been reported in the United State, it seems advisable to call physicians' attention to this complication so that any cases in which persons recently vaccinated show symptoms pointing to the central nervous system can be carefully investigated."

It may be interesting enough for physicians to study symptoms pointing to the central nervous system but it will not be interesting to you or your afflicted child. Since the medical profession is determined not to abandon this filthy and deadly practice, no matter how many children are sickened, maimed and killed, it is up to you to prevent post-vaccinal encephalitis, and all the other troubles discussed in this chapter, by not permitting your child to be infected with this dirty cow pus.

It is your child. It does not belong to the state. It was not born into this world to furnish money to the medical profession. You are responsible for its care and training. If you betray your child by giving it over to this modern moloch, you deserve a worse fate than any Dante ever pictured. Parents owe certain responsibilities to their children. One of these is certainly to guard these children against attack from all foes, including the foes of their health. It is the duty of every parent to "refuse and resist" vaccination for his or her children, wherever such a parent may live and whatever the circumstances under which the vaccination is demanded. Fight, go to jail, resist in every possible manner the cow-pox bullies and their putrescent points. In Italy some years ago, when a group of physicians invaded the homes of Italian mountaineers to forcibly vaccinate the children, the mountaineers simply stripped the pus-punchers of their clothes, gave them a liberal dose of their own "medicine," and sent them scurrying home. I recommend this measure for immediate adoption in this country. Let the rascals suffer as they make others suffer. It will teach

them a much needed lesson.

In reply to an inquiry, addressed to the United States Public Health Service, by Senator Robt. F. Wagner, New York, Surgeon General Hugh S. Cumming says: "One case (of encephalitis following vaccination) in the United States was published in 1929 and two in 1927. These three cases seem to be definitely established as sequelae of vaccination. Several other cases less well established have come to our attention but need not be considered here."

That these and all figures given in this reply are not complete is evident from the closing paragraph of his letter. He says: "Although a search has been made of the literature since 1925, we cannot be sure that this is a complete list. While the Public Health Service endeavors to learn of and in many instances to investigate untoward cases suspected of being caused by biologic products, there is no legal mechanism requiring the reporting of such cases to the Public Health Service."

The Report of the Surgeon General of the U. S. Army, 1918, shows that during 1917 there were admitted to the army hospitals 19,608 men suffering from anti-typhoid inoculation and vaccinia. The Report for 1919 covering the year 1918 shows the total admissions suffering from typhoid vaccination to be 23,191, and 10,830 suffering from vaccinia. Assuming that the proportions of those suffering from these two inoculations were about the same for the two years it means that approximately 20,000 were in the army hospitals admittedly suffering from smallpox vaccination. This takes no account of those whose sufferings were attributed to something else, nor of those whose sufferings, though great, were not great enough to cause them to be sent to the hospitals.

The *Chicago Tribune*, June 6, 1926, carried the account of the death of Kasmir Jeskey, 10-year-old son of Mrs. Anna Jeskey, 1523 17th Ave., Meirose Park. The *Tribune* stated: "Blood poisoning believed to have resulted from vaccination yesterday claimed the life of Kasmir Jeskey."

The Report of *The Register General*, England, from 1875 to 1923 recorded 1,464 deaths officially admitted to have been caused by vaccination. These figures give but a small part of the picture for most such deaths are covered up. For instance, in one series of deaths caused by vaccination, Public Enquiry revealed that vaccination had been mentioned as a cause in only one case. In another series of seventeen deaths following vaccination, investigated by a medical man, who published the details, only one death had been attributed to vaccination. One British physician said: "In certificates given by us voluntarily and to which the public have access, it is scarcely to be expected that a medical man will give opinions which may tell against or reflect upon himself in any way, or which are likely to cause annoyance or injury to the survivors. In such cases he will most likely tell the truth, but not the whole truth, and assign some prominent symptom as the cause of death. As instances of cases which may tell against the medical man himself, I will mention erysipelas after vaccination and puerperal fever. A death from the first cause occurred not long ago in my practice, and although I had not vaccinated the child, yet in my desire to preserve vaccination from reproach, I omitted all mention of it from my certificate of death."

Vaccination must be saved from reproach at all costs. Who cares how many children are killed if only vaccination may be saved from dishonor. It is up to parents to put an end to this crippling and maiming of children. It is the sacred duty of all parents to protect their children from all harm. If the medical profession is not honorable enough to abandon this highly remunerative, though evil and deadly practice, it behooves parents to cut their professional throats.

Will it be urged that while vaccination is often productive of harm and death, it produces less of these than it prevents? If so, I shall show that this is not true. But, grant for a moment the truth of the assertion, it is still true that to force such a dangerous process upon one is unjustifiable. It is a danger and we each have a right to choose between two dangers. Compulsory vaccination is a crime.

*The Christian Herald*, England, July 7, 1927, carries an account of a smallpox epidemic, of a very serious type, in 15 departments (counties) in France, with a death rate of nearly 50 per cent in women and about 33 per cent in men. All of these cases were vaccinated people—many of the victims having been vaccinated as many as three times. If vaccination protects, why did it fail in these cases?

In our army during the Spanish American War and in the Philippines the soldiers had been vaccinated, not only annually, but every six weeks. Chief Surgeon Lippincott said: "Vaccination is carried on as regularly as post drill." Yet the official report shows 276 cases of smallpox in 1899 with 78 deaths; 246 cases in 1900 with 113 deaths; and 125 cases with 37 deaths in 1901; the case fatality of nearly fifty per cent, in 1900 being the highest ever recorded for this disease in the army a well vaccinated army, if ever there was one.

In 1872 Japan passed a compulsory vaccination law which was rigidly enforced. But smallpox continued to "ravage" that country. In 1885 another law was passed requiring revaccination every seven years. From 1886 to 1892 there were 25,474,370 vaccinations, revaccinations and re-re-vaccinations recorded in Japan. During these same seven years, 1886 to 1892, Japan had 156,175 cases of smallpox, with 38,979 deaths, or a case fatality of nearly twenty-five per cent which exceeds the smallpox death-rate of the pre-vaccination period when nobody was vaccinated. In a single year (1893) Japan had 41,898 cases of smallpox with 11,852 deaths.

In 1896 the Japanese Parliament passed an act, which was immediately signed by the Mikado, requiring every resident of Japan, whatever his or her station in life, to be vaccinated and revaccinated every five years. The act was rigidly enforced under severe penalties. Baron Takalira boasted in London in 1906, at the Jubilee Dinner of the Society of Medical Officers of Health of England that:

"There are no anti-vaccinationists in Japan. Every child is vaccinated before it is six months old, revaccinated when it enters school at six years and again re-vaccinated at fourteen years of age when going to the middle school, and the men are re-vaccinated before entering the army, while a further re-vaccination is enforced whenever an outbreak of smallpox occurs."

Notice the last part of this statement. If vaccination prevents smallpox, how do "outbreaks of smallpox" occur in such a thoroughly vaccinated country? There can be but one answer; namely, *Vaccination does not protect.*

This compulsory vaccination law became effective in Japan in 1896. In 1897 there were 49,946 cases of smallpox in Japan, with 2,276 deaths from this cause. In 1908 there were 10,067 cases with 5,837 deaths officially recorded. From 1889 to 1908 Japan had 171,611 cases of smallpox with 47,919 deaths. If anybody thinks that vaccination, re-vaccination, and re-re-vaccination prevents or mitigates smallpox, let him look at these figures. Here is a case fatality of nearly 30 per cent. It would be interesting to know to what extent the disease was *mitigated* by vaccination in those

47,919 fatal cases of post-vaccinal smallpox.

The *New York Medical Journal*, July 22, 1899, contains an article on "Vaccination in Italy," by Chas. Rauta, M.D., Prof. of Hygiene and Materia Medica in the University of Perugia, Italy. In this he points out that "Italy is one of the best vaccinated countries in the world, if not the best of all, and we can prove that mathematically." He says further: "For twenty years before 1885, our Nation was vaccinated in the proportion of 98.5 per cent. Notwithstanding, the epidemics of smallpox that we have had have been something so frightful that nothing before the invention of vaccination could equal them." "During 1887, we had 16,249 deaths from smallpox; in 1888, 18,110; and in 1889, 13,413."

Referring to the Italian army, in which "vaccination had been performed twice a year in the most satisfactory manner for many years past" he says that, "now we see that soldiers not protected because vaccination did not 'take' were less attacked by smallpox than those 'duly protected,' by the good results of their re-vaccination; and that the death-rate in those vaccinated with good results was greater than among those in whom the vaccination did not take."

We have forced vaccination on the Philippines since we took over the Islands. Spain had done the same thing previously. In 1905-06; 1907-08 and in 1918-19 these Islands experienced severe smallpox epidemics, the 1918-19 one being the worst of all. There were 47,887 cases of smallpox with 16,578 deaths officially reported in 1918. In Manila alone, the best vaccinated part of the Islands, there were 1,326 cases and 869 deaths, or a case mortality of 65.3 per cent. The lowest mortality, 11.4 per cent was in Mindanao, the least vaccinated portion of the islands.

The Health Service got busy and vaccinated thousands and thousands, performing about four vaccinations for each inhabitant in Manila. This was followed in 1919 with 99,300 cases of smallpox, with 47,395 deaths. In two years time in a population of less than 11,000,000 there were 147,187 cases of smallpox and 63,973 deaths.

The 1920 Report of the Philippine Health Service, (see pages 141 and 142), makes the following very brief comment: "*From the time in which smallpox was practically eradicated in the city of Manila to the year 1918 (about 9 years) in which the epidemic appeared certainly in one of its severest forms, hundreds after hundreds of thousands of people were yearly vaccinated with the most unfortunate result that the 1918 epidemic looks prima facie as a flagrant failure of the classic immunization towards future epidemics.*" (Italics mine.)

Alibies were offered for the failure, however, and the dirty work continues. No matter how great the evil, those who profit from it will not correct it—not so long as profits are still to be made therefrom.

There is an unvaccinated country in this world without smallpox. Australia is the great unvaccinated country and despite dire predictions of disaster from vaccine advocates, Australia remains free from smallpox. Three-fourths of her population have always been in the never-vaccinated class. Under the modern theory that vaccinal immunity lasts only five years (Italy vaccinated twice a year and failed) 21/2% of her population are "protected."

In the whole of Australian history less than one person a year has died of smallpox. Many of these were from the outside and were simply quarantined there. In Queensland where the official figures show 1 vaccination for every 1,500 births the state has had but one "outbreak." In 1892 a

well-vaccinated quarantine official "contracted" the disease on ship. There were no other cases. The "epidemic" had no show among an unvaccinated people. In Victoria in 21 years there were 5 deaths from smallpox and 14 deaths from vaccination—these are only those deaths that are honestly attributed to this cause. This coincides with the reports of the Register General of England covering a period of years in which there were, in England, 42 deaths from smallpox under five years of age and 157 deaths officially admitted to have been due to vaccination. There are also the official figures which show that "only 109 children (under five) in England and Wales died of smallpox in the twenty-nine years ending December, 1933, but 270 died of vaccination" in the same period in these two countries.

In England and Scotland the decline of vaccination has been accompanied by the practical disappearance of smallpox. Here are the figures, briefly England, 1871-75 percentage of vaccination 97.6%; smallpox deaths per million people, 228; 1910-20 percentage of vaccination 43.9; smallpox deaths per million people 0.4.

Scotland, 1855-1874 one of the best vaccinated countries of the world, "not an unvaccinated child in Scotland;" 9,087 children under five years old died of smallpox; 1907-1919 with about one-third of the children vaccinated only 7 deaths under five years from smallpox.

I would not go so far as to say that vaccination has never saved a single person from smallpox. It is a matter of record that thousands of the victims of this superstitious rite have been saved by the *immunizing potency of death*. But it is a fact that the official statistics of England and Wales show unmistakably that, while vaccination has killed ten times more people than smallpox, there has been a decrease in smallpox concomitant with the decrease in vaccination. The following table of official statistics from England and Wales giving the average annual percentage of births vaccinated and the number of smallpox deaths registered will prove instructive to all intelligent readers:.

Period	Percentage of births	
	Vaccinated	Smallpox deaths
1872-1881	85.5	3,708.2
1882-1891 .	82.1	923.0
1892-1901	67.9	436.5
1892-1911..	67.6	395.3
1912-1921	43.3	12.2
1922-1931	43.1	25.0
1932-1941	34.9	1.4

During the period when 85.5 percent of all babies born were vaccinated and another ten per cent of them died before they were old enough for vaccination, these two countries had an average annual number of 3,708 deaths from smallpox. When vaccination had declined until only about one-third of the infants born were vaccinated the average annual death rate in smallpox had dropped to less

than two a year. It may be appropriately asked, in the words of the *Vaccination Inquirer* (London), Feb. 1947: "How could an operation that was declining be responsible for the extermination of smallpox?"

In 1942 a case of smallpox at Swindon (Britain) resulted in the vaccination of large numbers of people. Only three cases of smallpox occurred and these all recovered, but twelve vaccinated individuals died from inflammation of the brain. In the same year near Edinburg, Scotland eight people died of smallpox (six of these had been vaccinated) while ten died from the effects of vaccination.

In Britain during the years 1939 to 1944 there were 60 cases of post-vaccinal encephalitis, 31 of whom died. This is a fatality rate of slightly more than fifty percent. During this same period, there were but 21 cases of confirmed smallpox with but three deaths. There were, in other words, in Britain during this period, three times as many cases of post-vaccinal encephalitis as of smallpox and ten times as many deaths from post-vaccinal encephalitis as from smallpox. As these figures are official and are supplied by the British medical profession itself, as they make the diagnoses and report the cases and deaths, they constitute damaging admissions by the profession that, while vaccination does not prevent smallpox, vaccinia is a much more dangerous disease than smallpox.

Since the first edition of this book was published, England, the first nation in the world to pass a compulsory vaccination law, has repealed her law and no one in the British Empire, not even in her armed forces, is forced to submit to vaccination. Since 1907 nobody among her citizens or in her armed forces was compelled to be vaccinated if he conscientiously objected to it. On the same ground parents could avoid vaccination for their children. In this land of the craven and home of the slave, a land that proudly boasts that it gained its freedom in 1776 from this same British Empire, vaccination is still compulsory in several of our states and in many cities outside these states, as well as in the armed forces of the country. Civil service employees are also compelled to submit or lose their jobs.

Smallpox is always worse where vaccination abounds. The scratch of vaccination is the "scratch of death." Yet our medically controlled Health Boards cook up fake epidemics, create panics for profit, such as the ones in Kansas City in 1921, Pittsburgh in 1924, Philadelphia, Baltimore, Washington in 1925. An effort was also made to create a panic in New York in 1925, but due to the open fight against it by the *New York Evening Graphic*, the Commissioner of Health called it off.

Surgeon J. P. Leake, says in *Public Health Reports*, Jan. 28, 1927, the weekly bulletin of the U. S. Public Health Service: "Will a nonimmunized person contract smallpox if exposed to the disease? By no means uniformly. Exposure to smallpox, especially to the milder forms, without contracting the disease frequently occurs and is no definite evidence of immunity. The number of cases of smallpox among the unprotected persons in contact with patients suffering from the disease is very much less than 100 per cent

"Though smallpox is unquestionably many times more frequent in the unvaccinated than in those who have had even a single vaccination, it is believed that neither the vaccination history nor the presence of scars should be given diagnostic weight. The unreliability of such a criterion is especially evident in virulent outbreaks of the disease

"The purpuric, uniformly fatal form of smallpox, is the most difficult to prevent by vaccination, and

cases of this form, without a true smallpox eruption, may occur in persons with a fairly good vaccination history . .

"The mildness of the form of smallpox commonest at present is one reason for endeavoring to make preventive vaccination as harmless and as mild as possible

"Cases and even fatalities, occur in every severe epidemic among persons who were vaccinated in good time but with vaccine found, too late, to be of insufficient potency; such cases and fatalities also occur among persons thought to be protected by successful vaccination performed years previously."

You are vaccinated and have smallpox. The vaccine was of "insufficient potency," although this was discovered too late—that is, after you have the smallpox. You are vaccinated and do not develop smallpox—it is assumed that the vaccine was potent. It is like the old test for mushrooms—eat them and live they are mushrooms; eat them and die, they are toad stools.

In 1926, 130 members of the Dallas (Tex.) Chamber of Commerce cancelled their trip to Mexico because vaccination was required as a precedent to entrance. Nearly a 100 medical men, at a conference in Dallas, went to Mexico, after they obtained permission to enter without being vaccinated. Think this over before you submit your child to this evil and superstitious rite.

In this country the risks from vaccination, according to official figures, which are slanted in favor of vaccination, is ten times greater than the risk of smallpox. According to the figures of the United States Public Health Service there were officially reported an average of sixteen deaths per million vaccinations in this country in the years 1925 to 1928 inclusive. These deaths cover only those officially admitted to have been due to vaccination and do not include the deaths from encephalitis, meningitis, etc., which resulted from vaccination. Up to that time twenty cases of encephalitis had been officially reported in the United States as resulting from vaccination. The Public Health service instituted an investigation to determine the extent of such cases in this country, but I have seen no report of their findings.

During the years 1927 to 1929 inclusive there were officially reported an average of 1.18 deaths per million population from smallpox in the United States. In many of these deaths, smallpox is not given as the primary cause of death. Deaths from smallpox have almost reached the vanishing point in this country, only thirteen states of which require vaccination precedent to school attendance and none of which require vaccination of infants and adults outside the armed forces.

Due to the fact that vaccination is more dangerous than smallpox, many leading medical men refrain from vaccinating their own children. An editorial in *American Medicine*, March, 1914, says:

"The growing opposition to vaccination is a matter of grave concern. This new movement . . . is not the illogical and absurd anti-vaccinationist crusade, but is the conviction on the part of very intelligent men, that it is useless to protect against an infection which they may never encounter . . . This attitude is not confined to laymen, but is taken by those leading men in the medical profession who postpone vaccination of their own kith and kin until the last moment. Two world renowned men have confessed to us that they have had their children vaccinated only in obedience to public opinion in and out of the profession . . . So we hear men saying that there is not one chance in a million of their children being infected with smallpox, but that there is far more chance of pus infection or tetanus from the vaccine .

This criminal practice will end as soon as parents develop sufficient interest in the welfare of their children. At present parents offer up their children on the altars of the smallpox goddess, because commercial ghouls demand it, and hope that the children will not be greatly injured. If a child is invalidated for life or is killed, the parents meekly accept the lying excuses of the scoundrels who maim and murder children for money, cry a little, and return to their movies and joy rides. Reader, do you know how Judas felt after he had sold his master for a few pieces of silver? If you have surrendered your child to be vaccinated and inoculated, after you learned the truth, you know how he felt. There is one great difference between you and him—Judas had decency enough to go out and hang himself.

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## Commercial Medicine

### CHAPTER III

I am an incurable idealist and a chronic optimist, but I am not able to shut my eyes to what I see going on around me. I don't believe in looking always on the "bright side" of things and refusing to examine the darker side. In the human garden there flourish some mighty foul weeds, most of them cunningly disguised, that need to be looked at and destroyed.

Ours is a system of pig-ethics. I do not mean by this merely our love of wallowing, but include also our selfishness, our game of grab and stab. Modern business of all kinds is just such a game, cleverly disguised, though it often is, under a pretense of philanthropy, service and idealism. At the root of business, and supplying its motive power is a sordid commercialism that does not hesitate to trample the most sacred things of life, even life, itself, in the mud and mire to attain its selfish ends. Idealism can make little or no headway in our world until these pig-ethics are destroyed. For our pig-ethics employs idealism, not as a working principle, nor yet as a way of life, but as a cloak to mask the ulterior motives of the fraud and the cheat.

Some years ago a large drugless sanitarium, located in Battle Creek, offered stock for sale. The heads let it be known that they expected to pay dividends amounting to returns of twenty per cent, upon the investment. Think of this! A professedly humanitarian institution run on the same basis as a steel mill, or a public utilities corporation! Besides providing a fat living for the actual workers in the institution, they could pay large dividends to absentee owners. Does it not look as if the sick, with one foot in the grave, were going to keep the healthy on easy street.

This shameless exploitation of the sick and dying is carried on by every so-called school of healing on earth. Then, when a patient dies, the undertaker comes, with the same commercial motives, the same pig-ethics, and while the grief-stricken wife or husband, mother or son feels that there is nothing that he or she would not do for the beloved deceased, takes a mean advantage of this emotional state and holds them up on a fashionable burial.

In more recent years the shameless exploiters of human life and health, not content with the profits they were deriving from their abuses of the actually sick, have found ways and means to exploit the non-sick as well. As of old, this new form of exploitation hides behind a smoke-screen of altruism; the exploiters are doing it all for the good of humanity, for the public health, for the protection of our children, etc. Medical science is a form of madness from which few medical men ever recover. Backed by commercialism, this madness runs rough-shod over, the life and health of the people.

Few of us ever stop to consider the power of slogans in their effect upon the mob mind. "To Hell with Autocracy," "Down with the Kaiser," "Berlin or Bust," "Make the World safe for Democracy," "Work or fight," "Bonds or' Bums," or "Bonds or Bread Lines," "Republicans and Prosperity," "Democrats and Disaster," "Save the Children," "Buy a Tag," "There's a reason," "A Baby in every bottle," etc., *ad infinitum, ad nauseam*, are only a few of the soul stirring slogans that have helped to make this republic what it now is.

We are misled by these cheap slogans and have come to "think" in slogans and act in slogans. The man or woman who has a sincere and intense feeling towards humanity, a feeling that constitutes a religion in itself, and which is too broad and deep to exist in the narrow confines of any creed and

too strong to be devoured by the greeds of the time, must look on this spectacle with hatred and disgust.

Huge sums of money are collected to feed and clothe and care for the suffering and needy in foreign lands. What for? So that big business can sell its goods to these needy ones. It is a game of you pay for my goods and I'll ship them to the hungry in China. Organized charity is a cold, soulless business; a system of exploitation as much as any of our departments of big business.

Religion, whether called by one name or another, whether labeled *theism* or *atheism*, is profitably exploited by those who want to keep their hands soft and white. The exploiters in all fields prattle their idiotic platitudes about brotherhood and service, while going through the mechanical motions of their pet religion (?), where they curiously find sanction for it all, while shutting their eyes and ears to the solemn truth that they have humanity nailed to the cross.

I am not as much interested in the adults on this cross as I am in the children. If the adult population of this world allow themselves to be bullied and beaten, deceived and cheated, maimed and killed by the exploiters, they have no one to blame but themselves. They have but to rise in their collective might and these exploiters will desert their positions like rats leaving a sinking ship. Neither are the exploiters as much interested in the adult, except as the one who pays the bills, as they are in the children. We have just about turned our children over to them, body, mind and soul.

The physicians are moving heaven and earth to increase their, incomes, and they insist that there is a steady falling off in" patronage due to the fact that the public, in ever increasing numbers,, is turning to the other and newer schools. Costs of living are mounting, it costs more time and money to acquire a medical education and competition from without their ranks has made them desperate. They have tried, by every foul means—persecution, prosecution, slander, misrepresentation, lies—to destroy competition, but its growth has been steady despite this effort.

The profession is honeycombed with graft and corruption and thoroughly imbued with the spirit of commercialism. Commercial surgery, compulsory medicine, lying propaganda, fear and every foul means of drumming up trade are employed to increase their incomes. The *Journal of the American Medical Association*, Nov. 4, 1922, prints and address by Dr. W. S. Rankin. Sec. of the North Carolina State Board of Health in which he says:

"Last year we inoculated 70,000 persons against typhoid fever and 1,000 children between six and twelve years of age against diphtheria. The county Commissioner paid the local practitioners 25 cents for each complete inoculation, and that was \$20,000 which went to the profession last year which otherwise would not have been received. The work of the medical profession with the State Board of Health does not stop when the \$20,000 is paid. It goes on. In the dispensaries which were conducted in Union County, North Carolina, with 35,000 people, the physicians vaccinated 10,000 people in a campaign of five weeks. That was \$2,500 paid to twenty physicians—only \$125 each, but think of the effect on the business of the profession in keeping up that work. It goes on."

Does the last statement refer to the business the physician will receive from those who are made sick by vaccination? At least, he emphasizes the doctor's business and the increased income to him through state medicine,

In a paper entitled *Medical Practice and Public Health*, read before King's County (N. Y.) Medical Society, March, 16, 1926 the Hon. Louis I. Harris Dr. P. H., M. D., Commissioner of Health of the

City of New York, said: "In school work we have felt rather self-satisfied and smug. During the last eighteen years, the health department has conducted the examination of children, generally without any competition from or by the medical profession. This indicates a lack of understanding by family physicians of the glorious opportunity for service which they are missing. It is no new thing that I mention. *You have heard it time and again.* When we, in the health department send home a physical examination blank, a very simple and rudimentary one at that, and ask the parent to take the child to a physician to be examined, then, assuming that the parent follows our instructions, the physician fails to *capitalize* the opportunity." (Italics mine.)

The reader will readily see that the Board of Health is here trying to build business for the physicians, and Harris tells these physicians that what he is saying to them has been told to them time and again. But they don't seem to be so enthusiastic about it. Evidently not all physicians are as unscrupulous as the political medicos in the Boards of Health.

Mather Pfeiffenberger, M.D., president of the Illinois State Medical Society, in a speech before the annual Conference, Illinois Health Officers, Springfield, Ill., Dec. 3-4, 1926, said: "Prevention practiced to the uttermost will create more work for the physician and not diminish it, for the full time health officer will be educating his community constantly. There will be more vaccination, more immunizing, more consulting and use of the physician. His services will be increased many fold.

"I am informed that epidemic and endemic infections cause only 12 per cent of all deaths and that this percentage is declining very rapidly. Only 15 per cent of all children would ever get diphtheria, even under epidemic conditions, while 100 per cent are prospects for toxin-antitoxin. The percentage who would ever get smallpox, under present time conditions, is even less; but 100 per cent are prospects for vaccination. Scarlet fever will soon come in for its 100 per cent also, as it may for measles, judging from the reports on that disease. Typhoid fever is disappearing, due to sanitation, but vaccination should be used when the individual travels into unknown territory and countries." Thus another medical leader tells physicians how to increase their incomes by exploiting the children and non-sick adults.

Guy L. Kiefer, M.D., Commissioner of Health of Michigan, says in the *Journal of the Michigan State Medical Society*, Aug. 1928:

"In this state there are 100,000 people born annually. They are practically all susceptible to diphtheria from the moment they are born. They are highly susceptible from the age of six months until they are immunized. If these infants were all immunized, and for this service the physicians receive from \$5.00 to \$10.00 per case, the net income would be from \$500,000 to \$1,000,000. Michigan has 5,000 cases of diphtheria annually. If the physicians received for their services, exclusive of all other costs, an average of \$50.00 per case the income from this source would be \$250,000. *The increase in physicians income from diphtheria would be from one-quarter to three-quarters of a million dollars,* if we would immunize all children against this disease soon after they are six months of age, instead of waiting until they are stricken with the disease and then treating them.

"Some maternity hospitals are vaccinating with vaccine virus all babies born in their institutions. Babies under ten days old very seldom have any general reaction and the immunity usually lasts for the whole life-time of the individual. It is estimated that one-third of all the births in this state occur

in hospitals. If all hospitals were to establish this rule as part of their regular procedure, *it would mean an addition of 30,000 immunized people in the state each year and an additional income of at least \$60,000 to the physicians or hospitals.*

"When the 100,000 people born every year in Michigan are vaccinated against smallpox at birth, the income to the physicians would approximate \$200,000. The 500 cases of smallpox that occur every year, treated at an average of \$50,000 per case, bring physicians \$25,000. *Thus the physicians, by adopting the practice of vaccination at birth, would increase their income by nearly \$200,000.*

"We have taken diphtheria and smallpox as examples of the economic advantage of immunization, but the same conditions apply to other diseases and to other public health measures.

*"With the persistent educational work by the physicians and the Michigan Department of Health, these immunization programs will succeed in reducing the number of these preventable diseases and increasing the earning of the physicians who actively sponsor this modern type of practice."* (Italics mine.)

In the *Brooklyn Times*, March 21, 1929, Health Commissioner Wynne, New York, is reported to have said in an address to the Optometrical Club: "Here is the answer (to the physician's economic problem). Let them take in 20 children an hour, one hour a day, 3 days a week at a charge of \$5 for each anti-diphtheria inoculation. That will bring a revenue worth while to the doctor."

Mr. Osborne, Health Officer of East Orange, N. J., in an address reported in the *Journal of the Medical Society of New Jersey*, September, 1929, points out that the physician would receive several times more by inoculating children than by treating cases of the disease.

In an editorial, Jan. 1930, the *American Journal of Public Health*, points out in dollars and cents how much money physicians would receive from inoculating babies and adds: "There are of course four times as many preschool children as babies, and ten times as many school children. The opportunity for increasing practice by carrying on immunization among the preschool and school populations in the physician's clientele offers an almost unlimited field."

Dr. Vander Veer says, in a discussion reported in the *Journal of Medical Society of New Jersey*, February, 1930: "Dr. Wynne, Health Officer of New York City - gave me a clue to the subject of economics in which he said that we doctors had been going along the same old lines and had not created any new business, so I finally evolved this as a slogan in New York State: We cannot get away from the lay organizations, therefore we will lie down with them and ask them to provide means for carrying on the health programs and we are going to benefit ultimately from the periodic health examinations by an increased income. As a concrete example, take a town of 3,000, if only 200 come to us for examination at \$3.00 each that would be \$600 that would accrue to be divided among the doctors; if 100 came for examination at \$25.00 each there would be \$2,500 to be divided.

Vander Veer gives more statistics about the fees they would receive and then says: "That is the thing that strikes home to our doctors in New York State." Thus the reader will see that I am right in saying that physicians are using the various lay organizations, Parent-Teacher Associations, etc., to build business for them. The Red Cross has long been a tool of these men.

In the early part of 1930 one of my readers sent me a news clipping from the *Cincinnati Times Star*,

headed *Health Work Aids Doctors*. It said "thousands are sent to physicians as result." The whole article is as follows: "Are 'socialized' health agencies preventative and curative, bringing lean times and reducing the number of physicians and other private health workers?"

"Do public clinics, public hospitals and public health departments affect the income of physicians, surgeons and dentists?"

"These questions, presented Saturday to Health Director William H. Peters, brought the declaration that in his judgment the only effect was that practitioners had to modify their activities.

"Dr. Peters pointed out that when Cincinnati purified its water there was an almost entire elimination of thousands of cases of typhoid fever and other water-carried diseases, treatment of which gave an immense revenue to physicians, nurses and others.

"On the other hand Dr. Peters said the medical inspection of schools by publicly employed district physicians aided private practice. Thus the inspectors discover defects in children, which are reported to parents and thousands then take their children to the family physician or a specialist.

"The public drives for the immunization of children against diphtheria brought a great revenue to private practitioners. There were about 35,000 children treated and of this number about fifty-four per cent by private practitioners, or about 19,000. At \$5 a treatment the revenue would be \$95,000. Annually there are about 7,500 children to be so treated. This work gives a revenue far in excess of what the treatment of the disease yielded, said Dr. Peters.

"So he said, the agitation for annual general physical examination in his opinion, has resulted in thousands of persons resorting to their physicians, surgeons and dentists to be examined.

"Dr. Peters said it was requisite for physicians and other health practitioners to 'reconcile themselves to the age.' He said more should go in for preventative medicine and all should recognize how public health activity stimulated persons to mind their physical and mental condition and thus helped the private practitioner.

"Dr. Peters said it was true there were some physicians in this community who complained of the 'inroads' that 'socialized' medicine was making on their incomes and that there were perhaps some who actually were affected. He declared that there were compensations that in the mass more than canceled such instances."

This accounts for the growing interest on the part of physicians and health boards and serum and vaccine makers and dentists, in so-called *health education*. They are bent on increasing the business of the physicians and dentists and the sale of more vaccines and serums.

Inspecting the school children increases the work of physicians. It is done the country over. Not merely the school child, but the pre-school child now comes in for this form of exploitation. Here in San Antonio, for instance, The Parent-Teacher Association sponsors medical examinations of the pre-school child. Tonsil operations and other operations, eye-glasses, serums and vaccines and other forms of vandalism and poisoning follow these examinations and the physicians of the city are enriched in purse.

Medical inspection of school children is a means of boosting business for physicians. The inspected children are brow-beaten abused, bullied and "ragged" to have their tonsils removed and toxin

anti-toxin inoculated into them, by the incompetents who are placed on the school board. These physicians do nothing useful; but do much to injure the physical and mental health of children, besides greatly annoying parents and teachers. But the practice will not end until parents kill it.

A few years ago, the Bronx County Medical Society, through one of its Bulletins, expressed its resentment against the extent to which the toxin-antitoxin campaign had been pushed in New York City. Health Commissioner Wynne, in the *Weekly Bulletin* of New York City Department of Health, of July 19, replied that "The plan followed by the Dept. of Health should evoke nothing but commendation. It provides a simple, inexpensive, effective and entirely ethical method whereby the general practitioner can secure additional practice." Such is the altruism of these great public spirited physicians on the Boards of Hell (th).

Wm. A. Rohlf, M.D., President-elect of the Iowa State Medical Society, said in his official address at a meeting of that body a few years ago: "Allow me to quote from a letter received from Dr. Steel-smith: 'For the five year period preceding the State Department's Education toward diphtheria immunization, namely, the five years preceding 1923, there occurred in Iowa more than three thousand cases of diphtheria each year. Many of these cases were not seen by any medical practitioner, but the average revenue as computed by statisticians signifies that the physicians of the state of Iowa received in cash approximately \$20 per case for the treatment and cure of diphtheria for each of the five years preceding that state-wide anti-diphtheria program. This would result in physicians of the state receiving approximately \$60,000 for such work each year incidental to diphtheria.

"Now in comparison to that, allow me to suggest that there are approximately 44,000 children born each year in Iowa. For the sake of figures, we will say that the average price for immunization would be \$3 per child. If the physicians would interest themselves in preventative medicine and see to it that every child is treated before he is a year of age they would see clearly that from such practice the physicians of the state of Iowa would receive \$132,000 a year, or twice as much as you and I received years ago for treatment of cases."

Rohlf adds: "There is still much to do in the way of bringing about ideal conditions through vaccination and immunization, The role of local infection has opened up other avenues for our activities.

We should be personally interested, and, as physicians, assist in the examination and' treatment of school children."

These men plan ways of doubling their incomes and come to the public with the plea that they are sincerely interested in the health and welfare of our children and that they put over their income-increasing programs for the health of our babies and for the welfare of the school children. They are as cold-blooded as any class of criminals on the whole earth. Indeed, I know of no other class of criminals who live by crippling, maiming and killing babies and children.

It is asserted that there are 1,454 formally organized state and local tuberculosis associations in the United States. The organizations affiliated with the National Tuberculosis Association spent in 1928 at least \$6,196,376.98, the major portion of which was secured through the sale of Christmas seals. All of this begging by Tuberculosis Associations is to create jobs for physicians. Their work is admitted to have no influence on tuberculosis.

A Red Cross officer said to the victims of the Mississippi Flood, as reported in the *Savannah (Ga.) News*, June, 14, 1927: "From now on your meal tickets are canceled until you can show your vaccination scar." A similar order was given by this same disreputable organization in a later flood in New England.

People give freely of their money and goods to help the victims of calamities, and the medically controlled Red Cross uses that money to buy serums and vaccines, and pay incompetent physicians and uses the plight of the victims as a club, to make them submit to medication they do not need and do not want. The Red Cross can never have a penny of the author's money and I shall use all of my influence to prevent others from donating to its system of graft.

The so-called "mental hygiene" movement, which seeks to become a regular part of our public schools, is a commercial move, composed of the usual surgical and serum methods. The movement has among its heads several men who have been convicted of crimes in their care of the insane and men who are notorious for their extreme cruelties to animals in vivisection work. This is an extremely dangerous move and should not be permitted to touch the children of this country, who are surely suffering enough, at the hands of the medical moloch.

Of the same unholy and commercial character as the tuberculosis society and the Red Cross are the Foundation for Infantile Paralysis, the Society for the Prevention and Control of Cancer, the Damon Runyon Cancer Fund, the Arthritis Society, the Heart Association, the society to aid Crippled Children and similar panhandling organizations that regularly rattle the cup on the streets and in the press of the country. These various organizations collect many millions of dollars yearly from a generous and well meaning, but uninformed people, spend the major portion of the money in fat salaries and overhead or administration costs, spending much of it to pay for cruel and futile experiments on animals (research) and precious little of it for the purposes for which it is given. Like all organized charity, these things are soulless rackets.

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[Chapter 2--Serum Poisoning](#)

[[Vaccination](#)] [[Herbert Shelton](#)]



# LEPROSY AND VACCINATION

WILLIAM TEBB.





**WILLIAM TEBB**

[Smallpox books](#) [Smallpox vaccine critics](#) [Smallpox](#)

[Quotes](#)

"Dr. Charles [Creighton](#), Alfred Russel [Wallace](#), William [White](#), Prof. Edgar [Crookshank](#), William Tebb, [Dr. Scott Tebb](#), Dr. William J. [Collins](#) and his father, of the same name, who had been a public vaccinator for 20 years and had renounced the practice, were all head-and-shoulders above their opponents, both in intellect and in integrity. They may therefore never be mentioned on the radio, nor may their history."---[Lionel Dole](#)

[\[1893 Book\] LEPROSY AND VACCINATION by William Tebb](#)

[\[1892 Booklet\] THE INCREASE OF CANCER by William Tebb](#)

[\[1884 Book\] Compulsory Vaccination in England: with incidental references to foreign states by William Tebb](#)

[\[1881\] SANITATION, NOT VACCINATION THE TRUE Protection against Small-Pox By WILLIAM TEBB](#)

[\[1882\] PREFACE BY WILLIAM TEBB TO TESTIMONIES OF MEDICAL AUTHORITIES ON VACCINATION](#)

A Personal Statement of the results of Vaccination.. pp. 4. 1891. 8o.

Brief Story of fourteen years' struggle for parental emancipation from the Vaccination tyranny, etc.. pp. 20. E. W. Allen: London, 1894. 8o.

Government Prosecutions for Medical Heresy: a verbatim report of the case "Regina versus Tebb" [arising from W. Tebb's opposition to the Vaccination Law]. With an introduction by W. Tebb, and appendix of illustrative matter.. London, 1879. 8o.

The position and prospects of the revolt against compulsory vaccination in England. Being an address delivered before the First International Anti-Vaccination Congress, Paris, December 11, 1880 ... With letters, etc.. London: London Society for the Abolition of Compulsory Vaccination; E. W. Allen, 1881. pp. 15. 18 cm....

**Son of William Tebb:**

[\[Book\] A Century of Vaccination and What it Teaches. London: Swan Sonnenschein & Co, 1898 by W. Scott Tebb](#)

[\[Home\]](#)

# LEPROSY AND VACCINATION

WILLIAM [TEBB](#)

THE RECRUDESCENCE OF LEPROSY AND ITS CAUSATION BY WILLIAM TEBB  
LONDON  
SWAN SONNENSCHNEIN & CO  
1893

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THE LEPER CENSUS IN THE LEEWARD ISLANDS, WEST INDIES, 1891.

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TUBERCULIN IN LEPROSY.

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## **PREFACE**

THE remarkable spread of leprosy during the past thirty years has excited much public attention. Having for many years been interested in the public health, I have been prompted to investigate the causation of this increase. My attention was first called to the growing ravages of leprosy during a visit to Asia Minor in the year 1884, and to one source of infection the extent of which is as yet imperfectly realised (I mean vaccination), by the perusal of the evidence brought before the Select Parliamentary Committee on Vaccination of 1871 by Dr. R. Hall Bakewell. In 1888-89, during a visit to the Virgin, Leeward, and Windward Islands, British Guiana, and Venezuela, I took the opportunity of investigating this serious allegation. In the course of my inquiries I obtained particulars of a number of cases of leprosy due to vaccination. These were furnished by highly respectable colonists, but were often coupled with the request that no names were to be published, either of the suffering families or of those who communicated the details. This reluctance, which is entitled to every consideration was due to the fear of exposing relatives, and damaging their social - standing in the community where they reside. Although the danger of communicating leprosy by vaccination has been admitted in official and other reports, I have on many occasions found it extremely difficult to get at the facts, copies of important documents having been repeatedly refused by officials both at home and abroad, and notably in the French Colonial possessions.

It is perhaps too much to expect that those who regard Jenner as one of the greatest of human benefactors will display much energy in bringing to light such cases as I have referred to.

Some of the obstacles in the way of independent investigation of this subject are alluded to in a communication, read before the Royal Vaccination Commission, from Dr. Charles E. Taylor, Secretary to the Legislative Council, Island of St. Thomas, Danish West Indies. Dr. Taylor states that during his 20 years residence at St. Thomas, D.W.I., he has known many cases of the communication of leprosy by means of the vaccinator's lancet, but he adds that the sufferers or their families invariably decline to have the fact disclosed. One resident physician in Honolulu, who told me how the disease had been disseminated by means of vaccination in Hawaii, strongly deprecated making the details known, as he would not answer for the consequences. Despite these difficulties, however, a good many cases are recorded by medical men of high standing and wide experience, and some of them are here presented to the reader. Cases have come under my cognizance in which the reports of district surgeons, showing the spread of terrible diseases by means of vaccination, have been officially suppressed.

In June, 1890, I appeared as a witness before the Royal Commission on Vaccination, and gave evidence as to the results of my inquiries up to that date. This evidence will be found in the third report of the proceedings, pages 154-161.

At that time my investigations had been mainly limited to the West Indies, British Guiana, and Venezuela. Since then I have extended my - personal investigations to Norway, California, the Sandwich Islands, Ceylon, Egypt, New Zealand, Cape Colony and Natal in South Africa, and most of the Colonies in Australia, and have put myself in communication with superintendents of leper asylums and leading dermatologists in all other countries where leprosy is endemic. The results of these inquiries, with other collateral evidence bearing on the subject, are briefly set forth in this volume. While the *pros* and *cons* of the theories of heredity, fish-eating, malaria, and contagion, have been frequently dealt with by wellknown writers, this is, I believe, the first attempt made to bring together a body of evidence regarding the inoculability of leprosy and the evidence of its communicability by means of vaccination.

To physicians, superintendents of leper hospitals librarians of public institutions in Norway, Hawaii, the West Indies, the United States, and other countries, I am indebted for valuable official and other documents bearing on the subject, which I have freely quoted.

The *British Medical Journal* of July 3, 1886, p. 24, in a leading article on the investigations into the causation of leprosy, undertaken by Dr. Edward Arning in Hawaii at the instance of the Hawaiian Government, observes that this inquiry "is likely to have results of great importance both to science and to practical medicine." This prophecy is indeed likely to be fulfilled, but hardly in the manner anticipated by the writer. Amongst the most important of Dr. Arning's discoveries is that vaccination has been instrumental in widely disseminating leprosy amongst the helpless and confiding population of that beautiful Archipelago.

Leprosy is one of the most loathsome as it is one of the most tissue-destructive diseases known, and when going through the wards of leper hospitals I have frequently noticed with pain the poor afflicted creatures bending their heads and covering their hands to conceal from strangers the sight of their distorted features and mutilated limbs. It is hardly possible to conceive, much less describe, the depth of human misery caused by the spread of this hideous and destructive disease; but some idea of its nature may be gathered from the following description of leprosy, which may well excite the sympathy of the philanthropist. It will be found in a recent work on leprosy by Dr. Thin, pp. 99-100. It is translated from Leloir, an eminent French authority on leprosy, and refers to the tubercular variety of the disease. "If the patient," he remarks, "does not die of some internal disorder or special complication, the unhappy leper becomes a terrible object to look on. The deformed leonine face is covered with tubercles, ulcers, cicatrices, and crusts. His sunken, disfigured nose is reduced to a stump. His respiration is wheezing and difficult; a sanious, stinking fluid, which thickens into crusts, pours from his nostrils. The nasal mucous membrane is completely covered with ulcerations. A part of the cartilaginous and bony framework is carious. The mouth, throat, and larynx are mutilated, deformed, and covered, with ulcerated tubercles. The patient breathes with the greatest difficulty. He is threatened with frequent fits of suffocation, which interrupt his sleep. He has lost his voice, his eyes are destroyed, and not only his sight but his sense of smell and taste have completely gone. Of the five senses hearing alone is usually preserved. In consequence of the great alterations in the skin of the limbs, which are covered with ulcerated tubercles, crusts, and cicatrices, the pachydermic state of skin which gives the limbs the appearance of elephantiasis, and of the lesions of the peripheral nerves which are present at this time, and by which occasionally the symptoms of nerve leprosy are combined with those of tubercular leprosy, the sense of touch is abolished. The patient suffers excruciating pains in the limbs, and even in the face, whilst the ravages of

the disease in his legs render walking difficult and even impossible. From the hypertrophied inguinal and cervical glands pus flows abundantly from fistulous openings. In certain cases the abdomen is increased in size on account of the liver, spleen, and mesenteric glands being involved. With these visceral lesions the appetite is irregular or lost. There are pains in the stomach, diarrhoea, bronchial pulmonary lesions, intermittent febrile attacks, and a hectic state. The peculiar smell, recalling that of the dissecting room, mixed with the odour of goose's feathers, or of a fresh corpse, is indicated, but badly described, by the authors of the Middle Ages, who compared it to that of a male goat."

Dr. John D. Hillis, formerly of British Guiana, says of the anaesthetic variety, that it is "known also as *leuke* of the Greeks, *baras* of the Arabians, joint-evil of the West Indies, *sunbahirii* of the East Indies, and dry leprosy, in contradistinction to the other form also known as humid leprosy; is characterised by a diseased condition of the nerves, and a peculiar eruption, the primary characteristic of which is loss of sensation, or anaesthesia; hence its name. After a time ulcerations form, a sort of dry gangrene of the limbs sets in, and joints drop off, and finally there is more or less paralysis. It would take a large volume to describe the signs or symptoms of leprosy, but the preceding account is -sufficient to show what an alarming affection we have to deal with."

In Mrs. Hayes' little book, "My Leper Friends," is a chapter on leprosy, by Surgeon-Major G. G. Maclaren, M.D., in which the writer observes, pp. 123-4: Acting on the strength of my own convictions as to the transmissibility and communicability of leprosy, I established the Dehra Dun Asylum on the principle already noted (the presence of a *bacillus* in the blood), and it has answered so far admirably; all its inmates living as happily as they can under their unfortunate conditions, and ending their existence contentedly! I have had, of course, ample opportunity of studying the nature of the disease, and its effects on the different organs of the body, and in many examinations I have made, *post-mortem*, I can testify that not a single organ in the whole body is exempt from the attacks and inroads of this dire and, loathsome malady. It invades the brain, spinal nerves, the eyes, tongue, and throat, the lungs, the liver, and other digestive organs. In addition, as is generally known, it maims and deforms the external parts of the body in a manner too revolting to describe. It is painful to witness the amount of deplorable suffering some of these creatures endure. True it is that many feel but little pain—one of the forms of the disease producing *anaesthesia*, or insensibility of the parts affected; but this is the case in a few only. The majority suffer in variously painful degrees, according to the organ or part implicated, and it is a mistake to think that their sufferings are little. Many, in the earlier forms of the ailment, lose their sense of sight, smell, and taste, and when their lungs or throat is attacked (a common form), their agonies are dreadfully distressing and painful to behold. The inroads of the disease are slow and gradual, which makes it all the more trying, and the painful and lingering death to which most are doomed is a condition that one dreads to dwell on." It was the terrible nature of the disease that fostered the growth of the sumajh in India, the leper being accompanied to the grave with tom toms, where, in a sitting posture, he was buried alive.

In the West Indies, in British Guiana, in the Sandwich Islands, and in South Africa, when cases of invaccinated diseases were related to me, I was urged by the sufferers and by their friends to make known their grievances to English people and to the Imperial Parliament, and, if possible, to bring public opinion to bear upon a mistaken and mischievous system which, without doing the least good, has been the cause of such terrible and far-reaching consequences. Acting upon these entreaties, and upon others contained in communications from various leprosy countries, I have presented to the public through the press, and to members of Parliament, such facts on this subject as came before my notice up to July, 1890. I now offer to the public further evidence and testimonies, on behalf especially of the afflicted population of our Crown Colonies and Dependencies, whose grievances have been so long and so flagrantly disregarded. Every attempt to introduce compulsory vaccination in the populous Island of Barbados, British West Indies, has been thwarted, owing to the widespread belief that leprosy and syphilis are communicated by the vaccine virus. In St. Thomas, Danish West Indies, and in Georgetown and other parts of British Guiana, it has, for similar reasons, been found practically impossible to enforce the vaccination law, and, in spite of severe compulsory enactments, entire districts remain unvaccinated by reason of this special danger; while, in the Sandwich Islands, a bill for the repeal of the vaccination law was introduced in the Legislative Assembly, July, 1890, by J. Kalua Kahookano, representative from North Kohala, Island of Hawaii.

Under the head of "The Legislature," the *Daily Commercial Advertiser*, Honolulu, November 9, 1892, publishes the recent report of the Sanitary Committee, as follows:—

"Hon. J. S. WALKER, President of the Legislature.

"SIR,—The Sanitary Committee report consideration of Bills Nos. 9, 13 and 25, and Petitions Nos. 33, 152, and 206, relative to Vaccination.

"The object of all these bills and petitions is to repeal the law compelling parents and guardians to cause the children in their charge to be vaccinated.

"The complaints against the present system were very pronounced, and the repeal of the law making vaccination compulsory was strongly urged."

The committee met the Board of Health and conferred with them upon the subject, and under date of June 25th, addressed a communication to the Board, in which is the following:—

"Hawaiian Legislature, June 25, 1892.

"DAVID DAYTON, Esq., President, Board of Health. "SIR,—An effort is being made in the Legislature to repeal or amend the law relating to vaccination; the object being to leave vaccination optional with parents and individuals.

"The chief objection raised against the present compulsory system appears to be the belief of some that leprosy, and other diseases, have been propagated by means of vaccination.

"It is said that some of the vaccinating officers are careless in the use of vaccinating instruments, operating first upon one person and then another without cleansing the instrument; and that there is distrust of the quality of virus used, in some cases serious inflammation and illness following the inoculation.

"The petitions and proposed measures relating to the subject have been referred to the Sanitary Committee, and the committee desire the views of the Board upon the subject.....

"Any suggestions the Board may be pleased to make will be appreciated.

Respectfully submitted,

WILLIAM O. SMITH, *Chairman Sanitary Committee*

The official report of the Honolulu Board of Health for 1892 shows that resistance to vaccination is spreading in many districts in these islands, and at the same time there is observed a sensible diminution in the number of lepers. In New Zealand, prosecutions for non-vaccination have for some time been abandoned. In the South African Colonies of Natal and Cape Colony the vaccination laws are enforced only during outbreaks of small-pox, and vaccination is everywhere regarded with mistrust. In the Transvaal and Orange Free State vaccination is entirely optional. In England there are about one hundred towns and poor law unions where the vaccination laws are a dead letter. In several of the Swiss cantons compulsory vaccination has been tried and abolished, and in no canton is there any penalty for non-vaccination. An attempt was made to pass a federal vaccination law in 1881, and was defeated in a Referendum by 253,968 votes against 67,820. In the Australasian Colony of Tasmania the compulsory law has been suspended by reason of its deleterious effects on the health of the people. In the Colonies of New South Wales. and Queensland, Australia, the people have successfully resisted every attempt to impose the hotly-disputed Jennerian dogma upon them. Dr. Manning, the medical adviser to the Government of New South Wales, reports that in 1891 vaccination was only partially carried out in thirteen Country districts. In ninety-two districts, no vaccinations were reported. The extent of the mischief already experienced will never be known, but sufficient is already admitted to arrest the attention of all who are seriously concerned for the public health and for the well-being of the community. Is it not, therefore, the duty of every medical practitioner to personally inquire into the matter for himself; and no longer to shelter himself behind the orthodox belief in the benign character of vaccination? For nearly a century Jenner's prescription has been tried and found wanting. Each of the reports of the Royal Commission on Vaccination already published establishes the failure, mischievous effects, and injustice of the compulsory infliction of an artificial disease upon healthy people, while some of the most distinguished names in the profession have testified to its being the certain vehicle for the dissemination of leprosy. These names include Sir Erasmus Wilson (sometimes called the father of dermatologists), Dr. John D. Hillis, Dr. Liveing, Sir Ranald Martin, Professor W. T. Gairdner, Dr. Tilbury Fox, Dr. Gavin Milroy; Dr. R. Hall Bakewell, formerly Physician to the Leper Asylum, Trinidad; Dr. A. S. Black, of Trinidad; Dr. Edward Arning; Dr. Walter M. Gibson, late President of the Honolulu Board of Health; Professor H. G. Piffard, New York; Dr. A. M. Brown, London; Dr. Frances Hoggan, Dr. Blanc, Professor of Dermatology, University of New Orleans; Dr. Bechtinger, of Rio; Professor Montgomery, of California; Dr. Sidney Bourne Swift, late Medical Director, Leper Settlement, Molokai, Hawaii; Dr. P. Hellat, St. Petersburg; Professeur Henri Leloir, Lille; Dr. Mouritz; Surgeon Brunt; Dr. John Freeland, Government Medical Officer, Antigua; Dr. S. P. Impey, Superintendent, Leper Asylum, Robben Island, Cape Colony; and many others.

On the subject of leprosy there are no higher authorities; therefore, considering that the evidence adduced in the following pages is founded upon an accumulation of facts and the testimony of eminent dermatologists, it is hardly open to doubt the intimate relation between the spread of leprosy and the increase of vaccination. May I not, then, urge that a concerted effort—by petitioning Parliaments, Legislative Councils, and other governing bodies, and by the powerful aid of the press—should be made to abolish the compulsory infliction of a disease fraught with such disastrous and far-reaching consequences to the human family? Until vaccination is disestablished and discontinued, and sanitary amelioration substituted for the inoculative experiments, drastic drug medication, and nerve stretching, practised in various leper asylums, I am convinced that this dreaded disease will march onward with accelerated destructive force, and its ultimate extirpation will be rendered well nigh impossible.

No one can be more conscious of the shortcomings of this treatise than the author; but if the painful facts herein disclosed should induce some able and independent pathologist to continue these researches in the interest of the public and regardless of consequences, the author will feel that his efforts have not been altogether fruitless.

REDE HALL, BURSTOW, BY HORLEY, SURREY, *January 2<sup>nd</sup>, 1893*

## CHAPTER 1: THE INCREASE IN LEPROSY

THE awakening of public interest in the leprosy question is due to the accumulation of evidence from nearly all parts of the world, showing that this fearful scourge, for reasons which are now being investigated, has greatly increased, and is still increasing.

At a dinner given at the Hotel Metropole, January, 1890, in aid of the National Leprosy Fund, at which the Prince of Wales presided, Sir Andrew Clark said that, "after making due allowances for the scare and disturbance which had been occasioned, there remained the obvious and indisputable fact that leprosy was a real question. He could produce overwhelming testimony of this fact, and the evidence was conclusive not only that leprosy did exist in larger measure in recent years, but that new germ centres were springing up in various quarters, and the old centres were widening. Before England and the civilised world there was looming a condition of affairs which might by growth threaten civilisation"

Sir Morell Mackenzie, in an article entitled "The Dreadful Revival of Leprosy," which appeared in the *Nineteenth Century* for December, 1889, after referring to, its diffusion in Europe and America, says :—" In almost every other quarter of the globe leprosy is rife at present, and wherever it exists it seems to be slowly but surely extending its ravages. It is impossible to estimate even approximately the total number of lepers now dying by inches throughout the world, but it is certain they must be counted by millions. It cannot be comforting to the pride of England — 'the august Mother of Nations' — to reflect that a very large portion of these wretched sufferers is to be found amongst her own subjects."

Dr. A. M. Brown, in his comments on "Leprosy in its Contagio-Syphilitic and Vaccinal Aspects," says, page 6 :—"From all that we can learn, leprosy is now alarmingly on the increase, particularly in some of our Colonial dependencies, and the fact has been causing much anxiety in later years."

The actual number of lepers throughout the world is far more than is stated in official statistics; for all authorities agree that there are cases, in some countries very numerous, which have never been reported, "the patient and his friends" (in the words of Dr. Charles W. Allen) "knowing with what horror the public regards the disease, naturally shunning publicity, and the physician humanely guarding his secret." From personal inquiries in many countries, particularly in Ceylon, Hawaii, South Africa, British Guiana, Venezuela, and the West Indies, I can fully confirm Dr. Allen's conclusion. In Hawaii leper-hunting is a dangerous business, as many of these unfortunate beings consider death preferable to the best managed lazaretto, where, besides loss of freedom and the companionship of fond relatives, they are obliged to dwell amidst the most repulsive and saddening surroundings. While on a visit to the General Hospital, Honolulu, my attention was called to a police officer, Kealioha Mani, who was lying severely, and probably fatally, wounded by a leper whom he was endeavouring to arrest. A short time ago a party of lepers armed themselves with five new Winchester rifles, and fired upon the police sent in pursuit. The love of freedom burns as brightly in these afflicted people as in their more fortunate countrymen.

In an article on leprosy in Hawaii, in the *Occidental Medical Times*, April, 1889, Dr. F. B. Sutliff, Sacramento, California, who spent four years as Government Physician at Wailuku, on the island of Maui, observes:—"The work of segregation has at no time been faithfully carried out. A large number of milder cases are not disturbed at all, and a good many others have been permitted to go free because of some influence, political or otherwise, that they may have possessed. . . . It is seldom that a leper desires to go away from his home to an hospital, and the study of his life after he knows himself to be a leper is how to live with his friends and keep out of the way of those whose business it is to know all about him. I never before saw a place where the people can hide so easily. . . . They are quick to take alarm, and a look from the Government Physician, an inquiry concerning their name, is enough to cause them to change their residence at once." Dr. Sutliff says he has every reason to believe that there are at least four lepers not reported for every one that is.\*

\*Dr. L. Roussel, Government Medical Officer, in his report dated 30th October, 1888, Port Mathurin, Mauritius, says, "It is seldom lepers come to the Dispensary for treatment. Most of them hide themselves in the mountains, and do not like to move about in public."

Dr. H. S. Orme, President of the State Board of Health, California, in his instructive treatise on Leprosy, says, "I have no doubt that the practice of *secreting lepers is general throughout the world*, wherever the disease prevails; and it is not difficult, in an early stage, for lepers to evade the authorities and go about their usual business."

The largest number of lepers segregated in any one year was in 1873, when the numbers received at the leper settlement, Molokai, according to the official reports, was 487, for several years previous to which arm-to-arm vaccination has been prosecuted with great and unparalleled energy. The destructive results of this misguided policy are everywhere manifest for those who are not too prejudiced to see what is plainly before them.

## RUSSIA.

Leprosy is reported to be increasing in Russia with startling rapidity. A St. Petersburg correspondent of the London *Standard*, January 18, 1891, says:—"The Town Council of Riga, aroused by the rapid spread of leprosy in the neighbourhood, has voted a sum of nearly six thousand roubles for the establishment of an asylum and hospital, which it is hoped will be ready to be opened in August. In 1887, Dr. Bergmann discovered thirty-seven cases in the town, and twenty-one in the environs. There are now over one hundred. In and around Dorpat, where the disease has attained alarming proportions, the late Professor Von Wahl strongly urged the necessity of leper colonies, such a system of compulsory isolation being in conformity with the provisions of the existing, but unenforced, law of Livonia."

As to the prevalence of "prokaza," or leprosy, in Russia, Dr. O. Petersen and Professor Munch have collected eight hundred and seventeen cases, which, however, must be considered far below the actual number. The former observer has noted forty-three cases from the records of the St. Petersburg hospitals in the last sixteen years.

Archdeacon Wright in his instructive work, "Leprosy an Imperial Danger," says that leprosy has increased so much of late in the Russian provinces of the Baltic that last year a "Society for Combating Leprosy" was founded at Dorpat, under the presidency of Professor Wahl, but otherwise composed entirely of lay members. Dr. Hellat, of Dorpat, travelled through the district, and showed that the reports made to the Government were very imperfect. In Livonia, where official statistics reported 108 cases, he found 276. In Courland he discovered 76 cases, and in Esthonia, 26. From other sources I hear that in the neighbourhood of Dorpat the lepers number as many as 17 per 100, and another report says that in certain districts 10 per cent of the population are affected. From more recent

reports (May, 1892) I learn that the Town Council of Riga, alarmed by the ever-increasing proportions attained by the fearful malady, have just erected a leper hospital, at a cost of 60,000 roubles, which already contains 98 authenticated cases. The British Consul at Riga, in his report for 1891, says:—" It is difficult to discover the victims of this dire malady, as their relations and friends hide them from the sanitary inspectors."

In a communication from Dr. P. Hellat to Dr. P. S. Abraham on "Leprosy in the Baltic Provinces," dated 10th October, 1891, St. Petersburg, Mochovaia, 44, the writer says :—" My observations, continued for three consecutive years, gave the astonishing result that leprosy was very widely spread in the Baltic provinces; certainly considerably more than we formerly thought ourselves justified in believing. The number of lepers in certain districts is as much as 2 per cent, of the population. Furthermore, the investigation showed that the disease was steadily on the increase."—*Journal of the Leprosy Investigation Committee, No. 4, December, 1891, pg. 7.*

#### BOKHARA.

The London *Daily Chronicle* of October 29th, 1891, contains the following (per Reuter's telegram):--

"St. Petersburg, October 27th.—The Emir of Bokhara has had several consultations of late with Russian medical men concerning the prevalence of leprosy in his dominions, and especially in the north-eastern quarter of the town of Bokhara, called Gonzari Pissiane, which spot may indeed be considered as the hotbed of leprosy in Central Asia. The lepers are allowed to lead an independent life in this quarter; they are allowed to contract marriages, and no supervision, whether medical or otherwise, is exercised over them. It has resulted from the advice tendered him at these consultations that the Emir has decided upon the foundation of a special hospital for the lepers, at which they will be treated by specialists in their disease."

#### NORWAY.

The present writer has been under the impression that leprosy had diminished in Norway, the diminution being generally admitted to be due to the segregation of lepers in the hospitals at Troudhjem, Molde, and Bergen; but Dr. Vandyke Carter, who has closely investigated the subject, considers that :—" So far from leprosy in Norway showing a natural tendency to subside, there is ample evidence of a present activity equal to that displayed by the disease twenty-five years ago."—*British Medical Journal, Nov. 28th, 1885, p. 1048.*

#### ICELAND.

The Rev. W. T. M'Cornick, in a lecture delivered at Brighton, says:—" Before leaving, I was enabled to gain some details respecting leprosy, which is of a bad kind, and indigenous to the country, from Mr. Patterson, the British Consul, to whom Archdeacon Wright had written for information when publishing his book on this disease, and also Dr. Scheving. I learned here that in the year 1800 there were 150 cases out of a population of 50,000, but that now, out of a population of 72,000, the numbers had decreased to 25. I must state, however, that on further inquiries from an older and more experienced doctor near Laugardalir (Gudmunson, I think, was the name) I was told that the disease was increasing, and that one in every thousand was a sufferer from this hideous complaint. There are no hospitals for leprosy in Iceland, though Dr. Henderson, who travelled through the island in 1814, states that there were four then in existence.—*Journal of the Leprosy Investigation Committee, No. 4, December, 1891, pp. 69, 70.*

#### THE WEST INDIES.

During my visits to the Virgin Islands, the Leeward and Windward Islands, and British Guiana, 1888-89, I had opportunity of conversing with intelligent residents, including governors, medical practitioners, superintendents of leper hospitals, magistrates, prison chaplains, editors of newspapers; and the general opinion was that leprosy was largely on the increase. In some islands, such as Jamaica, St. Kitts, and Trinidad, there are leper communities, which are gradually increasing; and appeals are frequently made in the Colonial Press for their segregation in hospitals.

In a dispatch to the Colonial Secretary, Dr. R. Hall Bakewell, Vaccinator-General, Trinidad, said :—" The very great increase of leprosy in this island, particularly among persons in easy circumstances, is the subject of general remark, and although we have no statistical evidence of the fact, yet it seems admitted on all hands."—*Page 7, Compendium of "Extracts from Report and Returns" in the "Royal Gazette," Trinidad, March 1st, 1871.*

On the 22nd January, 1889, I visited the lazaretto at Barbados, a crowded institution. A new ward was then in course of construction, to accommodate 32 more patients; but the applications from the single parish of St. Michael were greater than the extra beds to be provided. I may mention that the island of Barbados comprises thirteen parishes, with a total population of about 180,000 of which St. Michael's contains about a sixth; and it is estimated that 150 to 200 more beds ought to be provided under the present system of voluntary segregation. If the segregation, which includes only the leprosy poor and pauper class, were compulsory, as some now demand, the alarming spread of the disease, which is endemic in all the islands, would be yet more fully exhibited.

The *Official Gazette*, Barbados, May 5th, 1890, p. 524, says :—"With a daily average of 104 there have been 16 admissions, 3 discharges, and 4 deaths. The Poor Law Inspector, Mr. C. Hutson, says:—"Considering the overcrowding of the wards, it is, I think, wonderful that we keep so clean."

The census returns from Barbados show that while the population during the ten years, 1871 - 81, had only augmented 6 per cent., the

lepers had multiplied 25 per cent.

According to the Surgeon - General's report of hospitals in Trinidad for 1880, No. 41, p. 38, the number of patients in the Leper Asylum on June 30, 1880, was 124.

The report for 1888, *Trinidad Royal Gazette*, p. 1116, says :—" The admissions have been limited to the amount of accommodation, and there were fourteen lepers at the end of the year in the Colonial hospitals, awaiting vacancies for admission to the Asylum."

The Asylum (at Mucurapo, Port of Spain, Trinidad), which I visited in February, 1889, contained at that time 180 patients (under the medical superintendence of Dr. Bevan Rake), who are admirably cared for by the French Dominican Sisters. Every bed is occupied. In his report to the Surgeon-General for 1887, Dr. Rake says:—" The new infirmary at the Asylum was opened in August last, and was quickly filled, 19 patients being admitted on the 19th, and nine more on the 25th. Since then it has been constantly full."

I was informed by the lady superintendent that a new ward was, to be built at once, to contain 30 additional beds. There were then, she said, fourteen lepers in the Colonial (Port of Spain) Hospital awaiting vacancies for admission to the asylum.

In the last report on leprosy in Trinidad, dated March 1st, 1891, by Dr. W. V. M. Koch, acting Medical Superintendent, it is stated (p. 65) that the new infirmary ward, which was finished at the end of 1889, and occupied early in 1890, has been full all the year round. There was a rush of patients to fill it.

The *Trinidad Leprosy Report* for 1890 (p. 31) says that during the year a new ward containing 30 beds has been opened. The asylum contains 210 inmates, "every bed being occupied."

Dr. Bevan Rake says :—" There is, I fear, little doubt that the disease is increasing in Trinidad as in other tropical countries."—*Papers on Leprosy, Trinidad, p. 34.*

In an article entitled the "Dreadful Revival of Leprosy," in the *San Fernando Gazette*, Isle of Trinidad, 22nd February, 1890, the writer says :—" It may not be generally known that as far back as 1805 there were only three lepers in Trinidad; eight years later there were 73 out of a population of 32,000. Twelve years later, when an attempt was made to segregate them upon a small adjacent island, it was found that these afflicted persons had increased so rapidly that the scheme had to be abandoned. In 1878 there were 860 out of a population of 120,000, and later statistics show that the number of lepers was increasing four times as rapidly as the population." The writer arraigns the authorities for their supineness, and urgently calls upon them to take the necessary steps to arrest the progress of this fearful disease.

In a leading article in the *St. Christopher Gazette* (of St. Kitts), the 17th May, 1889, entitled, "The most pressing question in the Colony," the writer quotes Dr. Boon's last quarterly report, which (he says) "clearly and forcibly showed the Government the enormous increase in our leper population during the last six years." Dr. Boon, who held the position of Acting Government Analyser of Vital Statistics, says :—" There is one subject to which I would specially call the attention of the Government, and that is the necessity of legislation with regard to lepers. I am satisfied that the disease is increasing rapidly in this island (St. Kitts)."

In the *Lazaretto*, No. 11, a paper published in the West Indies, the editor asserts that a careful census carried out by medical officers would demonstrate that St. Kitts and Nevis contain more lepers per thousand of the population than any other British possession. He also considers that the disease has increased in Antigua, and there are no fewer than 300 lepers in the Leeward Islands. The *Lazaretto*, No. 21, for April 20th, 1891, estimates the number of lepers in the two islands of St. Kitts and Nevis at 200. In 1871 Dr. Munro discovered, by a personal census, that there were 72 lepers at St. Kitts, a number which has now increased to 135, or at the rate of 90 per cent. in twenty years. To accommodate the growing community of lepers, a large lazaretto has recently been built at Sandy Point, ten miles from Basse Terre, St. Kitts, which already contains eighty inmates. The *British Medical Journal* for June 20th, 1891, says that a petition was lately sent to the Governor, Sir W. F. Haynes-Smith, with the request that it might be sent to the Queen. Amongst other things it states that leprosy is most prevalent in these islands, and that the number of persons afflicted with it is rapidly increasing.

The London *Daily Graphic* for August 15th, 1891, publishes the following:—" Sir Morell Mackenzie writes—' I beg to enclose a copy of a letter recently received by Dr. Munro, formerly medical officer of St. Kitts, West Indies, which shows conclusively that leprosy is extending in that colony.'

"The letter from Dr. Boon, referred to by Sir Morell, runs as follows :—"In your time I believe there were about fifty lepers in St. Kitts; at present there are 120 known lepers, and I think there are a good many more that are kept hidden from the medical men. I am at present getting as complete a list as possible of the lepers here. One thing is very noticeable in Nevis, namely, the way in which the leprosy spreads in each neighbourhood from single cases. It is not easily traced in St. Kitts, as the people there do not own land like the Nevis people, and are consequently more nomadic. One thing has struck me very much, and that is the number of shop-keepers that have contracted the disease.'

"We have also received a letter from Dr. Boon, who says :—"The enclosed photograph of mendicant lepers, subscribed for by a few gentlemen of this island for the purpose of forwarding to you for publication in the *Daily Graphic*, will give a slight idea of the risks by contagion to which the population of this colony is daily subjected. Leprosy has attacked people of all conditions in the West Indies. A few years ago a newly-appointed inspector of police enforced the local 'Vagrant Act,' and prevented the squads of mendicant

lepers from perambulating the town, begging from house to house, and importuning people in the streets. Through the action of the then President of the Island, the inspector was forbidden by the Governor to interfere in any way with these lepers. The fact that a member of the former gentleman's family was afflicted with this disease may have had something to do with his action in the matter. We count among our lepers (other than mendicants) bakers, butchers, salesmen in groceries and provision shops, fishermen, printers, editors, circulating - library keepers, shopkeepers, planters, agricultural labourers, and carpenters. In a lodging-house kept by a leper, members of the Bar lodged when on circuit, and slept on the same bed used by the leper when he had no lodgers. Another leper kept a creche, and tended about twenty infants at a time in his room for over ten years."

In the report of the Blue Book of St. Vincent, British West Indies, 1890, the Acting Administrator observes:—"It is greatly feared that leprosy, which has already proved so great a scourge to some of our colonial possessions, will become a serious trouble in St. Vincent.

Our administrator of the islands, Mr. Irwin C. Maling, reports to the Colonial Office that the disease, though perhaps slowly, is surely on the increase; and though the average of patients treated at the Leper Asylum is only 15, there are many more at large. No law exists to compel those afflicted with the disease to go to the asylum and receive proper medical attention, but the subject is one which will receive the early attention of the Local Government."

On June 2nd, 1890, Mr. Gourley, M.P., called the attention of the Under-Secretary of State for the Colonies to the considerable population of lepers in the West Indies, which, he said, was daily increasing. Sir W. F. Haynes Smith, of the Leeward Islands, who informed me in 1889 that leprosy was seriously on the increase in the West Indies, issued an address to the Federal Council in April, 1891, in which he quotes the opinion of the medical profession that the disease has greatly increased, and that the only satisfactory explanation of the spread of the disease is that under certain conditions it is communicable and contagious. Sir William Robinson, Governor of Trinidad, writing to the Secretary of State from Government House, 9th May, 1889, says :—" After fifteen years' residence in the West Indies, I can fully corroborate Dr. Rake's statement that leprosy is on the increase, and I am not surprised at it."—*Papers on Leprosy, Trinidad, p. 35.*

In the report of the superintending medical officer of Jamaica, dated July, 1891, it is stated that 420 cases of leprosy in the island are known to the district medical officers, but it is conjectured that a good many living in unfrequented districts are not reported, and that some cases in families of the better classes are not to be found in these returns. The actual number is estimated at 450, or one in 1378 of the present population of the island, reckoned at 620,000. This is a decidedly low estimate. A new ward, capable of accommodating forty beds, has just been made ready for the reception of these unfortunate patients.

A communication from Dr. N. Lacary, physician to the lepers in the French Antilles, dated Basse-Terre, Guadeloupe, January 16th, 1892, and sent by request of the chief of the Sanitary Department at Guadeloupe, in reply to an inquiry for the statistics in respect to leprosy, states that it is impossible to report with accuracy the number of persons known to be more or less subject to leprosy throughout the various districts. The island of La Disirade, in which the Lazar-house is situated, may afford some exact figures, and contains one hundred diseased (leprosy) persons from Guadeloupe and its dependencies, and from Martinique. The lepers frequently secrete themselves, and it is impossible to give the exact figures of those who are at large. It is recognised throughout the islands that leprosy is on the increase.

#### JAPAN.

As my communications to the Authorities in Japan requesting information remain unanswered, I have but few details to report. Leprosy has existed from time Immemorial in this country, and there is an old established leper settlement at the hot springs at Kusatsu, to the north of Tokio. Leprosy is reported to be increasing considerably, and according to a communication in the *Liverpool Mercury*, September 22nd, 1891, three leper hospital asylums have been established in Tokio during the past ten years. One of these hospitals, treated in 6 years 4249 cases, of which 3852 were those of Japanese patients. The *Pioneer* (Allahabad) of September 9th, 1891, reports that leprosy has spread in the Japanese villages to an alarming extent during the past few years. In one village near Toimachi, in the Gifu Ken province, every inhabitant is a leper. The Japanese Government is taking steps to look after their afflicted people.

Mr Hamilton Cartwright, in *The Lancet* for May 25th, 1889, states that vaccination was made compulsory in the seventh year of Meiji (1874). It will be noted therefore that the rapid diffusion of leprosy took place shortly after the introduction of the compulsory law, and has kept pace with the progress of vaccination in this community. Dr. Tamanoto, of the Imperial Japanese Navy, says that when leprosy occurs in a family it is the custom to conceal it.

The Rev. Father Vigroux, Missionary Apostolic, in an article in the *Catholic Review*, which also appears in the *Tablet*, May 14th, 1892, says that 44 patients have already been admitted to the Leper Hospital at Gotemba, Japan, founded by the late Father Testevuide. There is accommodation for as many as eighty.

#### THE GRECIAN ARCHIPELAGO, TURKEY, AND SYRIA.

In the Island of Samos, with a population of 42,000, there are 43 registered lepers, and many others unregistered; to segregate whom the Prince of Samos has built an asylum. In Constantinople Dr. Dujardin Beaumetz estimates that there are three thousand, some of them at large, and others in the hospitals.

In Syria lepers abound, and the most repulsive examples I ever saw were in the lazaretto at Damascus, where the supervision and accommodation was of the most wretched description. For their comforts they depended on the alms given by casual visitors. In Palestine I noticed many lepers, in the most hideous state of deformity, begging. This was in 1884. The Constantinople correspondent of the *Times* writes (July 31st, 1889):—" Dr. Zambaco has made a special study of leprosy, and purposes to present to the congress 'the result of his assiduous labours on the subject. Like some others, Dr. Zambaco has come to the conviction that leprosy is non-contagious. He offers practical arguments and proofs in support of his opinion. There are in Constantinople alone upwards of 250 lepers, all of whom Dr. Zambaco has personally attended. Of these, 25 individuals only are isolated in a special locality at Scutari—the remainder are to be seen in the streets, and in contact, without any restraint, with the rest of the population. In the Islands of the Archipelago there are at Crete 8000 lepers; and at Rhodes, Cyprus, Mytilene, Tenedos, and other smaller islands, they are also numerous, and excepting in the larger ones, free in their movements. Dr. Zambaco has prepared to lay before the congress, and for publication, a most interesting work upon the subject of leprosy in the Levant, containing numerous illustrations, portraits, and biographies of patients living and dead, with accounts of curious cases of cure, non-contagion, and remarkable facts observed by him, which cannot fail to attract attention of scientific men with respect to the disease which has come so prominently before the public."—*Times*, August 6, 1889, p. 10.

#### EGYPT

During my visit to Egypt in February, 1891, endeavoured to ascertain the facts as regards leprosy in that country. I called at several hospitals, and conferred with a number of officials connected with Government, but without obtaining much information. Dr. Selim Zeidan, the medical director of the General Hospital at Luxor, informed me that during the past few months five lepers had presented themselves for admission, but he was obliged to refuse them. This was due not to want of space, but to lack of funds. In a communication to Dr Abraham, dated 4th Nov-1890, and published in the *Journal of the Leprosy Investigation Committee*, Dr Greene, of Cairo, director of the Sanitary Department, Egypt, states that the total number of cases reported is 2058, "but this does not by any means represent the whole of the lepers in Egypt, for many districts, where I have reason to suppose some exist, sent in blank returns."

#### THE UNITED STATES

Dr. Blanc, of New Orleans, Clinical Lecturer Dermatology at the Medical College, and Dermatologist to the New Hospitals, has had opportunities for observation. In a report to Louisiana Board of Health, May, 1889, he refers to 42 known cases of leprosy at New Orleans, twelve cases at La Fourcho, and six cases (these doubtful), at St. Martinsville; and in only a very small number could he discover the causation in heredity.

In the *New York Medical Journal*, July 13th, 1889, Dr. R. W. Taylor states that during the past fifteen years he has almost constantly seen from one to three lepers in the crowded wards of the hospitals on Blackwell's Island, New York. Other authorities give similar reports of the New York hospitals.

Dr. Charles W. Allen, Dermatologist, in his article on "Leprosy" in the *New York Medical Journal*, March 24th, 1888, calculates the number of lepers in the United States at 150. "Unquestionably," says Dr. Prince A. Morrow, "is leprosy gaining ground in this country, and the disease prevails over more than a fourth of the habitable globe."

#### THE SANDWICH ISLANDS

In the Sandwich Islands leprosy is allowed to be the chief of the destructive forces which are gradually depopulating the native race of this beautiful archipelago. Its rapid increase is by far the most urgent and anxious question of the hour, and successive Medical Officers of Health seem powerless to cope with it.

In a leading article on "The Nature of Leprosy" *The Lancet*, July 30th, 1881, p. 186, says :—" The great Importance of the subject of the nature and mode of extension of leprosy is evident from the steady increase in certain countries into which it has been introduced. In the Sandwich Islands, for instance, the disease was unknown forty years ago, and now a tenth part of the inhabitants are lepers. In Honolulu, at one time quite free, there are not less than two hundred and fifty cases; and in the United States the number is steadily increasing."

According to the latest returns handed to me (October, 1890) by Mr. Potter, the Secretary to the Board of Health, Honolulu, 1154 lepers were segregated in Molokai, to which must be added thirty, sent from the Hospital of Suspects at Kalihi to Molokai on the 30th of the same month, while there are probably several hundred secreted by relatives in the various islands. On 31st March, 1888, the number officially reported to be at large in the various islands amounted to 644, but, efforts have been made during the past three years to capture these afflicted creatures and segregate them at Molokai.

The experiment of segregation, coupled as it is with enforced separation of relatives and friends amongst a race who are very gregarious and affectionate, is attended with great difficulties, and found impossible to carry out successfully.

A medical practitioner informed me that well-to-do lepers were not interfered with, and he gave me the names of several at large who occupied prominent positions in the island; and he observed that it was not intended to disturb them, notwithstanding the law which imposes segregation upon all lepers regardless of distinction.

Dr. J. H. Kimiball, of Honolulu, ex-President of the Board of Health, in his official report for 1890, observes:---"Some very bad and

unmistakable cases are in hiding in the fastnesses of the mountains or high up in the valleys, fed and secreted by their friends, while some mild cases change their place of residence so often as to baffle the efforts of the officers of the law for their arrest."

Dr. Edward Arning reported that he had visited the remotest gulches and corners of the islands, where few white men penetrate, and had found lepers at large, including some bad cases. He suggests that it may be just-as well to leave these poor wretched creatures where they are, as they are more out of the way there than at Kakuako or Kaluapapa. Dr. John S. M'Grew, in a communication to General James de Comby, the United States Resident Minister, says :—" From political and other influences with officials of the Government, many lepers are permitted (in Hawaii) to go at large without being questioned—really dangerous cases of leprosy."

Dr. White, surgeon to the United States Navy, who visited the islands in 1882, in a report to his Government estimates the concealed cases at 3 per cent. of the population.

Mr. Dayton, the President of the Board of Health, Honolulu (an old resident in the island, who has had a wide experience in the service of the public health), was kind enough to furnish me with facts relating to the introduction, establishment, and increase of leprosy throughout Hawaii, and the steps taken to deal with it by isolation, medical treatment, and hygiene, and also with copies of official reports published by the Board of Health.

According to the same writer on the subject, leprosy was discovered in the island in 1840, but Mr. D. Meyer, Agent for the Honolulu Board of Health, in the appendix to the report presented to the Legislative Assembly of Honolulu in 1886, says it was in 1859 or 1860 that he saw the first case of the disease. That 1840 was the date of its introduction is the opinion of Dr. W. B. Emerson, ex-President of the Board Health, Honolulu, who, in his report published in *Practitioner* of April, 1890, attributes the introduction of the disease to a case reported by the Rev. D.D Baldwin, M.D., to the Minister of the Interior, May 26th, 1864. In 1863 Dr. Baldwin received reports from the deacons of his church at Lahaina with the names of 60 people who were believed to be affected with this disease. In a very few years leprosy increased to an enormous extent, and in 1868 Dr. Hutchinson reported 274 cases.

Dr. Emerson says : —" Leprosy has made fearful strides. It is not necessary to trace with precision the curve that represents the increase of leprosy in these islands from that date to the present time. It is a fearful story, and should teach us that leprosy is undoubtedly communicable."

In his report dated Molokai, March 3 1st, 1888, Mr. Meyer says :—" That the spread of this scourge in these islands has been truly fearful is known to every one here, and that it could not have spread as it has done unless it were communicable, appears to me to admit of no doubt."

To account for the appalling spread of this terrible scourge of humanity within such a short period of time, the evidence points conclusively to one prominent cause--vaccination. There is no evidence to show that leprosy increased in Hawaii until after the introduction and dissemination of the vaccine virus.

Small-pox was introduced from San Francisco in the year 1868. In that year a general vaccination took place, spring lancets being used, which the President of the Board of Health (Mr. David Dayton) informed me were difficult, if not impossible, to disinfect—the operation causing irreparable mischief. The synchronicity of the spread of leprosy with general vaccination is a matter beyond discussion, and this terrible disease soon afterwards obtained such a foothold amongst the Hawaiians that the Government made a first attempt to control it by means of segregation. Another outbreak of small-pox occurred in 1873, and yet another in 1881, both followed by general arm-to-arm vaccination and a rapid and alarming development of leprosy, as may be seen in successive reports of the Board of Health. In 1886 the then President of the Board of Health recorded his conviction, in an official report, to the effect that "to judge by the number of cases in proportion to the population, the disease (leprosy) appears to be more virulent and malignant in the Hawaiian Archipelago than elsewhere on the globe." Leprosy became then, and is now, the most pressing question in these islands.

#### VISIT TO KALIHI

In October, 1890, I started from Honolulu in company with Mr. C. B. Reynolds, the Chief Executive Officer of the Board of Health, to visit Kalihi, a place three miles away, where persons supposed to be tainted with leprosy were incarcerated. It consists of cottages, dispensary and recreation ground, the whole surrounded by a double wall to prevent escape, and is a dreary place of abode. There were 74 patients in the establishment, most of whom exhibited distinct traces of this loathsome malady, including some unusually bad cases. Within this enclosure was a comfortably furnished cottage which Sister Rose Gertrude had recently occupied, but had now vacated. Both the cottage and the dispensary of which this lady had the charge were in a bad state of disorder, and presented a painful contrast to rooms in the care of the Dominican Sisters at Trinidad, and in other Asylums I have visited.

The day after my visit, 31 of the inmates were taken from the Suspect Hospital to Honolulu, and thence from the King's Wharf were forcibly deported to the living grave at Molokai, from whence no traveller returns. The scene was of the most painful description. These afflicted creatures were torn from their friends and relatives, husbands from wives, children from their parents, frantic with uncontrollable grief. Lovers were separated, their lips trembling with emotion, amidst unutterable wailings, wringing of hands in the agony of despair, and heart-breaking experiences which I shall never forget, and which the pen of a Balzac, or Victor Hugo, could only adequately describe. Mr. Reynolds said that at times it seemed more than he could stand and he did all that was possible to mitigate their sufferings. He told me that in ten days time there would be another contingent to undergo the same sorrowful experience. This goes on year after year, and will probably continue until medical men themselves turn their attention from experimental treatment to

preventive measures, and themselves petition Governments to suppress the mistaken system of vaccination, which, it is admitted by the highest authorities, has been a prolific source of this terrible evil.

#### THE MAURITIUS.

In the Mauritius, according to Dr. Seizor, in the *Progres Medical*, 1886, translated by Dr. P. Abraham, and quoted in his work on leprosy, lepers of all races, including Europeans, can be counted by hundreds without difficulty.

#### MADAGASCAR.

The Paris correspondent of the *Daily News* telegraphs, August 12th, 1890, that the French Catholic missions in Madagascar have taken up the lepers there, and have built a lazar-house at Ilafy, near Antananarivo. A second hospital for 200 lepers, who are not so invalided, is at Abohivaraka, where they work in the rice marshes.

#### CANADA

In May, 1885, the lazaretto at Tracadie, New Brunswick, contained 21 lepers, and others were known to be at large.

The *British Medical Journal*, July 18th, 1891, says:—"Owing to the increase of leprosy in British Columbia, the inhabitants recently memorialised the Canadian Government, asking that some steps should be taken to check the progress of the evil. It has accordingly been resolved to found a leper colony in D'Arcy's Island, which lies off the coast. As soon as the arrangements are complete all the lepers in the colony (most of whom are Chinamen) will be transferred to this island. Dr. F. H. Smith, the superintendent of the well-known lazaretto at Tracadie, New Brunswick, has been requested to investigate the alleged increase of leprosy in the towns of the Pacific slope of the Dominion"

#### UNITED STATES OF COLOMBIA.

In the consular report to the Foreign Office, sent by Mr T H Wheeler, the British Consul at Bogota, dated September 26th, 1890, I find various facts confirming previous reports as to the rapid development of this disease Referring to the number of lepers Mr Wheeler says—"A well-known physician of Bogota, the editor of the *Medical Review* of the city, has stated, in an article lately published in that review, that one tenth part of the inhabitants of Santander and Boyaca are lepers. As the population of these two departments is about 1,000,000 this estimate would give 100,000 lepers in that portion of Colombia alone. The medical officer of the principal lazaretto of the country, who has travelled extensively in the departments of Santander and Boyacá, with a special view of studying the question of leprosy, estimates that they contain some 30,000 lepers I believe that both these estimates are very much exaggerated, but the number of lepers must be very great in those two departments, as I am aware from my own observations in travelling through them in 1883. Some months ago the Government of Santander endeavoured to obtain from the various municipal authorities official returns of the number of lepers in the department. Reports were sent in from about half the municipalities, giving notice of 1804 lepers, of whom 388 were living in the lazaretto of the department. But no returns were sent in from the districts known to be most infected with leprosy, and in any case, no satisfactory census upon such a subject can possibly be taken in Colombia. On the merest suspicion that anything of the sort was intended, every leper, who could possibly do so, would at once disappear, and remain hidden until it was all over, for fear of being dragged to a lazaretto and separated from his family and friends, and amongst the population, in general, there is no such dread of the disease as would lead them to give information against any lepers who might be concealed in their neighbourhood.

"Santander and Boyaca are the departments most infected with leprosy; next to these are Cundinamarca, Tolima, and Antioquia, in the order named, but a certain number of cases are to be found in all the other departments. In Cundinamarca, where the number is more easily estimated than in any other part of the country, there are said to be over 4000 cases of leprosy, and in Antioquia from 800 to 1000. In the whole Republic, there cannot, I believe, be less than 20,000 cases, and there are probably many more.

"Leprosy is most common in Colombia amongst the lowest classes, whose homes and mode of life render them liable to exposure to cold and damp, but it is by no means confined to the poorer class, as many people of wealth and position have been attacked by it."

There are two lazarettos in Colombia, one in Agua de Dios, where one consul found 520 lepers in July, 1890, the other at Contratacion, department of Santander, with 390 of these afflicted people. A Bill has recently been laid before Congress asking for an appropriation of £10,000 for the construction of a new lazaretto, but the disease has reached such proportions as to render such a sum quite inadequate to cope with the ravages of the disease. Mr. Wheeler says that it seems inevitable that leprosy should continue to spread more and more throughout the country, unless some great effort is made to arrest its progress. He remarks that in Antioquia not a single case of leprosy was known thirty years ago. Since then, the disease has spread in all directions, and the number in this town is now said to be over 800. I may add that, during the interval, vaccination has been introduced in all the Republics of South America with the usual sinister results.

Mr. Edward H. Hicks, M.R.C.S., practitioner in Bogota, says :—"The local authorities have called attention to the alarming spread of leprosy in the Republic of Colombia, South America. In districts in which the disease was formerly unknown it has appeared to spread with great rapidity. As to articles of diet, the greater number of cases occur where fish cannot be obtained in these places."—*British Medical Journal*, Nov. 8th, 1890.

The *New York Herald*, of April 10th, 1892, says:—"Reports about the spread of leprosy in the Republic of Colombia are of the most alarming character, and should receive the very serious consideration of the United States health authorities. Every district in Colombia is said to be more or less infected."

In the last annual report of the Consul-General of the United States of Colombia (1890-1) it is observed that the question of the great increase of leprosy has become a very grave one for the country. Prior to the year 1860, the numbers of the afflicted were comparatively stationary; but since that time the increase has been much more rapid, and the disease has spread to districts in which it was previously unknown, almost the whole of Colombia being now infected. Children are frequently seen in the lazarettos in a leprosy state, and the mortality is exceedingly high.

Dr. Alzevedo Lima, chief medical officer, Hospital, Rio de Janeiro, says :—" Has leprosy increased in Brazil within the last years? It seems that it has, but we have no exact data to guarantee a positive affirmation. However that may be, it is no exaggeration to say that in Rio de Janeiro there are more than 300 lepers disseminated throughout the city"—*Journal of the Leprosy Investigation Committee, December, 1891, p 25*

The last census of Brazil returned the number of lepers at 5000, but Dr. Lutz, a lepra specialist, estimates it at 10,000 and upwards.

#### BRITISH GUIANA.

In January, 1889, I visited Demerara and Essequibo, British Guiana, but owing to the state of my health I was unable to visit the leper asylums at Mahaica and Gorchum. During my sojourn, the newspaper at Berbice (where the leper asylum is located) published a statement to the effect that, for want of accommodation in the asylum, lepers in the worst stages of the malady had been seen in the streets and bye-ways. In the report of the Surgeon-General of British Guiana for 1887, Dr. C. F. Castor says:—" I hear on all hands that leprosy is spreading — not only here, but all over the world—very considerably." And in a communication to the secretary of the Leprosy Committee, dated 21 November, 1891 (*Journal No. 4, p. 36*), Dr. observes:—" No one for a moment doubts that leprosy is spreading' I was able to obtain only one report of a date earlier than 1887, that of the Surgeon-General for 1879, in which Dr Manguet says—" Many children are brought to me in the incipient stages the disease (leprosy)," and added that the disease was spreading.

When going over the Colonial Hospital, Georgetown, British Guiana, Dr Ferguson spoke to me of the serious increase of leprosy in the colony, and said that they were obliged at the general hospital to receive lepers for whom there was no room at the asylum He pointed out to me five lepers in one ward with other patients Dr J L Veendam, a Government medical officer, who had at that time resided sixteen years in the colony, and has medical charge of four sugar estates, assured me that leprosy was much more widely disseminated in the colony than was generally supposed, and that this was the case amongst all classes of society. Referring to a ball which was to be given that evening to Governor Haynes Smith, he added, 'I know lepers who will mix with the gay throng this evening" Some time ago Dr Veendam medically examined all the labourers on the four estates under his charge, 250 in number, and found about 50 who were more or less tainted with leprosy.

One of the highest authorities, Dr. John D. Hillis, F.R.C.S., for ten years Medical Superintendent of the principal lazaretto in British Guiana, and who has devoted twenty years to the consideration of this important subject, says :—"To the most casual observer (in British Guiana) the increase must be apparent, irrespective of the fact that the asylums cannot be enlarged fast enough to contain the cases that are compelled, by want or the rapid advance of the fell disease, to seek admission and relief within their walls, whilst hundreds of others, it is well known, do not enter but remain outside to mingle with others or contaminate their surroundings. Not only is leprosy on the increase in the colony, but the increase has been greatest in the last decade. . . . Wherever the writer goes, he meets with lepers walking about among, and, mixing with, the people, may be in the church, or in shops. As the signs and symptoms of the disease become better known, they will perhaps be more easily recognised by the uninitiated."

In 1858, the lepers were located at the present Institution at the mouth of the Mahaica Creek, which not very long ago was enlarged to meet the ever increasing demand on its accommodation.

On 31st. December, 1859, there were only 105 inmates at the Asylum. In 1869, they had increased to 300, and the place could hold no more. Increased space was provided, and in 1889 we find, from the official reports, over 500 of these unfortunate inmates. Around this leper asylum, outside its boundaries, there are large numbers of lepers not included in these returns. Dr. Hillis states that, while the increase of the population in twenty years, between 1858 and 1878, was only 45 per cent., the increase of lepers was 160 per cent.

Dr. George Thin, in his work on "Leprosy, p. (1891), says :—" It is estimated that in 1890 the number of lepers in British Guiana was 1000, or one in 250 of the population." My own inquiries led to suppose the number was larger, as from all that could gather there were about 500 lepers in the asylums at Mahaica and Gorchum, and I saw several at the General Hospital, Georgetown, for whom there was no room in the asylum. These were by old medical residents to be far less than the total leper population.

#### DUTCH GUIANA

Leprosy is making rapid progress in Dutch Guiana, and a devoted priest, who has been attending to the temporal and spiritual wants of the people, was reported in October, 1890, to be dying of the disease. Bishop Walfingh, of Surinam, has recently visited Holland, with the object of raising funds to build a suitable hospital, and has met with a successful response to his benevolent appeal.

#### VENEZUELA.

In the early part of 1889 I visited Venezuela, pursuing my inquiries as to leprosy in Carracas, Bolivar, and other places. From all the information I could obtain I learned that its spread, though less conspicuous than in the adjoining territory of British Guiana, is making constant advance. From a report made by the United States Consul at Maracaibo, Mr. F. H. Plumacher, the American Government in 1890, I find that leprosy began to be felt as early as 1828, and in 1841 the National Government, under the direction of President Bolivar, purchased an island four miles east of Maracaibo, and erected an hospital and dwelling-houses for the accommodation of these afflicted people. In 1876 the cases had assumed alarming numbers, so as to seriously to endanger the sanitary future of the State. In the year 1890 there were 125 patients in the lazaretto, and many more at large in the city and environs, and all attempt to segregate them is thwarted by the efforts made by friends for their concealment. This increase here, as in other countries, is coincident with the extension of the practice of vaccination.

#### AUSTRALASIA.

Leprosy is not unknown in the Australasian colonies, and is especially noticed in a report dated 7th May, 1890, and ordered to be printed by the Legislative Assembly of New South Wales. This report was handed to me by the President of the Board of Health. From it I find that, at the close of 1889, there were 30 cases of leprosy under official cognizance.

The *Lancet*, of August 1st, 1891, says that the number of lepers has more than doubled during the past ten years.

Referring to the report for 1891 (which has not yet reached me) the *Sydney Mail* of February 20th, 1892, under the head of "Leprosy," observes :—" Those of the public who are the least disposed to alarmist views will probably regard as highly serious the statements now made public regarding leprosy in New South Wales. The statements give a great shock to the feeling of confidence based on the supposed comparative immunity of persons of European races from the attacks of this terrible disease. Of course, it has always been known that where the conditions are specially favourable to contagion, the supposed racial protection ceases to be a safeguard. But it is, nevertheless, startling to learn that of ten persons found by the Board of Health during the year to be suffering from leprosy five were natives of this colony of European descent, while four were Chinese, and one a Kanaka. At the beginning of the year there were 13 lepers under detention at the lazaretto, while those so detained at the end of the year numbered 21, of whom eight were natives of New South Wales of European descent, 11 Chinese, one Javanese, and one Kanaka. During the time the lazaret has been available there have been 31 patients, of whom one could not be detained, and nine have died."

Our colonists are becoming alarmed at the invasion of leprosy in New Zealand. The *New Zealand Herald*, Auckland, June 14th, 1890, in an article headed "Leprosy Among the Natives," says :—" A gentleman at Hokianga writes to a friend here—'My brother was north a few days ago on a vaccination tour at Herekino, and he reports an outbreak of leprosy at Herekino amongst the natives, several of whom died from it. Others are in a fearful state. Their fingers and toes rot off, their nose, teeth, and jaws are corroding, and their bodies are rotten. He has reported the matter to the Government. Strange to say, it got this length before we heard of it. The natives are scared, and avoid each other. Timoti Puhipi recommends the lepers being deported to the Three Kings' Island.'"

A petition by Dr. Bakewell of Auckland, New Zealand, formerly superintendent of the Leper Asylum, Trinidad, for an inquiry into leprosy in New Zealand, has been presented to the Public Petitions Committee, and referred to the Government for consideration.

Dr. George Thin states that a school in New South Wales has been closed by order of the Minister of Public Instruction, in consequence of reports that some children in it are developing symptoms of leprosy.—*Leprosy*, p. 247.

#### OCEANA.

The *Sydney Morning Herald*, of March 27th, 1891, says :—" The spread of leprosy among the Pacific islanders seems to be going on steadily, judging from the following report, which we take from the *Samoa Times* of January 31st—' We hear (says that journal) that leprosy has established itself at Penrhyn Island, and that there are no less than ten fully-developed cases there. The doctor of H.M.S. Cordelia, which has lately been cruising in that quarter of the Pacific, confirms the statement, and is of opinion that the disease has been brought to Penrhyn from the Hawaiian Islands by a number of refugees from the latter place. The same authority also states there is a case of undoubted leprosy at Manaheke Island. These facts strengthen the argument we have used in our columns, as to the urgent desirability of steps being taken to prevent leprosy becoming an established institution in our midst.'"

#### NEW CALEDONIA

In the French penal colony of New Caledonia, leprosy has made its way with fearful rapidity. Previous to 1853 leprosy was unknown in the colony, but recently two leper asylums have been established. In a report on leprosy, presented to the Parliament of Victoria by the Secretary to the Board of Health, Sydney, it is stated that the Board of Health has received a communication from His Excellency the Governor of New Caledonia, M. Pardon, to the effect that the disease is extremely prevalent in that Colony, where about 500 of the native population are affected, and seven persons of European parentage, six convicts, and one child, all French, have been officially reported as suffering from the malady.

The *Journal of the American Medical Association*, March 22nd, 1890, says :—" Leprosy is reported to have found its way to New Caledonia, the French penal colony, and already there are hundreds of cases among the natives and convicts."

The *British Medical Journal* of April 25th, 1891, has the following :—" Dr. M. A. Legrand has recently published an account of the

introduction of into the French convict settlement of New Caledonia which is at once interesting and instructive. In 1846, when missionaries first landed in the island, the was entirely unknown there, nor did it exist in 1853, when the French formally annexed it. In October, 1880, M. Vauvray, chief of the Health Department, sent back five negroes from the New Hebrides on the ground that they had lost their fingers and toes from leprosy. He at the same time requested the authorities to prevent the introduction of lepers into the colony. In September, 1883, M. Brassac reported that there were several cases of leprosy in the north part of the island, and suggested the establishment of a lazaretto for their reception. The authorities, however, took no steps, and in 1888, Dr. Forne, chief physician and president of the Committee of Hygiene, presented an elaborate report, in which he stated that the cases of leprosy could then be numbered by hundreds, especially in the north. But the committee adopted the ostrich-like policy familiar to such bodies, and it was not till the following year that, yielding to the force of public opinion, the executive decided to establish two leper houses, one at Pic des Morts, near the Bay of Canala, and the other in the Isle of Goats in the Noumea roads. Forty lepers were confined in the former, and twenty in the latter. In May, 1890, the total number segregated was seventy, and there had already been fifteen deaths. A third lazaretto is about to be established not far from Houailou. Though it was not until 1883 that the first cases of true leprosy among the aborigines of New Caledonia were observed, more or less legendary accounts of earlier appearances of the disease are current among them. Thus a Chinaman, covered with hideous sores, is said to have arrived in 1866 or 1867, and to have lived for several years with a native tribe, several of whom afterwards developed disease of the same nature Whatever may be the true history of the importation of leprosy, there can be little doubt that it was imported, and at the present time, according to M Legrand, it exists everywhere in New Caledonia, and has acquired a foothold in the great majority of the native tribes. Europeans have also suffered. The course of the disease appears to be more rapid than elsewhere, a fact which M. Legrand attributes to the habit which the natives have of scarifying the maculae and the tubercules, often to a considerable depth, with pieces of glass, and to their ruthless use of caustics. M. Legrand considers that these barbarous therapeutics, together with tattooing and burning with moxas, which seems to be their fashion of expressing affliction at the loss of relatives, have much to do with the spread of the disease. He explains the ravages made by the disease in virgin soil like New Caledonia by the fact that the people, not being aware ~f the danger, take no precautions against it."—*Archives de Médecine Navale, February, 1891*

*In all the French colonies vaccination has been prosecuted with rigour, and has been followed by the increase of leprosy, just as in England' the increase of infantile syphilis is due to arm-to-arm vaccination, as shown by the Minutes of Evidence with the third report of the Royal Commission on Vaccintion. The barbarous therapeutics, the tattooing and burning, have existed among the natives from time immemorial. Vaccination has been but recently introduced.*

## FRANCE.

M. Besnier, a member of the French Academy of Medicine, has reported that leprosy, far from disappearing by degrees, is spreading rapidly. Since the extension of the French colonial possessions, soldiers, sailors, traders, and missionaries, have fallen victims to it in large numbers.—*British Medical Journal, October 22nd, 1887, p 919.*

According to the *London Evening Standard*, October 26th, 1891, Dr. Besnier reports the number of lepers in Paris at 100, there being at the St. Louis Hospital eight persons afflicted with this disease.

## SPAIN.

"Leprosy has been on the increase in different parts of Spain for some years past, and the extension of the disease has at last aroused the attention of the Government. On February 16th the Director - General of Beneficence and Sanitation sent a circular letter to all governors of provinces calling on them to take such steps as may seem necessary under the circumstances."—*British Medical Journal, March 5th, 1892.*

In a communication to the *Lancet*, January 16th, 1892, "On the Origin and Spread of Leprosy in Parcent, Spain," founded upon investigations by Drs. Codina and Zuriaga, Dr. George Thin introduces the following table and comments :—

*"Table Showing the Cases of Leprosy in the Towns referred to in this Report.*

Towns	No of inhabitants	Date of invasion	Cases up to 1887	Males	Females	Total	Remarks
Parcent	150	1850	65	21	7	28	I gathered the data stated in the present table during my visit to the towns in the district of Parecnt. Although I have endeavoured to obtain my information as accurately as possible, I am unable to guarantee its correctness. the towns sometimes hide the truth as to the number of lepers existing; but if there are any, they will consist in showing too small, rather than too great, a number of lepers.
Languart	400	1868	31	20	5	25	
Pego	1200	17--	---	14	6	20	
Orba	160	1873	25	12	6	18	
Pedreguer	720	1809	79	9	3	12	
Murla	120	1870	14	8	2	10	

## LEPROSY AND VACCINATION by WILLIAM TEBB (Complete)

Sagra	100	1848	13	5	3	8
Benidoleig	80	1869	7	4	1	5
Gata	440	1860	6	3	1	4
Jalon	560	1867	8	2	1	3
Denia	650	17--	---	3	1	4
Oudara	325	1862	7	2	1	3
Tounos	80	1860	10	2	1	3
Beniarbeig	130	1871	6	3	--	3
Sanet	90	1884	3	1	1	2
Alcahali	98	1870	6	2	--	2
Jaica	320	--	--	2	1	3
Benichembra	120	1872	3	1	--	1
			285	114	40	154
						---

"There is nothing in the soil, occupation, food, or race to account for any difference in the number of lepers which are to be found in these towns respectively. It also shows that the proportion of lepers to the population of the towns is not connected with the length of time that the disease has lasted, and therefore is not in relation to the opportunities given by heredity, even if it were assumed that heredity was a cause. Parcent, which is the most striking example, shows in twenty-seven years, in a population of 150 inhabitants, 65 cases of leprosy, of whom 28 were living at the end of that period; whilst Pego, with 1200 inhabitants, and where the disease has lasted since last century, had only 20 living lepers. Pedreguer, in which we know there was leprosy in 1809, with a population of 720, had in about forty years 79 lepers, of whom 12 were living at the date of the report whilst Murla, with only 120 inhabitants, had had 14 cases in seventeen years, of whom 10 were living at the date of the report.

"Excluding heredity as an insufficient cause of these cases, and as otherwise being discredited, the difference of the rate of increase of leprosy in these similarly situated villages is best explained by the assumption that the opportunities for contagion have been greater in some cases than in others, even if we did not have the statements which I have collected from two independent sources—namely, from the Mayor of Parcent, referred to by Dr. Zuriaga, and from Dr. Codina's report to the Director-General at Madrid. Another sad fact comes out from a study of this table—namely, that in many of the towns the appearance of the disease is comparatively recent and that in this part of Spain leprosy is spreading. The necessity for a hospital in Parcent seems to have been realised at last, for we find that a commission visited the neighbourhood in June, 1887, for the purpose of finding a site, and were uttered one by the municipal corporation free of cost."

No inquiry appears to have been made, either by Dr. Codina, Dr. Zuriaga, or Dr. Thin, as to vaccination being a possible cause, which, according to a communication to me from Senor U. Montez, the Spanish Consul in London, has been obligatory for many years. This gentleman writes (London, May 26, 1892):—"Apart from previous ordinances on the subject, the law making vaccination obligatory on the whole of Spain is dated the 28th of November, 1855." This mode of propagation, where the contaminating virus enters directly into the blood, is surely more credible than the one suggested by Dr. Thin, of contagion (simple contact), unless Dr. Thin, like other pathologists, interprets the word to include inoculation and vaccination.\*

\* Baron, in his "Life of Jenner," vol i., p. 604, says that Mr. Allen, Secretary to Lord Holland, writing to Jenner from Madrid in 1803, observes:—"There is no country likely to receive more benefits from your labours than Spain; for, on the one hand, the mortality among children from small-pox has always been very great; and, on the other hand, the inoculation for the cow-pox has been received with the same enthusiasm here as in the rest of Europe." . . . The result, however, was the reverse of satisfactory; the writer adding, that "the inoculation of the spurious sort has proved fatal to many children at Seville, who have fallen victims to the small-pox after they had been pronounced secure from that disease."

## THE UNITED KINGDOM.

The following appears in the *British Medical Journal*:—"Dr. T. Colcott Fox, one of the Honorary Secretaries of the Dermatological Society, has been good enough, in reply to an inquiry, to forward for publication the following list of cases of leprosy shown to that Society since its foundation:--

DATE.	EXHIBITOR.	WHERE FROM
July 12th, 1882	Mr. Hutchinson	India
"	Dr. E. B. Baxter	Dutch and Chinese parentage
Oct. 11th	Dr. Crocker	Singapore (shown at International Medical Congress)
Dec. 13th	Dr. Liveing	India

Mar. 14th, 1883	Mr. Hutchinson	?
"	"	?
Oct. 10th	Mr. M. Baker	Antigua
	Dr Sangster	? If English case. Sections of nerves.
Jan. 9th, 1884	Mr. Baker	?
Feb. 13th	Dr. Crocker	?
"	Dr. Stowers	India
Mar. 13th	Dr. Allchin	?
July 11th	Dr. Crocker	?
Jan 9th 1885	"	India
May 1885	Mr Hutchinson	?
July 1885	"	Cape Colony
" "	Dr Crocker	?
Oct 10th 1888	Dr Cavafy	?
Feb 13th 1889	Dr Crocker	?

"Dr Fox adds that he has also seen the following private cases since 1879:---

1. Boy from Demerara. . . .
2. Girl from Demerara. ...
3. Man from Cape Colony.
4. Man from India. . .
5. Lady from Orange Free State.
6. Lady from Honolulu.
7. Lady from Cape Colony.
8. Officer from Bengal.
9. Man from India.

"Dr. Fox adds that he has seen three cases in hospital practice, but all these have also been under the care of other physicians at other hospitals.

"Dr. Larder has now two cases in the Whitechapel Infirmary."—*British Medical Journal, March 30th, 1889.*

#### SOUTH AFRICA.

In consequence of the serious increase of leprosy following the imposition of vaccination in Cape Colony, a Select Committee was appointed by the Legislature in 1883 to take evidence as to the cause of such increase, but, strange to say, no inquiry was made, nor were any interrogatories submitted to the witnesses, as to vaccination being a possible factor in the case. Mr. T. Louw, M.P., was appointed Chairman of the Committee.

Dr. Henry Anderson Ebdon, President of the Medical Board, testified that he had resided many years in India—the Punjaub, the Himalayas, Rajputana, Western India, where leprosy is prevalent, and in other parts. He has been in the Cape, consecutively, close upon 22 years, and during that time had seen a great deal of leprosy. He was sure it was on the increase.

Q.—"As you are inclined to think that the disease is contagious, do you think it dangerous to the health of other people to use food prepared by leper hands?"

"I should be sorry to see a leper cook, and I go further than that. In vaccinating, I think hardly a medical man would take vaccine lymph from the arm of a leper infant. I know it has been our practice for the last twenty years not to do so."

The Rev. Canon James Baker testified that "the increased spreading of the disease in many parts of the colony is now generally admitted. It is spreading among both the white and the coloured races, especially in places near the sea coast."

In the appendix E to this report, is a letter from Dr. Wm. R. Turner, dated Vrendenburgh, 1st Sept., 1883, in which I find the following :—"Leprosy in parts of Saldanha Bay is spreading so rapidly that, if some measures are not at once taken by the Government, all the surrounding districts will probably become infected. I know of more than twenty cases in one place alone, in every stage of the disease, and am sorry to say it is not confined to the coloured portion of the inhabitants."

The conclusion stated in the official report is "that leprosy prevails extensively in this Colony, and is steadily spreading among both white and coloured classes."

In June 11th, 1884, an Act was passed by the Legislative Assembly, Cape of Good Hope, entitled, "The Leprosy Repression Act, 1884," with the following preamble :—"Whereas the disease of leprosy is prevalent in this Colony, and has lately been spreading, and continues to spread, and it is desirable to check the extension of such disease, and, if possible, to exterminate it."

At a public meeting in Cape Town in December, 1890, Sir Gordon Sprigg said that there were between 600 and 700 lepers in Cape Colony.

In a paper read before the Epidemiological Society of London by Dr Phineas S. Abraham, p. 3, I find the following :—" In the South African Reports for 1886, a decided increase of leprosy is stated to have taken place in the districts of Alexandria, Bedford, Clanwilliam, Herschel, Malmesbury, Paarl and Stockenstran; and for 1887 the spread of the disease is reported not only from most of these districts, but also from Wynberg, Stutterheim, and Kokstadt. The majority of the medical officers speak very strongly on the subject. For example, one of them (from Alexandria) writes that 'leprosy is certainly spreading rapidly, and unless some active and efficient measures are soon taken, it will become a matter for the most serious consideration.' - Another (from Bedford)—' I believe it to be considerably on the increase, and should be stringently dealt with.' Another (from Malmesbury)—' With reference to leprosy I cannot but repeat my statements of the last years to the effect that the disease is slowly but surely increasing, each fresh case acting as the nucleus to a more or less extended infection.' Another (from Paarl)—'It is deplorable to see what strides it is making.' And in 1887, 'As for leprosy, although it is making rapid strides, there is no notice taken of it' (*i.e.*, by the authorities). More than one of these district surgeons, indeed, assert or imply that the Boards of Management, and others who have the power to put the Act in force, shirk the duty on the score of expense, and that the Public Health Act is to some extent a dead letter."

In consequence of the continued increase of this disease, another select Committee of Inquiry was appointed in 1889, under the presidency of Chief Justice Sir J. H. de Villiers. In the appendix J to the Report, printed by order of the Legislative Council, pp. xiv. and xv., the Rev. Canon J. Baker, F.L.S., F.S.Sc., says :—" I entertain no doubt that leprosy is spreading in this colony at the present time. Observant and intelligent persons have assured me that they have recently met, in various parts of the colony with more cases than in previous years.

"There are many and great difficulties in getting correct information on the subject. I have known patients to be carefully concealed, and the relations of the affected do not like to be spoken to as to the mode of contraction of the disease. I have given great offence by calling attention to particular cases. I believe the number to be much greater than is known by medical practitioners, or by the Government authorities."

From the minutes of evidence it appears that Dr. H. C. Wright, district surgeon at Wynberg, being under examination, testifies as follows :—

Q. 5 "Will you state roughly the number of cases in your district? "—"About twenty; but it is impossible to state exactly. A great number of cases are concealed. I have not the slightest doubt that there are more cases than have come under my notice. There are, for instance, some cases I suspect to exist, because I am aware that leprosy is in the family, and lately some of these people have disappeared ; they are never seen, and, I believe, are hidden away."

Dr. Simons, District Surgeon of Malmesbury, was asked :—

Q. 75. "Since your appointment as District Surgeon, have you known any increase in the number of persons affected ? "—"Yes; certainly."

Q. 76. "Is the disease principally confined to coloured persons? "—"No; it is not confined to coloured persons. I know of several cases where families of white farmers are affected."

Dr. W. H. Ross, Police Surgeon in Cape Town, was asked :—

Q. 230. "During the time you were Police Surgeon in Cape Town, did you meet with many cases of leprosy?"—"Yes; in going about, I used to see about a dozen a day among the poorer classes."

The Hon. Dr. Atherstone, M.S.C., who has practised in the colony 50 years, chiefly in Graham's Town, where he was District Surgeon for 26 years, and who has always taken a great interest in the subject, said :—

Q. 341. "I am decidedly of opinion that it (leprosy) is spreading."---July 18, 1889.

The following are *Extracts from the Report of the Select Committee on the Spread of Leprosy, President, Sir J. H. de Villiers, July, 1889, p. 8:*—"The result of the inquiry has been, in the first place, to establish the fact that leprosy is on the increase in the colony. Many of the District Surgeons say that, in their particular districts, there is no such increase, and others again are unable to express any opinion upon the question, but in the more populous districts of the colony, such as the Cape and the Paarl, and even in some of the outlying and less populous districts, such as Alexandria and Stockenstran, the District Surgeons report a marked increase in the number of cases. It should be borne in mind that the victims of this loathsome disease naturally endeavour to conceal it from others, as much and as long as possible, and that many more cases are sure to exist than have come under the notice of the medical men, whose answers have been received, or whose evidence has been taken. Your committee estimate the number of lepers in the colony to be upwards of 600."

On page 12 is an extract as follows :—"The committee conclude—(1) 'That leprosy is on the increase in this colony.' (2.) 'That the disease will continue to increase unless effectual measures are adopted to check it, and if possible to stamp it out.'

On the 8th April, 1890, the Governor of Cape Colony and High Commissioner Sir Henry Loch laid the foundation-stone of a new leper hospital at Robben Island, which will provide 200 beds for the unfortunates stricken with a fatal and repulsive disease. A writer in the

*Cape Argus*, May 20th, 1891, who signs himself "Epaminondas," and seems, by the character of his frequent communications, to be much concerned regarding the inadequacy of the measures undertaken to check the ravages of the scourge, concludes his letter thus—"In the cause of humanity; for the suppression of the deadly disease; for the safety of the general bulk of the inhabitants, and, last but not least, the alleviation of the afflicted, it seems to me that it is the bounden duty of the Government to meet the question face to face, and devise some means to cope with this terrible and, if unchecked, disastrous evil now pervading the Colonies, and Transkei particularly."

In the valuable Consular Reports issued by the Government of the United States I find one for June, 1887, from Consul Siler, of Cape Town, which is not without interest and instruction. Mr. Siler says, "Not until 1845 was any attempt made by government to check or -to stamp out the disease. In that year a leper asylum was established at Robben Island, seven miles from Cape Town, and, up to 1884, 744 lepers had been admitted to the institution, and comprised but a very small proportion of the leper population, as the segregation of lepers was not made compulsory. In fact, lepers mingle freely with the other citizens, and their appearance is so common that they attract little attention in the streets. At the Cape Town Fish Market I have seen lepers at work cleaning and curing fish, and the disgusting sight did not seem to deter buyers."

The rapid increase of the disease, particularly among the European population, as described in the recent reports of district surgeons, has aroused the Colonial Government to action, and a second and larger asylum is in process of construction, the present accommodation being -wholly inadequate to provide for all the afflicted applying for admission.

A correspondent writes to the *Cape Argus*, May 21, 1891, and, referring to the alarming increase of leprosy in South Africa, says :—"it is now two - years since the out-cry commenced, and yet, what has the Colony done for the benefit of the wretched people cursed with this insidious disease, and for the protection of their neighbours? Here, in the Transkei, nothing! It is notorious that in every magistracy in the Transkei leprosy is rife and spreading rapidly, and, sad to say, over the lepers themselves there is absolutely no restraint. They frequent the public offices and trading stations unchecked.

By their horrible hospitality, they provide lavish feasts of Kafir beer, invitations to attend the same being scattered broadcast. Fancy drinking Kafir beer, prepared and filtered by leprous hands? And this is done every month in the year!"

Under the head of "The Public Health," the South African Directory for 1891, p. 446, observes that "with a view of checking the spreading of venereal disease and leprosy, which have for some years past been reported to be phenomenally prevalent in various districts of the Colony, Acts were passed in 1884 and 1885 giving the Government powers whereby it was hoped that these disorders would eventually be stamped out." One of these is entitled, "The Leprosy Repression Act," which gives the Colonial Secretary power to forcibly remove and incarcerate any known leper in a leper asylum or hospital. This drastic measure had not then been promulgated or put in force. There are many lepers in good positions in the Colony, of both white and mixed races, whose friends would make any sacrifice rather than have them segregated with their fellow-sufferers, either in Robben Island or elsewhere. Those who advocate the forcible deportation of lepers from their friends (most of whom would willingly keep them from public observation in thinly-settled districts) can know little of the heart-breaking scenes constantly witnessed at the separation of these afflicted persons at Honolulu when about to undergo perpetual banishment to Molokai, Hawaii. Although a terribly repulsive and loathsome disease, leprosy is not communicable by simple contact. The Colonial legislature would have served the cause of the public health more effectually by directing their attention to municipal sanitation, and discouraging the practice of vaccination, which, according to the opinion of district surgeons, and the best informed authorities in South Africa, has been instrumental in largely spreading both syphilis and leprosy. It is hardly possible for a disinterested observer and inquirer to come to any other conclusion.

The Cape Town *Times* of March 5th, 1892, says:

"A correspondent writes to the Orange Free State *Express*, under date February 25: The first batch of these unfortunates (the Theba 'Nchu contingent), twenty in number, were despatched from here on Saturday last, and probably twelve or fifteen more will leave here within a few days. The lepers are all natives, mostly Baralongs. It was hard work for the Landdrost, with the aid of the mounted police, to hunt them up. It would take too much -time to relate all the cunning (in this case excusable) devices resorted to by the families of the lepers to evade the law. It was a heartrending sight to see how mothers and children parted. It must be done, for the sake of the general safety, but it was an awful spectacle to see and hear the cries of distress, especially of the sound relations who remained behind."

Referring later to the same deportation of lepers, the Port Elizabeth *Telegraph*, March 12th, says—"Although the large number of fifty-four lepers have been despatched to Robben Island, it is believed that others have managed to conceal their condition from the authorities." . . . "It is a very remarkable fact that, whilst in the last census the number of lepers were returned (from this district) as four, already fifty-four have been discovered suffering from the loathsome disease of leprosy."

Dr. Alexander Abercromby, author of "Thesis on Tubercular Leprosy," writing to me from Cape Town, April 20th, 1892, says the disease is now "spreading rapidly amongst the white population and better class of people."

#### INDIA.

In the speech delivered at Marlborough House, London, June 17th, 1889, the Prince of Wales stated that one of the chief centres of Leprosy is India, where there are 250,000 lepers, and that our colonies contained unnumbered victims to this loathsome disease. The *British Medical Journal*, September 13th, 1890 (p. 639), reports that "a comparison of statistics regarding lepers during the thirty years

1851-81, shows that their number has been increasing in India at the rate of about 30,000 every ten years. During the last ten years the rate of increase is supposed to have been higher." I have before me communications from staff surgeons, medical officers of health, superintendents of leper hospitals, and medical practitioners, showing the spread of leprosy in various provinces of India, and in other countries. The Rev. G. M'Callum Bullock, of the London Mission, Almora, writing 21st August, 1889, says :—" It is the general opinion of residents, both European and native, that leprosy has increased in Kumaon during the past thirty years, and there are upwards of 1600 lepers in Kumaon alone out of a population of 1 1/8 millions."

Dr. C. T. Peters, in his report on cases of leprosy treated at Belgaum, Presidency of Bombay, dated Bombay, June, 1879, says:—"Judging from Mr. M'Corkhill's figures, there were not less than 22.8 per cent. of the population, in the Belgaum districts alone, afflicted with some form or other of leprosy."

In a paper read before the Calcutta Microscopical Society, December, 1890, Dr. W. J. Simpson said it was certain that leprosy was on the increase, an opinion confirmed in a letter to me, dated August, 2 1st, 1889, by Dr. Chunder Ghose, Medical Superintendent of the Leper Asylum, Calcutta.

The City Coroner of Bombay says that leprosy is vastly increasing in that city. The *Times of India*, February 21st, 1891, estimates the number of lepers at large in Bombay, at 1000. At a meeting of the Municipal Council of Bombay, reported in the *Times of India*, April 12th, 1889, various speakers describe the terrible state of things existing in the city. Mr. Kirkham saw lepers near the public tank dressing their terrible sores, scratching their ulcers against the iron railing of the Elphinstone High School, where the boys sat on coming out of school. Dr. Blaney said, "all over Bombay, in dark corners, in gullies where rats and bandicoots had taken their abode, these lepers were hiding themselves, thrown out by their families, to pine away neglected and forlorn."

At a meeting of the General Committee of the "Homeless Leper Relief Fund," Bombay, held at the Municipal Rooms, the President, Sir Dinshaw M. Petit, said that the hospital (which contains over 200 patients) was overcrowded, and further admissions had to be refused. Having no homes or places of refuge, lepers hang about the bazaars of the large cities in India, forced by their necessities to sell fruit or vegetables, and to expose their maimed bodies to the gaze of the public, in order to obtain a wretched living.

Referring to the newly opened Matoonga Asylum, Bombay, Mr. Commissioner Acworth writes, May 26th, 1891 :—" With accommodation for 190, I had yesterday 226 inmates, but fortunately a new ward has just been completed, and this overcrowding will temporarily cease, though only temporarily. If I had room for 500 I could fill the asylum in a week."

The *Times of India*, May 21st, 1892, says :—"While the Matoonga Asylum is seriously overcrowded with lepers, and there are, besides, between forty and fifty bad cases in the Byculla Leper Dhuramsala, Sir Dinshaw's lakh of rupees and the land for the extension of the asylum lie still idle because of the deadlock between the Government and the Municipality over the police charges question. As the Government decline to budge in this matter, the Corporation, not altogether unjustifiably perhaps, refuses to undertake the responsibility of the Leper Asylum. Unless something is done to remedy this state of things, our streets will again be overrun with homeless lepers, and Mr. Acworth's labours in the cause of these afflicted people will practically be brought to naught."

The *Lahore Civil and Military Gazette*, May 30th, 1891, in a graphic narrative of the suffering caused by leprosy, bearing the signature "A. H.," in the leading article column, observes :—"A great deal has been said and written on the subject of the lepers and leprosy by people who have seen and pitied the miserable condition of native lepers, who parade their affliction before the public in our streets and thoroughfares, soliciting alms from the passer-by. The majority of English ladies and gentlemen who are told such persons are lepers understand and know so little about the horrible disease that they are inclined to regard them as ordinary crippled beggars, afflicted with a disease peculiar to natives, and from which Europeans are happily exempt. This is far from being the case: leprosy seems to have obtained a terrible hold over our white brethren and sisters in India, many of whom are hiding away, alone and forgotten, in the thickly populated slums and by-lanes of our large cities. I could conduct my readers to godowns and huts where English men and women are to be found in Calcutta in a horrible condition; some in the last stage of the disease."

In a Presidential address on the "Geographical Distribution of Diseases in Southern India," delivered at the annual meeting of the South Indian and Madras branches of the British Medical Association, Surgeon-General George Bidie, M.B., C.I.E., speaking on the subject of leprosy, said :—"According to census returns the proportion of lepers amongst the population of Madras is 4.4 per 10,000, against 5.2 in Bengal, and 8.5 in Bombay; but there is reason to believe that these figures fall short of the actual extent of the disease. In Madras it is on the whole slightly more prevalent in coast districts than in inland, the ratios being 4.9 in the former, and 4.4 in the latter, per 10,000 of population. The proportion of lepers in the several districts ranges from 2.0 in Coimbatore to 10.5 in Madras city. The districts showing the highest ratios next to Madras are Nilgiris 8.0, Tanjore 7.0, and Chingleput, Malabar, and North Arcot, each 6.0 per 10,000. The disease attacks Europeans and Eurasians as well as natives, but is most common in natives. The propagation of leprosy is no doubt largely influenced by heredity, but recent observations appear to show that it is also contagious. In localities in which lepers are at large with the disease in an active state, and having open sores, there seems to be an increased tendency to fresh cases amongst the general population."—The *British Medical Journal*, p. 115, July 20, 1889.

#### BURMA.

In a communication from Mr. C. G. Bayne, the Officiating Secretary of the Chief Commissioner of Burma, to the Secretary of the Government of India, dated Rangoon, 6th December, 1889, and published in the *Journal of the Leprosy Investigation Committee* for

February, 1891, it is said that the majority of officers questioned state distinctly that, in their opinion, leprosy is increasing in Burma. Mr. Smeaton, Commissioner of the Central Division, says :—"In the opinion of the majority of the gentlemen consulted, there are more lepers now than there were ten years ago." Mr. Norton, Deputy Commissioner of Rangoon, remarks :—" Those best qualified to form a judgment on the subject are of opinion that lepers are more numerous now than formerly." Surgeon-Major Baker and Dr. Frenchman have come to the same conclusion. Mr. Bayne observes :—" The opinion of these officers is of special value, because both of them, particularly Dr. Baker, have paid much attention to leprosy, and have much experience of it. Dr. Baker gives reasons which are based on observations of actual facts, and are not merely impressions."

#### CEYLON, TONQUIN

In Ceylon, as I learned by personal inquiries made in the island in January, 1891, leprosy is extending rapidly amongst the native population. The Leper Asylum at Hendala, near Colombo, one of the oldest in India, which in 1880 contained only 100 lepers, has now 208; and Dr. Meier, the resident Superintendent, does not hesitate to say that, in his opinion, the disease is steadily increasing.

There are about 200 lepers at large in the city of Colombo, and about 1800 in the island. Dr. Kynsey, the Surgeon-General for Ceylon, reported in 1885 that leprosy had decidedly increased since 1862, as the number of patients then in the asylum was 63, but had increased in 1885 to 151. Dr. Kynsey says :—"I have no doubt that a certain reproduction of the disease is going on, whatever the factors are at work, and that the proportionate growth of leprosy in the colony is by no means diminishing."

In a communication to the Government of Hawaii, Dr. Kynsey remarks that leprosy is not confined to any community, but is more frequently observed among the Singhalese and Tamilins; seldom among the Eurasians, and more rarely among Europeans, and is chiefly found among the poor, ill-fed, ill-housed classes of the community. The Eurasians, I may observe, as well as the better-class Europeans, absolutely decline to be vaccinated from native lymph sources, to which the native population are obliged, reluctantly, to submit.

An Anti-Leprosy Association has recently been organised in Bengal by certain benevolent members of Hindu communities in the Presidency. Their efforts are being directed especially to ameliorate the condition of the lepers in the Santhal Parganas, forming the southern portion of Bhagalpur, a very poor district, where the people can do little to help either themselves or their afflicted neighbours.

The *British Medical Journal* gives an account of a leper village near Hanoi, Tonquin, where, out of a population of 400, nearly one-half are affected with leprosy. The lepers of Hanoi doubt the contagiousness of leprosy, and the chiefs of the village affirm that there has not been a single case of contagion.

#### CHAPTER II: IS LEPROSY CONTAGIOUS?

ONE of the most debatable points in connection with the spread of leprosy is that of contagion, and amongst dermatologists there are rival schools—contagionists and anti-contagionists. In the report of the Committee of the Royal College of Physicians, issued in 1867, thirteen were in favour of contagion, and thirty-four physicians and experts in various parts of the world were convinced that the disease was non-contagious. The chief authorities in Norway, including Boek and Danielsen, who had forty years experience, were opposed to contagion; and this is the prevailing view in Norway at the present time.

Dr. G. A. Hansen says :—"If people wash themselves, and take the least care of themselves, when they come in contact with lepers, I do not think there is any danger whatever. It is a remarkable fact that not one of the nurses or servants in our Asylums (Norway) has caught the disease, although they daily wash and dress the patients."

In the pursuit of my investigation, I have been confronted on every hand by the most conflicting theories with regard to the causation of leprosy, and particularly with regard to this question of contagion. The contagionists, when pressed, I found invariably included inoculation, and interpreted the word in that sense. They admitted that the leprous discharge might be touched with impunity, when the integument is intact, but not otherwise. Every nurse, doctor, attendant or laundress, in the hospital, is bound to come in repeated contact with pus from ulcerated tubercles. It is only by the insertion of the leprous virus into the blood, through a sore, prick or abraded surface, that the disease is communicable. This view is now held by the highest authorities in all parts of the world. At the same time, there are others who hold that the disease is transferable in a lesser degree by inhalation, heredity and cohabitation.

From personal inquiries made at asylums and lazarettos in various countries where leprosy is endemic, I am convinced that, apart from the risk of inoculation, there is little or no danger of contagion, using the word to mean simple contact between unbroken surfaces of the body. So far as my investigations have extended, the only country where the belief in communication by simple contact prevails to a certain extent is Hawaii; but here also I found much diversity of opinion, not a few using the word contagion to include inoculation, both accidental, as in a cut or a sore, and by design, as in vaccination.

I believe that the instances of communication apart from inoculation of this disease (if they exist at all) are extremely rare, but the theory is opposed to the results of most inquiries.

A medical resident of sixteen years' standing in British Guiana told me that the disease was being extensively disseminated in some unexplained and mysterious way, as the infected population had greatly augmented of late years; you encountered them in churches, at balls and public meetings, in the streets, and the market-place. Several leprous patients were pointed out to me at the Colonial Hospital,

in close proximity to the other inmates, and I may observe that only the worst cases (and these belonging to poor families) are segregated at the Leper Hospitals. The lazarettos at Gorchum and Mahaica, British Guiana, at Trinidad and Barbadoes, were full to overflowing; new wings were in progress, or had recently been added, and the demand considerably exceeded the present accommodation in each establishment. No one appeared to be afraid of contagion, and I could not learn of a single case so communicated. After going through the various buildings of the Leper Asylum at Mucurapo, Trinidad, and seeing the unfortunate patients in every form of this hideous and mutilative disease, I said to the lady superintendent (of Dominican Sisters), who had been in charge of the institution for seventeen years, "Have you no fear of contagion?" "Not the slightest," she promptly replied. "And you and your assistants do all that conscientious nursing requires?" (This includes washing the sores and bandaging the limbs of the unfortunate inmates.) "Certainly, and feel it a joy and privilege to be of service to these afflicted people." "Has any case of infection by contact to doctor, nurse, attendant, or laundress ever been reported during your superintendence?" "Not one."

This experience was confirmed at the lazarettos in Barbados and elsewhere; and some of the nurses and attendants have been employed from ten to thirty-two years. At the leper asylum in Ceylon, I learned that the laundry work had been managed by one family for three generations, and no case of infection had ever been recorded of laundress, nurse, or doctor. Similar experiences were related to me in South America, South Africa, and at the leper asylums in Norway.

The officials connected with the leper settlements at Molokai, and the Hospital of Suspects, Kalihi, near Honolulu, where I saw some of the worst cases, have not the slightest fear of contagion. They told me that they had never known a medical attendant or nurse contract the disease by simple contact. Of inoculation through sores, or wounds in the skin, or the entrance into the blood through the minutest prick or abrasion, a wholesome fear is entertained, not only amongst the native population, but by the officials; and not without sufficient reason, as will be seen by the facts detailed in another chapter.

The British Consul in Crete, in a memorandum to Baron Ferdinand de Rothschild, M.P., on the subject of leprosy in that island, concludes that the disease is not contagious, from the fact that there are "several cases of healthy women married to, and living with, lepers for years without being in the least affected. In fact, if the disease were decidedly contagious and hereditary, it would inevitably spread much more than it does, considering that the lepers are perfectly at liberty to marry among themselves or with healthy persons, and that their children remain with them like those of other people, without any precaution being taken on their behalf."

Dr. Arthur Mouritz, in his official report to the Honolulu Board of Health, dated Molokai, February, 1886, says :—" The washerwoman for the hospital Kalowao (Molokai) has washed the soiled clothes of the worst cases, certainly many of them so, in the settlement for the past seventeen years."

In a communication by Dr. Van Deventer Director of the Suburban Hospital, Amsterdam, to the Hawaiian Government, the writer says :—" Not one case of contagion has ever been recorded."

Dr. Trousseau, of Honolulu, who told me he devoted much attention to the causation of leprosy in Hawaii, says :—" Is leprosy infectious or ever contagious in the proper sense of the word, that is, by contact mere and simple? I emphatically say 'No.' I am supported in that opinion by the whole medical world, and by my personal experience."

Dr. Manget, formerly superintendent of the Leper Asylum, British Guiana, observes :—" My own opinion is in favour of the contagiousness of leprosy, and that it may be propagated by the matter of ulcerated tubercles being applied to any raw surface; but I admit that I have met with cases which would seem to preclude the idea that the disease can be considered contagious in the ordinary sense of the term.

In the Leprosy Committee Report of 1887, signed by Dr. C. Handfield-Jones, chairman, it is stated "The committee believe that leprosy is not contagious in the conventional sense of the term, but, if at all, is only so in low degree and under exceptional circumstances."

Dr. Max Sandreczi, director of the Hospital for Children, Jerusalem, says :—" I am obliged to declare that the result of my researches gives me the conviction that leprosy is by no means contagious, and that consequently the exclusion and isolation of the patients is both a useless and a cruel measure."—*Lancet Aug. 31, 1889, pg 423.*

The *Lancet*, June 22, 1889, p. 1252, says :—"There hardly an hospital in London that has not had within its walls cases of leprosy within the past decade—in-patients, it is true, who have contracted the disease in countries where it is indigenous. Nor, so far as we know, has there ever been an instance of the communication of the disease from one of those subjects others in this country."

Mr. Jonathan Hutchinson, F.R.S., LL.D., in answer to the questions published in No. 1 *Journal of the Leprosy Investigation Committee*, "Is leprosy contagious?" suggests to inquirers into this subject the following important considerations :—"A certain number of lepers arrive every year in England from abroad. They usually remain in England and are allowed to mix freely with their friends. Children are permitted to go to schools, married couples continue co-habitation, inmates of hospitals and workhouses are, unless specially loathsome, placed in the general wards; in brief, not a single precaution against contagion is ever taken, and yet the disease never spreads. Precisely the same statements are true of French practice. It is believed that there are six lepers in Paris at the present time, and I am told that two leading Paris surgeons have each a leper employed as a household servant. Yet the disease never spreads in Paris any more than in London.

"The officers of leper hospitals, surgeons, nurses, and students, hardly ever become the subjects of the disease. . . In Norway I believe that no instance of an official becoming a leper has ever been known, although the exposure has been most free."

And in a footnote to his article, page 74, Mr. Hutchinson adds:—"Surgeon-Major Porteous, in 1855, published a list of servants who had been employed in the Leper Hospital, Madras. It included eleven servants who had been employed in the wards in periods varying from ten to fourteen years. None of them had become the subjects of leprosy."

Dr. Van Someron, who had charge of the hospital six years later, says :—" There is no record of any of the medical officers connected with the lazarettos having become affected with the disorder, nor have I heard of its ever having attacked the attendants of those who in private families were its victims."

Dr. W. Munro, the author of a work on leprosy, explains his views of contagion as follows :—" I do not pretend to express any distinct belief as to the probability of the disease being conveyed by simple contact, being more inclined to believe that it is carried by inoculation in most cases."

The *Lancet* of June 28, 1890, referring to the theory of contagion in connection with the spread of leprosy, says :—" But there are conditions and limits to the contagion: probably it occurs only through inoculation." This opinion is supported, according to the *British Medical Journal*, October 11, 1890, in the despatch from the Government of India relating to the isolation of lepers. It particularly notes that many of the medical authorities in India consider that the evidence at present available goes to show that leprosy is contagious only in the sense that it is inoculable. The "Report of the Royal college of Physicians on Leprosy," issued in 1867, states "that the all but unanimous conviction of the most experienced observers in different parts of the world is quite opposed to the belief that leprosy is communicable by proximity or contact."

Sir Erasmus Wilson says leprosy is endemic, but not contagious.

Dr. William B. Atkinson, secretary of the State Board of Health, Philadelphia, in diagnosing the case of John Anderson, a Swedish leper, observes that there is no danger of contagion except by inoculation.

Dr. Shoemaker, of Philadelphia, says leprosy is only contagious through inoculation.

In a study on leprosy, based on personal observation, Dr. L. Duncan Bulkley has arrived at the conclusion that the disease is not in any proper sense of the word contagious, but there is reason to believe that under certain conditions it can be inoculated.—*Family Doctor*, June 11, 1892.

Dr. H. M'Hatton, Macon, Georgia, concludes a paper "On the Propagation of Leprosy," published in the "Transactions of the Medical Association of Georgia," by stating that it is non-contagious, and quotes the report of the committee of the English College of Physicians to the effect that, out of sixty-six answers to their inquiries, only nine speak of it as contagious, forty-five as non-contagious, and twelve are silent.

Dr. John L. Mears, Medical Superintendent of San Francisco Board of Health, says—" Although this disease (leprosy) may not be contagious in the ordinary acceptation of that term, we are satisfied that it is communicated by inoculation."

Drs. Fox and Graham report in the transactions of the American Dermatological Association for 1883, page 197, as a result of their combined investigations, that leprosy is contagious by inoculation, and *there is no reason for believing that it is transmitted in any other way.*

Dr. P. W. Farrar, Nevada, Iowa, W.S., in a communication to Mr. L. F. Andrews, Secretary, State Board of Health, February 21st, 1885, p. 205, says:—" Leprosy is not contagious in the usual acceptance of the term. It requires actual inoculation of pus or blood into the circulation through open vessels or abraded surfaces, and there must be favourable cachectic condition to the action of the virus."

Dr. Bevan Rake in a communication to the Acting Surgeon - General, dated Maraval, 11th July, 1889, says :—"In a paper received from St. Louis, Missouri, only the other day, I saw that Dr. Bockmann estimates that there must be in Minnesota about 100,000 persons of Norwegian descent whose ancestors were lepers; and yet leprosy never appears amongst them; all the leprous Norwegians in the State are imported, so that leprosy does not appear to have spread there either by heredity or contagion."

In an article entitled "Notes on Leprosy as observed in Antigua, West Indies," Mr. John Freeland, Government Medical Officer, observes :—" On the subject of contagion I certainly agree with Mr. Hutchinson when he says that the profession divides itself into two camps, one asserting contagion and the other denying it; but I think that the contagionists, or those who believe that contagion takes an important share in the spread of the disease, are, in this part of the world at least, in a decided minority. No one, I imagine, would absolutely deny that contagion might be artificially effected by inoculation; but the chances of such an event happening accidentally are so remote that it can hardly be taken into account."—*British Medical Journal*, October 5th, 1889.

Dr. James H. Dunn, Professor of Dermatology in the Minnesota Hospital College, in a clinical lecture on leprosy, reported in the *North - Western Lancet*, March 1st, 1888, said :—" The question, Is leprosy contagious? has been a source of much discussion and contention. At times and in some countries it has been looked upon as markedly contagious. Some writers still regard it so; but at the present day the great majority of dermatologists teach that it is not, at least not in the ordinary sense of the term. There is no evidence

to show that the malady. has in any instance spread by contagion in a country where leprosy is not endemic."

Mr. T. H. Wheeler, the British Consul of Bogota, South America, in his Report for 1890 to the Foreign Office, No. 804, observes that although public opinion favours the belief prevalent in Colombia that leprosy is contagious, in the climates of Tocaima and Agua de Dios it is not so :—" For . more than one hundred years that these places have been the chosen resort of lepers in all stages of the disease, who have mixed freely with the other inhabitants of the district, there is no case on record of the disease having been contracted by contagion."

Dr. Alfred Ginders, in a communication to the Inspector-General of Hospitals, etc., Wellington, New Zealand, on Leprosy among the Maoris, dated Rotorua, 4th July, 1890, states his opinion that the disease is not infectious or contagious in the ordinary sense, but "that, in all probability, the worst cases have arisen from direct infection of the blood by inoculation, either accidental or premeditated." The only premeditated form of inoculation in vogue is that induced by the lancet of the vaccinator.

The Medical Superintendent, Leper Asylum, Calcutta, Dr. Madhub Chunder Ghose, in his Report to the Honourable H. Beverly, President of the District Charitable Society of Calcutta, 27th August, 1889, says :—" It seems to me, after an experience of fifteen years in the asylum, that leprosy is not contagious or infectious in the proper acceptation of the term. Recently I have taken the full history of all the lepers in this asylum, and, with one or two exceptions, the origin of the disease could not be traced to contagion; some acquired the disease from an hereditary taint, some from the effects of syphilis, and the indiscriminate use of mercury; but in most of the cases the origin of the disease could not be satisfactorily traced, but I have no doubt that the disease can be communicated by an abraded surface absorbing leprosy matter."

Dr. Ghose adds :—" To prove my assertion as to the non-contagiousness of leprosy, I beg to bring forward the following facts, that is to say, my own personal experience of the disease for over fifteen years. There is an inmate of the asylum, by the name of Doris, who is a non-leper, and who has been at the asylum for over twenty years, sleeping in the same ward, constantly mixing with the lepers, eating with them, etc., and he has not contracted the disease.

"There is also an idiot boy at the asylum, a non-leper, who has been an inmate for over ten years; he also sleeps, eats, and mixes freely with the lepers; this boy, also, has not the slightest trace of the disease.

"The dhoby attached to the asylum, with his father and grandfather before him, have washed the clothes of the lepers for more than thirty-five years; none of those showed any signs of the disease.

"The native doctor, Runchanun Dass, who lived with his family for over ten years in the premises of the asylum, neither contracted the disease, nor did any of his family.

"The dressers, Buddye and Narain, acted, the former for twelve years, and the latter for ten years: they did not suffer from the disease.

"The dressers, Rajjian and Jaddao, have been attached, off and on, the former for eight years, and the latter for ten years (this man is yet at the asylum as a dresser), and I have recent news regarding Rajjian, who has gone to his country: these men are unaffected. The dressers have, daily, to handle sores, wash unhealthy ulcers, apply ointment, etc., besides having to shave the lepers periodically. The present Christian cook and his father have been working at the asylum for over twenty years. The father died a non-leper, and the son is free of the disease.

"Other cooks, who work for a few years and then. go to their country, have never been attacked. The sweepers, Roohon and Bustee, have worked more than seven years without contracting the disease. Both the men have been discharged, and are yet living. Other sweepers, who have been working a short time each, also have not suffered.

"The Durwana have not contracted the disease. The present Durwan has been now over five years in service.

"I have myself been attached to the asylum now for over fifteen years, visiting the lepers daily, cutting and handling them, without having suffered.

"My predecessor, Dr. K. Stewart, was in medical charge of the asylum for over twelve years, and remained free of the disease till his death. My assistant, Dr. H. W. Mitnish, M.R.C.S., England, has been at the asylum for over eight years, and is healthy."—*Report presented to the Hon. H. Beverley, M.A., dated Calcutta, 27th August, 1889.*

Dr. Vandyke Carter, of Bombay, says:—" I have not met with any evidences of the contagious nature of leprosy that bear sifting."

Dr. Day, of Calcutta, who, according to Dr. Balehandra Krishna, L.M. and S. of Bombay, has made leprosy his special study, says, in the *Indian Mirror*, that he does not believe in the contagious nature, of leprosy.

Dr. J. Jackson, Bengal, in reply to a communication from the Royal College of Physicians, writes :—" It is not contagious in the ordinary sense of the term. . .—*Leprosy Report, p. 202.*

When Mr Commissioner Acworth, of the Bombay Municipal Corporation, paid an official visit to the Madras Leper Hospital, he was informed that the sweepers employed to wash the ulcers of the lepers did not contract the disease, although some of them had been doing the work for fourteen years.

Mr. A. Mitra, L. R. C. P., L. R. C. S. (Edinburgh), Chief Medical Officer, Kishmir, in an article in the *American Journal of Medical Sciences*, Philadelphia, 1891, observes :—"Of course, contagion by inoculation is possible, and often takes place in various ways. In India, people usually have their feet and skin bare, and, therefore, there is every likelihood of inoculation."

Mr. A. Mackenzie, Secretary to the Government of India, writing from Simla to the Minister of Foreign Affairs, Honolulu (October, 1885) says:—"On the whole, it is believed that the medical evidence tends to show that the disease is not contagious. In support of this view, it may be mentioned that not a single servant of the asylum at Almora, in the Kumaun District of the North-Eastern Provinces, appears to have contracted the disease during the thirty-one years for which there is information."

Dr. W. A. Kynsey, the Surgeon-General, Ceylon, says:—"It (leprosy) is not considered contagious in Ceylon, and lepers are not generally shunned by their relatives or friends for fear of infection, but are often maintained by them in their own houses. It is, in my opinion, not contagious as syphilis, Parangi, the exanthematous diseases. There is no conclusive evidence in the hospital records of, communicability by direct contact with, in close proximity to, diseased persons. The attendants of the hospital have for years been in close association with lepers in all stages of the disease, the head-servant for more than twenty years; and the washing of the establishment has been performed by a family in the neighbourhood for four generations; but not a trace of the disease, as I have reason to know, has been observed among them."—*Leprosy in Foreign Countries*, p. 9.

Dr. Dixon, Medical Superintendent of Robben Island, Cape of Good Hope, in a report published in the *Journal of the Leprosy Investigation Committee*, No. 3, July, 1891, says :—"The evidence gathered from officials and patients long resident on Robben Island shows that there is no authentic instance, with possibly one exception, of any non-leprous person on the island having contracted the disease, either direct or indirect, with the leper residents."

Dealing first with the possible exception, the circumstances were as follows :—A lad, son of the shoemaker, constantly associated with the lepers; he ate of food given to him by them, and was in the habit of fishing with their tackle; it is stated that on one occasion, when using the lepers' tackle, *he had a wound on his finger*. For about ten years he exhibited symptoms, said to be those of leprosy. He died in 1888, having suffered for about ten years. It cannot be held that there is conclusive proof that this solitary case originated by contagion.

The evidence of the older officers goes to show that, until about the year 1884, all the lepers' soiled and filthy linen was washed by the female lunatics in cold water only, and was often mixed with the underclothing of the lunatic patients in the process of washing. This practice was probably in vogue for upwards of thirty years, yet there is no alleged or recorded instance of any lunatic patient contracting leprosy on Robben Island.

Dr. W. H. Ross, Police Surgeon in Cape Town, was asked—

Q. 252. "You are aware that the bacilli have been in the saliva 'of lepers, would not that render the disease liable to be spread by the act of kissing?"—"Not unless there was some cracked surface on the lips or mouth. I have never known of a case of leprosy having been contracted on the island, although they mix there freely." — *Report of Select Committee on the Spread of Leprosy, Cape of Good Hope, July, 1889. Minutes of Evidence.*

Mr. Davidson of Madagascar says :—"Leprosy is contagious by inoculation only."

Dr. W. V. M. Koch, the Acting Superintendent of the Leper Asylum, Trinidad, writing on the subject of contagion, explains that "the entrance of the (leper) germ into the system will take place if it is brought into contact with an absorbing surface—any abrasion of skin or mucous membrane being sufficient for this purpose."— *Surgeon General's Report for 1891*, pg. 71.

Dr. Alexander Abercromby writes to me from Cape Town, April 20th, 1892, that after thirty years experience he holds that leprosy is partly contagious, and explains that he does not use the word contagion in the strict sense, "but when there is a discharge from a leprous sore, and this coming in contact with the tissues of a healthy person will develop the disease; or the saliva of a person coming into contact with a slight abrasion of cuticle, or healthy mucous surface."

Under the head of "Leprosy in Havana," the *British Medical Journal*, June 18th, 1892, says that the number of cases in the Real Casa Hospital de San Lazaro at the present time averages 80 to 90, but seldom reaches 100. In 32 cases (40 per cent.) no family history of the disease could be obtained. 'In no single case could leprosy be traced to contagion, and of the 25 persons employed in the hospital, only one (a chaplain) contracted the disease during the last 12 years. Dr. Arango, the present medical superintendent, has never known any case in which the disease could be distinctly traced to contagion, and he knows persons who have lived twenty-eight or thirty years in the hospital without contracting it."

### CHAPTER 3: LEPROSY COMMUNICABLE BY INOCULATION

WHILE the preponderance of medical and scientific opinion is against the theory that leprosy is, in the ordinary sense of the word, a contagious disease, the evidence in favour of its being communicable by inoculation is overwhelming. Even those who strongly uphold the theory, of contagion invariably include inoculation as one of the principal means of communication. However widely authorities differ as to the other causes to which leprosy is attributed, such as climatic influences, unwholesome and putrid food, want of salt, a

fish diet, malaria, heredity, contagion, syphilis. and insanitation, we may safely affirm that there is a practical consensus of opinion as to its inoculability.

To the question, Is leprosy inoculable? Sir William Moore, K.C.I.E., late Surgeon-General, Bombay Staff, Hon. Physician to the Queen, says :—"Professors Damisch and Kobner proved by an experiment that leprosy may be communicated to animals by inoculation. There is also the well-authenticated case of a boy, Miller, who pricked himself with a needle used by a leper, from which injury leprosy developed. Then there was a case of a medical student pricking himself when performing a *post-mortem* examination on a leper."

Sir William Moore has himself cited (*Journal of the Leprosy Investigation Committee*, No. .1, p. 28) a case of inoculation in a person with an injured hand who was employed to rub sulphur ointment on leprosy patients, his family being quite free from the disease, and no history of previous association with lepers being obtainable. He considers that the sulphur ointment had no protective influence. "All that is required is the transmission of leprosy discharge, which contains the microbe or germ of leprosy, to the healthy body. But in order that the poison may act it is necessary that it should come in contact with an abrasion or sore on a healthy skin. An infinitesimal portion of leprosy discharge is quite sufficient."—*Leprosy and Leper Houses*, pp. 2 and 3.

In a communication to the secretary of the Leprosy Fund, dated June 2, 1890, Sir William says:—"Leprosy has been attributed to the following causes:—(1) Climatic heat; (2) unsanitary conditions; (3) want of salt; (4) vegetable diet; (5) fish diet; (6) lime in water; (7) malaria. But facts show that none of these are the causes." After giving the reasons for this conclusion, the writer adds :—"My views that leprosy is a phase of inherited syphilis, communicable, however, by inoculation, and the reasons for such views, have been expressed in my 'Manual of the Diseases, of India,' 1887."

This view accords with the most eminent medical authorities in all countries where leprosy prevails. In a report on Leprosy in Cyprus, by Dr. Heidenstam, chief medical officer for the island, transmitted by the High Commissioner, Sir Henry Bulwer, to Lord Knutsford, and presented to both Houses of Parliament, March, 1890, the author, after dismissing various theories put forward to explain the spread of leprosy, such as heredity, the use of putrid food, salt pork, mal-hygiene, malaria, and miasma, says :—"My researches have led me to the conclusion that leprosy is what should be termed an inoculable disease, inasmuch as the virus is transmitted into the system in like manner as many other maladies, notably syphilis, anthrax, glanders, etc.; but it has not the same action in all constitutions, nor in all circumstances of life, and is of a long and slow incubation. My further researches and studies have not in any way altered the opinion I then expressed, and I am more than ever convinced that the direct cause of leprosy is simply and solely due to the inoculation of the virus of a person affected into another up to that time free.

"It has been advocated that instances of the communicability of leprosy have been rare, and so doubtful that it is impossible to rely on their authenticity. In this island, at least, I have met many cases where the slightest doubt could not be entertained."

Dr. Olavide, of Madrid, at the Paris Dermatological Congress of 1889, maintained that leprosy was evidently a parasitic disease, contagious, and inoculable. This authority refers to a curious fact, that it is observed by preference amongst the soldiers and monks who have resided previously in America and in the Philippine Islands. In Spain, while vaccination is not always carried out amongst the civil population, it is rigorously enforced in the army, as I was informed some years ago by the then British Consul; Mr. M'Pherson, of Madrid.

At the same Congress, Dr. Zambaco-Pacha, communicating the results of his inquiries concerning leprosy in the Isle of Mitylene, mentions that while he is an anti-contagionist, the discovery of the leprosy bacillus has somewhat shaken his ideas. He records the curious fact that, of about 120,000 souls in Mitylene, 15,000 are Mussulmans, and amongst these there is not a single leper to his knowledge. Dr. Zambaco omits to note the fact that Mussulmans in most countries have a rooted aversion to, and distrust in, vaccination, and escape the ordeal whenever they can.\*

\*This repugnance was made known to me by means of personal investigations in Ceylon in 1890-91. "The First Triennial Report of the Working of the Vaccination Department in Bengal" mentions, amongst other races, the Mahomedan Ferazis, who display the utmost repugnance (as do also the higher classes in India) to vaccination.

Dr. Sutherland, of Patna, observes that :—"Another test of the prevalence of leprosy in this district was to ascertain the proportion of leprosy persons in Patna gaol. Among Mussulmans, two were affected, or one in twenty-eight; while among the Hindoos there were seventeen persons affected, or one in every sixteen."

"This is certainly a startling assertion, one person in every sixteen affected with the taint of leprosy, and yet it comes from the pen of a careful *observer*."—*Leprosy a Communicable Disease*, by Surgeon C N. Macnamara, p. 15 and 16.\*

\*The *Madras Times*, Nov. 28, 1891, referring to the opposition to vaccination, which, the editor observes, is by no means confined to the ignorant populations, says :—"Official reports show notably that the Lubbays and Mahomedans, as a class, resist vaccination, and do much to prevent the authorities from tracing the age of children over six months, with a view to enforcing the Act. Male vaccinators, it is remarked, are prohibited from entering their houses on the ground that these are *gosha*, and Hindu female vaccinators are unable to cope with the difficulty satisfactorily. It has been proposed to employ a Mahomedan female vaccinator, but a suitable woman who can read, write, and serve notices has not yet been found."

In the *Archives de Médecine Navale et Coloniale*, September, 1890, is an article by Dr. F. Forne on the "Contagiousness of Leprosy," of which theory the writer is a firm adherent. Dr. Forne says:—"One of the arguments invoked for the purpose of denying the contagious character of leprosy consists in saying that the persons attending on the lepers—religious persons, infirmary attendants,

medical men —do not contract leprosy. It is important to refute that assertion by showing that it is contradicted by facts." The writer then proceeds to give details of the case of Father Damien, who, after sixteen years' residence at the leper settlement at Molokai, succumbed to this disease, as Dr. Forne supposes, through contagion. Of this there is not the slightest proof, unless contagion is understood to include inoculation, and that this is intended would appear by the following reference to another case to illustrate the author's theory:—"Dr. Hulin de Goden, medical officer of the leper settlement of Desirade (French Antilles), says that Sister A. became leprosy after having pricked herself in the fingers of her hand with a sewing-needle while mending articles that had been used by lepers. Whether it was after having pricked her fingers matters little, since it is by the skin of the hands that the leprosy contamination would have taken place in both cases. He observes that, in general, the washing of linen is habitually practised under the supervision of the Sisters, while sewing, on the contrary, is more often carried out by themselves.

"The accidental inoculation would have taken place before 1878, the date of the first leprosy manifestations; in 1881 the affection had taken so considerable a development that Dr. Hulin de Goden decided to isolate the patient.

"An analogous fact has been observed in Tahiti, where leprosy has been transferred by passing from the native race to the white race, absolutely in the same manner as we have the fact produced in the Sandwich Islands, in New Caledonia, and in Guiana.

"A religious woman from Europe, free from hereditary taint, who was working at the linen-drapery of the hospital at Tahiti, inoculated into herself the terrible malady with a sewing-needle under the same conditions as the religious woman of Guiana, She was sent back to France in 1881 as being affected with leprosy."

Dr. Woods, cited by Dr. Hahn, expresses himself, thus:—"In the hospitals of Calcutta, and other districts of the East Indies, hospital attendants, positively free from all hereditary taint, have contracted leprosy by means of accidental inoculations undergone in the exercise of their functions; Dr. Robertson, Director of the Leper Settlement of Seychelles, became leprosy during his period of service in that house."

Dr. Forné says: "Dr. Hillebrand cites the following case :—At Borneo a young European boy was in the habit of playing with a child of colour affected with leprosy. One day this latter plunged the point of his knife into an anaesthetised part of his body, an operation which was immediately repeated by his comrade with the same knife. Some time afterwards the European started for Holland, there attained his maturity, and, at the end of nineteen years, returned to Borneo fully affected with leprosy."

In a memoir read by Besnier before the Academy of Medicine, Paris, October 11th, 1887, Leloir, a high authority, is stated 'to have pointed out that lepra would appear to be contracted by inoculation and not by contact, from the fact that the epidermis does not, as a rule, contain bacilli, and that the epidermo-dermic basal membrane apparently constitutes a barrier to the passage of the micro-organism in either direction.

One of the latest contributions to 'this important subject is an able work entitled "Leprosy," by Dr. George Thin (London, 1891), in which the question of contagion is fully discussed. The author has succeeded in bringing together (pp. 139-166) the largest number of examples of alleged contagion of any writer I have met with. Some of these are distinctly traceable to inoculation by means of sores, pricks, gunshot wounds, abraded surfaces. The following are amongst the examples:—

No. 14.—Dr. Duncan, Civil Surgeon, Julpaiguri district, states that a healthy woman sustained a gunshot wound in the thigh. She had no leprosy relations, but her husband was a leper with ulcerations on his hands. The woman became a leper.

No. 53.—A young coloured boy, while suffering from an eruption, played with a boy who was a leper; the previously healthy boy became a leper about a year afterwards, whilst his family remained untainted.

No. 67.—Dr. W. H. Ross cites a case which occurred in a European family without any leprosy taint. J. K., while playing with leper boys, pricked himself with one of their fishing hooks, and became an undoubted leper.

On page 162 Dr. Thin remarks: "No one doubts that syphilis is a contagious disease, because surgeons, nurses, and attendants may fulfil their duties for many years in Lock hospitals without becoming infected; and it is a matter of every-day experience that a member of a large family may pass through all the infectious stages of syphilis, living in constant association with brothers and sisters, without the disease being transmitted; yet it is quite certain that in all those cases the disease could be communicated by an inoculation of the simplest kind." From this illustration we infer that Dr. Thin considers leprosy transmissible by inoculation, and sometimes uses the word contagion in that sense, as I have noticed with many other writers on leprosy.

On page 66 Dr. Thin quotes Dr. Donelan as authority for a case of leprosy due to inoculation.

Professor Cayley, F. R. C. S., says (*Journal of the Leprosy investigation Committee*, p. 36) that leprosy is directly inoculable.

Dr. John Murray, Inspector-General of Hospitals London, in a communication to Dr. P. 5. Abraham, Secretary of the National Leprosy Fund, June 9th, 1890, says: "I consider that it (leprosy) is communicable from the sick to those that are well, probably through a broken surface, as an ulcer or wound, and that it may be communicated by inoculation."

Dr. Liveing, physician to the Middlesex Hospital, in his Gulstonian Lectures for 1873, says:—"Facts, too, are slowly accumulating which tend to prove that the casual inoculation of leprosy matter is one actual means of spreading this fell complaint." Dr. Hoegh, in

his "Report on Leprosy" for 1855, quoted by Liveing, "suggests that the disease is communicable through the *Itch Acarus* (presumably the *acarus scabici*) which in Norway commonly infests the skin of lepers."

In his handbook on the "Diagnoses of Skin Diseases," 1880, p. 284-5, Dr. Liveing writes:—"Leprosy has within the last thirty years been imported and spread rapidly amongst natives of certain islands where it was before quite unknown. It is probable that in a certain stage of the disease it is inoculable. This appears to me the most reasonable explanation of its progress amongst a new population."

In reply to a communication which I addressed to the superintendent of the Leper Asylum, Bergen (which institution I visited in 1889), Dr. G. Armauer Hansen, the Physician General of Leprosy in Norway, the discoverer of the *bacillus leprae*, says :—"I think leprosy to be inoculable; I, moreover, think that leprosy in most cases is transferred by inoculation."

Sir Erasmus Wilson, F.R.S., in his work on "Cutaneous Disease," 1864, says :—"Lepra is a blood disease. The origin of the disease is doubtless an animal poison, but the source and nature of the poison are unknown. One remarkable case lately under our observation has led to the belief that it may be communicated by inoculation."

## INDIA

Dr. Balchandra Krishna, L.M. and S., in his pamphlet entitled "Leprosy in Bombay in its Medical and State Aspects," suggests a mode of reconciling the conflicting opinions as to the contagious nature of leprosy. He quotes the *Lancet* of June 29, 1889, "The discovery of the *bacillus leprae* by Hansen has greatly strengthened the belief in contagion. This bacillus has never been found in any disease or condition other than leprosy, while it has invariably been found by competent observers in the skin of tuberculated lepers from all parts of the world. In the non-tuberculated cases, on the other hand, it is invariably absent in all the sores in the diseased nerves. But, it has been found in the nerves themselves when the disease is not of too old a standing, and in those skin lesions of mixed nerve and skin leprosy not dependent upon disease of the nerve trunks. This goes far to explain the non-transmissibility of nerve leprosy. The evidence, on the whole, then, is strongly in favour of the disease being communicable; but all are agreed that it is only so in the *ulcerating stage* of the *tubercular* or the *mixed form* by inoculation of the pus on an abraded surface, either directly from the patient, or from the stained clothing or other objects contaminated by the secretions from the leprosy sores. It is certainly not communicable by aerial infection in the same way as small-pox or other exanthemata."

"This seems to me," says Dr. Krishna, "to explain satisfactorily the reasons why some observers found cases which convinced them of the contagious nature of the disease, while others met with some which did not show any contagious nature. It also explains the three cases which I have mentioned above, as on no other hypothesis can they be explained."

In a paper on leprosy in the *Times of India* (Bombay), August 13, 1889, Dr. Balchandra Krishna says that the evidence in proof of the communicability of the disease from man to man is overwhelming.

Brigade-Surgeon H. V. Carter, of Bombay, referring to the spread of leprosy, says: "The direct communicability of leprosy is at least a good working hypothesis."

Surgeon-Major Pinkerton, in his evidence before the Royal Commission on Vaccination, testified that leprosy was increasing in the cities of India, and believed that it was inoculable.—*Second R.C. Report*, p. 6.

In a letter to the *Times*, June 12, 1889, Surgeon-Major Pringle, late of the Sanitary Department, Her Majesty's Army, Bengal, refers to the danger of spreading leprosy by both inoculation and vaccination. "The fact is, the amount of the virus of leprosy with which Father Damien was unknowingly fatally inoculated might have been, and probably was, very minute. I am amply justified, from a careful study of smallpox inoculation and vaccination during the whole of my thirty years' Indian service, in stating that, unless prompt and stringent measures are taken in Bombay, leprosy inoculation will become far more possible, and hence probable, than it may appear at present."

Dr. Joq. Frank Periera, Medical Superintendent of the Leper Asylum, Bombay, India, in a communication to the *Times of India*, November 18, 1890, gives his opinion that the contracting of leprosy is mainly due to its inoculation by means of open sores from one person to another, and adds: "In most, if not in nearly all the cases treated by me, their previous histories have, almost without exception, disclosed the fact of the disease being due chiefly to heredity and inoculation."

Dr. Cunningham, the special adviser to the Government of India, admits the principle of the inoculability of the disease.

As to the supposed cause of leprosy, "my experience," says Dr. S. M. Shircore, of Moorshedabad, India, "does not tend to the belief that this disease is contagious in its nature, unless by direct inoculation."

Dr. H. A. Ackworth, Municipal Commissioner, Bombay, who has devoted much attention to the leprosy question, writes to me from Bombay, 24th May, 1891:—"All the medical men that I have met have agreed 'that in whatever of any other methods leprosy may be transmissible, it is certainly so by inoculation.'"

Dr. W. K. Hatch, M.B., Surgeon, Bombay Army, reports in the *British Medical Journal*, June 26th, 1886, p 1713, that on June 27th, 1885, a student, while making a *post-mortem* examination on the body of a confirmed leper, cut his left forefinger at the top, and received a small abrasion, which resulted in certain characteristics of leprosy. This writer has been promised further particulars.

Dr. Neve, of Kashmir, says that in leprosy the *bacillus lepra* is always present; that the period of incubation is so long, "that a few positive instances of inoculation or contagion outweigh an immense amount of negative evidence."—*Leprosy, by Dr. George Thin, p. 62.*

Dr. G. D. M'Reddie, Civil Surgeon, in his letter to Dr. Ghose, dated Hurdor, the 18th February, 1888, states:—"From observations I know leprosy is hereditary. It is also contagious in the sense that it is necessary for the discharge from a leprosy ulcer to come into direct contact with the broken skin of the recipient, or the blood of a leper to be inoculated into the system, as in vaccination."—*Report on Leprosy to the Hon. H. Beverley, MA., by Madhub Chunder Ghose, Leper Asylum, Calcutta, August 27th, 1889.*

Surgeon C. N. Macnamara sums up the question of the communicability of leprosy as follows:—"The arguments, therefore, against the communicability of leprosy do not refute those in favour of it; consequently, I can arrive at no other conclusion than that leprosy is communicable; but it is necessary for the propagation of the disease by this means that the discharge from a leprosy sore should enter the tissues of a healthy person, and, further, the disease may even then (unless under peculiar circumstances) remain undeveloped in the system for years."—*Leprosy a Communicable Disease, p. 43.*

#### SOUTH AFRICA.

In Appendix A to the "Cape of Good Hope Report of the Select Committee on the Spread of Leprosy," 1883, is an interesting communication from the Rev. Canon James Baker, dated Kalk Bay Rectory, August 10, 1883,, as follows:—"My own opportunities for investigation have been rather exceptional, and my advantages considerable. In early life I was a student of Medicine, and subsequently of Chemistry and Natural Philosophy, at University College, London. My appointment as chaplain to the Lunatic Asylum and General Infirmary on Robben Island, where I remained nine years, put me in the way of getting experience among lepers, and I commenced at once and continued to make the nature of this terrible disease a special subject of inquiry. In my present sphere of duty I see, unhappily, many cases for investigation. The increased spreading of the disease in many parts of the colony is now generally admitted; it is spreading among both the white and the , coloured races, especially in places near the sea coast.

"Leprosy is not to be compared with small-pox or scarlet fever, as to contagion, any more than typhoid fever, but this can be conveyed in excreta, finding its *nidus*, or seat of incubation, in one part of the body only; and so, while many will escape leprosy who handle patients as they may handle decomposing corpses, with the skin of their hands unbroken, others may have their blood-vessels or absorbents come in fatal contact with the active poison of the disease."

In the body of the same report I find the evidence of a number of witnesses of wide experience, who have given the subject much attention. Hon. Dr. Atherstone, Member of the Legislative Council, and F.R.C.S., Eng., who has practised in the Colony fifty years, chiefly in Graham's Town, where he was District Surgeon for twenty-six years; also Consulting Physician of the Albany General Hospital, and President of the Leprosy Inquiry Committee of 1889, testified as follows :—"I have formed a very decided opinion as to the nature of the disease, and the manner in which it is transmitted from one to another, and spread all over the country. Recent microscopic investigation has established the fact that the diseased tissues and secretions are invaded by numerous parasitical, rod-like organisms called bacilli, always of the same form and size, no matter from what part of the world the leper comes, or what part of the body is examined, whether the tubercles, lymphatic glands, cartilages, or suppurating sores. This specific bacillus of leprosy is no doubt the true cause, and it is spread by inoculation, either by direct contact with the secretion, or suppurating sores of the leper, or transmitted by the clothes, utensils, pipes, etc., containing these parasitical germs of the disease."

Q. 345. "You are then of opinion that it is contagious?"—"Yes; in the mode I have described; not in the ordinary sense of the word."

On page 8 I find the following :—"Another result of our inquiry has been to remove any doubt that might previously have existed as to the contagiousness of the disease. Your committee are satisfied that where the disease has not been derived by heredity from one of the parents or grandparents, it has in every instance been contracted by means of contagion. It is quite possible that the disease may not be communicable except to a person having some wound or abrasion in the skin; but when it is borne in mind that the victims often suffer from a discharge of matter from the hands or other limbs, it is not difficult to conceive how readily the disease may be communicated to persons coming in contact directly or indirectly with the sufferer."

Dr. Abercrombie, member of the Cape Town Medical Board, says (Answer 6a) :—"It would be communicated to a person who came in contact with a leprosy person if he had a sore or an abrasion. For instance, if he were to touch a leprosy person with a sore finger, use the same knife and fork, or drink out of the same glass."

Sir Samuel Needham, superintendent of the Old Somerset Hospital, says:—"I do not think it is contagious, except in cases of cohabitation, when persons are reduced to a low state of health, through being badly fed, or when they get a cut or wound inoculated by contact with a leprosy patient."

Dr. W. H. Ross, twenty-two years Police Surgeon at Cape Town, in reply to Question 311, "Do you know the case of a little boy who contracted leprosy on the island?" said:—"I know the case. The boy had no leprosy relations. He associated with lepers, and one day, being out fishing with them, he ran a fish hook into his finger. Leprosy shortly afterwards made its appearance."

In the "Report of the Select Committee of the Legislative Assembly on Leprosy," July, 1889, are the following answers from the same

witness :—

Q. 346. "I know of several cases in which the disease was communicated by inoculation."

Q. 351. (1) "It has been conclusively shown that it is always accompanied, if not caused, by a specific bacillus or bacilli, distinctly recognisable under high powers of the microscope in all the stages, in the skin, tissues, glands, secretions, nerves, and bones of the parts affected, undergoing ulceration and destructive degeneration by the pressure of interstitial tubercular deposits. (2) These specific rod-like bacilli, like other fungoid growths of the lowest type of generative life, such as dry rot in old wood, etc., it appears, can only gain access to the system in persons in a low state of vitality, either from poverty and filth, defective nutrition, or depressed nervous energy or constitutional debility, from heredity, or other causes of enfeebled condition of health, admitting of the growth and reproduction of the germs of these low organisms.

(3) In such weakened state of the constitution, hereditary or acquired, these bacilli may be introduced into the system by direct contact with any abraded absorbent surface of the skin or mucous membranes, as in wounds, sores, pricks, etc., or with the mucous surfaces of the lips, mouth, nose, eyes, etc., but chiefly in parts distant from the centre of circulation, as in the toes, fingers, etc., where they may find a lodgment from the diminished vitality of the part being insufficient to destroy them, although sufficient to prevent its rapid growth."

Dr. J. C. Tache, Titular Professor, Laval University, Visiting Physician of the Tracadie Lazaretto, New Brunswick, Canada, reports to the Hawaiian Government ("Leprosy in Foreign Countries," 1886, p. 142-3):—"There is a case, the facts of which are established beyond the possibility of cavil, in which the disease appears to me, as well as it did to those who witnessed it, to have been produced by the absorption of liquid matter discharged from the body of a woman who had been in a cachectic state from leprosy. At the funeral of that woman, the body was carried on the shoulders of four strong young men. The day was hot, and, on a sudden, liquid matter began to ooze out through a joint of the coffin, wetting the shoulder of one of the carriers. The wet, combined with the heat and the pressure of the sharp edge of the coffin, produced an abrasion of the skin of the young man. The contact of the liquid with the abraded surface lasted a part of the time of the procession, and the whole length of the service, as it was only on his way home that the young man washed his sore shoulder, and changed his clothes. Some months after, that man, whose health had always been robust, began to feel unwell. In a short time the symptoms of leprosy made their appearance, and he died of the disease eleven years after the occurrence. There had never been any case of leprosy in his family, whose ancestral genealogy is traced for several generations back. In fact, the disease was not yet known as leprosy, being of recent appearance in the locality, and among these people. He was the fourth case in that place, the other three being the woman spoken of, the husband and sister of the woman, in the ancestry of whom there had never been any trace of the disease. The fifth case in that locality was the sister of the young man." It is noticeable that the incubation of this disease was of comparatively short duration.

Dr. Manget, Surgeon-General, British Guiana, in the Report of the Royal College of Physicians on Leprosy," p. 45, observes:—"My own opinion is in favour of the contagiousness of leprosy, and that it may be propagated by the matter of ulcerated tubercles being applied to any raw surface; but I admit that I have met with cases which would seem to preclude the idea that the disease can be considered contagious in the ordinary sense of the term."

Dr. Charles W. Allen, attending physician to the North Western Dispensary for Skin Diseases, Surgeon to the Charity Hospital, in an article in the *New York Medical Journal*, March 3 1st, 1888, on leprosy, concludes that the disease is transmissible by inoculation from one individual to another.

In a remarkable article on "Leprosy, its Extent and Control," by Dr. H. S. Orme, published in the 20th volume of "Transactions of the Medical Society of the State of California" (1890), page 180, Dr. Saxe is quoted as giving the case of a physician's son who acquired the disease after inserting a pin into his leg which a little Hawaiian leper had just previously thrust into an anaesthetic patch on his own leg.

Dr. S. Kneeland, of Boston, U.S., who visited Honolulu in 1872, says :—"There can be no doubt that it (leprosy) is spread by cohabitation, and inoculation of its diseased fluids, in the same way as syphilis."—*Dr. Hillis on "Leprosy in British Guiana,"* p. 192.

Dr. J. C. Graham concludes an article in the *Canada Medical and Surgical Journal*, October 1883, as follows :—"In all probability the disease is communicated solely by means of inoculation; and opportunities for such inoculation are very few indeed, unless there has been a long and intimate contact with a diseased person."

Dr. Graham here omits from his purview the universal practice of vaccine inoculation, which sometimes carries with it the sources of leprosy and of other diseases.

In a leading article in the Philadelphia, U.S.A., *Medical News* on "Leprosy in its Relation to the State," the writer says:—"From time to time we hear of lepers reaching this country, either from Norway, the West Indies, or from China, and it becomes a very important question how to deal with such cases. Up to a few years ago, opinion was very strongly against the contagious nature of the disease, but since Hansen's discovery of the *bacillus lepra* facts have been accumulating to show that the virus is a fixed contagion, communicable by inoculation, like syphilis and glanders."

Dr. William B. Atkinson, Secretary to the State Board of Health, Philadelphia, in his official report for 1890 of a case of leprosy (John Anderson, a Swede), observes: "There is no danger of contagion except by inoculation. The transmission of leprosy by inoculation or contact has been a debatable point with the profession for many years; but since the disease has been better studied, and the discovery of the *bacillus leprae*, a minute organism found in every case of true leprosy, opinion is gradually but surely coming round to the recognition that leprosy may be communicated by the unhealthy to the healthy to a much greater extent than has hitherto been considered probable."

The *American Journal of the Medical Sciences*, October, 1882, has a communication on "The Question of Contagion in Leprosy," by Dr. White, who remarks that heredity as the only, or as an important factor is out of the question. "It would have required several generations to have accomplished such results; we must look, then, to the customs of the race as exceptionally favourable to inoculation, and as the only possible explanation. It is probable that leprosy, like syphilis, may be communicated under all circumstances by which some of the fluids and other products of the infected *foci* of a diseased person come in contact with abraded or excoriated, possibly with the uninjured surface of a healthy person. It would be necessary that the diseased products should be at the surface of the skin, or mucous membrane, and this would generally be accompanied during the process of softening by which the impermeable layers were removed. Thus the nodular form in its ulcerative stage would necessarily be the most dangerous phase of disease, whereas the anaesthetic form might exist for years with little danger of communicating itself to its surroundings. In this sense we may conclude that leprosy is contagious, and in these ways, probably, the disease mostly spreads in a family, a community, a nation."

Mr. Plumacher, United States Consul at Maracaibo, Venezuela, observes in his official report for 1890 (p. 695) with reference to leprosy :—" I confess freely that I am not a believer in the theory of contagion properly so called. It will be easily understood that should matter from a leprosy ulcer come into absolute contact with the blood of a healthy person inevitable infection would result, and leprosy be engendered, in the same manner that the surgeon at times meets his death through blood poisoning contracted in the dissection of a cadaver."

The United States Consul to Cape Colony, Mr. James W. Siler, in the official report on leprosy to his Government, dated March 24th, 1887, observes :—"This specific bacillus of leprosy is no doubt the true cause, and it is spread by inoculation by direct contact with the secretion or suppurating sores of the leper."

In a paper read before the State Medical Society by Dr. R. J. Farquharson, Secretary of the Iowa State Board of Health, Des Moines, and published in the *New York Sanitarian*, July, 1884, the author says:---

"Leprosy is not contagious in the ordinary acceptance of that term. It requires an absolute inoculation of pus or blood into the circulation through open vessels or abraded surfaces, and at the same time it is assumed that we must have the cachectic conditions favourable to the action of the virus."

Dr. Wood, of the United States Navy, in the Fourth Report, Navy Department, says that the dressers in the hospitals of Calcutta and other portions of the East, positively free from hereditary disease, have in many instances developed it, under circumstances connecting the inoculation with their duties.

The *New Orleans Medical and Surgical Journal* 1880, published a communication from Dr. T. H. Bemiss, Lahaina, Hawaii, on the introduction and spread of leprosy in these islands. "Alarmed," says the writer, "by an invasion of small-pox in 1853, a general vaccination of the whole population was ordered, and physicians being at that time very few on the islands, non-professionals aided in the work. It is charged by some that, as a natural result of the labours of the heterogeneous force so appointed, not only syphilis but also leprosy was greatly increased. In my last circuit trip in my district, I found very few adults who had never been vaccinated. This involves the question of inoculability, in my opinion the main, if not the only means of propagation, other than inheritance."

The same journal, 1888, says that "leprosy may be communicated from a leprosy to a non-leprosy person by means of a specific virus, which acts somewhat like the specific poison of syphilis, depending upon thin or denuded surfaces for its absorption, and which remains potent, very probably for an indefinite period of time."

Dr. R. Hall Bakewell, formerly Superintendent of the Leper Asylum, Trinidad, testified before the Select Committee of the House of Commons in 1871, that the inoculation of leprosy was proved as much as any fact in medical science.

In a paper read before the Auckland (New Zealand) Institute, July 20, 1891, and printed in vol. xxiv. of the "Transactions of the New Zealand Institute," Dr. Bakewell says :—" That bacilli exist in both leprosy and tubercle is beyond all dispute; that the bacilli of these diseases may be grown and cultivated in suitable media is ascertained as a fact respecting one of them—tubercle— and, although not experimentally proved as regards the bacillus of leprosy, yet is almost beyond doubt. Artificial nutrient materials have hitherto failed, and it is not allowable to try the only natural medium—the blood and tissues of a person living under conditions likely to develop leprosy. I have no doubt, from seeing the origin of leprosy cases, and studying several hundred cases of the disease, that it is not only inoculable, but that it spreads by inoculation or absolute contiguity, and I have no hesitation, after twenty years' consideration of the subject, in affirming again the opinion given before the Committee of the House of Commons."

Dr. N. B. Emerson, President of the Honolulu Board of Health, says :—" The great problem that confronts the Board of Health is the

leprosy question, and the medical profession in the Hawaiian Islands are, I believe, unanimous in the belief that leprosy is a communicable disease, and a transplantable disease, communicable by inoculation."

In a communication to the Secretary of the National Leprosy Fund, dated Dublin, 6th October, 1890, Dr. John D. Hillis, F.R.C.S.I., late Medical Superintendent, Leper Asylum, Demerara, says :—" My views on leprosy are explained in my work, 'Leprosy in British Guiana,' published by Churchill & Son. A further experience of ten years has convinced me more firmly than ever that leprosy is a communicable disease, most probably by inoculation. In tropical climates, many suffer from ulcers, excoriations, etc., which may render them more susceptible when brought so much into contact with lepers."

Dr. Arthur Mouritz, who occupied the position of physician to the Leper Settlement, Kalawao, Molokai, in 1886, says :—" The *contagium* of leprosy enters the system by inoculation at broken surfaces of the skin, fissures, or chaps, on external mucous surfaces, and possibly by punctures of insects, or the presence of parasites, scabies, etc." In his report to the President of the Board of Health, Honolulu, dated February, 1886, the doctor says:—" Some weight must be attached to the views of the foreigners themselves. They, one and all, such as are now alive, emphatically declare their belief that the disease is contagious. Some give evidence of contact (immediately followed by local symptoms—direct inoculation), infection of the whole system speedily following, this again succeeded by external manifestations of leprosy within a comparatively short period."

In his "Biennial Report to the Legislature of the Hawaiian Kingdom," session 1890, Dr. T. H. Kimball considers the fact of the inoculation or transplantation of leprosy to have been proved in those islands, and that the *bacillus lepra* carries the infection.

Dr. Ginder, who investigated cases of Maori leprosy at Taupo and Rotorua, New Zealand, in his "Report to the Inspector-General of Hospitals, etc., Wellington," dated 4th July, 1890, concludes "that in all probability the worst cases have arisen from direct infection of the blood by inoculation, either accidental or premeditated."

From inquiries made from those who were intimately acquainted with the late Father Damien, I have no doubt that in his case the disease was induced by means of inoculation of leprosy virus from other patients, when he resided in Molokai, through sores on the skin. While possessed of many noble traits, this worthy and self-sacrificing missionary was conspicuous for neglect of ordinary hygienic precautions.

Dr. W. Munro, in his work on leprosy, quotes a series of cases to show that leprosy is spread by contagion, but explains in page 80 the wide interpretation he gives to this much misunderstood word. He observes "that by using the word 'contagion' I do not pretend to express any distinct belief as to the probability of the disease being conveyed by simple contact, being more inclined to believe that it is carried by inoculation in most cases, though long-continued contact even of unbroken healthy with diseased skin may be sufficient."

The doctor gives particulars (p. 84) of several cases of inoculation, all of which, he says, tend to show that inoculation is the chief, if not the only, manner by which the disease is propagated, such propagation taking place quickly only when some special circumstance, as the person being wounded, makes inoculation easy and certain. This writer does not believe there is any evidence of its being communicated in food or drinks, and the only danger from association with lepers is "*when the healthy person has any cut or sore about his hands by which he might be inoculated.*"

Dr. John Freeland, Government Medical Officer, Antigua, in a communication dated Antigua, Sept. 15, 1890, says :—"When I wrote to the *British Medical Journal* in October last that no one would deny that contagion might be artificially produced by inoculation, I meant, of course, inoculation by means of the actual introduction of secretion from the leper's sore into the skin of the healthy, effected either directly by the lancet, or accidentally conveyed through the broken surfaces of the leper and the healthy coming in contact." Dr. Freeland relates how that "T. S., a healthy and robust lad, who was denied board and lodging by his relatives on account of his irregular and late hours, sought accommodation and residence in an out-room situated in a leper's yard. After a time, he received rather a severe wound on one of his feet, and I was called upon to attend him, when I naturally protested against his surroundings, and wished him to go into hospital, not only that he might have every comfort and care, but that he might also be at once removed from his diseased neighbours. He would not, however, consent to leave his house, and I continued attendance long enough to discover that my patient had, since his accident, been systematically using the same basin, the lotion, and even the very rags and bandages that were, perhaps, but a few hours removed from the ulcerated surfaces of his leprosy companion. I need not tell you that the healthy wound soon developed into an intractable and sloughing sore, and was, after some time, followed by those general, but unmistakable, symptoms of leprosy, which went on progressing until the disease was fully formed, and the lad died, an ulcerated and necrosed leper." — *The Lazaretto, St. Kitts, West Indies, October 6, 1890.*

#### THE INOCULATION OF THE CONVICT KEANU.

Whatever doubts have heretofore existed as to the inoculability of leprosy, there can hardly be any after a dispassionate consideration of the facts connected with the experiment on the condemned convict at Honolulu. The prisoner Keanu was inoculated with leprosy by Dr. Edward Arning on the 30th September, 1884, and again in November, 1885, *after previously making a most searching inquiry as to any leprosy taint in his family, and a dose examination of his own body.* This examination satisfied Dr. Arning that no trace of the disease could be found in him. Every precaution was taken to secure his isolation from contaminating surroundings, and means were adopted to ensure that he was not employed outside the prison walls. On the 2nd September, 1888, Dr. N. B. Emerson, then President of the Board of Health, and Dr. T. H. Kimball, Government Physician, examined the prisoner and signed the following certificate :—

"This is to certify that we have this day carefully examined Keanu, who was inoculated in November, 1885, and we find his condition as follows:— "Ears tubercular and considerably hypertrophied; forehead the same; face, nose, and chin show flattened tubercular infiltration; mouth clean, no tubercles; face generally presents a leonine aspect.

"Hands puffed, fingers swollen at proximal phalanges, tapering to distal phalanges; tips of forefinger and thumb of left hand are ulcerated from handling hot tin cups of tea or coffee, indicating anaesthesia.

"Body—Back thickly mottled with flattened tubercles and the surface uneven to feel, colour of the same—a yellowish brown; front of the body, chest and abdomen, presents plaques of tubercular infiltration of larger size than back, separated from each other by wider intervals and of a brighter colour, in some cases a ruddy pink, especially over upper part of sternum.

"Legs—The infiltration thins out as far down as the knees, there being one large bright patch on the inside of the left thigh ; legs below knees quite clean and skin smooth and even to touch.

"Feet — (Edematous; have poor circulation; bluish colour; soles of feet clean.

"Seat of inoculation, outer aspect of left forearm, upper third, shows a dark purplish scar, about one-and-a-half inches long by five-eighths of an inch wide, irregular in shape, keloid in aspect, dense and inelastic.

"The tests for anaesthesia were not made. Eyes with sclerotitis, muddy and infected.

"No signs of palsy about muscles of face, orbiculares palpebrarum, hands, or forearms.

"It is our decided opinion that this man is a tubercular leper.

"N. B. EMERSON, M.D., *President of the Board of Health.*

"J. H. KIMBALL, *Government Physician, Honolulu.*"

In the spring of 1890 Dr. D. W. Montgomery, Professor of Pathology, California University, microscopically examined a piece of Keanu's skin, and discovered the *bacillus leprae* both singly and in groups. This bacillus has been found, according to the *Lancel*, by competent observers in the tuberculated form of leprosy in all parts of the world, and has never been found in any other disease or condition. Keanu has since been sent to the lazaretto, Molokai, a confirmed and incurable leper—a punishment ten times more severe than the death penalty, and, in my judgment, utterly unjustifiable. In a letter on "Leprosy" in the *British Medical Journal*, September 24, 1887, Dr. William Jelly observes :—" I daresay the poor Kanaka convict (Keanu), had he known what leprosy is, would, without hesitation, have preferred the guillotine, the garotte, or the hangman's rope."

Regarding this official declaration, Dr. C. N. Macnamara says:—"This report establishes unequivocally the fact that the inoculated man has become leprosy; and, as he had been inoculated three years previously, there is every reason to believe that the disease is the result of the inoculation. This is very much borne out by the fact that at the seat of inoculation there is what is described as a dark, purplish scar of about one inch wide, keloid in aspect, dense and inelastic.

"The importance of a positive result like this cannot be outweighed by a considerable number of negative experiments; although, so far as we know, this is as yet the only direct experiment that has been made from a leper to a sound individual, and we do not believe that its importance is lessened by the fact that inoculations made from a diseased part of the body to an apparently unaffected part of the body of the same person have, in some cases, not led to development of the disease in the inoculated part within a comparatively short lapse of time.

"The communication of leprosy in this case confirms the views generally entertained by those who hold that the disease is contagious, the idea being that it can only be conveyed from one person to another by a direct communication of leprosy tissue into the moist, living tissue of the person infected; in short, that when it is contagious, it is contagious in the same way that syphilis is understood to be contagious."—*Leprosy a Communicable Disease*, p. 45.

In an article in the April (1890) number of the *Occidental Medical Times*, Dr. Sidney Bourne Swift, Resident Physician, Leper Settlement, Molokai, reports the present condition of Keanu as follows :—"Age 70 years; weight 178 pounds; leprosy infiltration beneath integument of face and forehead; tubercular enlargement of lobes of both ears, the right more than the left; ulceration of palate, and extensive ulceration of pharynx; tubercular enlargement of uvula; tubercular enlargement of alae of nose; partial occlusion of nasal fossae, due to leprosy infiltration beneath pituitary membrane; chronic conjunctivitis and pharyngium-like growth on both eyes; almost deaf; voice hoarse, and with a nasal inflection. Anaesthesia of both hands and feet, although no pronounced enlargement of ulnar or tibial nerves; numerous tubercles distributed over the entire body, but most marked on the upper and lower extremities; three small but angry-looking ulcers on outer aspect of left leg; softened tubercle on dorsum old age."

In an article on "Personal Observations of Leprosy in the *New York Medical Journal* for July 27th, 1889, Dr. Prince A. Morrow, after describing the results of the inoculation by Dr. Arning and the development of tubercular leprosy in the convict, observes that, during his visit to Molokai, he excised a small sub-cutaneous tubercle and a portion of the underlying skin. Numerous sections of this specimen were made by Dr. Fordyce, and in all of them the presence of bacilli was exhibited under a microscope. Dr. Morrow estimates that in the Sandwich Islands "about one half the cases are tubercular, about one-third are anaesthetic, and the remaining

sixth represent the mixed form; the tubercular type is the most rapidly fatal."

Dr. F. B. Sutliff, who spent four years studying cases of leprosy in Maui, Hawaii, says, referring to Keanu's inoculation :—" This case will always stand alone; I suppose no other man will ever be purposely inoculated with leprosy. The facts in the case that point towards the inoculation as having been the direct and only cause of the disease are many and strong. Still they will be attacked by those who would rather maintain their own ideas than discover the truth.\*

\*In an article on Keanu's inoculation, the *Occidental Medical Times*, April, 1892, Dr Sidney Bourne Swift intimates that the case made out by Dr Arning is inconclusive, inasmuch as other members of Keanu's family have been found to be affected with leprosy. Keanu's own son, Eokepa, aged about 23 years, and his first cousin, Maleka, on his mother's side, are lepers, living in the leper settlement. Eokepa left school in 1873 on account of this affliction. These cases are by no means inconsistent with the facts contained in the reports above quoted, and it must not be forgotten that the lepra disease was first discernible at the points of inoculation. Nor can they be considered remarkable, knowing how the disease had been propagated by the vaccination lancet. In one instance reported to Queen Liliuokokalani, an entire school in Hawaii was swept away, with the exception of a single survivor, by this means. However, the case for inoculation does not rest upon Dr. Arning's experiment, but on the un impeachable evidence of numerous reputable witnesses in all parts of the world, and on the fact admitted by pathologists that, given suitable conditions, all bacterial diseases are inoculable.

A well-known medical practitioner at Honolulu gave me a photograph of Keanu, which distinctly shows the appearances peculiar to inoculated tubercular leprosy at the point of insertion in the arm, as well as in other parts of the body. And he considered the experiment an absolute demonstration of the inoculability of the disease. He also unhesitatingly expressed the opinion that the dissemination of leprosy in Hawaii was largely due to inoculation by the lancet of the public vaccinator, a most serious matter not only for Hawaii, but for all other countries where the repulsive and destructive disease is endemic. Dr. Arthur Mouritz, Medical Superintendent of the Leper Settlement, Molokai, says it is doubtful whether one per cent, of the Hawaiians would resist intentional inoculation.

#### LEPROSY COMMUNICATED BY INSECTS.

Both in the West Indies, and in British Guiana, I found the belief prevailing amongst the people, as well as, to a certain extent, amongst medical practitioners, that leprosy was inoculated into the blood by mosquitos.

Nor is there anything improbable in the idea. Sir William Moore, late Surgeon-General, Bombay Staff, "is of opinion that one of the chief sources of danger is due to flies and mosquitos. These pests of Indian life may carry enough leprosy discharge to communicate the disease to a healthy person. None of us can make sure that the fly or mosquito, which irritates by its persistent attention, has not come from a leper. A fly investigates a leprous sore or discharge, carries a particle of poison in its proboscis, or feet, and next settles on some abrasion of the skin of a healthy person !" Dr. Manson, in China, says that elephantiasis has been conveyed by a mosquito. (The "elephantiasis" conveyed by mosquitoes appears to have been another kind of disease than leprosy).

In Dr. Wilson's communication on leprosy in *The Lancet*, Nov. 13, 1880, p. 779, the writer says:—" Dr. Manson received some reward from the Chinese Government a few years ago, for the discovery that leprosy was caused through the introduction of a poison into the blood by the bite of the mosquito, and although little has been heard of this discovery since, the idea seems to receive support from many facts, and explains the curious occurrence of that dreadful malady in the arctic regions, where the mosquito abounds."

Dr. Albert S. Ashmead has an article on "Leprosy in Japan" in the *Journal of Cutaneous and GenitoUrinary Diseases*, vol. viii. page 220, copied into the *Journal of the Leprosy Investigation Committee* for July, 1891, in which the danger of minute inoculation by insects is referred to as follows :—" The Japanese guard carefully against mosquitos and other insects, and wherever insects most abound the most endemic leprosy is found. In addition, those parts exposed to insect foraging are the seat of primary skin lesions of leprosy, as also mucous membranes most exposed to germs in food and water."

And it may be remarked that, if leprosy may be communicated by means of mosquitos and other insects, where the inoculated virus is infinitesimal in quantity, how much greater in proportion is the danger of such contamination in vaccination? In' the latter case the vaccine lymph may, and often is, taken from children where the disease lies dormant, in the incubating stage, without declaring itself by the smallest signal to the eye of the most experienced physician. In all countries where leprosy is endemic, Europeans resolutely object to be vaccinated with lymph from native sources; and, notwithstanding the law, when imported lymph cannot be obtained they and their children remain unvaccinated. As a consequence, the population of Europeans attacked with leprosy is comparatively small and, indeed, of rare occurrence, except in the case of soldiers who are subject to the military regulation of revaccination. This repugnance to native lymph on the part of Europeans in the West Indies was pointed out by Dr. R. Hall Bakewell, Vaccinator - General, Trinidad, in his remarkable evidence before the Select Parliamentary Committee of 1871, and has been referred to by Dr. Castor, of British Guiana, and other authorities.

#### CHAPTER 4: VACCINATION WITH REFERENCE TO LEPROSY

HAVING shown, on the authority of some of the most eminent dermatologists and superintendents of leper asylums, and from the testimony of those who have devoted special attention to the study of leprosy, that the disease is inoculable and spread by inoculation, we proceed to inquire whether there is evidence that this inoculation may be due in whole or in part to vaccination. When dealing with this question, I am aware that I am treading on delicate ground, inasmuch as vaccination has been lauded as an operation benign in its nature, free from peril, "the greatest discovery in the history of medicine," \*

\*Sir John Simon, late Chief Medical Officer to the Local Government Board, speaking of Jenner and vaccination in his "English Sanitary Institutions,"

London, 1890, p.123, *note* says :—"I venture to predict that the new evidence [before the Royal Commission on Vaccination], so far as it may regard the merit of his discovery, will establish more firmly than ever that Jenner's services to mankind, in respect of the saving of life, have been such that no other man in the history of the world has ever been within measurable distance of him."

and, out of half-a-million prescriptions or so, the only one possessing such transcendent merits as to justify its universal compulsory enforcement. It is, moreover, considered by many ardent advocates to be impolitic to do or say anything calculated to discredit vaccination. It is hardly necessary to remind our readers that there has never been a scarcity of medical inventions which have held out similar promises. Smallpox inoculation, which, according to Dr. Moore, cost the nation millions of lives, was universally accepted by the profession for the best part of a century as a discovery "highly beneficial to mankind;" and it would not have been difficult, had it been originally an English discovery, to have obtained a munificent grant from Parliament, and possibly to have persuaded the Government to make it obligatory and universal. The practice of bleeding and cupping was in vogue for at least three centuries, and the use of huge doses of mixed and noxious drugs for nearly as long a period. Jenner received a reward of £30,000 from Government on his explicit assurance that vaccination would make an end of small-pox. The evidence brought before the Royal Vaccination Commission in London, by statisticians and able pathologists, abundantly shows that, while it has had no effect in diminishing either sporadic or epidemic small-pox, it has been a prolific source of the spread of inoculable maladies, such as skin disease, pyaemia, eczema, phlegmon, and, notably, leprosy and syphilis.

#### THE WEST INDIES.

One of the earliest medical practitioners to call public attention to the spread of leprosy by vaccination was Dr. R. Hall Bakewell, president of the Board of Health, Trinidad, who, as Vaccinator-General of that island and Visiting Physician of the Leper Hospital, possessed unusual opportunities for observing the effects of vaccination upon the health of the people. In a communication dated 31st December, 1870, Trinidad, to the Colonial Secretary, London, Dr. Bakewell says :—" The question is not as simple as it appears. It is not a question of half-a-dozen minute punctures in an infant's arm *versus* an attack of small-pox. It is a question of performing on every child that is born into the world, and that lives to be three months old, an operation sometimes, though very rarely; fatal; sometimes, but not frequently, attended with severe illness, always accompanied by considerable constitutional disturbance in the form of fever; sometimes, in an unknown proportion of cases, introducing into the system of a healthy child constitutional syphilis, but suspected in the West Indies of introducing a poison even more dreaded than that of syphilis—leprosy. And the parent is required by law to subject his child to these evils, most of which are only possible, but one of which is certain (the fever), for the purpose of avoiding the chance of an epidemic of small-pox, which, when it does occur, may or may not attack the child.

"It may be taken as proved that the syphilitic poison may be, and has been, introduced into the system of a previously healthy child by means of vaccination. But we know that leprosy is a constitutional disease, in many respects singularly resembling constitutional syphilis; like it, attended by stainings and diseases of the skin; like it, attacking the mucous membrane of the nose, throat, and mouth; like it, producing falling off of the hair, diseases of the nails and bones; and, like it, hereditary. Why should not the blood of a leprosy child, whether the leprosy be developed or not, contaminate a healthy one?

"It seems to me not merely a popular opinion, but a medical one also. In returning to Europe in the spring of this year, I met several medical men from Demerara and other tropical countries, and they all considered that leprosy might be, and is, propagated by vaccination.

"Such cases as the following are difficult to account for, unless one adopts the hypothesis that leprosy is contagious (and, if contagious, *a fortiori* inoculable). The daughter of a colonel in the army, who held a staff appointment in one of our tropical colonies, contracted leprosy while in the colony. There could be no hereditary tendency, for both the parents are English, and it could not have arisen from bad diet. The young lady herself was a creole, but I was not able to discover whether she had been vaccinated from a creole or not. When I called in to see her in England, the disease was so far advanced that nothing could be done for her.

"Four cases at this moment in this colony are whites, both of whose parents are Europeans."—*Royal Gazette, Trinidad, March 1, 1871.*\*

\*Since the above was written I have been informed by the father of one of the patients that Sir Ranald Martin, on being consulted after seeing the case, pronounced that the leprosy had been caused by vaccination.—*Footnote to Dr. Bakewell's Report.*

Dr. Bakewell was summoned on behalf of the Government to give evidence before the Select Vaccination Parliamentary Committee in 1871, and testified as follows (Answer 3563, p. 207 Official Report) :—"There is a very strong opinion prevalent in Trinidad, and in the West Indies generally, that leprosy has been introduced into the system by vaccination; and I may say that, as Vaccinator-General of Trinidad, I found that all the medical men, when they had occasion to vaccinate either their own children or those of patients in whom they were specially interested, applied to me for English lymph; and that was so marked that in one instance a man, who had never spoken to me before, wrote me quite a friendly letter, in order to get lymph from England when he had to vaccinate his own child. It is quite evident that the only reason for wanting lymph from England must be that they consider it free from contaminating the system by leprosy; because, of course, there is an equal chance, and probably a greater chance in England, of the lymph being contaminated by syphilis."

Question 3564 and Dr. Bakewell's answer (pp. 207-8) are as follows :— Q.—" Have you had experience of any case in which Leprosy has been introduced by vaccination?"

A.—" I have seen several cases in which it seemed to be the only explanation. I have a case, now under treatment, of the son of a gentleman from India who has contracted leprosy, both the parents being of English origin. I saw the case of a child last year, who, though a creole of the Island of Trinidad, is born of English parents, and is a leper, and there is no other cause to which it is attributable. Sir Ranald Martin, who is a great authority on these points, agreed with me that the leprosy arose from vaccination." \*

\*Since the above evidence was communicated, twenty years ago, Dr. Bakewell has availed himself of opportunities for extending his researches into the causation of leprosy in New Zealand, which have served only to confirm and strengthen his previous conclusions. In a paper read before the Auckland (New Zealand) Institute, 20th July, 1891, and printed in vol. xxiv. of the "Transactions of the New Zealand Institute," Dr. Bakewell observes that the inoculation of leprosy by means of vaccination is now exciting much attention, and he gives the results of his more recent Inquiries into the subject of vaccination, citations from which will be found in the appendix to this volume.

In a State paper addressed to Earl Granville, consisting of correspondence on the subject of leprosy, presented to both Houses of Parliament by command of Her Majesty, May, 1871, Dr. Bakewell refers to a boy, aged 15, brought from Guadaloupe by Dr. Brassac at the expense of the French Government, in which the disease was attributed to vaccination from a leprous source.

No notice seems to have been taken of this startling testimony by the Select Vaccination Committee in their Report; and it was not until the publication of Professor Gairdner's remarkable cases in the *British Medical Journal*, June 11, 1887, that further inquiry was attempted. In the same year Governor Robinson, of Trinidad, issued a circular to medical men in the Colony, referring to these cases. This letter contained the query, "whether the disease (leprosy) is communicable by vaccination, lymph from healthy vesicles alone being used." It is obvious that the form in which the question was submitted was, but little calculated to elicit the true facts. If "healthy vesicles" alone were used, it is clear that no disease, other than *vaccinia*, could result, and vaccination would be acquitted from a serious indictment, which was the evident intention of the experts who formulated the question. To discuss whether, and how far, impure lymph; or the arm-to-arm lymph in general use in countries like Trinidad, where leprosy is endemic, could convey leprosy, would have been to travel beyond the scope of the inquiry. To this circular twenty-seven replies were received, which may be summarised as follows :—

(a) Upon the matters of experience, two of the witnesses, Dr. Alston and Dr. Chittenden, do not clearly indicate how far their experience warrants them in expressing an opinion upon the question. Of the remainder, four, Dr. de Verteuil, Dr. R. F. Black, Dr. R. H. Knaggs, and Dr. Bevan Rake, appeal confidently to their own practice. The others do not appear to have had sufficiently extensive experience to warrant a conclusion.

(b) As to the communicability of leprosy by vaccination, two of the writers, Dr. de Verteuil, and Dr. Bevan Rake, consider that leprosy cannot be inoculated by vaccination, if pure lymph be used. Dr. Black is of opinion that leprosy can be inoculated, though lymph from healthy vesicles alone be used. All the others express themselves with uncertainty and hesitation, or else disclaim having an opinion worth expressing upon the subject. Dr. de Montbrun, senr., says that leprosy would not be inoculable if every medical practitioner selected very healthy infants, born from healthy parents, and used only the lymph which exudes spontaneously after the puncture of the vesicles. Hardly any of the witnesses refer to the notorious difficulty, not to say impossibility, of ascertaining what families are leprous; concealment, for prudential reasons, being the rule, as admitted by intelligent inhabitants in all the leprous districts I have visited. Dr. Robert Francis Black, who has resided sixteen years at Port of Spain, Trinidad, informed me that his attention had been directed to the subject, and he had not the smallest doubt as to the invaccination of leprosy. He replied to the circular as follows:--

76 Queen Street, Trinidad,

July 16, 1887.

SIR,—I have the honour to acknowledge the receipt of your confidential circular, No. 1818, dated 12th instant, and beg to state, for the information of His Excellency the Governor, that my experience of leprosy agrees with the statements of Professor W. T. Gairdner, of Glasgow, contained in your circular, and that I am of opinion that the disease in question is communicable by vaccination, lymph from healthy vesicles alone being used.

I myself have seen two or three cases of leprosy following vaccination, and have questioned the parents closely, but failed to ascertain or detect any family taint in either. Both the parents were respectively from Africa and China, the other was of creole parentage, but all the children were born here. With reference to these facts, I may mention here that, as far as I can recollect, the periods of incubation after vaccination were from two to three years; in fact, immediately after vaccination all were seized with obstinate cutaneous eruptions. As these were casual cases, I kept no memoranda, and as they did not return I lost sight of them, they probably concluding that it was hopeless to do so. I am also of opinion, for the reasons here stated, that arm-to-arm vaccination, at least in Trinidad, where leprosy is decidedly on the increase, is bad, as many very respectable families here are tainted with the disease, and nearly all the Portuguese have some member of their families actually diseased.

In conclusion, I may mention that I am also of the opinion that leprosy, like syphilis, tubercular phthisis, and cancer, is hereditary and contagious.

I have the honour to be, Sir,

Your obedient servant, R. F. BLACK,

Dr. C. B. Pasley, Acting Surgeon-General, etc.

Dr. Gairdner's cases are reported in the *British Medical Journal*, June 11th, 1887, with the following title: "A Remarkable Experience concerning Leprosy; involving certain Facts and Statements bearing on the, Question—Is Leprosy Communicable through Vaccination?" By W. T. Gairdner, M.D., LL.D., Professor of Medicine in the University of Glasgow :—

"The time seems to have arrived when, without injury or offence to anyone concerned, it is possible to bring under the notice of my

medical brethren some facts, and some inferences arising more or less directly out of the facts, in a case which occurred to me some years ago, but which I have found it necessary hitherto to deal with as involving matters of professional confidence not suitable for publication. Even now I shall deem it expedient to frame this mere narrative in such terms as shall not point to any definite locality, or to any recognisable person, among those chiefly concerned; although, by a formal certificate granted only the other day, I feel, as it were, absolved from the last tie that bound me, even under the most fastidious sense of professional duty, to reticence.

"Six or seven years ago, the parents of a young boy, fairly healthy in appearance, but with a peculiar eruption on the skin, brought him to me, and along with him a letter from a medical gentleman whom I had entirely, or almost entirely, forgotten, but who stated himself to have been a pupil of mine in Edinburgh considerably over twenty years before. It is unnecessary to enlarge on the particulars of this case, further than to state that, after more than one most careful examination, in which I had the assistance of my colleague, Professor M'Call Anderson, we came to the conclusion which we announced to the parents, that the boy was suffering from incipient, but still quite well-marked, leprosy in its exanthematous form; a diagnosis afterwards amply confirmed. What struck me at the time as most peculiar was, that this case, coming from a well-known endemic seat of leprosy (an island within the tropics) and with a letter involving medical details by a medical practitioner of many years' local experience—sent to me, moreover, for medical opinion and guidance—should not have been more frankly dealt with by a diagnosis announced even to the parents, before they left the island. The father of the child was a sea-captain constantly engaged in long voyages—for the most part between this country and the island alluded to. Both father and mother were Scotch, and there were several other children, all reported as quite healthy, as also were both the parents. Under these circumstances I wrote to the medical man—who in the sequel may be called, for brevity, Doctor X.—simply stating the diagnosis arrived at, and indicating the line of treatment proposed. The parents were informed that it would be best for the child to live in this country, and his mother agreed to remain with him accordingly. And, as they appeared anxious to have every available suggestion and advice, I mentioned the name of Dr. Robert Liveing as having given much attention to the subject, and offered to write to him if they would take the boy to London, as they appeared desirous of doing. Although I wrote to Dr. Liveing, circumstances unknown to me led to a change in their plans, and, instead of going to London, they went to Manchester, where I believe some physician was consulted, but I do not remember who he was. Ultimately, the mother determined for a while to settle in Greenock, and I placed her accordingly in communication with Dr. Wilson of that town, who for some time thereafter remained in medical charge of the case.

"Meanwhile, the course of post brought me in a few months a reply from Dr. X., not only entirely assenting to our diagnosis as communicated to him, but stating that he had been perfectly well aware from the first of the case being one of leprosy, but had deliberately chosen not to affirm the fact or even to allude to it in any way, either in his communications with the parents or in his letter to me. No reason was assigned for this (as it appeared to me) very remarkable reticence; but, as I did not wish to have the credit of having discovered for the first time what a gentleman so much more familiar with the disease might have been supposed to have overlooked, I took means to inform the parents of Dr. X.'s reply, and of his having been all along of the same opinion with regard to the disease as we were.

"After this the matter passed out of my mind, and for several years I neither saw nor heard of this child except accidentally and in a way entirely to confirm first impressions. About three years ago, however, while engaged in lecturing on specific diseases, and among others, briefly, on leprosy, I made an effort to find out something more about this patient. The mother had removed to Greenock, and had brought over the whole family to Helensburgh, where, as I learned, they were visited by Drs. Reid and Sewell, and from the latter I now learned that the poor boy had gone steadily to the worse, and was extremely feeble, covered with sores, and in a most deplorable condition physically, but still receiving every attention and care that constant medical treatment, with the most faithful and loving maternal nursing, could afford to lighten his sufferings. I accordingly proposed, within the next few days, a visit to my old patient, as a matter of satisfaction to myself. Unhappily there was no other apparent object, either as regards diagnosis or treatment, for a visit which was, nevertheless, very gratefully accepted.

"The case was now in the most advanced stage of leprosy, proceeding to mutilation of the extremities, and accompanied not only by external sores, but presumably by internal lesions, which had reduced the patient to the last stage of emaciation. It was on this visit that the curious particulars now to be related were first brought to my knowledge by Dr. Sewell, and afterwards confirmed by the statement of the mother, showing very clearly, though, of course, upon second-hand information to a certain extent, that Dr. X. had a very special reason for his extraordinary reticence in the first instance. Her husband, who in his frequent voyages had opportunities of coming into communication with Dr. X., had remarked to him how very strange it was that, even in writing to a medical man about the case, he had given no hint of his opinion about it. The Doctor's reply to this was, in the end, to the effect that he had kept silence because he did not wish to compromise a boy of his own, whom he (Dr. X.) believed to be a leper, and from whom he believed at the time that the boy he had sent to this country had become infected with the disease. He further explained that he had vaccinated his own boy with virus derived from a native child in a leprosy family, and, as I understood (though perhaps not definitely so stated) that leprosy had declared itself in the native child after the vaccination; and, further, that (using his own child as a *vaccinifer*) he had vaccinated our patient directly from him. Before sending the last-named patient away with his parents, he had satisfied his own mind not only that his own boy was leprosy, but that he had in this way become the source of the disease to another; but, the disease in his own child being in a very mild form, he was anxious not to disclose its existence. Meanwhile Dr. X. had died; his estate had passed into the hands of trustees; and I was informed that this reputed leper-boy had been, under the instructions of his father and his guardian, placed and retained at a public-school well known to me in this country, and that the boy was pursuing the usual course of a public-school education, in entire unconsciousness of the disease with which he was supposed to be affected.

"This information, so communicated, placed me in rather a difficult dilemma, namely—was I justified in taking steps to ascertain the truth of the story as regards Dr. X.'s boy, either by personal investigation or, at least, by inquiries conducted so as to result in a well-grounded and scientifically exact opinion as to the facts? And, further, supposing that such opinion should turn out to be that Dr. X.'s boy was a leper, was it a matter of duty on account of others to formally disclose the fact, be the consequences to the boy what they might? It was hardly probable that a boy generally known to be a leper would be retained permanently in any public school in this country, even had it been unquestionably a matter of medical doctrine that such a proceeding was quite safe. On the other hand, the boy was receiving the benefits of an English education at the express wish and on the responsibility of his father and guardian, and without (so far as appeared) any misgivings on the part of anyone. He was an orphan, and in what was to him a foreign land; his remaining under instruction might be, and probably was, a matter of the greatest possible importance to him. To bring him, therefore, even by an indiscreet inquiry, under the ban which in many or most countries still attaches to leprosy was certainly no part of the business of an outsider, and could only be justified at all by an overwhelming sense of duty to others.

"Under these circumstances I thought it well to consult, privately, one or two of those friends in London whom I believed to know most about leprosy, and among others Dr. Liveing, whom I was able to remind, at this stage, of my previous letter. These friends concurred in assuring me that, in the rather improbable event of their being personally consulted as to the retention of a leper in a public school (it being presumed, of course, that he was physically fit otherwise), they would have no hesitation at all in affirming that the other boys would not be endangered by such proceeding. As I happened to be very well acquainted with one of the medical officers (though not the ordinary medical officer) of the school in question, I communicated these opinions to him, and stated to him at the same time the extraordinary circumstances which had begotten, for me, such a lively interest in the son of Dr. X. In the course of a few days I was informed that an inquiry had been held by the medical staff; that the boy had been sent for and privately examined (though not ostensibly ill in any sense); and that it was, beyond all doubt, considered to be a case of leprosy. The medical authorities decided, however, that under the circumstances it was not their duty to sound the alarm, or in any way to disturb the boy's education.

"From this time onwards (except the death of the first patient soon afterwards) I heard nothing more of these matters till a few weeks ago, when I was asked to see Dr. X.'s son professionally on behalf of the school authorities; and, if so advised, to request Dr. Anderson also to give an opinion as to the present state of health of this young man, who happened at the time to be visiting some friends in Glasgow. It was represented to me that he had maintained, on the whole, fairly good health since I last heard of him through my medical friend, and had not been incapacitated from school work except on account of a contagious eczema which had been prevailing, and with which he had been affected in common with other boys. Apparently, however, the opinion had arisen that his general health was not quite so good, and that, in view of a cutaneous affection of this kind, apparently communicable, existing, it was no longer expedient that he should remain at the school. Indeed, I could not but come to the conclusion that his removal, on public grounds, had been practically settled; and with every desire to soften the blow as much as possible to the poor boy, it was felt to be necessary that his guardian, at least, should receive unequivocal and unbiased testimony as to the actual state of the facts and circumstances under which the decision was arrived at. Under these circumstances I saw and examined this boy, and made a report, along with Dr. Anderson, to the effect that the disease was evidently leprosy, though of a remarkably mild type, as shown by discolorations and cicatrices, and also by large, anaesthetic areas on the back of one limb. All breaches of surface, however, and all discharge had ceased at the time of our report, and Dr. Anderson felt still in a position to affirm that no danger to others could occur from the boy's remaining at school. On this last point I did not feel able to give an unqualified assent to my colleague's opinion; but as regards the matters of fact and observation there was no doubt whatever, and our report accordingly on these was substantially as above."

In further explanation Professor Gairdner, in a letter to the *British Medical Journal* August 8, 1887, says :— "In submitting to you some curious facts and statements which had been brought under my notice as bearing on the above subject ("Leprosy and Vaccination": *British Medical Journal* June 11, 1887)I was exceedingly careful not to obtrude any opinion of my own. It was clear from the first that the mere statement of such detail would waken up some old controversies, and would perhaps involve very serious practical issues; but these considerations did not appear to me to justify withholding the facts, but rather the public statement of them in as unbiased a form as was possible."

Referring to these cases, Dr. C. Burgoyne Pasley, Acting Surgeon General, Trinidad, observes :—" The fact remains, that an unlucky boy, of undoubted European parentage, acquired a most loathsome disease, and died a miserable death as the result of vaccination, carefully or carelessly performed as the case may have been."—*Papers on Leprosy, Government Printing Office, Trinidad. 1890.*

The same medical authority says :—" If by accident I draw blood in puncturing the vesicle on the arm of any child, I invariably reject the child as a vaccinifer, no matter how healthy it may appear, or how abundant the supply of lymph may be, fearing to inoculate any constitutional disease, leprosy, syphilis, etc."—*British Medical Journal* 1p. 270, July 30th, 1887.

A correspondent of the London *Daily Graphic*, writing from St. Kitts, 5th June, 1890, reports the following under the title of

#### "A SAD CASE."

"A sad case occurred here a short time ago, which shows the danger that arises from the practice of vaccination in an island where leprosy is treated as of no account. A few months ago a little girl, the daughter of the Rev. Mr. —, a Wesleyan missionary, who came to the West Indies from England two or three years before, fell ill. On examination by the doctors it was found that the poor child had contracted leprosy. The only probable means of communication was by inoculation; and thus the parents, endeavouring to save their

daughter from the very remote danger of small-pox, inoculated her with the horrible poison that will make her life a living death and herself a loathsome and repulsive, spectacle. Hoping that by returning to England he might get something done for his daughter, the missionary resigned his charge and made preparations for his departure. But a new trouble awaited him. The Royal Mail Company's steamers could not take a leper as a passenger; but one of Messrs. Scrutton's vessels agreed to take the sorely distressed family to England. They got on board, and started on their voyage. But ill luck again attended them, for, while leaving the island, and when nearly opposite their old home, the ship struck on a reef; and, although all on board were saved, the missionary and his family remain here, where they have been so sorely tried."

While in Trinidad, I made inquiries of a highly intelligent merchant, who has resided forty-three years in the West Indies, and has always been much interested in the public health. He says the belief is general in the islands that leprosy is being extensively disseminated by vaccination, and he furnished me with particulars of a number of healthy families where leprosy and other diseases have broken out after vaccination, of others who, in spite of a law enforcing vaccination, have preferred to undergo the worry and penalties of prosecution to the terrible risks of this hideous and incurable malady. In some instances the children infected with leprosy have been sent by their parents to France and England, where, after treatment by some of the most distinguished physicians, they have either succumbed to the disease or returned to die at home; and in one case the mother died of a broken heart on seeing her eldest son come back a complete wreck, loathsome to the sight. All the victims described by my informant were in good circumstances, and none were even sent to the Leper Asylum, where only the poor are interned. He says that had he kept a record he would have been in a position to have given details of very many cases, with all the attending circumstances, and adds, "I have come to the conclusion that we are indebted to vaccination for not only this (leprosy), but many other diseases, especially those of a scrofulous nature, as well as syphilis."

In a communication to the *Lazaretto*, St. Kitts, August 25, 1890, Dr. John Freeland, Government Medical Officer, Antigua, West Indies, says:--"In some of these islands leprosy has no doubt spread for the want of precautions to separate the diseased from the healthy, from poverty, overcrowding, or decomposed food, and from, I fear, the system of arm-to-arm vaccination which now so universally prevails."

The following letters, read before the Royal Vaccination Commission, from Dr. Charles E. Taylor, of St. Thomas, Danish West Indies, secretary and member of the Colonial Council of St. Thomas and St. John, member of the Board of Health, etc., illustrate the difficulties which obstruct the investigation into this momentous subject, owing to the dread which is generally felt by inhabitants of its becoming known that members of their family are tainted with this fearful malady, and probably also to an unwillingness to cast reproach on a prescription so extensively recommended by the profession as vaccination:--

St. Thomas, Danish West Indies

Virgin Islands, Jan. 2 1890.

DEAR Sir to your inquiry with reference to the spread of leprosy in the West Indies, I beg to say that it is difficult to obtain testimony with regard to this disease having been conveyed into families either by vaccination or otherwise.

There is such a dread of the hideous fact becoming known, and though parents will talk about such and such a case, when it is pushed home to themselves, and their evidence requested for public purposes, even so important as a Royal Commission, they beg to be excused.

My own experience has compelled the conviction that leprosy has on numerous occasions been propagated by the vaccinator's lancet in these islands. Children have been brought to me a year or two after vaccination who have shown unmistakable signs of leprosy, and whose parents assured me that such had never been in their family before. On the other hand, inquiry into the antecedents of the child from whom the lymph had been selected revealed the existence of leprosy taint either on the paternal or maternal side.

My own experiences have been confirmed by Dr. Bechtinger, formerly a resident and practising physician here, whose extensive researches entitle his opinion to great weight amongst pathologists.

The belief also, in the British West Indies as to the conveyance of leprosy in this way is widespread, and forms one of the strongest grounds against compulsory vaccination that I know of.

In view of such a fact, and in face of such a terrible danger it is my conscientious opinion that every physician should hesitate before subscribing to such a doctrine.

I have the honour to be,  
Yours very respectfully,  
CHARLES E. TAYLOR, M.D., F.R.G.S., etc.

A later communication from Dr. Charles Taylor is published in the *Public Opinion* of Nov. 27th, 1891.

It is dated :—

St. Thomas, Danish West Indies, October 20.

I have read the report of the evidence given before the Royal Commission on Vaccination in London with much interest, and with regard to the connection between vaccination and leprosy, an experience in these islands of over twenty years enables me to confirm the truth of this terrible indictment. On more than one occasion cases have come before my notice of leprosy in families which could

only have been inoculated with the vaccine virus, none of the family having previous to vaccination been afflicted with this malady. Leading dermatologists in all parts of the world, and the most experienced physicians in the West Indies, are of the opinion that leprosy is spread most readily by means of inoculation, either through a wound or an abraded surface, and still more readily by puncturing contaminated vaccine virus into the arms of healthy persons. The reports of the medical officers of health and physicians to the leper asylums in the West Indies show that leprosy, which thirty years ago was stationary or subsiding, has increased. This, I have every reason to believe, and it is also the opinion of other competent medical men, is coincident with the introduction and spread of vaccination, for there are a number of islands where the disease was almost unknown previous to its inoculation in this way. Were it not for the reluctance which all physicians, have to expose families tainted with leprosy, they could give evidence as startling as the cases mentioned by John D. Hillis, of British Guiana; Dr. Bechtinger, formerly of St. Thomas; Dr. R. Hall Bakewell; and Dr. Black, of Trinidad. The possibility of spreading such a dire disease by means of the lancet is one too grave to be longer disregarded, and, it is needless to say, a serious matter for these islands, the most lovely in the world, where children, whose parents may be the most healthy, are liable to leprosy through arm-to-arm compulsory vaccination. May I venture to hope that the English Press will have the humanity and courage to speak out and compel colonial authorities to withdraw the vaccination enactments, which on these grounds alone are so dangerous to ourselves and our families. CHARLES E. TAYLOR, M.D.

So great is the dread of the invaccination of leprosy and syphilis, that when I visited the island of Granada in January, 1889, a gentleman connected with one of the public institutions of the island told me that he had two unvaccinated children, and, that rather than incur the risk of invaccinated leprosy or syphilis, he had sent them with his wife to a place of refuge in the mountains. He was not sure, he said, whether this *ruse* would succeed, as the authorities were very sharp.

When I visited Barbados in January, 1889, Mr. E. Racker, the proprietor of the *Agricultural Reporter*, Bridgetown, informed me of a case of leprosy communicated by vaccination, which he had personally investigated. Mr. Racker was intimately acquainted with the father, a member of the Legislative Council, and on one occasion, when visiting his house, noticed that his friend's youngest child was afflicted with leprosy. The father said it was due to vaccination with lymph taken from a child subsequently discovered to be leprosy. Though he believed in the benefits of Jenner's discovery, he declared that there should be no more vaccination in his family. I may observe that so widespread is the belief in Barbados that leprosy and syphilis are communicated by vaccination, that every attempt to make it compulsory has been defeated. Nevertheless the advantage of vaccination is believed in by several men with whom I conversed, and there is a considerable amount of vaccination practised, to which I attribute no small share in the admitted augmentation of this disease before referred to. The hideous risk, attending the practice of vaccination is illustrated by the following letter of Mr. Racker, who writes .2nd May, 1890:—" I know all about the case reported in the *British Medical Journal* by Dr. W. T. Gairdner. I am one of the executors to the will of Dr. J. C., but I had no idea that the boy was suffering from leprosy until I .got a letter from the head master of Dollar, enclosing a letter from Dr. Gairdner.

"I think I told you how I once consented to have my children vaccinated, and how at the last moment I changed my mind, and would not allow them to be operated on, Well, that boy, Dr. J. C.'s son, was the one from whom they were to be vaccinated. What a narrow escape I had!"

Mr. Alexander Henry, Vice-Chairman of the Council of the British and West Indian Alliance, and formerly editor of the *St. Kitts Gazette*, who has resided some years in the West Indies, and has devoted much attention to the spread and causation of leprosy, writing 12th June, 1890, says :—" A medical officer of health cautiously admitted to me that leprosy was contracted by means of careless vaccination. Now, careless vaccination means vaccination from arm to arm, which is almost universal in these islands. I do not believe there is a doctor of any standing in the West. Indies who would deny that leprosy can be inoculated. It is admitted that owing to the slow incubation of the disease it is difficult to distinguish a leper; and when you take into account that medical officers are constantly complaining to the Government 'that they cannot get a supply of calf-lymph,' and add to this the indiscriminate and careless yet vigorous manner in which they carry out the vaccination laws upon an ignorant and simple people, who have no means of asserting themselves, I think we may safely conclude there is a high probability that leprosy is spread by vaccination."

When or how leprosy entered this island is perhaps unknown. Certain it is, however, that the dread disease has recently been advancing by leaps and bounds. In proof of its increase here I quote the following passage from a recent quarterly report of Dr. Alfred Boon, one of the Government medical officers and acting analysts of Government statistics. Dr. Boon says :—"The opinion that it is, as many hold, increasing in the island, is supported by the fact that in the four years 1885 to 1888 thirty-four such deaths were registered."

In a later communication received by me from Mr. Henry, dated October 8, 1891, he declares his conviction that vaccination is one of the chief factors in the spread of this fearful disease in the West Indies. After referring to the small-pox epidemic in Martinique, in 1887, and the consequent extensive re-vaccination propagated in St. Kitts, the writer proceeds :—" But, you may ask, how did that affect the labouring class, who are known to have a strong prejudice against vaccination, and among whom the disease of leprosy is most common? This is the incident to which I wish to draw your attention. There is in force in St. Kitts (and in most of the other islands) a law to compel all boatmen and porters to take out a yearly license. Now, it so happened that, at the time when the boatmen and porters required to renew their yearly badge, the small-pox was raging in Martinique, with, of course, the usual panic in St. Kitts. The boatmen and porters were informed by the Inspector of Police, or by his authority, that no one could have his license renewed unless he had been re-vaccinated that year. I need not point out the unspeakable dangers which such a system of indiscriminate—almost reckless—arm-to-arm vaccination exposed adults of the class among whom leprosy is rampant. In considering the medical aspect of the practice, you must bear in mind that the defence of the arm-to-arm vaccination by the medical officers is their

admission that it is almost impossible to obtain pure calf lymph in the islands. Can you wonder, then, that there should exist a strong prejudice and an unspeakable dread of vaccination among the lower classes in the West Indies?" In support of this contention, that the majority of the West Indian islanders fear the practice of vaccination, Mr. Henry adduces the evidence of the medical officers themselves :—" Dr. Gavin Milroy, in his 'Report on Leprosy and Yaws in the West Indies' (House of Commons Command Papers, c. 729) states on pages 32, 33, 'In the frequent conversations which I subsequently had with many of these gentlemen (the medical officers in the West Indies) I learned the fact that the European and most of the higher creole families were always extremely anxious about the source of the lymph to be used in the vaccination of their children, from the dread of a leprous taint being thus acquired. None of my informants appeared to partake of this belief themselves, but all recognised the propriety of avoiding the use of lymph from children of families known or believed to be afflicted, especially as infants themselves rarely, if ever, exhibit any outward manifestations of the malady.' "Dr. Milroy says that the Vaccinator-General, Dr. Bakewell seemed to give countenance to the *popular belief* as to the transmissibility of leprosy by vaccination."

Dr. de Verteuil, of Trinidad, in replying to the views of Dr. Bakewell, says (p. 34) that "it is necessary to take certain precautions. The vaccinifer should be healthy, and born of parents free from any syphilitic or leprous taint, and, as hereditary syphilis generally manifests itself after the age of four or five months, it would be as well to choose as vaccinifers children of five or six months and above." The only comment I need make on the "defence" of Dr. de Verteuil's is to point out that it is well nigh impossible to take the necessary and certain precautions to know if the vaccinifers are *leprous*.

Dr. Bowerbank, of Jamaica, in pp. 34, 35, says:—"I have frequently heard of a case of leprosy occurring in a family, alleged to have been the result of vaccination. I know of two instances in one family (a Jewish one), in which the parents and friends are thoroughly convinced in their own minds that such was the case. In Barbados we find a strong prejudice against vaccination, for Dr Browne writes:—"It has been a general rule not to vaccinate from the *apparently unhealthy*, or those of leprous taint, not so much from any opinion founded on fact of the possibility of conveying the disease, as *from respect to the general prejudice prevailing*. For the Leeward Islands, I refer you to a letter to the editor of the *St. Kitts Lazaretto*, 23rd August, 1890, by Dr. Freeland, Government Medical Officer of Antigua :—" In some of these islands, leprosy had no doubt spread from the want of precautions to separate the diseased from the healthy, from poverty, from overcrowding, or from decomposed food, *and from, I fear the system of arm-to-arm vaccination, which now so universally prevails.*"

Mr. Henry says that the only point on which medical men seem to be unanimous regarding leprosy is that, whether it is contagious or not, it is inoculable; and, after citing various medical testimonies, showing the connection between leprosy and vaccination, he observes :—" If ever a case was proved it is this one that there is a universal belief in the West Indies that leprosy is spread by means of vaccination. And I, for one, place far more reliance upon a popular belief of this kind, and especially upon this subject, than I place upon medical testimony, because the neighbours of a leper are far more likely to know when and how he contracted the disease: they know his pedigree, family history, and the whole condition of his life and its surroundings, whereas the medical officer simply pays a casual visit, and often does not hear or know of the leper till the disease manifests itself to such an extent that the leper becomes a burden and a danger to his relations and his neighbours.

"But what was the answer of the College of Physicians to the inquiry of the Chief Secretary of State for the Colonies, as to 'whether there was any ground for the belief that leprosy was spread by vaccination (in the West Indies)?' On page 86, same Report, in their answers and advice to Lord Kimberley:—" The College of Physicians feel they cannot press too strongly on your Lordship the importance of enforcing the practice of vaccination for the protection of those who are too ignorant to protect themselves.' As the people become a little wiser, they will be able to protect themselves from the prejudice of the College of Physicians."

#### SANDWICH ISLANDS.

Leprosy is a disease of relatively slow incubation. Children pronounced perfectly healthy, and represented as approved subjects both for vaccination and for vaccinifers, may, in a few months, exhibit the unmistakable signs of leprosy. In a report by Dr. Edward Arning, dated Honolulu, H.I., November 14, 1885, presented to the president and members of the Board of Health, p. 52, this distinguished observer says:—" The next point touches the vaccination question, with which I have dealt at length under the heading of experimental work. I would further urge that the medical examinations of school children, which have led to the elimination of quite a number of cases, should be kept up regularly and carefully. As an instance of their necessity, I may quote a case which has quite recently come under my observation. A little girl (native) belonging to one of our large schools passed my close examination a year and a half ago as healthy, but now presents initial symptoms of leprosy. We must not rely on general healthy appearance in these examinations, and on a furtive glance at hands and arms. I have found unmistakable marks of leprosy on the back of a child that held a recent health certificate. Moreover, we shall have to extend our examinations even to the very young children, in spite of Dr. Fitch's assertion that leprosy does not make its appearance before the period of second dentition. I have seen a child with clear signs of leprosy at three and a half years of age, and -know of another boy who was a marked case at four years old."

This eminent bacteriologist, in a letter before me, dated September 6, 1889, says:—" During my stay on the Hawaiian Islands for the bacteriological study of leprosy, I was naturally drawn to a scrutiny of the question whether leprosy is transmissible, and had been there transmitted by vaccination; all the more so as there is a general opinion prevailing on these islands that the unusually rapid spread of the disease about thirty years ago may possibly be attributed to the great amount of indiscriminate vaccination carried on about that period. And there is no mistake about the actual synchronicity of the spread of vaccination and of leprosy in the Hawaiian

Islands; but many a mistake is possible as to the real causal relation between the two.

"I could trace the first authenticated cases of leprosy back to about 1830, but the terrible spread all over the islands did not take place until very nearly thirty years later, at a time when an epidemic of small-pox had given rise to very general and very careless vaccinations throughout the group . . . . . attach far more importance to an instance of an increase of leprosy soon after vaccination on a much smaller scale, and during a much more recent period than the above. I have it on good authority that a very remarkable new crop of leprosy cases sprang up at Lahaina, on the island of Maui, about a year after most careless vaccination had been practised there."

The impossibility of detecting leprosy in its early stages is a matter of common notoriety amongst physicians, so that many who believe in the prophylaxis of vaccination refuse to incur the terrible risks involved by its practice in leprosy countries.

Dr. E. Kaurin, in "Notes on the Etiology of Leprosy," in the *Lancet*, January 25th, 1890, observes :—" We must bear in mind that the duration of the disease is much longer than is generally supposed. The patients, as a rule, take no account of the long prodromal stage, marked by indefinite subjective phenomena and temporary affections of the skin. The physicians themselves often overlook the early symptoms of the disease; indeed, it is sometimes impossible to form a diagnosis in the early stages. The whole period of the disease, from the onset to the time when distinct signs are noticeable, amounts to at least from three to four years."

Mr. H. A. Acworth, writing to me from the Municipal Commissioner's Office, Bombay, July 29th, 1891, says:—"I have plenty of lepers in my hospital here who could not be identified as such, unless they were completely stripped and examined by a trained eye."

Dr. Mitra, in his Report on Leprosy in Kashmir, refers to the recorded statistics of lepers, and says that the enumerators "might have overlooked many cases in the incipient stages," whereupon the Lahore *Civil and Military Gazette* calls attention to the consequent dangers of communicating organic or other diseases by means of vaccination.

Dr. E. Arning says :—" When in Hawaii I attended a German boy, aged 12, who suffered from leprosy, from whom, when he was seven years old, several white families had been vaccinated."—*Journal of the Leprosy Investigation Committee, February, 1891, p. 131.*

In the report of Dr. Webb, medical inspector, on the condition of the schools, April 1st, 1886, are recorded five-cases of incipient leprosy in the Royal School, and two in the Fort School, Honolulu.

Dr. F. B. Sutliff, of Sacramento, California, who has studied the disease as Government physician on the Island of Maui, says:—" I very seldom visited a school without excluding some (children), while the spots just beginning to show in others made it only too probable that they would not long be doubtful cases. It did not seem to me a difficult task to read the fate of Hawaii in the little dark faces that looked up from their books."— *Occidental Medical Times, April, 1889.*

In Dr. Arning's report, dated Honolulu, Nov. 14, 1885, p. 14, we read :—" Closely allied to inoculation is the subject of vaccination. You are doubtless aware of the very prevalent opinion among medical men that the unusually rapid spread of the disease may possibly be attributed to the great amount of indiscriminate vaccination which has been carried on in these islands. If my information is correct, unquestionably new centres of leprosy have developed after vaccination was practised and several old inhabitants have told me how they themselves used no precautions whatever in vaccinating during a small-pox scare.

"To bring some light on this moot point I vaccinated a number of lepers. The vaccination only took in three cases, one tubercular and two anaesthetic. Both the lymph and crust of the tubercular case contained the *bacillus leprae*; in the anaesthetic cases I could not detect it."

Dr. Arthur Mouritz, then Resident Physician and Medical Superintendent of the Leper Settlement, Mokai, in his Report for 1886 to the Board of Health, after alluding to contagious and hereditary predisposition, says:—" The third cause to which I attach some importance, and which has undoubtedly spread the disease, is vaccination. I can bring forward no case personally, but I have reliable hearsay evidence that after the operation of vaccination had been performed on several white children, they manifested signs of leprosy, and finally developed the disease. Evidence on this same point is put forward by Sir Ranald Martin in India, and by Professor H. G. Piffard, of New York, both reliable authorities."

An Appendix to the "Report on Leprosy" addressed to the Legislative Assembly of Hawaii, in 1886, is an interesting account of Queen Kapiolani's visit to the Leper Settlement at Molokai, by the Princess (now Queen) Liliuokalani, in July, 1884. Amongst other incidents, the Princess refers to an interview with one, Kehikapau, in the presence of several persons. - Kehikapau called the Princess's attention to the circumstance of his having contracted the disease from vaccination. He also mentioned that, through the same agency, all his schoolmates had died of the disease, induced in this way.

According to the Report of Surgeon J. R. Tryon, of the United States Navy, leprosy has spread "from year to year in Hawaii, and has increased to a marked degree since the indiscriminate and careless vaccination practised during the severe epidemic of small-pox in 1853." — *Medical and Surgical Memoirs, 1887, vol. 2, ft. 1252, by Dr. Joseph Jones, President of the State Board of Health, Louisiana.*"

In a summary of reports furnished by foreign Governments to His Hawaiian Majesty's authorities as to the prevalence of leprosy in India and in other countries, and as to the measures adopted for the social and medical treatment of persons afflicted with the disease (Honolulu, 1886), I find the following extracts, p. 238 and 239, from the *New Orleans Medical and Surgical Journal, April, 1880.*

After referring to the relation of leprosy with syphilis in the Hawaiian Islands, the author says :—"Vaccination was also inquired into. Alarmed by an invasion of small-pox in 1853, a general vaccination of the whole population was ordered, and physicians being at that time very few on the islands, non-professionals aided in the work.

"It is charged by some that, as a natural result of the labours of the heterogeneous force so appointed, not only syphilis, but also leprosy, was greatly increased. In my last circuit trip in my district, I found very few adults who had never been vaccinated. This involves the question of inoculability—in my opinion the main, if not the only, means of propagation other than inheritance—that is, like syphilis, it depends for its propagation upon the direct introduction of virus into the blood."

The fact that an increase in the practice of vaccination in leprosy countries is often accompanied by an increase in the dissemination of leprosy is shown by the following evidence :— Mr. George C. Potter the Secretary to the Honolulu Board of Health, writing to me on behalf of the President of the Board of Health, Dr. J. H. Kimball, in a letter dated Honolulu, H.I., June 1st, 1890, says :—" It is an opinion among the laity and some of the profession that the extensive arm-to-arm vaccination that was practised in the years 1852 and 1868 during small-pox epidemics was a prolific cause of the spread of leprosy" In a report of the Board of Health to the Legislative Assembly of 1886, by the then president, Mr Walter M Gibson, I read, p 35, "There are two more causes which, in my judgment, have had a great effect in the propagation of leprosy, or diseases closely allied to it, although, medically, it be a disease *sui generis*. The first was the ignorance of some of the early and unqualified medical practitioners who were permitted to spread disease broadcast, and to do irretrievable injury before retribution overtook them; but the second and chief cause was the indiscriminate and, to my mind, careless vaccination that began about 1868

Dr H S Orme, President of the State Board of Health, California, in an able memoir on "Leprosy: its Extent and Control," says:—" There can be no doubt that the lowering of the vital stamina of the race by the great prevalence of syphilis (at Hawaii) prepared them for the inroads of any disease that might threaten. During this period small pox also scourged the people, and in 1868 there began a general vaccination, in which virus was taken indiscriminately from human subjects. This reckless practice doubtless contributed greatly to the spread of both syphilis and leprosy."

In an article on "Personal Observations of Leprosy in Mexico and the Sandwich Islands," in the *New York Medical Journal* for July 17, 1889, the author, Dr Prince A Morrow, M A, says —"Vaccination is believed by the natives, as well as by many intelligent physicians, to be a potent agent in the rapid diffusion of leprosy through the islands It must be remembered that until recently vaccination was performed by unskilful persons, human virus was used, and no distinction was made between a healthy person and a leper as a vaccifer. The fact is incontestable that, after the general vaccination of the natives, numerous leprosy centres developed in various parts of the islands where the disease had previously been unknown. Arning demonstrated the plentiful presence of *bacilli* in the lymph and crusts of vaccine pustules in lepers."

In the *Archiv fur Dermatologie und Syphilidologie* for January, 1891, we read that at the Berlin Medical Congress of 1890 Dr. Arning read a paper on "The Transmission of Leprosy," wherein he scouts the idea of hereditary transmission. He proceeds to ask the question raised by the late Dr. Hillebrand, "Has leprosy been spread in the Hawaiian Islands by means of universal vaccination?" And he declares:—"There can be no doubt as regards the synchronousness of the diffusion of leprosy and the introduction of vaccination into the Hawaiian Islands.

"I am able to state—having excellent authority for so doing, though, unfortunately, no statistics—that a very remarkable accumulation of fresh leprosy cases took place in 1871-72, in a place called Lahaina, on the Island of Maui. This happened about one year after a universal arm-to-arm -vaccination, which had been most carelessly performed. About fifty to sixty cases occurred suddenly in this locality, which up to that time had been comparatively free from the disease."

Dr. Arning concludes :—"Arm -to-arm vaccination should be prohibited in countries in which leprosy abounds."

When, during my visit to -Honolulu in October, 1890, it became known that I was seeking information concerning the spread of leprosy, in the interest of the public health, and not to support any medical theory or foregone conclusion, several gentlemen who had devoted much attention to these subjects called upon me, and others gave me introductions to those who were conversant with them. The President of the Board of Health, the Hon. David Dayton, and the Secretary, Mr. Potter, afforded me valuable assistance, and supplied me with copies of their various official reports relating to the introduction and dissemination of leprosy and the methods adopted for dealing with the scourge, which, with other European diseases, bids fair, unless arrested, to destroy the entire native race. They incidentally showed me copies, cut from the Press, of my own communications on the subject of leprosy and vaccination in the West Indies, thus illustrating their desire to inform themselves upon the subject by evidence from all quarters of the globe.

I have, in this monograph, made free use of the facts and testimonies contained in these important official documents, and I take this opportunity of expressing my thanks for the courtesy' and information furnished by the gentlemen connected with the Board of Health, resident physicians, the Executive Officers at Molokai and Kalihi, and members of both Houses of the Legislature.

According to all the evidence which I have been able to obtain, leprosy was unknown in the Sandwich Islands until many years after the advent of Europeans and Americans, who introduced vaccination ; and there is no aboriginal word in the Hawaiian language for this disease. Mr. Dayton, President of the Board of Health, says that the natives, having no words of their own, used the Chinese words *maipake* ?—" what is this disease?"

In Captain Cook's time (1770-79 ED) these islands were supposed to contain a population of 400,000 at the present time they do not number more than 40,000, and are rapidly diminishing. In all quarters, both native and European, lay and medical, among members of both Houses of the Legislature, I found the belief all but universal that leprosy was considered to be communicable, and that the propagation of the disease during the last twenty-three years was largely due to vaccination.

One medical authority told me that he had no doubt that the disease was inoculable and spread by vaccination, but he did not think it would be prudent to disclose the fact amongst the natives, as he would not be responsible for what they would do. He expressed his own convictions freely on the subject, which are confirmed by Dr. Edward Arning's inoculation experiment on the condemned convict Keanu, of whom he gave me a photograph, showing the development of the tubercular form of this disease. No other intelligent resident shared the fear of such an exposure, the incriminating facts having already been acknowledged both in the official reports and in various communications by medical practitioners to American medical journals. On the contrary, when it became known that I was there not to institute experiments but to collect facts in the interest of those afflicted people, I was urged by influential citizens, and particularly by members of the Legislature, to do what was possible to make known the evils under which they suffered, and to bring an enlightened public opinion to aid them in putting an end to a mistaken medical procedure, which had led to such disastrous results. One of the gentlemen who besought my intervention was Mr. J. Kalua Kahookano, a barrister-at-law, and representative of North Kahala, Island of-Hawaii (the largest in the Archipelago), who introduced a bill (July, 1890) in the Hawaiian Legislative Assembly to repeal the vaccination laws. This bill was supported by a petition from Mr. Kahookano's constituents, showing how leprosy, syphilis, and other diseases had been scattered broadcast in these islands by means of the vaccinator's lancet, and new centres of the diseases thus established. The truth of this fearful indictment is now admitted by several medical practitioners of high standing, who have visited the islands to study the cause of the rapid spread of this destructive malady.

Amongst other old residents who kindly volunteered information was Mr. H. G. Crabbe, a member of the Upper House of Legislature, who had resided in the islands for forty-three years, and had always taken an active interest in the public health. He said it was time that the true facts concerning the propagation of this disease in Hawaii were made known, as the people were being decimated by leprosy conveyed to the blood by vaccinators. Mr. Crabbe detailed various facts in proof of this serious charge, and expressed the utmost anxiety that the truth should be made manifest in countries where public opinion was a potent factor for the wellbeing of the community. He had met with many cases of leprosy clearly traceable to vaccination in the islands, and the facts were admitted by those who, like himself, had taken the trouble to investigate them; but the evil was being perpetuated by those who ought to know better, partly through apathy on the part of the authorities, and partly through the ignorance of the natives, who accepted whatever kind of vaccine virus was most handy when wanted for use. Mr. Crabbe was a believer in vaccination as a prophylactic against small-pox, but considered that, as at present administered, it was a most cruel and mischievous infliction upon a confiding population.

In a statement handed to me by Mr. Crabbe, dated Honolulu, Hawaii, Oct. 22, 1890, the writer says:—"In the year 1866 there was an indiscriminate vaccination of young and old amongst the natives; this vaccination was compulsory, but, thank heaven, I did not allow my children to be vaccinated with the common herd. From that time the leprosy cases became more frequent; many natives who had previously been healthy were afflicted with leprosy. The spread of the loathsome disease was more pronounced in the years following this indiscriminate vaccination. I can recall one case in particular of a native girl by the name of Kapeka, as healthy and as nice looking as 'tis possible for a native to be, who was forced to be vaccinated in the year 1866. In the year 1871 or 1872 Kapeka was sent up to the Molokai Leper Asylum by order of Dr. Robert M'Kibbin. In this particular case I have always contended that this girl was inoculated with the germs, not only of leprosy, but also of syphilis, from this fact. Long before she exhibited any signs of leprosy (some three years), if she hurt herself, so as to make an abrasion of the skin, the place would inflame and suppurate, and would take a long time in healing, presenting an appearance like a syphilitic sore. She died at the Leper Settlement."

The appropriation by the Government for the Molokai Lazaretto is £10,000 a year—a large sum for a poor and comparatively thinly populated country. During the past twenty-five years, about a million and a quarter dollars have been expended by the Hawaiian Government in making provision to benefit these afflicted people. It is, however, melancholy to reflect that one source of the dissemination of the disease, viz.—vaccination, is still permitted, and, there is reason to believe, is encouraged both by the misguided Government and, notably, by certain official members of the medical profession. The latter have inherited such a deeply-rooted prejudice in favour of the merits of the Jennerian practice as to blind them to its destructive potency in countries where leprosy is endemic. The great majority of medical practitioners take their views from the medical journals, which most unfairly refuse to give their readers the adverse side of the Jennerian practice.

Notwithstanding the evidence of the disastrous results of vaccination in spreading and establishing new centres of leprosy, we are told in the "Biennial Report of the President of the Board of Health to the Hawaiian Legislature for 1888" (in which the depopulation of the islands, and the spread of leprosy, is frequently referred to) that "the work of vaccination has been pushed with vigour;" and, "The Board would recommend the passage of a more stringent law, imposing heavier penalties and giving the vaccination authorities all necessary authority."

In his remarkable work, "Traite Pratique et Theoretique de la Lèpre," p. 306, Professor Henri Leloir refers to the introduction and progressive increase of leprosy in the Sandwich Islands, and states that vaccination, compulsory and *en masse*, contributed to the spread of the disease.

Coincident with the activity with which vaccination has been extended in Hawaii, there have been several very severe outbreaks of

small-pox. In the year 1881, according to official reports, 500 persons died of smallpox, a large majority of whom had been vaccinated. Each of these epidemics has been accompanied by a more stringent enforcement of vaccination, and has been followed by the development of new centres of leprosy and the more rapid spread of this destructive scourge.

## BRITISH GUIANA.

In the pursuit of my inquiries in British Guiana in 1888-89, the public librarian, Mr. Rodway, expressed himself much interested in the subject of leprosy, which, considering the remarkable increase of the disease in that colony, has been neglected of late years. He called my attention to a work entitled "Leprosy in British Guiana," by a careful scientific observer, Dr. John D. Hillis, formerly Superintendent of the Leper Asylum in that country. Mr. Rodway said this was regarded as the standard work on the subject. From it I extract the following particulars of invaccinated cases

Case IV., p. 30.—*Confirmed Tubercular Lepra, supposed to have been contracted by Vaccination.*—Joseph Francis C—, a fair Portuguese, born in Demerara, now aged twenty years. His parents are alive and healthy. He has been suffering for the last ten years from tuberculated lepra. He has a sister, aged eighteen years, at present (1879) an inmate of the asylum, suffering from the same form of leprosy. They were both admitted on July 30th, 1877, from Murray Street, Georgetown. They have three sisters and one brother, who are alive and well. Our patient, J. F. C—, and his sister were vaccinated with lymph obtained from a member of a Portuguese family, ("It is within the knowledge of Dr. Manget, surgeon-general, and the author, that this family are at present afflicted with tuberculated lepra.") in whom leprosy was afterwards found to exist. They were the only members of the C— family vaccinated with this lymph. Within 18 months of the performance of the operation by Dr. —, a reddish brown spot appeared on the inner side of the right thigh, preceded, it is stated, by some constitutional disturbance. This spot was raised and tender, accompanied by profuse sweating all over the body, and remained for some time. Subsequently other spots made their appearance on the right buttock (which disappeared shortly after), between the shoulders, and on each cheek. They were all ushered in by more or less well-marked febrile symptoms. A red patch next appeared on the forehead, and epistaxis set in, periodically occurring to this day. Tubercles then made their appearance on the face, the other patches continuing to increase in thickness and roughness, and forming tubercular infiltration."

"The latter was removed by gurjun oil, under which treatment many of the symptoms were ameliorated." State and condition on November 30th, 1879 :— "He has a light brown irregular patch on the front of his chest; this had been larger, thicker, and mahogany-coloured, and has evidently undergone partial absorption. There is a patch of tubercular infiltration on the back of the arms, and at the back of the elbows. The fingers are swollen, shining, and dark-looking, a solitary tubercle forming on the back of the hand. The swollen condition of the fingers and hands is very characteristic. There are two tubercles on each cheek the size of marbles; the lobes of the ears are thickened, and a tubercle is forming on the upper lip.

"There is no appearance of hair growing on the face. There are reddish-brown discolourations on the front and back of the legs. There are a few small scattered tubercles on the dorsum of the feet, and the lower parts of the legs are swollen and hard to the touch. There are tubercles on the scrotum, an ulcer on the leg where a tubercle has ulcerated, and the larger tubercles are slightly anaesthetic. This young man is one of the carpenters of the Institution; he is in hopes the treatment now being adopted may arrest the disease, which is, however, making slow but sure progress."

On page 191 of Dr. Hillis's book, a passage is cited from the work of Dr. Vandyke Carter (p. 178), one of the greatest authorities on the disease, in which vaccination is instanced as one mode of communicating leprosy. On page 192, we read :—" The subject of leprosy was brought forward at the stated meeting of the New York Academy of Medicine, January 20, 1881, in a communication by Dr. H. G. Piffard, in which the author, who is not himself a believer in the contagiousness of leprosy, states :—' A review of the evidence bearing on the contagiousness of leprosy led the speaker to the conclusion that this disease, like syphilis, is not contagious by ordinary contact, *but it may be transmitted by tile blood and secretions. Vaccination may transmit it.*"

A case in the speaker's own experience was cited in proof of this."— *The Medical Record, February 19, 1881 p 212.*

Sir Ranald Martin states :—" The dangers to Europeans arise chiefly from vaccination and from wet-nursing. I felt that very early in my career in India and I took the precautions which are here recorded. I saw an English lady last year in a horrible condition (she said) from having been vaccinated from a leprous child." — *Leprosy in British Guiana, by Dr. Hillis, p 182.*

On page 208 we read :—" I have already given some cases in which there could be no reasonable doubt but that the disease was produced by vaccination with tainted lymph. Those of the brother and sister mentioned are conclusive on the point, and we have the testimony in favour of this mode of propagation from such men as Tilbury Fox and Erasmus Wilson. I will therefore conclude this chapter with a case from the work of a recent writer, Dr. Piffard, of New York " :—" Case III.—William T—, aged 25 years, was admitted into Bell Hospital in May, 1864. He was of English parentage, but was born and passed his early life in British Guiana. After vaccination, performed when young, his arm became greatly swollen and inflamed, and large sloughs separated. Investigation revealed the fact that the vaccine virus had been taken from a negro whose mother was a leper. At the age of seven years some brownish spots appeared upon his back and arms; and at the age of eleven a blister formed on the palm of the right hand, followed by permanent contraction of the flexor tendons. A few months later he felt a tingling sensation around the nail of the right index finger, followed by a line of suppuration and loss of the nail. The finger soon healed, but the same morbid process separated itself in the other fingers of the same hand. After a few months, according to his statement, the skin of the distal phalanges split, and the flesh shrank away from the bones, leaving them exposed. The bones separated at the joints, and the stumps healed. These various processes occupied eighteen

months or two years.

"The disease then affected the distal phalanges of the left hand in the same manner. After this it attacked the right foot, and a slough formed over the lower part of the instep. The great toe then became swollen, the skin split, and its distal bone separated; then, without much regularity, the remaining phalangeal bones of fingers and toes necrosed and came away."—*Diseases of the Skin*, p. 209.

"On examination," adds Dr. Hillis, "the patient was found to have *maculae* or other spots, and anaesthesia of the parts affected."

On the 31st March, 1890, I wrote Dr. Hillis, referring to the cases of invaccinated leprosy mentioned in his book, and asked if he could furnish me with any other facts, and whether he would be willing to give evidence before the Royal Commission. To this I received the following reply:—

134 Leinster Road, Dublin, 2nd April, 1890.

DEAR Sir,—Yours to hand. I have no further reliable evidence as to the transmission of leprosy by vaccination than that contained in my book. These cases, however, may be relied on. I got the particulars from the medical man who performed the vaccination in question, and the parents of the children. I enclose a reprint from *Timehri*.—I am, Yours faithfully, -JOHN D. HILLIS.

Wm. Tebb, Esq

*The British Medical Journal* of November 5, 1887, contains a letter from Dr. Hillis, repeating his conviction as to the communicability of leprosy by means of vaccination. Dr. Hillis says he has had more than twenty years' experience of the disease (leprosy), and half of this time he was superintendent of the largest leper asylum in the West Indies. In this remarkable work, Dr. Hillis quotes Dr. George Hoggan, whose testimony I have adduced, as an authority on the subject of leprosy, and few persons have had greater opportunities of studying the pathology of this disease.

In a recently published work by the late Archdeacon Wright, entitled "Leprosy an Imperial Danger" (Churchill, 1889) the writer, p. 85, reluctantly admits the danger of leprosy vaccination. "Much, very much," he says, "seems to imply that leprosy can be communicated by inoculation, and is communicated by vaccination."

Dr. C. F. Castor, the Medical Superintendent of the Leper Asylum, Mahaica, British Guiana, in his report for the year 1887, p. 43, says :—"Another manner in which the disease (leprosy) may be produced in the healthy with no taint is vaccination. This seems a most probable means of communicating the disease, nor can there be any doubt, I fancy, after reading the admirably recorded case by Professor Gairdner, of Glasgow, in the *British Medical Journal* of the 11th June, 1887. Dr. Rake, of Trinidad, disputes the obvious conclusion of the professor, and marshals a number of facts that do not in any way, to my mind, overthrow the fact that in that case vaccination was the cause of introducing the disease in the child."

Again, in paragraph 86 of the same report, Dr. Castor says :—" I have noted these points because I consider they are important, and as needlessly obscuring a palpable fact which should be made known far and wide in countries where leprosy is endemic and widespread, as with us, that there is every certainty of inoculation through vaccination."\*

\*Since the above was written Dr. Castor has given evidence before the Royal Commission on Vaccination (December 2nd. 1895), and in some particulars modified this opinion as to the danger of communicating leprosy by means of vaccination. In an article in No. 4 of the "Journal," December, 1891, in reply to my evidence on this subject before the Royal Commission, p. 4, Dr. Castor observes:—"The opinion expressed that vaccination from a tainted source will produce the disease is, I believe, a true one." Surgeon Brunt, R.N., testified, March 2nd, 1892, before the Royal Commission, to actual cases of invaccinated leprosy within his own experience. Positive evidence and a body of unimpeachable facts cannot be set aside by wavering and contradictory statements like those of Dr. Castor.

The dread of communicating leprosy at Georgetown by means of vaccination is very general, and, as a consequence, the vaccination laws are, to a large extent, inoperative. Dr. Robert Grieve, Surgeon-General for British Guiana, in his report for 1887, referring to vaccination, p. 7, says :—" In the beginning of the year vaccination, which had been carried on energetically in the latter part of 1886 in Georgetown, came practically to an end, owing to the unwillingness of the people to bring their children for the purpose."

On inquiry from both medical practitioners and intelligent residents, I found that this objection was mainly due to a wholesome dread of infection of leprosy, when the vaccination was performed with arm-to-arm virus, and of syphilis with various cutaneous eruptions, when imported lymph was used.

In the "Report on Leprosy and Yaws in the West Indies," by Dr. Gavin Milroy (House of Commons papers, C 729), the Surgeon-General of British Guiana says (p. 33) :—" As far as my own opinion goes, I am inclined to believe in the possibility of such communicability—i.e., of leprosy by means of vaccination. There is no objection in Guiana to vaccination, if the parties know the children from whom the lymph is to be taken." But against this there is the testimony of Drs. Hackett, Watkins, Stevenson, and Allison, who state that vaccination has hitherto been practised to a very limited extent among the lower classes in Guiana. Dr. Allison says that "this is principally, if not entirely, due to the difficulty of obtaining vaccine lymph ;" while Dr. Stevenson admits (p. 35) that "the prejudice of the lower classes against vaccination, on account of the supposed communicability of leprosy by it, was, until the recent epidemic of small-pox in Trinidad, insurmountable."

## UNITED STATES.

The origin of various recent outbreaks of leprosy in the United States is veiled in obscurity, only because medical men do not know where to look for it; though they have admitted that, since the discovery of the *beth/us leprce*, vaccination appears to be the most probable cause. Reluctant to impugn the Jennerian practice, and with opportunities at command, they have preferred to extend their researches in other directions.

Dr. H. S. Orme, President, State Board of Health, California, considers the ordinary explanations given to account for the dissemination of this disease inadequate, and observes:—" Not heredity, nor syphilis, nor endemic conditions, could have given rise to the group of sixty cases in the village of Spain; to the outbreaks in New Brunswick and Cape Breton Island; to the sixteen cases at Charlestown between 1846 and 1876; to the forty-two now at New Orleans, or to the two at Galveston. It is often impossible to trace the source and mode of contagion, but the same is true with all the disorders whose contagiousness is disputed."---*Leprosy: its Extent and Control*, p. 29.

In the "Transactions of the Medical Society of the State of California" for 1890, vol. XX., Dr. Orme, referring to the general vaccination of the people of the Sandwich Islands in 1868 with human lymph, consequent upon an outbreak of small-pox, says:—" This reckless practice doubtless contributed greatly to the spread of both syphilis and leprosy."

"At a meeting of the New York Academy of Medicine, June 6, 1889, Dr. Prince A. Morrow gave an account of his personal observations on Leprosy. Referring to his visit to the Leper Asylum at Molokai, he said he considered it probable that a number of the cases which had arisen in the Sandwich Islands had been caused by impure vaccine."—*British Medical Journal*, Aug. 31, 1889.

Dr. T. B. Sutliff of Sacramento, California, has sent me the following narrative of a case of invaccinated leprosy, contracted in California :—" Boy, native of California; never been out of this State; no family history of any constitutional disease; was well until about eight years ago; was then vaccinated. The arm became very sore, and was swollen in its entire length. An abscess formed in the axilla, and subsequently broke, discharging pus freely. Recovery ensued, the arm becoming well again. Soon after it was noticed that there were numerous patches of 'ringworm' on the body. This condition continued for several months. Several persons, himself included, were vaccinated by the father directly from the boy. The father, and one other of the persons vaccinated, subsequently had 'ringworm.' The father has since had 'tetter' from time to time. One year after vaccination the boy's ears became slightly enlarged. The nose was noticed to have become broadened, and tubercles formed on it and on other parts of the face.

"The ears are markedly enlarged, the nose broadened, and the *alce* are thickened. The hands show the disease quite plainly, the fingers being clubbed. There are a few small ulcers. There is a sore on the shoulder. The feet are beginning to be affected."

In the report of Dr. H. W. Blanc, Professor of Dermatology and the Chief Sanitary Inspector for the city of New Orleans, November 27, 1889, addressed to the President of the Board of Health for the State of Louisiana, where leprosy has been provokingly prevalent, it is stated that leprosy, syphilis, and tuberculosis are transmitted by vaccination. Dr. Blanc says that, "in his two-fold capacity of Dermatologist to the Charity Hospital of the city and Chief Sanitary Inspector of the city, he has had unusual opportunities for the study of leprosy and vaccination. During the past eight years he had observed over sixty cases of *bona-fide* leprosy (anaesthetic and tubercular). The disease is slowly increasing, it is inoculable and communicable by vaccination, and humanised virus should be avoided. Most of the vaccinations are performed by me and my assistants, and I will not on any account allow humanised virus to be used."

*The Occidental Medical Times*, Sacramento, California, of September, 1890, publishes "An Interesting Case of Anaesthetic Leprosy apparently following Vaccination," by Sidney Bourne Swift, Resident Physician, Leper Settlement, Molokai, H.I., and D. W. Montgomery, Professor of Pathology and Clinician for Diseases of the Skin in the Medical Department of the University of California. The writers say that "one of the most interesting points in this case is that Peke (the leper) had been vaccinated one year before developing symptoms of leprosy, and that the vaccination scar became anaesthetic. Might it not be that with the vaccine virus the virus of leprosy has also been inoculated?"

This question is answered by Dr. Chr. Uronwald, Chairman of the Sanitary Committee on Leprosy, Minnesota, Wisconsin, U.S., who says in the official report of the State Board of Health, "Vaccination has undoubtedly originated leprosy."

In a paper read before the California State Medical Society, in 1881, Dr. A. W. Saxe gives an instance of three children in Honolulu, born of American parents, who became lepers.

In consequence of the serious development of leprosy in Hawaii, there has arisen, during the past two or three years, a determined opposition to vaccination, to which the increase of leprosy is naturally attributed. The President of the Board of Health, the Hon. David Dayton, in the Report to the Board of Health, Honolulu, for 1892 (p. 27), says "that notices were inserted in the newspapers offering vaccination, but there were no applicants." In the same report (p. 67) Dr. R. B. Williams, Government Physician for Hilo and Puna, Hawaii, says:—" There is among natives great prejudice and opposition to vaccination. . . . Hence voluntary vaccination is almost impossible." The existing law renders vaccination obligatory upon all the inhabitants of these islands, and has heretofore been enforced with great rigour, particularly during outbreaks of small-pox. During the past two years it appears to have been relaxed, and objectors have been humanely suffered to escape the dreaded ordeal. It is interesting and instructive to note the result. On page 41, the President of the Board of Health, observes :—" On December 31st, 1890, there were 1213 lepers in the custody of the Board, that being the

highest number ever reached; and on March 3 1st, 1892, there were only 1115, a decrease of 98 during the period." A recommendation is thrown out in the report, that the vaccination law should be amended, as the present laws are entirely unsuited to the times. In view of the evidence brought before the Royal Commission on Vaccination in London, showing the futility of vaccination as a preventive of small-pox, and its fertility in disseminating every inoculable disease, the only reasonable alteration in the vaccination laws that will be acceptable to an enlightened public opinion is their entire- and permanent abrogation.

Personally I have heard of many cases, which I have no doubt have been due to leprosy vaccination. There is, however, it is to be regretted, manifest reluctance on the part of the profession to look for causation in this direction; it is generally pooh-poohed as soon as mentioned; and when it appears to be the only way of accounting for a particular case, the attending physician prefers to hold his peace rather than discredit a practice which he has been educated to believe is the greatest discovery in the history of medicine. Professor Gairdner, of Glasgow, introduces his cases of invaccinated leprosy in the *British Medical Journal* with an apology and evident reluctance.

It is generally admitted that, given the right conditions as to environment, temperament, or idiosyncrasy, all bacterial diseases are transmissible from one human being to another; and as no single authority that I have met with, since the discovery of Hansen, pretends that leprosy does not belong to this category, the danger of vaccination is obvious. I am aware that this objection is attempted to be met by the introduction of animal lymph; but animal lymph is admitted to be too active, especially in tropical countries, to be used direct; and in general, therefore, it is available only after one or two removes, when it carries with it diseases both animal and human, as has been shown in evidence before the Royal Commission on Vaccination.

#### BRITISH INDIA.

An uneasy feeling is beginning to be exhibited in India on this momentous subject, owing to the accumulation of -evidence tending to show the sinister connection between the extension of the State-provided remedy against small-pox and leprosy. The synchronicity between the spread of leprosy and the extension of vaccination has given rise, in some districts, to such a dread of vaccination, that every device is resorted to by thoughtful parents to prevent their children being vaccinated. Attempts have been made to remove the dread of leprosy inoculation by the substitution of cow, calf, sheep, lamb, and donkey lymph; various compounds (one described by the medical purveyor as the Madras paste, and another as Lanoline) have been introduced; and some of the leading journals now energetically demand a safer and better system of vaccination. Dr.N. Boral, Chief of the Vaccine Department in the Jubbulpore district, has come to the rescue of the Jennerian *cultus* in the columns of the Allahabad *Morning Post*, but he sees clearly the weight of the incriminating testimony, and admits that to deny- the possibility of vaccinal syphilis or vaccinal leprosy would be tantamount to denying the value of human testimony altogether.

The authorities in India are well aware of the widespread repugnance to vaccination in that country, and of the cause of this repugnance, in the mischievous results known to every vaccinator; but all mention of these evils is carefully omitted in their official reports. Now, however, that the dangers attending the most carefully conducted vaccination have been so fully disclosed in the voluminous evidence taken before the Royal Commission on Vaccination, the culpability of such reticence is inexcusable. *The Statesman*, of Calcutta, August 22, 1891, commenting upon the "Resolution on the Statistical Returns of Vaccination in Bengal for 1890-1," in the *Calcutta Gazette*, August 21, 1891, observes:—"It has been stated that one of the greatest objections to vaccination among the natives of India, and other Oriental peoples, is that diseases such as leprosy, and other terrible blood diseases, have been inoculated with the vaccine virus. We think that some opinion should have been expressed under this head, and the omission of it is to be regretted in what is supposed to be a report given for the general edification of the Government as well as the public." And in a leading article, November 22, 1891, this same influential Indian journal, referring to leprosy vaccination, observes:—"There seems to be no possible room for doubting the reality of the very grave danger to which attention is drawn. . . . . It is notorious that inoculation, that is, the direct introduction of the virus into the blood, is the chief, if - not the sole, means by which leprosy is communicated. Throughout the greater part of Europe, at least, and in all the principal British Colonies and Dependencies, including India, vaccination is not merely the most common means of inoculation, but in most of the countries in question it is a means which, practically, is universally adopted, and enforced by legal penalties. It seems, then, to follow, almost of necessity, that, unless special precautions are taken to prevent so terrible a calamity, leprosy, wherever it prevails in these countries, must inevitably, in a certain proportion of cases, be communicated through the medium of vaccination. . . . When vaccination from the human subject is practised, it is quite possible that, in a few generations, it might lead to an enormous multiplication of cases, and that without implying any want of ordinary care on the part of operators. For it should be remembered—and herein, it seems to us, lies the real gravity of the danger—the disease is not one that commonly shows itself in infancy. The child from whom the lymph was taken might, to all appearance, be perfectly healthy, and yet its blood might be infected with this fatal and loathsome poison, and the operation thus make it a focus of contagion."

*The Calcutta Daily News*, August 7th, 1891, referring to the allegations that vaccination is responsible for the transmission of insanity, leprosy, and other diseases, observes :—"The question is an important one; and while it is a great gain to humanity to even modify such a scourge as small-pox, it is largely discounted by the consideration that immunity from it may be purchased at the price of other diseases as bad or worse than that affliction itself."

*The Bombay Guardian* of April 6th, 1889, commenting upon the spread of leprosy by vaccination, observes :—"If we have to choose - between the danger of leprosy and small-pox, let us by all means have the latter. The ghastly sights to be seen in every Indian public thoroughfare, of the scabious, handless arms, and footless legs of begging lepers, forbid any other alternative. Small-pox is bad, 'but

leprosy is a hundred times worse."\*

\* *The Indian Spectator*, Bombay, December 27, 1891, in a leading article, calls attention to a strong reaction that has set in against vaccination, and points out that the opponents of the Jennerian method of preventing small-pox contend that vaccination is answerable for much of the spread of leprosy in recent times, and that this view, which has the support of men considered as high authorities on the subject, is of vital importance. The article concludes by observing that "The Leprosy Commission seem to have thrown away a fine opportunity in omitting to direct its researches into the alleged connection between vaccination and leprosy."

When similar charges have been made against vaccination in Europe, the usual course of the official propagandists is to ignore the terrible indictment as long as possible, and then, when questioned in Parliament, either to minimise its character and attribute the results to other causes, or to deny them altogether. Those who are concerned for the public well-being in India may study with profit the pages of the Third Report of the Royal Commission, to see what lengths the official supporters of vaccination are prepared to go in their advocacy of the Jennerian *cultus*.\*

\*On December 30, 1880, fifty-eight young recruits belonging to the 4th Regiment of Zouaves were vaccinated from a Spanish child at the Dey Hospital, Algiers. In a few weeks all the vaccinated developed syphilis, to which about one half subsequently succumbed. The Minister of War, General Farre, instituted an inquiry, but no report has been published. Five times questions were submitted in Parliament with a view of eliciting the facts. The President of the Local Government Board promised to institute inquiries through the Foreign Office, but, on receipt of a reply, excused himself from giving particulars by declaring that "the information was incomplete," and promised to make another application. Finally, on the 27th October, 1882, Mr. C. H. Hopwood repeated his question, which was answered by Mr. Dodson (Lord Monk Bretton) by a categorical denial of the facts. At this time *the Local Government Board were in possession of full details of this vaccine tragedy (supplied by a Member of Parliament), including the names of the unfortunate sufferers, their grade, matriculation numbers, and nationality, as furnished by a medical witness, after a personal and painstaking investigation of the facts at the Hopital du Dey.*

A report of a "Scheme for obtaining a better knowledge of the Endemic Skin Diseases of India" has been prepared by Mr. Tilbury Fox, M.D., F.R.C.P., Fellow of University College, Physician of the Department for Diseases of the Skin at University College Hospital, London, etc., and Dr. F. Farquhar, Surgeon - Major, Bengal Medical Service. Under the title of Propagation these authors include inoculation and vaccination, and observe that there is by no means a slight body of facts which seem to show that the inoculation with matter from a leprosy sore—and this may occur in cohabitation and constant contact, and in vaccinations—may give rise to the disease. The authors propound a series of fifteen questions, with the view of elucidating the presence and cause of leprosy in different districts and individuals. It is noticeable that, while they allow that vaccination is a cause of the propagation of leprosy, inquiry on this point is not demanded. The Secretary of the Leprosy Investigation Committee, in his address before the International Congress on Hygiene and Demography, states that the cases of invaccinated leprosy are few in number. But, inasmuch as all the cases have cropped up accidentally and not as the result of research, it is impossible to estimate their number. An incalculable service to humanity will be performed when medical practitioners of high qualifications, not committed to any preconceived theory, will, in the interest of the public health, undertake this important investigation.

*The British Medical Journal*, Sept. 19th, 1891, reports an paper read at the meeting of the British Medical Association, on "Leprosy and Vaccination," by Dr. R. Pringle, surgeon-major, late of the Sanitary Department of the Bengal Army, who said "that of all charges which had been brought against vaccination, none approached in seriousness — especially as it related to India—the charge that the present admitted increase of leprosy in certain countries was due to the increase of vaccination, which was stated to be not infrequently in those countries little else than leprosy inoculation." Dr. Pringle, in recording this statement, fully admitted that in the main it rested on the evidence of medical officers of the, highest rank and authority in the West Indies, and that one Indian medical officer (Surgeon-General C. R. Francis) distinctly admitted, in an important public document, that this was not only possible but probable. Surgeon-General Francis, in the *Journal of the Leprosy Investigation Committee*, No. 1, August, 1890, had written that leprosy may be propagated by inter - marriage and hereditary transmission is undoubted. I believe, too, in its propagation by vaccination or inoculation, but I am very sceptical as to mere contact being the cause. . . . I would advocate an investigation into the effects of vaccination, there being some who are still dubious on this point, though the statement made two or three years ago by Professor Gairdner on the subject would seem to be conclusive in favour of vaccination as a factor." The inoculation alluded to by Dr. Francis was stated by Dr. Pringle not to be inoculation by flies, as seen in ophthalmia—a fact which he remarked in passing was both recognised and dreaded by the Jews of old as one of the most certain and probable means of spreading leprosy—contact, as pointed out, being to them a Levitical uncleanness, and not, therefore, necessarily risking the consequences of contagion. The inoculation alluded to by Surgeon-General Francis was small-pox inoculation, as practised in the Himalayas as a preventive against spontaneous small-pox. Dr. Pringle severely criticised the circumstances attending vaccination in the case recorded by Professor Gairdner in the *British Medical Journal* June 11th, 1887. It was hardly to be expected that the opponents of vaccination would fail to take advantage to the full of such damaging statements regarding vaccination in India as recorded by Surgeon-General Francis; but Dr. Pringle stated that Surgeon-General - Francis' experience was entirely the reverse of his own. The main object of his paper was to point out the means available for subjecting these two conflicting experiences to the most searching investigation on the spot by the Leprosy Commission now in India."

Dr. Pringle proceeds to explain that for twenty years he had collected vaccine lymph in Tern, in the Himalayas, where leprosy was very gravely endemic, and used this lymph in districts where the population was 500 to the square mile. Over two millions of these vaccinations had been performed, and - he had never seen a case of leprosy traceable to vaccination. Dr. Pringle- omits to say whether he ever searched for such cases, or inspected the vaccinated subjects a year or two after the operation, or inquired whether those attacked with leprosy traced their affliction to vaccination. As Dr. Pringle urges upon the Leprosy Investigation Commission the

importance of inquiry to test the validity of the charges now brought from all quarters, it would seem that he had not made this investigation himself.

Dr. Vandyke Carter, of Bombay, allowed to be one of the greatest authorities on the subject, includes vaccination among the list of causations, of which he says he has found recorded a few affirmative examples, at least, of each one method or means.—*Report on Leprosy and Leper Asylums in Norway, with reference to India, p. 178.*

Mr. H. Brown, of Simla, writes to me Oct. 2, 1889:—"Experiments have proved - leprosy to be inoculable. There must necessarily be a dread of vaccination in India, since the subject from whom lymph is taken for the operation may be a leper. In India native village vaccinators are not over careful from whom they procure their lymph. In Malabar and various districts of the Madras Presidency, where I have lived hitherto, it has been no uncommon thing to see the lymph extracted from the arms of itchy native boys. Leprosy has increased- alarmingly since the introduction of vaccination. I know of some cases where perfectly healthy persons, whose parents also are healthy, and who have been accustomed to live in healthy localities, have been smitten with leprosy after vaccination. I can also quote cases similar where children have died, or have become very seriously ill, immediately after vaccination, from hideous eruptions and swellings. One lady, the wife of a respectable merchant in Cochin, assured me that *vaccination* and *nothing else* killed her baby. It was perfectly healthy until vaccination. The Surgeon-General, Dr. Brodie, in his report for last year on the 'Distribution of Diseases in the Presidency,' declared that syphilis was on the increase throughout. This increase is coincident with the introduction of compulsory vaccination in a large number of municipalities, and with the more energetic action on the part of vaccination officers in the Madras Presidency."

Dr Chunder Ghose, in medical charge of the Leper Asylum, Calcutta, in a communication to the Secretary of the District Charitable Society of Calcutta, dated August 2 1st, 1889, states his opinion that leprosy is increasing in India, that it is communicable by vaccination, and that there is a dread of the operation on this account.

Dr. Roger S. Chew, of Calcutta, who was for six years in the Medical Department of Her Majesty's Army in British India, and has devoted fourteen years to the study of leprosy in India and other countries, furnishes, in his pamphlet on leprosy, a table giving the results of his investigations into the causation of the 1034 cases which have come under his treatment. Of these, he says, insanitation is responsible for 105 cases, vaccination for 148, and 72 cases are due to other forms of inoculation. Dr. Chew has been kind enough to supply me with the following particulars from his case-book, in which, according to his diagnosis and careful inquiries, the disease is directly traceable to vaccination.

The cases here quoted are samples of a large number collected by Dr. Roger S. Chew, in which the connection between the onset of leprosy and a previous vaccination is well determined. With reference to this, I am advised by high medical authority that a secondary development of the results of an inoculation frequently coincides with a re-awakening of disturbance at the point of inoculation. *Also, that when a secondary and constitutional disease first indicates its existence at the scar of vaccination, it may be taken as conclusive evidence that it is consequential to that vaccination.* It will be noticed that, in almost all of these cases, the place of inoculation is first attacked, and in all of them it is affected.

Another point in the evidence adduced should be noted, namely, that it does not seem to matter whether the vaccination "took" or not for the secondary effects to be manifested in due course. The probability is that, if a vaccination is immediately "successful," a portion of the poison is discharged, and the rest retained. If there is no immediate result, the poison may still lie dormant for a variable period, concerning which practically nothing is known.

*Extracts from Memoranda in case book by Dr. Roger S. Chew, Calcutta, showing connection between vaccination and the commencement of leprosy*

1.—"Jahoorie, aged twenty - eight. Married; no children. Duration of leprosy, twenty years.

"There is no history of syphilis, either with himself or his relatives. - When he was about seven years old, he was vaccinated on his right arm. About six months after he- noticed a white patch over vaccine site; a similar patch appeared on his right buttock, and he soon after lost sensation in his left foot. The marks gradually faded away, broke out afresh in - other portions of his body, and again disappeared to reappear, *et seq.*; but wherever these marks appeared, they were accompanied by loss of sensation, which remained permanent throughout. About sixteen years ago he suffered from enlarged spleen, for which he was fired (*i.e.*, burned with hot iron). Ten years ago the fingers of both hands began to be flexed on themselves.

"Present state :—Perpendicular of ankylosed fingers is 1/8 inch on right hand, and 7/8inch on left. Fingers and thumbs of both hands much ankylosed, discoloured, and anaesthetic. Dry ulcer at inner flexion of right thumb. Open and entirely painless ulcer on tip of nose, extending 1 1/4-inch inwards. Amesthetic discoloured patches all over chest and abdomen. Two large (burn) scars over splenic region. Right foot has three large open sinuses, freely discharging a viscous, stinking, purulent fluid. On inserting little finger into the largest of these three sinuses, free vent was obtained, and the finger, striking against the astragalus, not only caused the patient a great deal of pain, but also brought away a quantity of foetid caseous-looking matter, due to caries of the bone. There are three discharging sinuses — the largest one inch in diameter at the opening—in the left foot also. Raw, ulcerated, and entirely painless stump, marking where middle toe of left foot has recently fallen off. Second toe of same foot has also dropped off, and on outer side of little toe of same foot is a peculiar blistered surface. Both shins largely covered with scaly and desquamating cuticle, with absolute loss of sensation. Hacking cough, and great pain in left thorax, with frequent and bloody *sputa*, beginning some two years ago, but aggravated

during the last month. Caseous degeneration at extreme apex of right lobe of left lung.

2.—"Daidas, a male, aged forty-three; a native paliki bearer. Duration of leprosy, twenty years.

"There is no history whatever of syphilis or syphilitic or leprous hereditation, nor are any of his relatives similarly afflicted. He was forcibly vaccinated about twenty-one years ago. The operation was not successful, but a year afterwards the vaccine pock grew rough, lost sensation, and gave place to a small crop of *papillae*, which spread, grew larger, and became entirely anaesthetic. He never had fever of spleen. About four years ago he used to get peculiar cramping sensations all along the course of the right ulnar (nerve) accompanied by extremes of cold and heat in fourth and little fingers. Contractions began to supervene, and these two fingers, entirely losing sensation and their power of grip, became permanently flexed on themselves. At this time his brows began to protrude and his upper lip to get thick.

"Present condition :—Permanent and rigid ankylosis of fourth and little fingers of right hand, with total anaesthesia. Tumoid, discoloured, anaesthetic patches and papules all over hand and arm from finger tips to clavicular articulation. Large tumoid and anaesthetic patch, 5 X 4 in., on anterior aspect of right shoulder; another, 3 x 1 in., over vaccination site; and a third, 3 X 2 1/2 in., on elbow of same side. Upper lips very tumoid with paralysis of left side and partial anaesthesia of right. Uvula elongated and anaemic; fauces very anaemic. Sense of smell and taste are unimpaired. Left inguinal glands are indurated and slightly enlarged. Scrotum and prepuce elephantoid and anaesthetic. Posterior portion of scrotum is ulcerated. There are a few white spots over buttocks, whitish mark over left second toe, with loss of feeling. Ears are rather swollen. Features leonine, the supraorbital ridges being very tumoid and perfectly anaesthetic.

3.—" 1. Chundar Ghoral, a male, aged forty-two; a Brahmin, and farmer by occupation. Duration of leprosy, twelve years.

"There is no history whatever of heredity, syphilis, impure living, or irregular habits. He was vaccinated seventeen years ago (the operation did not take), and five years afterwards a small rash broke out on that portion of his right arm where he had been punctured. This rash spread, ulcerated, healed, and left behind a thick warty lump, 3 1/2 in. long and 1 3/4 in. broad, which was utterly devoid of feeling. Similar excrescences appeared on various parts of his body, and about seven years ago he noticed some peculiar white patches appear.

"Present condition ;—Open sinuses under ball of both great toes. Nodes all along course of lymphatics. Anaesthetic patches over several parts of body. Excoriation on left elbow. Leucoderma in patches of rather large areas in different parts of back and thorax. Features leonine and feet slightly swollen and oedematous. Knees swollen and marked with tubercular ridges. Complete loss of power and sensation in the fingers of both hands, but no ankylosis.

4.—" Rohim Bux, a male Mahomedan, aged twenty-five, a hackney carriage driver, stated on the 18th August, 1889, that, a fortnight after vaccination, which did not 'take,' eighteen years ago, his parents noticed whitish patches occupying the site where the vaccine pits should have appeared, and remaining persistent for two years, after which they increased in size, coalesced, and steadily kept increasing to their present extent . . . On his forehead, half of right arm and hand, and on his right shin, are pinkish-white patches that do not itch; leprous ulcers on his right foot, implicating the great toe, the nail of which has sloughed off. A painless ulcer, 2 1/2 inches by 1 3/4 inches, occupies the surface of right hip joint. These ulcers are all perfectly anaesthetic. The ulcer on his hip joint is nearly three years old, scabbing, and breaking out afresh at irregular intervals.

5.—" Meer Mahomed, a Mahomedan male, aged thirty-four years, married, with eight children; a clerk by profession. His parents were quite healthy, and so are his wife and six of his children, but two daughters are lepers. On the 23rd August he showed bright silvery lines on the palmar surfaces of both hands, while on the dorsal surfaces were several small annular patches, together with three large crusted patches, the largest 1 in. by 3/4 in. First joint of left fourth finger had sloughed off, leaving a very angry stump. Running ulcers in right leg and thigh. Angles of mouth tough and thickened. Both ears nodular and tumoid (thickness, 1 1/4 in.). On chest and left arm were white patches, three of which formed a peculiar triangle which covered the vaccine pits, *in which the disease first appeared*. The lymph for the operation was taken from the arm of an apparently healthy native child. Patient has never had syphilis, nor does he know of any member of his family being afflicted with any blood disorder.

6.—" Bundaban Mullick, a Hindu male child of seven years, exhibited on the 27th August, 1889, several leprous ulcers on left wrist and at the angle of his mouth. On left arm was an oblong whitish-pink patch that entirely obliterated the vaccine pits. The boy's father, who is perfectly healthy, says that two and a half years ago the boy was vaccinated, and about four months after the operation he noticed the puncture sites occupied by three small white patches, which in the course of one year extended and coalesced to form the single patch now seen. The ulcers appeared about a year ago, and refused to heal up.

7.—" A Hindu male, Bhaleshur, aged ten years. Six months after vaccination, three and a half years ago, a white patch appeared over his left clavicle and on vaccine site. Half of the patch on clavicle ulcerated, and the ulcer, finch broad and 3/4 inch long, refused to yield to either arsenic or mercury, both of which he had taken for two years. The clavicle is denuded of flesh, and plainly visible to the naked eye, while the ulcer itself is of a leprous type.

8.—" A Hindu female, Gowrah, aged nineteen, stated that she was vaccinated in her seventh year (as far as she remembers). The operation did not 'take,' and, five months after, three whitish spots appeared on her right arm, where the vaccine pits should have been.

These spots extended, coalesced, and, spreading downwards, disfigured her arm as far as the wrist. Her lips thickened, menses became irregular, and obstinate sores, which are still open, broke out on her feet.

9.—" Vincent D'C., an East Indian clerk, aged thirty. A year after vaccination (six years ago) he felt a peculiar constant itching in the vaccine pits, and, a short time after, noticed on this left arm a curious rash, which subsequently gave place to obstinate ulcers, for which he was unsuccessfully treated by three different doctors. On his left arm are three irregular-margined annular patches, averaging 1 1/2 inches in diameter.

10.—" Da Singh, a Hindu schoolboy, aged twelve, told me (Dr. Chew) on the 11th December, 1889, that he had been vaccinated in his seventh year. About eight months after the operation, the vaccine pits ulcerated, and the ulcers spread and coalesced, to form a large annular patch which has obstinately remained open. On same arm (right), a little above the elbow joint, appeared a long pinkish white patch, which gradually enlarged, and now occupies a space, 9 1/2 x 3 1/4 inches wide, running over flexor aspect of portions of both arm and forearm. .

11.—" Francis G—, an East Indian male child, aged three; admitted on 21st December, 1889, has eczema of the scalp of three months' duration. He was vaccinated when only eleven months old. The operation did not 'take,' and a month afterwards the whole of that left arm became perfectly anaesthetic. An annular patch of the size of a rupee occupies the left angle of his mouth, and close by this annular patch are two small anaesthetic tumoid ridges.

12.—" Ameer Hoosein, a Mahommedan lad, aged fifteen, was vaccinated in his seventh year. The operation 'took,' but in his eighth year the vaccine pits turned into little ulcers, which enlarged, scabbed, cleared, and finally coalesced to form one large annular patch on his left arm. Smaller annular patches exist on left shoulder, right hand, and right foot.

13.—" Doorie, a male, aged 18, is a leper, and attributes his disease, from which he has suffered for the past nine years, to impure vaccination. The vaccine pits are badly ulcerated, and he has an anaesthetic patch covering the entire elbow joint of the same arm. Both lungs are implicated.

14.—" Kasmini Bibi, a married Mahommedan female, the mother of two healthy children, deposed, on the 29th December, 1889, that she was vaccinated on her right arm in her thirteenth year. The operation 'took,' but five years afterwards the pits ulcerated, and these ulcers remained obstinately open. At this time crops of *paapillae* accompanied by total anaesthesia, began to show themselves on her chin, right breast, right thigh, and right knee. About one and a half years ago a tiny white spot appeared in the centre of her forehead, and this spot has now increased to a circular patch the size of a shilling piece.

15.—" Goolburee, a married Mahommedan female, aged forty-seven, with pemphigus (five blotches on right foot) of one and a half years' and leprosy of thirteen years' standing. The latter disease she attributes to improper vaccination. She has been five times vaccinated—the last occasion when thirty years of age. Four years after this the leprosy manifested itself. There are nodosities in both ears, in her nose, on her left arm, and along the left sternocleido-mastoid; one ulcer, 1 1/2 x 1 1/4 inches, on right ankle, and another twice this size covers last vaccine site on right arm.

16.—" Mabel P—, a Scotch lassie, aged seventeen, and a leper for the last eight years, was brought by her mother, who stated that she was vaccinated when she was seven and a half years old. About six months after the operation, which was successful, symptoms of leprosy began to develop, and she flew here and there to every medical practitioner that money could procure to save her child, but to no avail, as the disease kept increasing. The girl's present condition is :—Ears tumefied, and 2 1/2 inches thick. Face marked with ridges like cooled lava (volcanic). Sores on hands and feet and angles of mouth. Eyesight impaired. . . Tonsils indurated. Uvula ulcerated.

Ankylosis of little and fourth, fingers of both hands. Ulcer in left nostril, the right being entirely blocked, arid external nares flattened out. Lips protruding, thick, and hardened. Slight contraction of right knee, and anaesthesia well marked everywhere.

17.—" M. T—, a Eurasian female, aged fifteen, whose father stated that three years ago—at the time of the great scare caused by an expected epidemic of small-pox—he had his daughter vaccinated. The operation "took," but a year after the pits ulcerated and refused to yield to treatment. 'At the same time a few white spots appeared on her back, her sides, the nape of her neck, and over her face.' Those on her face grew larger, till, impinging on each other, they finally coalesced to form one large blotch of pinky-white, which, contrasting against her olive brown complexion, terribly disfigured her.

18.—" A. A—n, a Chinese carpenter, aged forty-three, married, and the father of four healthy children, deposed on the 22nd December, 1890, that four months after vaccination, eleven years ago, the vaccine pits broke down into ulcers, which are still open. His ears are tumoid (1 1/4 inches) and perfectly anaesthetic. Tubercular deposit, and welt marked anaesthesia in patches all over body.

19.—" Imrato J. Ghose, a Hindu male, aged twenty-eight years, stated, on 14th Feb., 1891, that he had been three times vaccinated, in infancy, at six years, and at twenty-one years of age, at each of which times the operation was very successful. Fifteen months after the last vaccination his leprosy showed itself. His body is covered with hypertrophied anaesthetic patches of various sizes and contiguous to each other. Mercurial foetor of breath. Ears tumoid., *Alae nasi* partially affected, and anaesthetic. Brows very slightly leonine; pains in loins in rising, and drawing up the legs; ulcer on ball of great toe of left foot, freely discharging serum. Vaccine pits are badly

implicated in the hypertrophies on left arm.

20.—" Sibhoo, a Hindu male, aged forty, and a widower, stated on the 14th March, 1891, that he was vaccinated when thirty-six years old. A year afterwards the vaccine pits ulcerated (ulcers still open). He has never had syphilis in any stage; his people are healthy; his body is well nourished, with patches of discoloured (whitish) hypertrophied and anaesthetic cuticle—the smallest 4 x 5 inches—scattered all over. Black anaesthetic patch over surface of lower half of left "tensor vaginm femoris." Little toe of left foot has dropped off. Both ankles are much swollen and inflamed; there is entire loss of sensation in fingers, feet, and ulcers. Under the balls of both great toes are running ulcers.

"21.—William J. C—, an East Indian male, aged twenty-one, admitted on 31st August, 1891, was vaccinated three years ago, and a year afterwards noticed some pimples break out in vicinity of the pits, on back of hands, and on his back. These at first itched a great deal, but, breaking down into pustules, became devoid of feeling, and extended to various portions of his body. The left, fourth, and little fingers are also anaesthetic.

22.—" Khyroo, a Mahomedan male, aged fifty, applied for treatment on the 20th October, 1891. Has been married twenty years, and has four male and two female children, all healthy. Leprosy showed itself nearly a year after he was vaccinated. Prior to this he was always hale and hearty. Had small-pox eight years ago (*i.e.*, four years after he was a leper). Present condition :—Ears are slightly tubercular, their hypertrophy measuring about 1/32 inch, while their long and short diameters are normal, without sore or abrasion, and with slight anaesthesia. Face marked with small-pox pits, hypertrophy over malar ridges, angles of mouth and bridge of nose, the *aloe* of which are thickened, and tubercular anaesthesia is well marked. Arms covered with patches of tubercular deposit and vesicles, with well-marked anaesthesia.

"Hands—Thumb, ring and little finger of right hand permanently flexed; burn on thumb and forefinger, proving anaesthesia; nails deformed and splitting up; tubercular infiltration. Left forefinger much swollen, and a small ulcer on back of first joint, which is bent. Little finger also swollen and flexed on itself; fourth finger slightly flexed. Anaesthesia well marked in all the fingers, and in the palms and wrists. Small patches of tubercular growth all over wrists and dorsal surface of hands.

"Body, legs, and feet all show well-marked developments of tubercular leprosy, with anaesthesia.

23.—" G. D'R—, an East Indian of thirty years, admitted 3rd January, 1892, stated that one year after vaccination his disease appeared. Present condition :—Ears wrinkled and elongated, with irregular nodes. Features leonine. Brows tumoid and tubercular, malar ridges hypertrophied and anaesthetic. Tubercular deposit at angles of mouth; nose flattened out, anaesthetic, and depressed at bridge. Tubercular deposit and anaesthetic patches along the entire length of both arms. Fingers contracted, ulcerated, and anaesthetic. Body also affected. Right leg elephantoid; the left anaesthetic. Feet well marked with the disease, being ulcerated and mutilated.

24.—" R. B. M—, a Brahmin of thirty-eight years of age, stated that three years subsequent to vaccination the pits ulcerated and became anaesthetic. Features leonine, angles of mouth hypertrophied and anaesthetic. Arms ulcerated, with hypertrophied cuticle: ankylosis of elbow joint of left arm. Fingers of both hands badly ankylosed. A few patches of leucoderma on his back, and one on thorax. Large anaesthetic sinus under ball of great toe, of both feet.

25.—" Ishar Ghosal, a male Hindu, forty years of age, admitted 3rd January, 1892, deposed that he was vaccinated when twenty years of age, and five years afterwards the pits ulcerated. The ulcers healed, their site entirely lost feeling, and the anaesthesia spread till it implicated the entire length of right arm. Present condition :—Features slightly leonine; face shows scars of old sores; hypertrophy and anaesthesia of malar ridges and angles of mouth. Besides the anaesthesia of right arm, there is a large whitish patch (5 x 2 1/4 inches), just above elbow. Ankylosis of fourth and little finger of both hands. Large patches of leucoderma on back, and one large white patch covers the entire thorax. The interspaces are hypertrophied and anaesthetic. Feet badly ulcerated, the ulcers being anaesthetic and discharging freely."

Dr. A., Mitra, Chief Medical Officer, Kashmir, says:—"I have on three occasions searched for bacilli. In one instance I found them in lymph from a vaccinated leper."—*American Journal of Medical Sciences, July, 1891.*

In the year 1888 the Government of India adopted and issued a series of resolutions on the subject of leprosy, admitting the increase of the disease, and acknowledging the impossibility of dealing with it in any effective manner. No word of warning was then, or has been since, uttered as to the inoculability of the disease, now so generally admitted by medical authorities, and the consequent dangers of its dissemination at the hand of the public vaccinator, nor is it likely that this source of infection will be officially condemned until the people in India, as in many parts of England, stand upon their parental rights, and refuse at all costs to imperil the health and lives of their offspring by this irrational and disease-engendering rite.

Some medical authorities, while admitting that leprosy is inoculable, and disseminated by vaccination, insist, for the credit of the Jennerian practice, that such cases are very rare, and are due entirely to the carelessness of the operator, and that, therefore, it is unreasonable to throw discredit on so beneficent a discovery on this account. This mode of reasoning may satisfy, the unreflecting; but if it be once allowed that leprosy is transmissible by vaccination, who can estimate the extent of the resulting mischief? Vaccination is practised in all the colonies and dependencies of our empire, and in all countries -where leprosy prevails. The disease is usually of slow incubation, and, until external indications of the malady are exhibited, a child may be, and often is, used as a vaccinifer without inquiry. Here, then, in leprous countries, are all the conditions necessary for inoculating the germs of leprosy into the blood of present

and future generations. The late Dr. George Hoggan, of Beaulieu, France, who devoted many years to the study of leprosy, has examined many lepers in Europe, and he attributes the disease in nearly all cases to vaccination.

The following letter explains Dr. Hoggan's view on this part of the subject :— .

Beaulieu, Alps Maritimes,  
December 29th, 1889

DEAR MR. TEBB—Upon the connection between vaccination and leprosy I hold a very strong opinion. Apart from the opportunities which I have had in Egypt, Palestine, and elsewhere of studying leprosy in the mass, I think that my extensive researches into the minute pathology of the disease, as evidenced by the papers published in the "Pathological Transactions" for 1879 and "Archives de Physiologie" for 1882, warrant me fully in expressing a firm conviction on the subject. At pages 88 and 90 of the latter work I refer to the relations between vaccination and leprosy infection, only, however, to show the difficulty of connecting the two in the history of the case. Taking all the factors into consideration, I hold that, in the cases of leprosy I was then investigating, the disease was conveyed through vaccination. I further believe that, in the majority of cases of leprosy developing in children, the leprosy infection is transmitted along with the vaccine virus. In adults, on the contrary, I have had evidence that leprosy is often conveyed along with syphilis; and this, taken in connection with vaccinal infection in the young, had led me to suggest the following explanation of infection in leprosy :—Hitherto all untainted evidence has shown that leprosy cannot be inoculated *per se* into a healthy body. \*

\*Dr. Hoggan, no doubt, refers to the negative results mentioned by Leloir in "De La Lépre," p. 237, where a doctor inoculated twenty healthy persons with leprosy pus, blood, and tubercle, and to Profeta's inoculations (p. 238) of twelve persons, including himself, with blood and pus from leprosy ulcers in wounds made by scarification and surfaces laid bare by blisters, and to his subcutaneous injections of matter from leprosy tubercle. He overlooks, however, the numerous recorded cases of accidental leprosy inoculations. Failures in intentional inoculations in countries free from leprosy cannot be set against cases of inoculation through abrasions of the skin or when the leprosy poison is introduced into the blood by means of the vaccinators lancet.

Combined, however, with the virus of small-pox, syphilis, or other diseases, it seems to be easily transmissible into the system, and it is in this direction that future investigations should be pursued.—I am, dear sir, yours faithfully, GEORGE HOGGAN, M.B.

In page 74 of the "Report of the Royal College of Physicians on Leprosy," dated 1867, is the following important suggestion:—

"The question alluded to in the communications from Dr. Erasmus Wilson and Sir R. Martin (*vide* Appendix to Report) as to the transmission of leprosy disease by vaccination and wet-nursing, is one of special interest to Europeans resident in India and other tropical countries, and calls for searching examination."

The cases referred to are—Case 1, p. 235—*Elephantiasis tuberculosa*; duration of latent period, two years; total duration, five years; no pains; febrile attack, simulating rubeola; vaccinated from a native child:—

"A young gentleman, age 16, with fair hair and complexion, and somewhat more youthful in appearance than might be expected of his age, has been afflicted with the tubercular form of leprosy about five years. He was born in Ceylon, is the son of European parents, and one of six children, all of whom are healthy. His father and mother have always enjoyed good health, the father having resided in Ceylon for twenty years, the mother since her marriage. He was nursed by his mother, but vaccinated from a native child."—*College of Physicians' Report*.

Page 239, Case 9—*Elephantiasis anaesthetica* following vaccination (given in Dr. Erasmus Wilson's work, 1867, pp. 620-2):—

"A lady, aged 26, the wife of an officer in the Indian army, became affected with elephantiasis in 1861. She was born in Calcutta of European parents, and brought to England when two years old. She returned to India in 1853; was married in 1855; has been eight years married, and has now (1863) revisited England for medical treatment. In 1861, then being in Oudh, she, was vaccinated from a native child, and shortly after vaccination "a slight spot came on her cheek, and increased in size to the diameter of a shilling." It was hard to the touch, a little raised above the level of the surrounding skin, and of a dull red colour, without pain or tenderness. The swelling was painted with iodine, and afterwards blistered several times, and the blister kept open; but although somewhat reduced in size, the prominence was not removed. About six months later dull red flat spots appeared, dispersed over the greater part of her body. Her hands and feet became swollen, and she had pains of some severity in her joints and feet."

The same author gives the following on p. 650 (p. 86 of the Leprosy Committee Report):--

"Dr. Bolton, of Mauritius, mentions the case of a boy of fourteen, afflicted with leprosy from the age of seven, the son of British parents, whose father ascribed the origin of the disease to vaccination. . . . Several medical men, who have had the opportunity of watching the disease closely, expressed their belief that leprosy may be conveyed to sound persons through the medium of the discharges of ulcers."

Referring to the series of papers which he reports, Dr. Erasmus Wilson says ("Royal College of Physicians' Report," 1867, p. 234) :—"Our cases also favour the suppositions of the existence of other modes of transmission (transmission by generation—*supra*), namely, by lactation, by vaccine inoculation, and by syphilitic inoculation. The first of these methods of contagion lies beyond the reach of remedy; the others are preventible."

In the December number of the *Nineteenth Century* for 1889, p. 929, Sir Morell Mackenzie, in an article entitled "The Dreadful

Revival of Leprosy," says :— "There is, or was quite lately, a boy in a large public school, in whom there are the strongest grounds for suspecting the existence of leprosy in the early stage; the disease is supposed to have been communicated by vaccination in the West Indies. It is beyond question also that there are many other cases in this country at the present moment, which are carefully concealed from the knowledge of every one but the medical adviser. Nearly every skin specialist must be able to attest this fact."

Dr. Suzor, of Mauritius, stated in the *Progrès Medical*, No. 14, that "in one instance two children of healthy parents became lepers, apparently as the result of having been vaccinated with lymph taken from a child belonging to a leprous family," and he thought the cases furnished conclusive proof of the communicability of the disease by vaccination.

In the *British Medical Journal* for Nov. 29, 1890, there is given a tolerably full report of the discussion on "Vaccination Eruptions" at the annual meeting of the British Medical Association held in Birmingham.

The discussion was opened by Mr. Malcolm Morris, M.R.C.S. (Edin.), who presented a formidable classification of vaccinal eruptions, including constitutional diseases of the most serious character, amongst which he included leprosy.

Dr. A. M. Brown observes in his pamphlet on "Leprosy in its Contagio-Syphilitic and Vaccinal Aspects," 1888, pp. 12, 16, 17: "When we come to note a recent medical disclosure bearing on this point (inoculation of leprosy by vaccine virus) and which has been allowed to pass unheeded for the reason, I presume, that it tells against the Jennerian and Pasteurian theory and practice, the necessity for strictest caution will be obvious. Hypothesis and specific *bacilli* apart, the observations of Arning, and alas, of too many who do not care to confess it, prove that vaccination is capable of actually transmitting *lepra* from the leprous to the non-leprous. The fact is unmistakable, and our duty is to make mankind and the medical profession dearly comprehend what this implies. . . . The unanimity and persistency with which vaccination in markedly leprous countries is charged with propagating and disseminating the malady, the well confirmed coincidence of leprous centres with vaccination centres, and the discovery of the specific *bacilli* in those leprously vaccinated, ought to satisfy all who are capable of weighing evidence, or of rational reflection, that controversy on the question must, and will, ere long, be silenced."

In a communication which I received from Dr. Brown, June, 1891, he refers to the communicability of leprosy by vaccination, and the attitude of the medical profession as a body towards the ever-increasing weight of evidence. "The fact of leprosy being communicable by inoculation is clearly shown by evidence to be beyond cavil or question. Medical men, seriously interested in their profession, who fail to see this are unfortunate, and their position must be charitably attributed to indifference to the whole question of leprosy, or a dread of the overthrow of some pathological doctrine to which they are practically pledged. The evidence of the fact that leprosy is communicable through vaccination is rapidly accumulating, and the force of its importance on the medical mind, as exhibited in its special journals, is anything but welcome. The fact of the exclusion of numerous well-known cases of invaccinated leprosy from the published papers of the Leprosy Investigation Committee, though most regrettable, is not surprising; the still ignoring of experimental data by inoculating bacillo grafters is quite as little so. It is certainly amazing to find that probably the chief factor in the dissemination of leprosy in the present day—Jennerian vaccination—should have been practically set aside by the Indian Commissioners. Considering the amount of conclusive evidence now before us, many, like myself, must have felt appalled to find that this was so. Still, we may feel perfectly assured that such a performance can no more score than the proverbial Hamlet-play where the leading role has been left out."

The *Hospital Gazette*, London, Oct. 1, 1890, contains the following, under the heading, "Leprosy and Vaccination":—"We know now that it is possible to transmit leprosy by inoculation, and it therefore behoves those who practise in countries where the disease is endemic to be very careful whence they take their vaccine. Leprosy is about as frightful a disease as any that poor man is exposed to, and beside it syphilis—the vaccinator's bugbear—sinks into comparative insignificance. A contemporary recalls the case of a native of the Sandwich Islands, who developed leprosy a year after vaccination, and seems disposed to raise the question as to whether the vaccination might not have been the means of conveying the infection."

Dr. Bechtinger, of Vienna, who has devoted thirty years to the study of leprosy in many countries, says :— "No scientific man will deny that leprosy, like all bacterial diseases, is inoculable;" and he attributes the present increase of leprosy to the vaccinator's lancet.

Dr. W. Munro says :—"I am decidedly of opinion that by careless vaccination, bloody matter being taken with the vaccine lymph, leprosy can and most certainly would be propagated. .... I decidedly consider that leprosy can be inoculated."—*Leprosy an Imperial Danger*, by Archdeacon Wright p. 72.

Referring to an alleged case of infection by means of vaccination, the *British Medical Journal*, October 25, 1890, says:—"Remembering Arning's important observations of leprosy bacilli in vaccine lymph taken from a leper, it is not to be denied that such inoculation may be occasionally possible." Perhaps this admission from the editor of a journal which has defended vaccination against all attacks and organised a powerful medical opposition against any modification of a most stringent and cruel law goes as far as could be expected. Mr. Ernest Hart has not thought it expedient, however, to submit the extraordinary statements in his "Truth Concerning Vaccination" to the test of cross-examination before the Royal Commission.

"Chambers' Encyclopedia," 1891, vol. 6, page 585, says :—"Evidence has recently been adduced which seems to show that it (leprosy) may be communicated by vaccination from a leprous child."

In the appendix to his work on "Leprosy," p. 274, Dr. George Thin has the following :—"In the 'Monats. f. Prakt. Derm.,' Vol. XIII.,

No. 1, the report of a case is extracted from the *Occidental Medical Times*, of a leper who was vaccinated in 1878, who a year afterwards became leprosy, and who at present has a large anaesthetic scar at the point of vaccination. This man had healthy parents, and of two brothers and three sisters, one had died of tubercular leprosy. He is twenty-five years of age, and has mixed with lepers all his life."

In his work of 280 pages on "Leprosy" (Percival & Co., 1891), Dr. Thin devotes four pages to "Vaccination in Relation to Leprosy," and refers to Dr. Gairdner's cases. "The presumption," says Dr. Thin, "that the disease was conveyed to the second and third child in the vaccine lymph is strong, but the case is by no means proved." Amongst others, Dr. Thin, p. 194, quotes the following from Dr. Daubler "Monats. f. Prakt. Dermi.," Vol. VIII., p. 123), who "relates two cases of leprosy at Robben Island, in South Africa, in which he believes it to be proven that the disease was conveyed by vaccination" :—

"The first case is that of a woman, H., thirty-six years old, married, and the mother of a healthy child of twelve. There was no leprosy in the family. Several years previously, on account of an epidemic of small-pox, she was re-vaccinated, the first vaccination having been effected when she was two years old. In the course of the two months following the re-vaccination, she experienced attacks of shivering and fever three to five times weekly, was frequently thirsty, but passed less urine than usual, and whilst the points of vaccination swelled and became brown, she grew dull and weak. She had been vaccinated on both arms over the insertion of the deltoid. No pustules formed, and when she saw the medical man two months after the vaccination, the parts were swollen. The swelling had begun three days after the insertion of the lymph, and reached its greatest extent eight days afterwards. At this time the parts became yellowish, and within fourteen days of the vaccination on each point there was a raised, discoloured skin, of a yellowish brown colour, and as large as a two-shilling piece. These swellings gradually increased, and, ten weeks after the vaccination, her physician found the skin of the arms and upper third of the forearm brown in colour and uneven. The brown spots extended lower down, when, after three more weeks, in which she was feverish and ill, the spots became swollen and smaller, but the skin did not resume its normal colour. In the fourteenth week after vaccination she had a violent rigor, repeated twice within the following week. Subsequent attacks of fever were at longer intervals, and not so severe. At and shortly after the severe rigors, brownish spots developed on the cheeks and forehead. Eighteen weeks after the vaccination leprosy tubercles developed on the brow and on the cheeks. Two years later the woman was sent to the leper asylum at Robben Island, where she was seen and photographed by Dr. Daubler, tubercular leprosy being fully developed.

"The other case was that of a girl, fifteen years old, who was re-vaccinated at the same time and by the same medical man who vaccinated the woman H. The same local appearances followed on the arms as those described in the woman.

"After two months there were maculae on the forehead and cheeks, and after three months more, leprosy tubercles on the forehead. When seen and photographed by Dr. Daubler, the disease had lasted three and a-half years. Inquiries made at the homes of both patients, and from the medical man who vaccinated them, showed that the person from whom the lymph was taken had died of tubercular leprosy several months before, other members of the family being leprosy, . . . facts of which the practitioner was ignorant when he took the lymph with which he vaccinated the patients."

These cases have been carefully investigated, and their description in the "Monats. f. Prakt. Derm." is accompanied by photographs. On my visit to Robben Island, February 10th, 1892, I met Dr. P. Travers Stubbs, who is much interested in the leprosy question, and believes that the disease is inoculable and spread by vaccination. Dr. Stubbs was at that time acting as *locum tenens* for one of the medical officers at the Leper Settlement, and has since been kind enough to furnish me with the following further details concerning these remarkable cases of invaccinated leprosy :—

NOTES OF THE TWO CASES OF LEPROSY ON ROBBEN ISLAND,  
AS REPORTED BY DR. DAUBLER.

—————  
*Elizabeth Hart, aged 39.*

European. Born at Cape Town.  
Date of admission—26th April, 1887.  
Race—English. Came from Wynberg (*i.e.*, eight miles from Cape Town).  
Disease—Tubercular leprosy.  
When contracted—When small-pox was prevalent at the Cape in 1885.  
Where—  
Hereditary—No.  
Complications—

*Particulars as taken from the Case-book, Medical Department, Robben Island.*

The patient says :—"I was quite healthy until vaccinated at Wynberg by Dr. Silke in 1885. I was living with my husband in good circumstances, and had never come in contact with leprosy. About a year after vaccination a large livid patch began to appear round the vaccination mark. A few months later a creeping sensation on both sides of the face, worse on the left. Soon after this the face gradually began to swell."

*Present Condition, May 3rd, 1890.*

Tubercular condition of both sides of face and ears—the left more so; loss of eyebrows; some loss of hair. Tongue a little affected in front. Both hands rather

## LEPROSY AND VACCINATION by WILLIAM TEBB (Complete)

swelled and tender. Infiltration of forearms and upper arms up to shoulders. Legs same as arms. Ulceration about both ankles. There is no marked anaesthesia. No special indication at seat of vaccination on left arm, which, patient says, ran its usual course.

Has been under treatment about six months. First, iodides; gurjun about four months. The appearance of patient has much improved; also general health.

*February 10, 1891.*

Elizabeth Hart, aged 39, married 16 years. Occupation, housewife. One son born one year after marriage. No miscarriages. Menstruation irregular. Last unwell three years ago. Her husband is still living; also the son; both at work. Her father died—the result of an accident. Mother died of phthisis, aged 40. No sisters. Three brothers—one living, healthy; two dead—one of dropsy, other found dead.

She states she was healthy until one year after vaccination, when her attention was drawn to a peculiar lividness of her left arm around the vaccination scar, which is still visible, and skin around quite healthy. There is no infiltration around the scar, which is of ordinary size and clearly visible. She consulted a doctor about this lividness, and then she went to the new Somerset Hospital, and attended for some six months, taking medicine all the time. She had pains in her legs at this time. She had no rash over her body. No sore throat, tongue, etc. Her nose, fingers, and hands became affected two years ago, 1888. Her hair began to fall out before she went to the hospital; eyelashes before she was admitted to the Robben Island Leper Asylum.

At present she has very little hair—no eyelashes and eyebrows. Her nose is very much disfigured by old ulceration. Tongue— nothing abnormal seen. No affection of her shoulder or elbow joints. Both her wrist joints are swollen, painful, and infiltrated.

There are small ulcerated spots about the size of a threepenny—piece, which are beginning to discharge; are not deep, nor are the edges undermined. The palms of both hands were sound. The last phalanges of all the fingers 'and thumbs were destroyed, and the finger nails are cracked and shrivelled. No anaesthesia of fingers. Her legs from her knees downwards were in a similar condition. No periostitis of tibia. No, enlargement of glands (occipital).

In my opinion, this woman has leprosy, plus evidences of syphilis, but I am unable to find out when the latter was contracted or how.

P.B. TRAVERS STUBBS.

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*Ellen Wangell, 16 years.*

English.

Admitted November 1, 1889, from Old Somerset Hospital.

Disease—Tuberculated leprosy.

Has lived in Cape Town and Clairmont all her life.

Contracted about 1885 at Clairmont.

Parents and brother healthy.

Tertiary rupial sores.

Patient says :—" I was quite healthy till re-vaccinated at Clairmont in 1885 by Dr. Murray. I was living with my mother. We were in pretty comfortable circumstances. We were living by, ourselves. I had never seen anyone with leprosy to my knowledge. I first noticed my nose begin to swell, and afterwards the rest of my face. I was taken to New Somerset Hospital in July, 1889, for what, Dr. Eaton said, was leprosy in my legs. Afterwards to the Old Somerset Hospital ; then brought here." ‘

*Present Condition, 9th May, 1890.*

Symmetrical enlargement of face; right ear more than left; left cheek, large scar of ulceration, which broke out soon after admission, but soon healed; some infiltration and thickening of tongue; fingers of right hand numb, another contracted; left hand comparatively free; some remains of infiltration in forearms, but this has much diminished; some infiltration about the ankles, which are at present suppurating. Infiltration extends nearly as far as knees. Body free; no special indication at seat of vaccination. Has been under treatment since admission. First, iodide and oil gurjun from date of admission, then gurjun alone. General health much improved. Condition of arms and legs much improved.

*As copied from case-book.*

P.B. TRAVERS STUBBS.

Dr. S. P. Impey, Medical Superintendent, Leper Settlement, Robben Island, South Africa, says :—" I wish to draw your attention to one very serious matter in respect to the spread of leprosy. It is contagious, and can be communicated from one patient to another by inoculation. In South Africa the reprehensible practice of arm-to-arm vaccination is carried on to an enormous extent. I have always held very strong opinions on this subject, and consider that many loathsome diseases are spread by means of the vaccinator's lancet. No medical man would take lymph from a patient in whom the disease is visible; 'but in how many of these cases is it not latent? For years I have not vaccinated except with animal lymph, and, think that some means should be adopted to stop the dangerous practice of vaccinating with humanised lymph; rather allow the patients to have small-pox, where there is a chance of recovery, than force leprosy upon them. It is a noteworthy fact that, since the introduction of the art of vaccination, leprosy is spreading with rapidity. I am a firm' believer in the efficacy of vaccine, but consider the arm-to-arm vaccination is a most dangerous practice and one which has led to untold misery."—*Extract from Special Report on Leprosy, from Robben Island, for 1891, in Reports presented to both Houses of Parliament by command of His Excellency the Governor of the Cape of Good Hope, Capetown.*

Dr. Alexander Abercromby, of Cape Colony, writing from Capetown, April 20th, 1892, says that, if a drop of blood gets mixed with the vaccine lymph in the operation of vaccination, then the disease (leprosy) may be transmitted in this way, but he is of opinion that, without the blood, there is no danger. So far as the transference of syphilis and other deadly diseases is concerned, we know that this can be done with lymph of unimpeachable quality and without admixture of blood. In the January (1890) number of the "Archives of Surgery" Mr. Jonathan Hutchinson records several fatal cases, and another fatal case in July, 1890 (p. 23), all following vaccination. Mr. Hutchinson observes :—" There is not the least reason to suspect any want of care in the vaccination or defect in the lymph." On

July 6th, 1881, Dr. Robert Cory, Superintendent of the Calf Lymph Department, London, succeeded experimentally in transferring syphilis to himself with lymph free from admixture of blood.

Rev. Canon Baker, formerly. Chaplain at the Leper Colony, Robben Island, writes to me, June 1st, 1892:—"I have not met with any medical man who has been any considerable time in this Colony who affirmed that vaccination, from arm to arm especially, was not attended with danger in the direction of your inquiry."

Dr. P. Hellat, the leader of the movement for stamping out leprosy in the Baltic Provinces, Russia, writes to me from St. Petersburg, May 1st, 1892, that at the time when he published the result of his investigations into the spread of leprosy, he had omitted to take into account "what might be ascribed to the spread of vaccination." The matter "was of great importance, and one that cannot be considered an open question." Dr. Hellat says that in Russia no one is admitted to school without the marks of vaccination. Re-vaccination is resorted to on the occurrence of serious small - pox epidemics.

## CHAPTER 5: LEPROSY AND RE-VACCINATION

THOSE who have studied the literature relating to the remarkable recrudescence of leprosy in tropical countries, or made personal inquiries where the disease is prevalent, must have been struck with the number of cases of persons whose family history has been shown to have been entirely free from all taint of this disease. In some instances the afflicted persons state they have never seen or come in contact with a leper. It is usual amongst the well-to-do classes to keep the malady a profound secret as long as possible; but a time comes when the disease discloses itself to the family physician or casual observer, and the friends are then led to inquire as to how the disease originated. Close inquiries reveal the fact that with them it is not hereditary, and the afflicted member is free from sore or abrasion of the skin. How, then, could the dreadful leprosy poison have been contracted? The doctor then suggests the vague and much misunderstood word "contagion," or malaria, or diet, all of which theories are now rejected by leading lepra authorities. The unfortunate patient remembers that during a smallpox scare by the advice of his doctor he was re-vaccinated. Inquiries are made as to the vacciner, and it is not seldom discovered that the vaccine virus was taken from a subject in which the leprosy taint—then not discernible—has since fully disclosed the ulcerations of unmistakable tubercular leprosy. It will be said that this is a hypothetical case. From much conversation with intelligent observers in many countries where this disease prevails, including both English and native medical practitioners, public vaccinators, and army surgeons, I am convinced that this is by no means an uncommon experience. So strong is the belief in the existence of this danger, that soldiers in our tropical colonies, when subjected to vaccination, often resort to the practice of squeezing out the virus, if they can do so without observation, and use carbonate of soda, borax, and other disinfectants in order to neutralise the effects of the poison. This dread of vaccination is due to the knowledge amongst our troops, often born of bitter experience, that vaccination is not seldom the factor of disgusting and intractable diseases, the fatal cases of which are invariably registered under secondary causes, without disclosing the originating source of the malady. The leprosy taint is more common in the army than is generally supposed. In my various inquiries I have heard of several soldiers being so affected. In his work on "Leprosy" (p. 71), Dr. Munro refers to the case reported by Dr. Liveing of a private soldier, a leper, in British India, who had several brothers and sisters all older than himself and all healthy. The same authority cites "the case of an officer mentioned in the Report of the College of Physicians, p. 241. Landre speaks of Dutch private soldiers being affected, while ladies never are, they never being exposed to contagion" (p. 45). If Dr. Munro had explained that ladies are not exposed to compulsory re-vaccination, he would have touched the solution of one source of infection. Dr. Sutherland, of Patra, says :—" When serving with the native army, I found repeatedly that men who had in early life the character which I regard as a proof of the existence of a leprosy taint, which I have already described, frequently had to be invalided in after years for leprosy, and subsequent observation and inquiry have led me to the conclusion that the opinion I have formed regarding what I have named a leprosy taint was correct, and that this condition precedes the appearance of the disease in its aggravated form; and I think I am warranted in concluding, from the data given above, that this leprosy taint exists in one out of every ten of the adult rural population of this district. In stating this, I am aware that my views will probably astonish persons who have not given the subject the attention I have."—*Royal College of Physicians Report*, p. 188.

In a note, entitled, "Leprosy in Livonia," the *British Medical Journal* of August 20, 1887, p. 423, says:—" The disease (leprosy) was introduced by a discharged soldier from Southern Russia." The same journal, in its issue of October 22, 1887, in a note on "The Spread of Leprosy," quotes M. Besnier, a member of the French Academy of Medicine, to the effect that, since the extension of the French Colonial possessions, soldiers, sailors, and missionaries, have fallen victims to leprosy in large numbers. The *British Medical Journal*, January 12, 1889, p. 93, in an article entitled "Transmission of Leprosy," mentions several cases of leprosy, including two young soldiers who became lepers. And the number for March 23, 1889, pp. 668-9, publishes the details of a case of mixed leprosy—tubercular and macular—reported by Dr. O. Carroll to the Royal Academy of Medicine in Ireland. The patient was an army pensioner, who had served in India and the Cape, "but he had not been, so far as he is aware, in contact with any leprosy person." Again, on April 13, 1889, the same journal publishes a letter on "Leprosy in the United Kingdom," in which the writer says :—"T. H., after a service of twenty-two years in India under the East India Company, returned home, and soon became a victim to tubercular leprosy." Another case of a soldier, formerly in India, who is now a leper in the wards of a large general hospital, is mentioned by Mr. C. S. Loch in the *British Medical Journal*, July 13, 1889. And in its issue of December 21, 1889, the same journal gives the fatal experience of this re-vaccinated part of the population, observing, on the authority of Dr. Olavide, of Madrid, that in the (leprosy) infected provinces of Spain—Jaen, Cordova, and Guadalura—"most of the sufferers are missionaries or soldiers."

Madhub Chunder Ghose, Medical Officer in charge of the Leper Asylum, Calcutta, in a communication to the Hon. H. Beverley, dated Calcutta, 27th August, 1889, says :—" It is well known that a distinguished officer of the Indian Medical Service became affected by

leprosy during his residence in India."

These cases are too numerous to be explained by the theory of coincidence, and similar instances can be heard of by inquiry in every country where leprosy is endemic. In none of the foregoing instances does it appear that any inquiries were made as to re-vaccination being a possible source of the infection. No doubt the medical practitioners had their private opinions as to the causation of the cases examined, which, however, they have carefully withheld. In one of the cases a press reporter remarked on the reticence of the doctor, who, he said, "absolutely refused to give me any details beyond those which may be said to be available to any member of the public." He admitted, however, that the case was undoubtedly one of leprosy.

Soldiers, it should be observed, are picked men, living amidst healthy surroundings under superior hygienic conditions. They do not associate with lepers, but, on the contrary, carefully shun them. Nor can the disease in the instances I have cited be due to heredity. Re-vaccinated soldiers appear to be more liable to the disease than the European residents in countries where the disease prevails. However much opinions may differ as to other sources of causation, all authorities admit that leprosy is an inoculable disease and communicable by vaccination. Is it not probable, therefore, that the cases I have quoted are due to contamination at the point of the lancet in re-vaccination? Since the terrible disaster at Algiers in December, 1880, when 58 soldiers of the 4th Regiment of Zouaves were syphilitised by re-vaccination from a Spanish child "of remarkably healthy appearance," I have made it a practice in all tropical countries which I have visited to interview soldiers and question them on the results of vaccination in the army. I could fill a long chapter of this book with details of disastrous consequences where soldiers; have been invalided at hospital with tumours, abscesses, and sometimes intractable maladies directly due to vaccination. Some have had their arms amputated and been discharged from the service, and others have sustained lifelong injuries. It must be noted that soldiers, when quartered in tropical countries where leprosy and syphilis prevail, are often obliged to submit to several re-vaccinations. In Capetown, a soldier belonging to the North Stafford Regiment, on duty near Government House, informed me (February 9th, 1892) that since he joined the army he had been vaccinated thirteen times. He was badly pitted with small-pox.

In an article on "Leprosy in the Baltic Provinces," by Dr. P. Hellat, dated St. Petersburg, in the *Journal of the Leprosy Investigation Committee*, December, 1891, the writer cites the following case which he considers speaks "very strongly for infection":—"A young man coming from a leprosy-free district is called for military service, through which he comes to the South of the Empire to a leprosy village, gets ill after two years with *lepra tuberosa*, returns home, lives with his mother, who after two years is attacked with *lepra ancaesthetica*." Dr. Hellat omits here to note that the first danger to which the recruit is subjected on joining the army is that of being inoculated with contaminated virus in the process of vaccination. All other risks, unless he has sores or wounds on his body (very improbable in a recruit who has recently undergone medical examination), are comparatively infinitesimal. For the serious risks incurred by re-vaccination our troops receive no compensating advantage in the way of immunity from small-pox, either of a sporadic or epidemic nature. According to the army medical reports, we find that among troops in Egypt in 1889 there were 42 cases and 6 deaths from small-pox. In the Bengal army in 1889 there were 71 cases and 8 deaths. In the Bombay contingent there were 49 cases and 3 deaths; and among the troops in Madras 32 cases and 6 deaths. In all, there were, in 1889, among this picked body of healthy re-vaccinated men, 202 cases and 23 deaths. How many cases of erysipelas, eczema syphilis, tuberculosis, and leprosy were due to re-vaccination is not stated, but we know that after every general vaccination order, a number of soldiers are disabled for a time, some more or less seriously. I produced evidence before the Royal Commission on Vaccination (Vol. III., p. 116) that in 1882 the Federal Government of Switzerland, owing to re-vaccination disasters, rescinded the regulation in the army, and in 1883 M. Weitzel, the Minister, of War for Holland, for similar reasons, issued an order to the effect that re-vaccination was no longer obligatory in the army of that country.

## CHAPTER 6: OTHER ALLEGED CAUSES OF LEPROSY

I CAN only refer very briefly to causes of leprosy other than those detailed in previous chapters. Next in importance to that of contagion is the question of heredity. The theory of heredity, as a factor in the propagation of leprosy, is rejected by leading authorities such as Hansen, Hjort, and Arning, and by many writers it is not even mentioned. Dr. Arning, while failing to discover evidence that the disease is congenital, is of opinion that a certain weakness to resist its attacks may be transmitted.

Dr. G. Armour Hansen, who discovered the *bacillus leproe* in 1873, has devoted much attention and research to the question of heredity, and failed to find a decided and indisputable proof of its influence in the United States, though hundreds of thousands of immigrants had leprosy parents in Norway. — *Minnesota State Board of Health Report, 1889-90, p. 43.*

Dr. W. Munro says :—"I do not deny that leprosy may be occasionally hereditary, but only say that it has never been proved to be so."

Dealing with the subject of the alarming increase of leprosy in Hawaii, the victims amongst a clean nation multiplying faster as the years roll on, until it has invaded nearly every district in the Archipelago, Dr. W. Hillebrand observes :—"And, mark well, in all this, hereditary taint, from the nature of the case, has no share, or, if any, only a most subordinate one."—*Leprosy a Communicable Disease, by Dr. Macnamara, p. 59.*

The *Lancet*, March 3 1st, 1883, p. 555, observes "Morehead, as well as Lewis and Cunningham at Almora, came to the conclusion that heredity could not be a great factor in the increase of leprosy in a district, inasmuch as lepers have comparatively small families, who suffer a high rate of mortality, and therefore the survivors are only just numerous enough to replace their defunct progenitors."

Dr. George L. Fitch, in his report addressed to the president and members of the Board of Health, Honolulu, in 1884, says:—"Hereditry plays but little figure in the spread of the disease, because we find that, after sending more than 2800 lepers, during a period of eighteen years, to Kalawao Leper Settlement, there are only twenty-six children alive, and only two of these children are lepers."—*Appendix to Report on Leprosy in Hawaii, 1886, p. 31.*

In a note to the Secretary of the State Board of Health,, Minnesota, U.S., December, 1888, Dr. Christian Gronvold observes:—" Our experience in the North-West has made it probable that the disease is not hereditary. Not a single case has been discovered, after forty years of immigration, where a child, born in these States of leprous parents, has inherited the disease."

The same authority concludes an article on "Leprosy in Minnesota" as follows:—" I cannot here relate all my observations in detail. I will only tell what I have found in regard to the occurrence, or rather the disappearance, of *lepra* in America (N.W. States). Of about 160 lepers who have immigrated into the three States named (Wisconsin, Iowa, Minnesota), thirteen are alive, whom I have seen myself, and perhaps three or four more. All the others are dead. Of all the descendants of lepers (and that includes the great-grandchildren of some of them), not a single one has become leprous. This is, in short, the result of my investigations."—*Lancet, March 26, 1892.*

*Report of the Select Committee on the Spread of Leprosy, Cape of Good Hope, July 15, 1889. Minutes of Evidence:--*

The Hon. Dr. Atherstone, M.L.C., who has practised in the Colony fifty years, chiefly in Graham's Town, where he was District Surgeon for twenty-six years, and who has always taken a great interest in the subject, said, in answer to Q. 352 concerning heredity, that "it is the constitutional diathesis, or cachexia, which, I consider, is inherited; not the dormant germs rendering the individual less able to resist its attacks and subsequent reproduction."

In an article on the "Cause of Leprosy," by Sir William Moore, K.C.I.E., Hon. Physician to the Queen, late Surgeon-General with the Government of Bombay, the author says :—"We are told that leprosy is caused by eating fish, and, therefore, cannot possibly be syphilis. Now, I lived and worked many years among the inhabitants of the semi-desert districts of Western India, who never see fish. The sea is hundreds of miles away, and there are no lakes or rivers. Even dried fish did not penetrate into those remote districts. Fish was practically unknown as an article of diet. Yet there is a considerable amount of leprosy in those countries. At recent meet ings of the Medical and Physical Society of Bombay, the subject of leprosy was exhaustively discussed, and the members were unanimous in discrediting fish as a cause of leprosy. The members, being both native and European practitioners, private and in the public services, who are constantly seeing leprosy, are perhaps better qualified than any body of men to give an opinion on this matter. In the districts of Western India above referred to, salt is made from the earth at most villages. The people have as much salt as they want. Yet leprosy has been attributed to an absence of salt. It has always been ascribed to a vegetable diet, to new rice, and to diseased grain. But the kind of food does not appear to influence the disease further than, like insanitary conditions, insufficient food, and food deficient in required elements, that it induces a state of constitution rendering the subject more liable to almost any malady. Again, it has been advanced that leprosy is not, like syphilis, contagious. But the communication of leprosy has certainly been proved. Direct proof seems to have been afforded by the experiment on the criminal at Honolulu. In the case of Keanu, *bacilli* were found to have multiplied at the seat of inoculation. ....Leprosy very frequently commences on the extremities. Natives in India do not generally wear shoes and stockings; their feet are thus very liable to become abraded or wounded; a leper's slippers may easily be taken by mistake, and conveyance of discharge is, I believe, thus frequently accomplished."

In an article in the Fourth Annual Report of the State Board of Health for Massachusetts, U.S., by Dr. Samuel W. Abbott, reprinted in the Hawaiian "Report on Leprosy in Foreign Countries," 1886, is the following, under the title of "Leprosy in its Relation to Public Health ":—"The questions which render leprosy a matter of special interest, as affecting public health, are those of etiology, modes of propagation, and the question of contagion.

"The causes of leprosy have been sought for in the peculiarities of climate, soil, diet, and habits of life. As regards climate and soil, the wide geographical distribution of the disease would seem to preclude them as elements or factors of causation. Opinions differ much as to the question of diet. The eating of tainted fish has been strongly urged as a cause. Leprosy is found in a most aggravated form among fish-eating people, as in Norway and Crete, and, on the other hand, it also prevails in inland districts where fish is but little used.

"Doubtless an improper diet and bad hygienic surroundings aggravate the disease.

"All these causes acting together for centuries did not produce the disease in the Hawaiian Islands, nor was it known until some time after the islands were open to foreign trade and commerce with other nations."

Mr. Jonathan Hutchinson says :—" The suspicion that vaccination has been the means of spreading the disease in the case of the Sandwich Islands has been entertained." The spread of leprosy, according to this distinguished surgeon, is due to eating fish, a theory which finds very few supporters amongst those who have studied the disease in leprous countries. The Parsees are great consumers of fish, and leprosy amongst them is of rare occurrence. With regard to the fish theory, which has obtained currency owing to the eminence of its author, I may observe that in my travels in leprous countries I have hardly met with a single advocate of it, and those most practically conversant with the disease at leper institutions consider it both far-fetched and irrational. In an article on "Leprosy in Kashmir," by Dr. A. Mitra, Chief Medical Officer in that country, in the *American Journal of Medical Sciences*, Philadelphia, pp. 22

and 23, the author says :—"As to Hutchinson's fish theory, the Goojurs do not get fish. Since this theory first came to my notice in the pages of the *Lancet* I have always asked lepers if they have been fish-eating, and in the large majority of instances the reply was in the negative. The theory is untenable in India, where we do not find the disease more prevalent among fish-eating people than among abstainers from such food, as *vaisnabs*. The Kashmiris, among whom leprosy is rare, eat fish, fresh, dried, and salted. In India European sportsmen, planters, etc., use largely preserved fish, but there are no facts to show that fish-eating ever produced leprosy, among them. High-class Hindu widows are strictly prohibited from taking fish, but I have seen several cases of leprosy among them. But the fact that the leprosy is common among Goojurs completely disproves the fish theory." In "Notes on Leprosy in Norway," Dr. Hercules MacDonnell observes :—"Nowhere did I perceive that any credence was attached to the fish-origin 'theory. Dr. Kaurin's writings on this special subject are widely known abroad."—*Lancet, August 31, 1889*.

Dr. C. N. Macnamara says:—"Among the Norwegians putrid and dried fish are said to give rise to leprosy; others fancy that rice prepared in a particular way is at the root of the evil. We may be sure that the theory of bad and salted food being a cause of leprosy does not apply to many parts of India, for the natives, as a rule, do not eat salted food, and certainly are not in the habit of consuming putrid fish."—*Leprosy a Communicable Disease, p. 48*.

In a paper read before the New Brunswick Medical Society, July, 1889, by Dr. Murray MacLaren, M.R.C.S., on "Leprosy in New Brunswick," Mr. Jonathan Hutchinson's Fish and Food theory is dealt with. After quoting Mr. Hutchinson, the writer says:—"This view is not at all borne out by what can be observed, in our own affected district, which is only 45 miles in length, and of the 82 cases already mentioned, 58 have arisen in the parish of Tracadie alone, which has been the headquarters of the disease, while the remainder come from the other parishes: Niguac, 3; Pokemonde, 9; Shippegan, 6; Caraquette, 6. It does not seem possible that this district, and especially Tracadie, should have food in any way different from a large part of the extensive northern and eastern coast, which is quite similar to the leprosy district in soil, climate, food, including fish, and inhabited by a similar race of people' with the same manners of life. Besides this, the fact that no case is known to have occurred among the Indians dwelling within the affected area helps to disprove this theory."—*Maritime Medical News, July, 1890, p. 50*.

Dr. Julius Goldschmidt, in a communication on "The Madeira Leprosy," says :—"Those districts where mostly fish is consumed, and sometimes in an unhealthy state (coast villages), are freer from the disease than in other parts of the island."—*Journal of the Leprosy Investigation Committee, No. 4, December 1891*.

Dr. Max Sandreczki, Director of the Children's Hospital, Jerusalem, says :—"Leprosy in Palestine is developed by insanitary conditions, of which I will enumerate the chief: impure air; the tainted exhalations which prevail in the villages and unhealthy habitations of the fellaheen; the water supply, often stagnant and deteriorated; the oil and fat (used for food), rancid, or salted beyond measure; olives and cheese in a state of decomposition; meat rotten, or coming from animals diseased, or worse still. Add to all this extreme uncleanness, the utter absence of skin action, and then one 'may easily explain derangements in the tissues of the skin, in the lymphatic and ganglionic systems, and, in a word, complete disorder of all the nutritive functions.'"—*The Lancet, August 31st, 1889*.

The Hon., David Dayton, President of the Board of Health, Honolulu, says :—"I am not of the opinion that leprosy 'is always hereditary, so many cases proving to the contrary. By referring to tables in Mr. C. B. Reynolds' reports, it will be seen that a large proportion of the girls in the Kapeolani Home were children of leprosy parents without becoming diseased themselves."—*Report, Board of Health, Honolulu, 1892, p. 42*

## CHAPTER 7: INADEQUACY OF MEDICAL THEORIES OF CAUSATION.

IN conversation with leprosy specialists in countries where leprosy is endemic, nothing is more common than the admission that the alleged exciting causes of the disease, such as contagion, heredity, or malaria, are quite inadequate to account for the rapid progress of leprosy over a wide area in recent years. Dr. Alzevedo Lima, chief medical officer of the hospital, Rio de Janeiro, observes:—"Even at the present time, in spite of the progress in sanitation, and the more favourable conditions of life among the Brazilians, there are still centres of contagion, whence we receive patients for the hospital in larger numbers than from other places. Throughout the whole country, in fact, this terrible disease is still rife. This being so, if we consider the differences in climate, the food, the habits of life, the sanitary conditions, etc., of the various regions of this vast country, it is difficult to believe that the etiological factors still given as determining causes of the disease can be in themselves a sufficient explanation. At the most, they can only act as favouring conditions, and explain the greater or less frequency of the malady, its predilection for certain places or for certain classes of the people."—*Journal of the Leprosy Investigation Committee, December 1891, p24*

Alluding to this subject, Dr. Alzevedo Lima, writing to me from Rio de Janeiro, May 20th, 1892, says :—"None of the ordinary etiological factors explains satisfactorily the spread of leprosy in this country, where one finds focuses in places altogether different in the climate-telluric conditions, and where, besides the sick people who live in bad conditions of feeding, etc., there are many others who live in luxury and belong and dwell amongst the best society. The inheritance also does not account for it in a very large scale. About this last point I always take very great care to inquire of the sick people who are taken to the Hospital dos Lazaros, where we have had 242 patients during these fourteen years past that it has been under my direction. . . ." Referring to the inoculation of leprosy by means of vaccine virus, Dr. Lima says :—"I believe in the possibility of the fact, not seldom, and I suspect this may have been the cause of the spread of the disease amongst our people, specially in the country, where, with the absence of a doctor, the vaccination is done by someone not professional, and therefore incapable of distinguishing whether they are using the vaccine taken from a pure source or not. Moreover, to those who know how long it takes for the incubation of leprosy, and how difficult it is to diagnose it in its

initial stages and in several of its forms and varieties, it is easy to know that even the professional man may have given rise to the spread of the disease in that way.

"Amongst 62 persons affected with this disease now in treatment in the Hospital dos Lazaros, in this city, 26 were vaccinated, being 8 in Rio de Janeiro, 8 in the State of St. Paul, 6 in the State of Minas, and 2 in Portugal; the remaining 36 have never been vaccinated. Abstracting the 10 of Rio de Janeiro, where the vaccination is gone through with every care and the vaccine taken directly from the cow, we have 8 come from St. Paul, either from the country or from small villages where the vaccination is performed, as a rule, by people not competent, and with the lymph taken at random from any person amongst their own people, where leprosy prevails endemically. In any of these States, in the absence of a physician, any clever man undertakes the duty of vaccinating amongst the people, and this may very likely be one way of propagating the leprosy."

Dr. Alexander Abercromby, of Cape Colony, referring to the causation of leprosy, says :—"It is evidently dependent on some vitiated state of the blood, and that acquired in many instances, as has been clearly ascertained, by hereditary predisposition. In many cases, however, it occurs where no such predisposition can be traced, and in persons whose parents were perfectly healthy, and who evinced during their lives no trace of the disease whatever. In these cases we are led, therefore, to seek for other causes to account for it."—*Thesis on Tubercular Leprosy, p. 15.*

In the Report on the Annual Returns of the Civic Hospitals and Dispensaries in Madras for 1888, p. 14, under the head of Vizagapatam, Surgeon-Major Sturmer says that leprosy is on the increase in the district, and observes :—" This year I have seen many fresh cases of leprosy in adults as well as in children, in whom no hereditary taint could be traced. They evidently had contracted the disease from some outside source, for in each case it was ascertained that no other member of the family was affected."

The "Report on Leprosy in New South Wales," May 13th, 1891, forcibly exhibits the unsatisfactory condition of modern inquiry into the etiology of the disease. No mention is made as to the chief factor of causation.

The Secretary of the Board of Health in New South Wales, Mr. Henry Sager, observes :—" The detailed history of the cases given in Appendix C., though of very considerable interest, does not furnish any grounds for definite conclusions as to the causation and spread of the disease. There are no data on which to advance a view of spontaneous, climatic, dietetic, mal-hygienic, or hereditary origin of the malady, and nothing of scientific accuracy to be adduced as to contagion, though the evidence in several cases points more or less strongly in this direction."—*Journal of the Leprosy Investigation Committee, No.4, December, 1891, p.50.*

The Report of the Inspector of Asylums for 1890, presented to both Houses of Parliament, Cape of Good Hope, under the head of "Female Leper Wards," p. 32, says :—" The fact which stands out most prominently in making these records is the absence of any history of direct contagion, or even with contact of a known source of the disease in almost all of the cases which have been investigated."

When, about a year later, Dr. S. P. Impey, the present medical superintendent of the asylum, Robben Island, unable to account for the spread of leprosy by popular medical theories, began a more careful and exhaustive investigation than his predecessors had ventured upon, and included vaccination, hitherto ignored, as one of the possible factors, he had no difficulty in tracing a number of cases directly to this source. Dr. Impey felt it his duty to warn the Government of this danger.

In concluding a second paper on "Notes on Acquired leprosy as observed in England," by Mr. Jonathan Hutchinson, in the *British Medical Journal, July 6, 1889*, this distinguished pathologist observes :—

"The twelve cases which I have quoted do not, I believe, comprise by any means all the examples of leprosy beginning in patients of British birth and descent which have come under my observation. They are all, however, of which I am able at present to find record in my note-books. One and the same criticism may be said to apply to all. They are the examples of the acquisition of a specific disease by healthy persons who had no inherited predisposition. In no single instance had the person so acquiring it been exposed to any degree of hardship, or deviated in any definite manner from the ordinary conditions of a cleanly and well-regulated life. In every case the acquisition of the disease had occurred in some country where it was known to be prevalent, the East and the West Indies being the chief localities. I submit—as, indeed, I have already suggested—that there are only two suppositions open to us by which to explain the *de novo* acquisition of such a disease in cases such as these. The patients must either have received the specific contagion of leprosy on some part of the skin or mucous membrane, or they must have swallowed it in connection with food. Both these suppositions are possible. I may confess, however, that to my own mind one of them seems far more probable than the other. In no single instance had there been any known exposure to contagion. In no case had the patient associated with anyone suffering from leprosy, and in most instances the statement given was that they had but rarely seen lepers, and had certainly never come near them."

Amongst the possible sources of leprosy contamination, Mr. Hutchinson, while inclining to what is known as "the fish theory," mentions "the perils of vaccination."

## CHAPTER 8: LEPROSY AND VACCINATION AT THE INTERNATIONAL HYGIENIC CONGRESS.

IN the month of June, 1890, I presented before the Royal Commission on Vaccination certain facts tending to show the increase of leprosy in various countries which I had visited, and that this, increase was largely due to vaccination. In the following autumn I extended my inquiries to other countries, and discovered the same sinister results; and in the following April I published my

conclusions in a pamphlet entitled "Leprosy and Vaccination," which has been widely circulated in the countries where the alleged cases of leprosy have occurred. But no attempt was made to reply to the allegations until August, 1891, when Dr. Phineas S. Abraham, the Secretary of the Leprosy Investigation Committee, read a paper on the subject before the International Congress of Hygiene and Demography in London. The following is the report of his address, from the *Lancet* of August 22, 1891 :—

"On the Alleged Connection of Vaccination with Leprosy.— Phineas S. Abraham, M.D., read a paper on this subject. Accepting the bacillary theory of leprosy, and believing that instances have occasionally been reasonably demonstrated of its communication from one infected person to another previously healthy, Dr. Abraham has sought for evidence as to every possible means of inoculation, vaccination included. In this paper he gave a short account of the principal inquiries bearing upon the subject, and discussed the facts which have been alleged to connect leprosy with vaccination. The statements, or supposed cases, of the following observers were among others alluded to :—Sir Erasmus Wilson, Sir R. Martin, Dr. Bakewell, Dr. Tilbury Fox, Dr. Castor, Dr. Ebdon, Mr. Malcolm Morris, Dr. Bemiss, Dr. Hildebrandt, Dr. Arning, Dr. Mouritz, Dr. Rake, Archdeacon Wright, Professor Gairdner, Dr. Black, Drs. Swift and Montgomery, Surgeon Brunt Dr. Piffard, Mr. Hillis, and Professor Leloir. It was pointed out that the question had been in the minds of inquirers for many years past, and that the supposed instances brought forward were comparatively few. Even the most suspicious cases, such as those adduced by Professor Gairdner, Mr. Hillis, and others, were open to the objection that there was nothing to show that the subjects had never been exposed to any other possible means of inoculation or contagion, had never been in contact with lepers, or had never had to do with food or anything else which might have become contaminated by lepers; in short, we could not be sure that, having been born, or having lived for some time in a leper land, they had not been exposed to other pathogenic conditions of the disease. Dr. Arning's and some of the other observations were quoted in full because they had been much twisted, and false deductions have been drawn from them. The evidence from Scandinavia was significant; vaccination had been compulsory in Norway for many years, and largely practised from arm to arm in the leprosy districts, and, as Dr. Hansen stated, no case of transferring leprosy therefrom had been hitherto known. Leprosy, indeed, was there steadily decreasing. In China, according to Dr. Manson, leprosy was common in the district where vaccination had been practised for the last sixty or seventy years; but, on the other hand, it was more common in districts where vaccination had only been recently introduced, and was practised to a very limited extent only. Some fresh facts and definite information on the subject were hoped for from Mr. William Tebb's late evidence before the Vaccination Commission. A great deal was, of course, made of the observations of Professor Gairdner, Dr. Arning, Dr. Castor, Mr. Hillis, and of some of the others alluded to above. One of them held the view that the spread of leprosy might be due to *syphilitic* vaccine lymph, and another had written a pamphlet on the subject which was full of inaccuracies. In point of fact, although *a priori* the possibility of an occasional accidental inoculation of the disease by vaccination might be admitted, up to the present time no absolutely clear and incontrovertible evidence connecting vaccination with leprosy had been forthcoming; and, in Dr. Abraham's opinion, anyone who said that vaccination was to any extent responsible for the spread of leprosy talked arrant nonsense. Nevertheless, from what was known concerning the introduction of bacillary diseases in man and animals, it certainly behoved medical men to be extremely careful in the selection of their lymph for vaccination; and in a country where leprosy was rife it seemed to him that it would be advisable to exercise particular caution, and, if possible, avoid, as was now being done in Hawaii, an indiscriminate arm-to-arm vaccination among the natives. The question of the possibility of transmitting leprosy bacilli by vaccine is receiving attention on the part of the Indian Leprosy Commission, and a paper on the subject by Drs. Bevan Rake and Buckmaster will appear in the next number of the *Leprosy Journal*"

In answer to this statement I sent the following to the *Lancet*:—

#### LEPROSY AND VACCINATION.

(To the Editor of the *Lancet*.)

SIR,—Dr. P. Abraham's address before the recent International Congress of Hygiene and Demography on the alleged connection of vaccination with leprosy, reported in the *Lancet* of 22nd August, is hardly calculated to allay public anxiety in our tropical colonies where the disease is endemic. As he has referred to the evidence which I gave on this subject before the Royal Commission, I shall be glad if you will kindly allow me a short space for explanation. Dr. Abraham has furnished a tolerably large list of authorities who have either pointed out this particular danger or supplied particulars of cases where leprosy has in their opinion been invaccinated, but he adds that these cases are comparatively few. Allow me to observe that Dr. Abraham has omitted to mention that, of the distinguished medical witnesses, some have adduced several cases of invaccinated leprosy, and others refer to a "prolific," "serious," "alarming" increase of leprosy due to vaccination. Some of the cases are introduced with reluctance by practitioners, who know the damaging effect of these allegations upon a prescription lauded as "the greatest discovery in the history of medicine." Dr. Abraham quotes Dr. Hansen as stating that in Norway no case had been hitherto known of the communication of leprosy by vaccination. Permit me to say that this well-known pathologist has given his emphatic opinion, which I quoted before the Royal Vaccination Commission, that the chief means of disseminating leprosy is by inoculation, and that in Norway the greatest possible care is observed to prevent lymph being taken from leprosy subjects. Dr. Abraham advises medical men to be "extremely careful" in the selection of their lymph, especially in countries where leprosy is rife, and to avoid arm-to-arm vaccination, "as is now being done in Hawaii." I beg to state that less than a year ago, as I know from personal inquiry, the bulk of the vaccinations in Hawaii were performed with humanised virus, it having been found that animal lymph produced excessive inflammation and many terrible cases of ulceration. In Ceylon, where leprosy is endemic, and, according to Dr. Kynsey, the Surgeon-General, increasing from some occult cause, arm-to-arm vaccination is principally in vogue, as it is also in the West Indies. If leprosy is spread chiefly by inoculation (and this source of infection is more generally accepted amongst dermatologists than any other), there is no mode of inoculation so widely prevalent as vaccination; and,

having investigated the subject in all quarters of the globe, I attribute largely to this cause the alarming recrudescence of the disease which has taken place during the last thirty years in our colonies and most other leprosy countries., WILLIAM TEBB., Devonshire Club, St. James's, London, 5th September, 1891

*This letter was refused insertion*

It is clear by Dr. Abraham's mode of argument that leprosy vaccination, as an important factor in the increase of the disease, is the last thing he will admit. All other possible sources of dissemination must be excluded before a theory so fatal to medical prestige can be tolerated. Any other of the numerous theories promulgated to account for new centres of leprosy contamination the doctor is ready to consider, but vaccination (to use a classic phrase) "must be preserved from reproach," and the reputations of its distinguished advocates maintained. His opinions, however, do not seem to meet universal approbation, even amongst the medical profession. Commenting upon Dr. Abraham's address, the *Hospital Gazette*, London, of August 22nd, 1891, observes :—" Dr. Abraham has gone to a great deal of trouble to prove, or attempt to prove, that, though leprosy is probably as susceptible of being conveyed by vaccination as is syphilis, there is no well authenticated case of the kind on record. It is admitted that quite a number of suspicious instances have been reported by competent observers, but Dr. Abraham rules them all out of court on the ground that other possible sources of infection have not been eliminated. This seems to be asking too much. Leprosy vaccine is obviously only obtainable in countries where leprosy is common, so that, theoretically, the victims must necessarily have been exposed to the special pathogenic influences. It has, we believe, been scientifically demonstrated that the disease can be conveyed by inoculation, and we shall require something more than this specious special pleading of Dr. Abraham before acquiescing in his conclusions."

### CHAPTER 9: VACCINATION IGNORED IN OFFICIAL LEPROSY REPORTS.

Now that evidence is accumulating in all directions regarding vaccine virus as a propagator of leprosy, attempts are made to minimise the effects of this evidence on public opinion, by alleging that the instances of such infection are few in number, and of no account when put in the scales against the enormous benefits arising out of the application of Jenner's great discovery. This is not the place to enter into the *pros* and *cons* of this much-veiled question, but those who wish to study the facts may do so advantageously in the reports of the Royal Commission on vaccination; in the article on vaccination by Dr. Charles Creighton in the ninth edition of the "Encyclopedia Britannica"; in the able monograph, "Jenner and Vaccination," by the same author, and in Professor Crookshank's instructive treatise, "The History and Pathology of Vaccination." My own views on this subject—the results of a lengthened experience—may be found in the *Westminster Review* for December, 1888, and January, 1889. While I do not admit with Dr. P. Abraham, Dr. George Thin, Dr. Beavan Rake, and others, that the cases of leprosy due to vaccination are few in number, it should be borne in mind that the subject has never been submitted to searching and impartial investigation. In 1862, by request of the Government, a Committee of the College of Physicians prepared a series of seventeen interrogatories which were sent to leprosy specialists in all parts of the world, but all reference to vaccination as a possible or probable factor was strictly excluded.

In consequence of the rumours of the spread of leprosy, by means of vaccination, in the Island of Trinidad, Governor J. R. Longden felt it his duty to call the attention of the English Government to the subject, and on the 4th March, 1871, he addressed a dispatch to the Right Hon. the Earl of Kimberley, then Secretary of State to the Colonies. In confirmation of this serious charge against vaccination Governor Longden referred to the report of Dr. Bakewell, the Vaccinator-General of Trinidad, and to certain cases of unvaccinated leprosy, and to Sir Ranald Martin and other eminent physicians as authorities for his statements, and added, "This part of Dr. Bakewell's report appears to me to be deserving of your Lordship's attention in connection with the increase of leprosy, which I fear must be admitted to have taken place in the last few years." In paragraph 13 of the dispatch Governor Longden says: "The danger of introducing disease into the system of a previously healthy child by vaccination is possibly a real one, and it is very important, as regards tropical colonies at least, that it should receive the attention of the medical profession." In paragraph 14, Governor Longden pertinently observes that the special danger of spreading broadcast the seeds of leprosy would be worse than the perpetuation of small-pox. Governor Longden's dispatch was referred by the Colonial Department to the Royal College of Physicians, who were anxious to get rid of the most damaging indictment yet preferred against vaccination. This they, sought to accomplish, as far as possible, by ignoring it altogether.

That learned body nominated, Dr. Gavin Milroy, F.R.C.S., who arrived at Georgetown, British Guiana, on the 22nd July, 1871, and prosecuted inquiries mainly as to the contagiousness of leprosy in that Colony, and on the 17th October, 1871, he submitted to the Earl of Kimberley a report confirming the conclusion of the College of Physicians, as given in p. xix. of their report as follows :—" The all but unanimous conclusion of the most experienced observers in different parts of the world is 'quite opposed to the belief that leprosy is contagious or communicable by proximity or contact with the diseased.'" Dr. Milroy adds :—" My personal observations and inquiries in the Colony all tend in the strongest manner to the same result" No question as to vaccination was submitted for consideration. On the 25th October, 1871, Dr. Milroy reached Barbados, and from thence proceeded to Antigua, and later on visited Trinidad, Dominica, and Jamaica. On reaching Trinidad in November, 1871, he discovered that Dr. R. H. Bakewell in his report had given "countenance to the popular belief as to the transmissibility of leprosy by vaccination," and, with the consent of Governor Longden, inserted an additional question to the Interrogatories for circulation in that Colony. This question, then submitted for the first time, elicited answers abundantly confirming Dr. Bakewell's contention. These answers will be found cited in the communication from Mr. Alexander Henry, and elsewhere, in this volume.

Dr. Milroy's report on this part of the subject is mainly directed to answer and, if possible, disprove Dr. Bakewell's allegation, which,

if unanswered, might prejudice the continuance of vaccination. Dr. Milroy says, "What is contended for is, that pure, genuine, vaccine virus, unmixed with blood, cannot be the medium of any contagion but cow-pox:" conditions, as every public vaccinator knows, impossible of fulfilment. At this period the transference of syphilis by means of vaccination was publicly acknowledged, but Dr. de Verteuil of Trinidad, in his reply to Dr. Bakewell, observes: "It is an illogical deduction that, because syphilis is inoculable, leprosy is, or might be, inoculable, the diseases being essentially different." Dr. Browne of Barbados, one of the witnesses, has misgivings on the point, and writes to Governor Rawson, November 8th, 1871, as follows:

"It has been a general rule not to vaccinate from the apparently unhealthy, or those of leprosy taint, not so much from any opinion founded on fact of the possibility of conveying disease, as from a respect for the general prejudices prevailing." Public opinion, as shown by Dr. Bakewell's evidence, was even at that time in advance of medical opinion regarding the danger attending vaccination. Dr. Reade, the Colonial Surgeon of Singapore, cautiously observes (Dr. Gavin Milroy's report, p. 36):

"There is a possibility that the disease (leprosy) may be transmitted from children hereditarily tainted with leprosy, and I strongly advise the continuance of importing lymph from England by every mail, and carefully selecting only healthy children as vaccinifers."

The testimonies elicited by this inquiry as to the communicability of leprosy and syphilis seem to have had no practical effect on the College of Physicians. In a letter from that body on "Vaccination and Leprosy," dated London, August 17, 1871, and addressed to the Earl of Kimberley, it is stated that, while it is admitted that in a few instances syphilis has been transmitted by vaccination, "yet with reference to leprosy it must be observed that there is no evidence adduced beyond the merest presumption that this disease has ever been transmitted by vaccination." And so far from cautioning the public against this fearful danger, and petitioning Parliament to repeal a law which had been productive of so much mischief, the College of Physicians reaffirmed their belief in the benign character of vaccination, and declared "that they cannot press too strongly on your lordship the importance of enforcing the practice of vaccination for the protection of those who are too ignorant to protect themselves, and it would be a grievous wrong to forego so great a public benefit on the mere speculative grounds advanced by Dr. Bakewell."—*Report on Leprosy and Yaws*, p. 86.

The next inquiry emanated from the India office, and is entitled "Scheme for obtaining a better knowledge of the endemic skin diseases of India," prepared by Tilbury Fox, M.D., F.R.C.P., and T. Farquhar, M.D., 1872. Two chapters in the report of this inquiry are devoted to leprosy. The authors here furnish a list of twelve questions for elucidation in regard to the presence and cause of leprosy in different districts, and three questions for leprosy in individuals. In none of these is either inoculation or vaccination specified.

The alarming increase of leprosy in Hawaii, which took place after the introduction of vaccination by the missionaries, once more called public attention to the subject, not only in that group of islands, but throughout the civilised world. In 1885 the Department of Foreign Affairs in Honolulu instituted the most extensive inquiry made up to that time into the causation of leprosy, and the means of its treatment and prevention. The deplorable position of affairs is briefly stated in the introduction to the official report, entitled, "Leprosy in Foreign Countries: Summary of Reports furnished by Foreign Governments to His Hawaiian Majesty's Authorities, as to the prevalence of Leprosy in India and other Countries, and the measures adopted for the social and medical treatment of persons afflicted with the disease." . . . "It is about thirty years since leprosy first attracted any serious attention in the Hawaiian Islands. In the year 1866 the dread disease had gained such a deadly hold upon the native race, that the Hawaiian Government began to attempt to stamp out the scourge by segregation, for it had become a contest for the preservation or destruction of the aboriginal race. To judge by the number of cases in proportion to the population, the disease appears to be more virulent and malignant in the Hawaiian Archipelago than elsewhere on the face of the globe. What has been attempted and accomplished in this twenty years struggle with a great national calamity appears elsewhere."

"His Hawaiian Majesty's Government being anxious to provide every possible means for the treatment and understanding of the fearful malady, His Excellency Walter M. Gibson, His Majesty's Minister of Foreign Affairs and President of the Board of Health, addressed letters of inquiry to the Secretary of Legation at Ceylon and to the diplomatic and consular representatives of the Hawaiian kingdom in various parts of the world where leprosy was known to exist, making inquiry in respect to the character and treatment of the disease." It is stated that the response to these inquiries has been most generous, more especially from governments of dependencies of Her Majesty Queen Victoria. This interesting document gives reports from every section of the vast Empire of India and its dependencies, from Ceylon, Hong Kong, Siam, the Netherlands and their colonies, the Canary Islands, Norway, Spain, Mexico, Chili, and Guatemala, and an extremely interesting and valuable report from the famous Leper Institution of Tracadie, New Brunswick, Canada. The report from the Secretary to the Government of India being so comprehensive and voluminous, it has been considered expedient to separate it from the other reports.

"In grateful recognition of the sympathy of other afflicted nations, this collection of reports, together with the sad history of its own affliction, is presented to the world by the Hawaiian Government in the devout hope that the Almighty, in his great mercy, may ere long permit suffering humanity to find the means of mitigating the terrible scourge."

From this little known compilation I have made extracts on various matters dealt with in this volume.

In this important inquiry, although at that time the facts had become known throughout the Hawaiian Archipelago as to the spread of leprosy by vaccination, yet such was the reluctance to bring so grave a charge against a practice proclaimed far and wide as "the greatest discovery in the history of medicine," that it was thought expedient to make no mention of vaccination in the interrogatories, and to specify only those points drawn up by the Committee of the College of Physicians in 1862.

Owing to the increase of leprosy in South Africa, inquiries by Select Committees of the Legislative Assembly were instituted in 1883 and 1889, but the interrogatories relate chiefly to the spread of the disease, and to its contagious or non-contagious character. The questions were submitted *viva voce*, and vaccination as a possible factor in the dissemination of leprosy is carefully ignored.

An important report by Dr. S. P. Impey, Medical Superintendent of the Leper Settlement, Robben Island, on the dangers of spreading leprosy by means of vaccination, was in June, 1891, sent to the Colonial Office, Capetown. Of this report I have attempted, by repeated personal applications at the Colonial Office, Capetown, and at the Stationery Department of the colony, to obtain a copy, but without success.\* (\*An extract from this report, through the intervention of a correspondent in South Africa, has since been obtained).

In the "Report of the Leprosy Inquiry Commission" for the Colony of Mauritius, published 26th October, 1888, I find the following request in the circular of instructions sent to medical practitioners:—"We would be glad to obtain any facts bearing upon the question of its heredity or contagiousness, upon the conditions favouring its diffusion, upon its treatment, and, finally, upon the best means of preventing its spread in the community.—T. LOVELL, Chief Medical Officer," etc.

Nothing is said as to the inoculability of the disease, nor is there any inquiry suggested as to vaccination, which has been the means of spreading leprosy in this colony.

The Royal College of Physicians published another report on leprosy in 1889, concerning which the *Lancet*, April 20th, 1889, says:—"A report from the Leprosy Committee was read. It stated that the documents forwarded by the Government on the subject of leprosy since 1887 did not contain much, if any, new information. In view of the fact that there is increasing evidence respecting the communicability of leprosy, the committee repeated 'with greater urgency' the recommendation made in 1887, that the Government should institute a full and careful scientific investigation, which would entail expense and require considerable time. The adoption of the report was moved by Dr. Symes Thompson, who said that the disease was spreading very much among communities in South Africa, and was seconded by Dr. Handfield Jones, who thought that the College should express more definitely its opinion of the contagiousness of the disease and the need for compulsory segregation. This view was not accepted by other speakers, but all concurred in the urgency for a thorough scientific investigation, and it was referred to the committee to draw up a statement respecting the scope of such inquiry, for submission to the Government."

This report was, founded upon official and other documents collected up to that date and forwarded by the Government to the College of Physicians. Of these documents I have been unable to obtain copies or even permission to inspect them. The report is signed, "James Risdon Bennett, Chairman," and is dated April 5th, 1889. It was then four years since the disastrous effects of vaccination in Hawaii had been published by Dr. Edward Arning, and two years since Professor Gairdner's remarkable cases of invaccinated leprosy had been made known in the *British Medical Journal*. These and other facts showing the danger of invaccinating leprosy had been laid before the Dermatological Congress of Europe by eminent specialists. And soon after the publication of Dr. Gairdner's cases, Sir William Robinson, Governor of Trinidad, issued a confidential circular to about 30 medical practitioners of that island, containing the question as to whether leprosy is communicable by vaccination, "lymph from healthy vesicles alone being used." Dr. A. S. Black, a well known practitioner, gave particulars of several cases in his own experience, and stated that leprosy was increasing in the island. In his report to the Surgeon General for 1890, p. 34, Dr. Beavan Rake says:—"Some thirty or more Trinidad doctors to whom the same circular was addressed returned negative replies." Dr. Rake omits to state that those who doubt or deny the risk qualify their answers by remarks such as that there is no danger "if pure lymph only is used, and precautions taken in the selection of the vaccinifer and the examination of the pustule," "if there be no admixture of blood" and "healthy lymph is used," "provided the lymph is clear" and "the vaccinifer is free from hereditary taint," "if bovine virus is selected," "with perfect cleanliness of the lancet," etc. Dr. Woodlock mentions that he takes the precautions of constantly importing fresh certified lymph from England. Dr. D. de Montbrun "dreads vaccination on the ground that syphilis and other cutaneous diseases have been transmitted by it." He also states that nearly all the families in Trinidad strongly object to vaccination with lymph taken from the children of the island, from fear that leprosy may be thereby communicated. Dr. Chitterton says:—"Vaccination is performed in Trinidad in a very unsatisfactory way." It is obvious that the value of the answers is seriously vitiated by the form in which the question is worded. The use of clean lancets and healthy vaccinifers without hereditary taint, however much insisted upon, cannot be made compulsory; and the people are obliged under severe penalties to submit to whatever vaccination is offered, which is chiefly of the leprosy and syphilitic variety, collected from miscellaneous native vaccinifers by perfunctory public vaccinators. Indeed, as I have found by personal inquiries in the West Indies, South Africa, and Hawaii, all the precautions admitted to be indispensable for the safe performance of the official rite are habitually disregarded.

The latest inquiry is due to the extraordinary amount of public interest awakened by the published reports of the labours, devotion, and death of the late Father Damien in the Sandwich Islands, and to the accumulation of evidence from many English and French Colonies showing conclusively the increase of this frightful malady. The first meeting was held at Marlborough House, June 17th, 1889, under the presidency of H.R.H. The Prince of Wales; and a dinner in aid of the National Leprosy Fund was held at the Hotel Metropole, London, on the 13th January, 1890, at which also the Prince of Wales presided. A highly influential Committee was subsequently appointed, with Dr. Phineas S. Abraham as secretary. The following letter, with a view of eliciting suggestions, was published in the *Lancet* of the 31st May, 1890, also in the *British Medical Journal* and in the first number of the *Journal of the Leprosy Investigation Committee*:—

SIR,—With the object of eliciting by correspondence as much information as possible on the subject of leprosy, it is proposed as a

preliminary investigation to address a series of questions to the officers of the various leper asylums and to others who may be able to throw some light upon the matter. I am requested to ask you to allow me to invite the co-operation in this inquiry of those of your readers who, from their knowledge of the disease, may be in a position to offer suggestions as to matters of, inquiry and as to points of elucidation. Any observations with which the Committee may be favoured will be gladly received and incorporated in the "Journal of the Leprosy Investigation Committee," of which the first number will be shortly published.—I am, sir, yours faithfully, P. S. ABRAHAM, Med. Sec. May 26th, 1890.

Dr. Abraham further explains that "although all information bearing on leprosy will be deemed of interest, it will be desirable for observers to direct particular attention to questions relating to the cause or causes and propagation of the disease, as well as to those referring to remedial measures." "It is to be noted that this 'Journal' is published for the purpose of obtaining reliable scientific information on the subject of leprosy, and that it will not be carried on in the interest of any one particular theory. Views from all sides will be admitted; and that the truth may be arrived at, full and free discussion is invited."

Nothing could be fairer, more explicit, or more promising for establishing public confidence and support than these announcements. Realising the importance of the subject and the limitations laid down by Dr. Abraham, I addressed to him, as Secretary of this Inquiry, the following brief communication on the principal point referred to—the causation of leprosy :—

Rede Hall, Burstow, near Honey, Surrey,  
June 10th, 1890

SIR,—Observing your note in the *Lancet* of the 31st tilt., requesting suggestions as to methods of inquiry, and as to points of elucidation, with regard to the remarkable spread of leprosy, I beg to point out that amongst the questions which it is proposed by your committee to issue to the superintendents of Leper Hospitals, dermatologists, and others, that of the connection of the disease with vaccination should be included. That there is a connection is now admitted by some of the most eminent authorities of the day, including Professor W. T. Gairdner, Dr. Liveing, Sir Morell Mackenzie, Dr. John D. Hillis, Dr. Edward Arning, Dr. Armaur Hansen, and others. Some of these writers admit that not only is leprosy communicable with the vaccine virus, but that new centres of contagion of this hideous disease have been created by vaccination, with most disastrous and far-reaching consequences. Trusting that this important feature of the question will not be overlooked by your committee, and awaiting the favour of a reply, I am, sir, yours faithfully, WILLIAM TEBB.

Dr. Phineas Abraham, National Leprosy Fund, Adam Street, W.C.

To this letter the following reply was received :—

2 Henrietta Street, Cavendish Square, W. July 2nd, 1890.

DEAR SIR,—I must apologise for not answering your letter before this. With regard to the alleged connection with leprosy, this question will certainly be one of the points to which special attention will be directed on the part of the committee, and an attempt will be made to sift the evidence in an impartial manner.—I am, dear sir, yours faithfully,  
PHIN. S. ABRAHAM, M.D.

W. Tebb, Esq.

This correspondence, implicating vaccination, and pointing out a much-neglected source of danger, is absolutely ignored in the *Journal of the Leprosy Investigation Committee*; while communications from all parts of the world, in which the most diverse and conflicting theories are advanced by persons whose opportunities for observation and inquiry have necessarily been of a very meagre description, have found insertion in its pages.

In a notice of a recent able work, "Leprosy," by G. Thin, M.D. (London: Percival & Co.), in No. 4 of the *Journal of the Leprosy Investigation Committee*, p. 71, no mention is made of the cases of invaccinated leprosy introduced by the author, which occupy several pages of the work. On the other hand, three articles against the theory that leprosy is spread by vaccination are inserted. It is also to be observed that, while numerous communications, pointing out the dangers of vaccination in countries where leprosy is prevalent, have, since the Leprosy Commission was appointed, appeared both in the home and colonial press (some of the writers citing cases of the disease disseminated in this way, and others furnishing the results of their painstaking investigations), no notice of such communications has been taken in the *Journal of the Leprosy Investigation Committee*. Three pamphlets dealing with the subject—two of them by medical writers—have been treated in a similar fashion. What amount of confidence the public, who have subscribed largely to the National Leprosy Fund, will place on an inquiry so manifestly one-sided, remains to be seen. It is certain that those who have looked for the impartial treatment of this serious phase of the question at the hands of the Leprosy Investigation committee will be grievously disappointed. Counsel holding a brief for the perpetuation of the Jennerian *cultus* could hardly have exhibited a less judicial attitude than disclosed by the official documents relating to this latest leprosy inquiry.

## CHAPTER 10: OFFICIAL STATISTICS.

### THE LEPER CENSUS IN INDIA, 1881, 1891.

MR. J. A. BAINES, Census Commissioner, India Office, has been kind enough to furnish me with the following Table showing the results of the Census in

## LEPROSY AND VACCINATION by WILLIAM TEBB (Complete)

relation to Leprosy in the decades 1881 and 1891.

PROVINCE	Males 1881	Females 1881	Males 1891	Female 1891
1. Ajmir	23	6	20	7
2. Assam,	2,409	906	5,128	1,599
3. Bengal,	40,484	13,490	32,957	11,029
4. Berar	2,971	777	2,886	1,624
5. Bombay	7,259	2,559	7,558	2,419
6. Sindh	166	111	125	84
7. Aden	0	0	1	0
8. Upper Burmah	0	0	2,262	1,242
9. Lower Burmah	2,009	580	2,281	679
10. Central Provinces	4,430	2,013	3,575	1,780
11. Coorg	25	18	12	11
12. Madras and Small Feudatories	10,329	3,846	9,455	3,182
13. N. O. Prov. and Oudh	14,453	3,369	14,114	2,957
14. Punjaub	5,333	1,547	3,322	1,029
15. Quettah	0	0	2	0
16. Andaman	30	0	1	0
17. Hyderabad	2,117	872	2,261	716
18. Baroda	450	174	397	172
19. Mysore	340	193	536	266
20. Rájputána	0	0	1,314	394
21. Cent. Ind. Regs., etc.	7	6	59	21
22. Bombay States	1,681	606	1,907	641
23. Cawnpur State	0	0	4	2
24. Cochin & Perderkottal	143	0	313	138
25. Travancore	0	0	684	284
26. Central Prov. States	0	0	799	460
27. Bengal States	1,799	750	1,471	577
28. N.-W. Prov. States	339	94	312	67

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29.Punjab States	2,241	613	1,462	458
	99,038	32,622	95,218	31,838
TOTAL	131,660		127,056	

*The general reader may perhaps be assisted in understanding the foregoing Tables by the following Analysis.*

PROVINCE	MALES		FEMALES	
	Increase	Decrease	Increase	Decrease
1. AjmIr	...	3	1	....
2. Assam	2,719	....	693	....
3.Bengal	.....	7,527	.....	2,461
4.Berar	.....	85	847	....
5.Bombay	299	.....	.....	140
6.Sindh	....	41	....	27
7. Aden	1	.....	....	....
8.Upper Burmah	2,262	.....	1,242	...
9. Lower Burmah	272	.....	99	....
10. Central Provinces ~	.....	855	....	233
11. Coorg	....	13	....	7
12. Madras and Small Feudatories	...	874	....	644
13. N. O. Prov. and Oudh	.....	339	....	412
14. Punjaub	.....	2,011	....	518
15. Quettah	2	....	....	...
16. Andaman	....	29	....	...
17. Hyderabad	144	...	....	156
18. Baroda	...	53	....	2
19. Mysore	196	.....	73	...
20. Rájputána	1,314	....	394	...
21. Cent. Ind. Regs., etc.,	52	.....	15	...
22. Bombay States	226	.....	35	...
23. Cawnpur State	4	....	2	...

## LEPROSY AND VACCINATION by WILLIAM TEBB (Complete)

24. Cochin and Pardukta	170	....	46	...
25. Travancore	684	.....	284	....
26. Central Prov. States,.	799	.....	460	...
27. Bengal States	...	328	...	173
28. N.-W. Prov. States	....	27	...	27
29. Punjab States	...	779	...	155
	9,144	12,964	4,191	4,975
Deduct increase		9,144		4,191
Net decrease		3,820		784
	1891.....	95,218	1891.....	31,838
	1881.....	99,038	1881.....	32,622
Places	15	14	13	13
Add increase		15		13
Unchanged*				3
	Total.....	29	Total.....	29

\* Nos. 7, 15, and 16.

From the foregoing analysis, it appears that the number of male lepers has during the decade increased in fifteen places and decreased in fourteen. The number of female lepers has increased in thirteen places and decreased in thirteen: while in three places they are *in statu quo*. In seven places no returns are given for 1881.

The total number of lepers returned are as follows:---In the census for 1881, 131,660; in the census for 1891, 127,056.

It will be remembered that at a meeting held at Marlborough House on the 17th of June, 1889, His Royal Highness the Prince of Wales declared that there were 250,000 lepers in India, an estimate nearly double that which is indicated by the figures derived from the censuses of 1881 and 1891. That the estimate given by His Royal Highness is far nearer the mark than are the figures derived from the census, will appear probable from the following facts and considerations.

On the perusal of the census forms issued by the Indian Government, we find in Rule 14 that "white leprosy" is to be excluded from the infirmities to be returned by the enumerators. That rule is as follows:—"If any person be blind of both eyes, or deaf and dumb from birth, or insane, or suffering from corrosive leprosy, enter the name of the infirmity in this column. Do not enter those blind of one eye only, or who have become deaf and dumb after birth, or who are suffering from white leprosy only."

Mr. J. A. Baines, Census Commissioner, writing 21st June, 1892, says that in the recent census, "the instructions were clearer (as to leucoderma, or white leprosy), and the exclusion far more strict."

The census form also contains the following direction:

"You are to make all the entries as the person himself or his guardian, states, and not to dispute his statement."

Coupling this direction with the fact that now, for the first time within thirty years, the report has been widely circulated, that all lepers at large were to be segregated, that is, to be separated from their friends and from all they hold dear, we should infer that a large number of cases of leprosy would be suppressed, and not returned to the census enumerators, who are much more in sympathy with the afflicted members of their own race than with their official chiefs, and would be slow to aid in the perpetual incarceration of their friends; and among the respectable classes no one will admit that he is a leper, as an admission of this kind would involve loss of caste and social ostracism.

Moreover, leprosy is an insidious disease, and in its early stages cannot be diagnosed and detected save by experienced medical practitioners accustomed to treat this particular malady. Of the enumerators, not one in a hundred could detect a case of leprosy if he saw it, except when presented in its most aggravated and repulsive form.

Mr. H. A. Ackworth, Municipal Commissioner, Bom— bay, in a communication to me, dated 29th July, 1891, says :—" I have plenty of lepers in my hospital here who could not be identified as such unless they were completely stripped and examined by a trained eye." And a correspondent of the *Calcutta Daily News*, October 20th, 1891, writes:—" To my personal knowledge there are at least twenty-three lepers in this town who are not entered as such in the census papers. And it is quite probable that there are many more who have not been numbered."

A medical correspondent connected with the Army Medical Department writes to me, January 27th, 1892, "that the census form used in the census of 1891 is an enigma that the enumerators could not properly explain; and the remuneration offered was so small that it failed to tempt any of the better educated classes to volunteer for the census work. Consequently the papers were handed over to men who, for the most part, were too devoid of understanding to enable them to ascertain facts or comprehend the nature of the information required for filling in the returns." My correspondent adds that the wide-spread belief in India, that leprosy is a disease of venereal origin, induces all but the lowest classes to carefully guard against it becoming known, either to officials or to others, that any member of the family is a leper, and "even the threat of prosecution would not frighten them into publishing their terrible secret for census information." For these and other reasons there can be no doubt that a considerable portion of the leper population in India has been omitted from these returns.

Without endorsing the accuracy of the leper census in India, which is clearly misleading, it may be incidentally remarked that the proportion of vaccinations to population in India, as a whole, is less than in any of our crown colonies and dependencies, but is increasing every year, and, unless arrested, will soon produce the calamitous consequences exhibited in tropical countries where vaccination is general.\*

\* The births in India in 1899-1 were officially estimated at 40 per cent. of the population, or 8,244,101, and the number of children under one year returned as vaccinated in 1890-1 was 2,268,922, being about 27 per cent. on the total number of births.

#### THE LEPER CENSUS IN THE LEEWARD ISLANDS, WEST INDIES, 1891.

A census has recently been taken for the Leeward Islands, which also minimises the number of lepers in a similar fashion. Referring to this, the *St. Kitts Lazaretto* of February 22nd, 1892, says:—"The census return for the Colony is at length out, and a copy may be seen at the Public Library. It is openly said all over the Colony that this particular census is utterly unreliable; indeed, Mr. Fred Evans, the Colonial Secretary, says as much of the returns from Dominica. A glance at the tables which pretend to show the number of lepers in the Colony satisfies us that, in this particular, the returns are worthless.

"Some time ago, the doctors here were called upon to send in returns of the lepers in their districts. They did so, and sent in a list of 51 lepers. That this list was necessarily incomplete we fully demonstrated at the time. Since then, we have heard of several other lepers of whose existence no one here knew, and a few have been committed to the Leper Asylum. But in the face of the reports from the doctors, the compiler of these precious returns sets down the number of lepers at large in St. Kitts as thirteen and in Nevis as five!! How could Mr. Fred Evans or his clerk have got these figures? The census forms that had to be filled in by each householder contained no space in which the number of lepers could be entered. Therefore, we are forced to the conclusion that the opportunity of misrepresenting the leprous condition of this Colony was seized by those who were on the look-out for such a chance, the doctors' reports disregarded, and that some one invented these figures. . .

"We guarantee to produce fully 50 (and perhaps 60) lepers who are now at large in this little island (St. Kitts).

"There are considerably more than 13 in Basseterre alone. As regards Nevis, the inaccuracy of the Colonial Secretary's figures is equally striking.

"We can give off-hand the names of a half-dozen lepers living there, and we have heard of many more, of whose existence we are assured by gentlemen who are above, lying, and who have no motive for suppressing the truth.

"The figures for the other islands are also palpably incorrect and misleading. In Antigua 34 lepers are said to be under restraint. This is not true as regards the restraint, for according to Dr. Freeland they cannot legally be restrained, and as a fact they go and come from the so-called Lazaretto as they please. Only last month we saw several of them promenading the streets of St. John's. Then to set down 11 lepers only as being at large is a gross misstatement, as every one in Antigua knows. We were up there quite recently, and satisfied ourselves that there are probably in all over a hundred lepers in that island.

"We accept the return of 3 lepers to about 500 people in Barbuda, but we confidently challenge the assertion that there are only 9 lepers in Montserrat and 3 in the Virgin Islands. .

"Anguilla, the Government says, contains 8 lepers. Will Mr. Fred Evans be surprised to hear that he has made the trifling error of only eighty per cent? We happen to know that if he had guessed 40 (for the whole thing is evidently pure guess work) he would have been pretty near the mark.

"The total for the Leeward Islands is, according to this eccentric statistician, 172. That for St. Kitts and Nevis is 98. We declare, speaking with a knowledge of the subject which is infinite compared to that possessed by Mr. Fred Evans, that there are at least 200 lepers in St. Kitts and Nevis; and that Sir William Haynes Smith knows. Taking St. Kitts, Nevis, and Anguilla, we would not be surprised if 250 free lepers could be ferretted out. Of Dominica and Montserrat we cannot speak so confidently, but we have interviewed many gentlemen from them, and the sum of our inquiries is that no one knows how many lepers there are in any one of them. It has been no one's business to find out, and therefore no one has given the least attention to the subject."

### CHAPTER 11: LEPROSY AND THE ABORIGINAL RACES.

IN 1889, during a visit up the river Essequibo, in British Guiana, the British Commissioner and resident Magistrate, Mr. Michael M'Turk, of Kalacoon, informed me that he had not the slightest doubt that leprosy was disseminated with the vaccine virus. He was intimately acquainted with a healthy family, in which one of the children was affected with leprosy by means of lymph taken from a child afterwards proved to be tainted with leprosy. The unfortunate victim of the state-enforced operation was isolated in a small building at the end of the garden at the parents' house, and ultimately succumbed to the disease. As an explorer, Mr. M'Turk has been much among the Indians, all his servants and boatman belonging to that race, and he had never known or heard of a case of leprosy amongst them. The truth of this statement is confirmed by a communication to me from Mr. Herman Klein, Acting Assistant Medical Officer, H. M. P. 5., Potosi, British Guiana, dated June, 1891—"I have been about eleven years up the Essequibo, river, and have never seen an Indian afflicted with leprosy." I received similar testimony at Bartica Grove from Mr. John Bracey, an Indian trader of twenty-nine years' experience among the Macousi and Wapisiana tribes. Dr. John D. Hillis, F.R.C.S., formerly the Superintendent General of the Leper Asylum, Mahaica, in his work, entitled "Leprosy in British Guiana" (1881), says, p. 148:—"With regard to this country one important fact is the immunity from leprosy enjoyed by the aboriginal tribes of British Guiana." This immunity from the disease is attributed to the circumstance that no Indian will allow himself or his children to be vaccinated. Dr. T. C. Taché, Titulary Professor to the Laval University, writing from Ottawa, Canada, in reply to questions submitted by the Hawaiian Government, June, 1885, says:—"There never was any case of leprosy among the Indians, although one of their principal villages is located in the endemic section, being contiguous to the parish of Nigavrick." Professor T. C. White says that in Tracadie, New Brunswick, more than too lepers were received at the hospital between 1849 and 1882; nearly all the cases were of French descent, and no Indian had fallen a victim.

Dr. J. E. Graham, in a report from the Government of Hawaii as to leprosy in New Brunswick (1886, pp. 114 and 140), observes:—"That the Indians have been the only race, of those inhabiting these localities in any number, which have remained so far exempt from leprosy. . . . The places in which the Indians dwell bear precisely the same character as those inhabited by their neighbours among whom the ailment has exercised its ravages."

Dr. Miguel Valladores, physician to the Lazaretto, Guatemala, says, in his report to the Hawaiian Government, 1886, p. 174, "that it is almost an unheard of thing for an Indian to be afflicted with leprosy."

Drs. Vlagthoes and Mayrinck state that, previous to the discovery of Brazil, leprosy was unknown among the Indians.

Dr. Alzevedo Lima, in a letter on "The Leper Hospital of Rio de Janeiro," dated June 1st, 1891, Rio de Janeiro, says:—"On consulting all the documents and books written by travellers and missionaries in Brazil, we find no mention, either direct or indirect, of any prevalent complaint among the Indians which might be attributed to leprosy. Even nowadays those who live a savage life away from all contact with civilised society are not attacked by this disease, while those who have left their woods for peopled centres, together with their descendants, are, according to observations, occasional victims."—*Journal of the Leprosy Investigation Committee, December, 1891, p22.*

In a communication to me, dated Rio de Janeiro, May 20th, 1892, Dr. Lima says:—"Now, about the Indian races, those who live away altogether, without any interference or intercourse with civilisation, their freedom from leprosy can be explained not only by the absence of the Jennerian vaccination, but also by the non-intercourse with people capable of being the conductors of the germs of the disease." I have personally met with races of Indians in South America, amongst whom, though living amongst lepers up to this date, no cases of leprosy have occurred. This immunity is attributed by old residents, one a physician, to the circumstance that they will not allow themselves or their families to be vaccinated.

Dr. J. Z. Currie, secretary of the Provincial Board of Health, Fredericton, New Brunswick, in reply to a communication from me, dated January 2, 1892, as to the vaccination of Indians in New Brunswick, Canada, says:—"There has been no outbreak of small-pox among the Indians for some time. However, in almost all instances they object to vaccination. Four cases of small-pox occurred in this Province during the past year among white people."

The main object of this evidence is to show that in countries where leprosy is endemic, the Indian tribes who reject vaccination escape the plague. In New Brunswick it would appear that they also escaped smallpox, while vaccinated white persons have been attacked with the disease.

### CHAPTER 12: VACCINAL DISEASES IN SOUTH AFRICA.

VACCINATION was made compulsory in Cape colony by Act of the Legislature in 1882. Very soon the deleterious effects of the virus were exhibited. The London *Daily News*, March 5, 1884, says that owing to impure lymph there had been many cases of illness

from vaccination; but, later on, the natives were vaccinated on an extensive scale. The Public Health Act, No. 4, Cape of Good Hope, dated September 6, 1883, contains the provisions of a vaccination law of a stringent and despotic character. Section 60 states—"No person who has not been vaccinated shall be appointed, or, if appointed prior to the taking effect of this Act, promoted to any office in the public service." Section 60 provides that "Every child, admitted to any school which shall be maintained or aided by any grant from the public funds, shall be vaccinated by the District Surgeon or by a vaccinator specially appointed, unless such child shall have been previously vaccinated." The penalty for non-vaccination is £2. The law contains other oppressive clauses, thus incorporating in one act the worst features of the English, American, and Continental vaccination enactments.

All this time, while the vaccine poison was being forced into the blood of the defenceless natives, laying the foundation for the disorders which speedily followed, nothing was said or done to remove the causes which developed the outbreaks of small-pox, the fearfully insanitary condition of the town in which the pestilence abounded, the fruit of long-continued filth and neglect, scarcity of water, foul, unkempt streets, seas of mud in the winter and hurricanes of dust in summer, and, worst of all, a population ignorant of the commonest instincts of decency.

The *Cape Times* reported that Cape Town was buying its experience at a heavy price. Within a short time of the introduction of compulsory vaccination, spreading with accelerated industry this tainted virus distilled from the bodies of a filthy population, we read of the spread of leprosy, and of the alarm created in the Colony among those who had observed its destructive progress. A not uncommon experience is to hear of cases of leprosy in families where there is no taint of the disease, and where the afflicted member has never come into contact with lepers. The late American Consul, Mr. James W. Siler, of Cape Town, in his official report to his Government, No. 79, June, 1887, records a case of this description; and, as vaccination is obligatory, the obvious causation is that the disease has been transferred in the vaccine virus. Mr. Suer says :—" A case with which I am well acquainted will illustrate its seemingly mysterious power of propagation. In one of the oldest and wealthiest Dutch families in this Colony the mother is a confirmed leper, of the type described as 'tubercular' by Dr. Atherstone, before alluded to. The father and a large family of strong, healthy, grown-up sons and daughters show not the slightest taint. I have several times enjoyed the hospitality of this family, and availed myself of the opportunity thus afforded of inquiring into this melancholy case, with the view of a possible solution. I am assured that neither on the side of the father nor mother a case of leprosy had ever occurred in their families, and they are able to trace their genealogy back at least one hundred years."\*

\*The *British Medical Journal*, July 5, 1890, under the head of "Reports — Liverpool Workhouse Hospital," communicated by Dr. Cunningham, Senior Medical Officer, gives particulars, with copy of photograph, of an "interesting case." C — L —, aged 46, who has a husband and six children, all of whom are healthy, and, until she became affected with leprosy, had never suffered from any disease. "*She has never known or seen anybody with the same or similar disease.*" The italics are mine.

The conclusions of the Select Committee regarding the increase of leprosy in South Africa\* (\*Chap. I.; pp. 68 and 69 of this report.) derive confirmation from the individual reports of missionaries, clergy travellers, and district surgeons in South Africa, and this increase is specially observable where vaccination has been extensively practised: Referring to the reports of district surgeons, published at the Colonial Office, Cape Town, and presented to both Houses of Parliament, I find the following relating to leprosy and to syphilis, a disease, according to various authorities, pathologically allied to leprosy:—

The medical officer for *Herbert* (Report, 1885), says:—"During the year, small-pox, syphilis of a particular type, and leprosy, have been the prevailing epidemics. The two last named are still prevailing to an alarming extent." It would appear that vaccination, as usual, was resorted to on account of the smallpox, but the medical officer reports that "the difficulties in carrying out arm—to--arm vaccination seem insurmountable."

*Cala*.—The District Surgeon (Report, 1885), says:—"About two. years since, there were many cases of swollen arms, and some deaths after vaccination," and observes: "There is also the danger of inoculating syphilis."

*Aliwal North* (Report, 1885).—"Vaccination has been extensively performed amongst both Europeans and natives." In the following year (Report, 1886), the same officer remarks that "small-pox has raged," of which he has treated about 450 cases, and adds that "syphilis has made vast strides." Two years later (Report, 1888), we read :—" Syphilis is still very prevalent. I have frequently drawn the earnest attention of the Government to the sad havoc this disease is dealing amongst the inhabitants."

While showing the utter failure of the extensive vaccination practised in 1884 to prevent the serious epidemic of small-pox which occurred the following year, these three official reports show how the most loathsome of diseases are disseminated by the vaccinator's lancet. The District Surgeon urges the Government to appoint a Commission of Inquiry.

*Alexandria* (Report, 1887).—" Leprosy is certainly spreading rapidly." In 1890, the District Surgeon reports that the state of leprosy demands urgent attention.

*Port Elizabeth*.—The medical officer says (1887):—"There is a growing aversion to it (vaccination), partly due to an underlying current of belief in the possibility of obnoxious disease being propagated by it." The Report for 1891 states that during the year the presence of leprosy was gone into, and six cases reported to the Government.

*Caledon*.—The District Surgeon reports (1888) that he has vaccinated close upon 800. There are about twelve cases of leprosy in the district, and it appears that syphilis is so increasingly prevalent that an hospital is needed for syphilitic patients.

*Cape-Wynberg.*—(Reports, 1887-8). The medical officer says:—"Of the great increase of leprosy there can be no doubt; it is obvious to the casual observer that Europeans as well as natives are afflicted with it. . . . The number of cases vaccinated has been about 100." The following year (1889), the District Surgeon says :—" Leprosy is becoming far more frequent in the neighbourhood" . . . and adds :—" The question of leprosy is one of the most serious the Government have to deal with. . . . Vaccination has been thoroughly carried out throughout the district."

*Malmesbury* (Report, 1888).—" Leprosy is slowly but surely gaining ground." This officer reports that he does not think it advisable to vaccinate in the district.

*Cradock* (Report, 1887).—" Fifteen cases of leprosy have occurred, all in an early stage."

*Paarl* (Report, 1887).—" Leprosy is on the increase." Report, 1890.—" Leprosy is spreading."

*Glen Grey* (Report, 1889).—The District Surgeon says:—" I have incidentally about a dozen cases of leprosy, some of these of quite recent origin." . . . "A centrally situated leper hospital is imperatively required."

*Kokstad* (Report, 1886).—" Vaccination during the past year has been in several districts well carried out." Two years later (Report, 1888).—The Medical Officer for this district writes as follows :—" Leprosy is still very much on the increase. There are at least fifty cases in Kokstad itself." . . . "It is deplorable to see these wretched victims dependent on the public charity for a bite, whilst the Government will do nothing for their alleviation."

*Stellenbosch.*—The District Surgeon (Report, 1889) remarks that he has just vaccinated two hundred children. He reports 20 cases of syphilis and six cases. of leprosy. In 1890 the same officer returns nine cases of leprosy, and adds "but no doubt there are a few more unknown to me."

*Stockenström.*—Referring to leprosy (Report, 1890) "I have seen persons without hands paying their quit rents, holding the money on the stumps of their arms."

*Somerset East* (Report, 1890).—" We have a good few lepers here, as already reported."

One experienced district surgeon told me that he had, again and again, year after year, called the attention of the Board of Health to proofs of this terrible havoc wrought by arm-to-arm vaccination, and had advocated its suppression in the interests of public health. A careful examination of the official documents would show that the facts incriminating vaccination have not been allowed to appear.

When making inquiries regarding etiology and spread of leprosy in South Africa, I was generally referred to the Rev. Canon Baker, of Kalk Bay, Cape Colony, as a high authority on the subject, and one who had probably devoted more attention to it than any other resident in the Colony. Canon Baker had in 1883 given evidence before the Select Committee of the House of Assembly, Cape Town, and presented a statement of his views, which appeared in Appendix A, pp. 1-9. Since then he has continued his investigations and accumulated a considerable body of facts bearing on the subject. Vaccination, he says, is carried out in the Colonies in a most careless and perfunctory manner. He has seen the operator pass his lancet from one arm to another without the smallest attempt to disinfect the instrument or discriminate between the diseased and the healthy, in districts where both leprosy and syphilis are endemic. From other reliable sources I am satisfied that this is the rule rather than the exception. Canon Baker believes that leprosy is chiefly communicated by means of inoculation, and that arm-to-arm vaccination is a prolific cause of the spread of this fearful plague in South Africa.

The Colony of Natal passed Vaccination Law No. 3 in 1882, and Law No. 10 in 1885. Penalties for non-vaccination £5. In a communication from Archdeacon Colley, dated Natal, August 25, 1885, I learn that hundreds of summonses were issued in vain upon the colonists, but the natives were vaccinated by thousands; one operator would get through two hundred a day.

While the vaccination laws for several years have not been enforced against the white population in Natal, all the natives are vaccinated either under persuasion or threats, the operation being carried out in the usual careless manner, with arm-to-arm virus taken from native children without previous examination, and not the slightest attempt is made to clean or disinfect the lancets after each operation. Hundreds of natives, as I am informed on unimpeachable authority, have died of blood-poisoning and of inoculated diseases.

A member of the Legislative Council, Sir John Bisset, reported in Parliament that many were "blood poisoned, presenting a horrible sight, and dying masses of corruption." In January, 1891, leprosy disseminated in this way was discovered in fifty kraals in one electoral division alone. The natives in their simplicity submit to vaccination, being told that it was the "Incosi" (King) that ordered it, and this was the way the white man secured himself against the plague of small-pox.

As the Government of Natal does not publish reports from the District Surgeons, and appears to be indifferent as to the suffering and mischief caused by the vaccinators, I found it difficult to obtain further details.

### CHAPTER 13: A VISIT TO THE LAZARETTO, ROBBEN ISLAND, SOUTH AFRICA

ON the 9th of February, 1892, after obtaining a permit from the Colonial Office, I took passage in the small but stoutly-built little tri-weekly steamer "Tiger," from Dock Basin, Cape Town, for Robben Island. Amongst our fellow-passengers were visitors, merchants, a clergyman, a singing lunatic in the custody of a warder, and officials connected with the island. Our cargo consisted of

fruit, poultry, beef, and other stores for a population of about 700 persons. In less than an hour after starting, we cast anchor opposite the island; and, there being no landing-stage or jetty, we found small-boats, managed by convicts clad and numbered in penal costume, awaiting our arrival.

These singular-looking boatmen rowed us near the shore, and then carried the male passengers on their backs and the women in chairs through the surf on to *terra firma*. The convicts on the island, about one hundred in number, are said to be chiefly murderers and diamond stealers. There is a strong current between the island and the mainland. Only one attempt has ever been made by a convict to escape by swimming, and the attempt cost him his life.

The first building I entered for the purpose of making inquiries proved to be the female ward of the lunatic asylum. Here I was referred by the attendant to the office of the medical superintendent for another permit, which was granted. Dr. S. P. Impey has medical charge of the convicts, lunatics, lepers, and attendants, comprising the entire population of the island. I found him busily occupied with one caller after another, examining and signing papers from different departments; and, instead of engaging his attention at the moment, I expressed a hope that, as I was interested in what is popularly known as the leprosy question, he would be able to see me later in the day. He readily agreed to see me for this purpose at two o'clock.

On my way to the leper wards I looked in at the little church, a rather pretty edifice, adorned with scripture mottoes disposed in large letters around the galleries, where the Rev. W. W. Watkins, the successor to the late Mr. Wiltshire, ministers to his singular congregation. I then proceeded to the male leper wards, meeting with convicts and lunatics on my way. The sun was scorchingly hot, but there was a good breeze blowing, and the ozonised air from the ocean was gratefully invigorating. I should think that the island, although only a sandbank of about 1200 acres in extent arid almost devoid of vegetation during the hot season, would be very salubrious if the conditions for health were observed. The water supply is excellent.

The first lazaretto building I entered—one of the old wards devoted to male lepers—was by no means an inviting structure. It was a large shed with low-studded walls containing a double row of beds, upon which the lepers were reclining in every variety of posture. The air was close and noisome with the evil effluvia of decaying living bodies—death in life—supplemented by the odour of influenza, which at this time was raging throughout the island. Of one hundred male lepers, no fewer than eighty, on the day of my visit, were down with this distressing disease. It has been said that a leper hospital, with its handless, footless, ulcerated, feature-swollen, and distorted patients, is as horrible a sight as a field of battle; and to the misery inseparable from a repulsive and incurable disease were now added the effects of a depressing epidemic—a most heart-breaking spectacle surely. Investigation as to the causation of leprosy under such circumstances was not a promising outlook. The majority of the inmates belong to the poorer classes of the native or mixed races, and are unable to speak English. In some cases the destructive disease had invaded the larynx, and they could only converse in a whisper. It was as painful to hear as to look at them. I must add that a new and much more spacious and suitable hospital, substantially built of stone, has been erected and is now used for the accommodation of fifty patients. Here I found a better state of things. Another building of like character is in course of erection; so it is evident that the authorities, while apathetic as to the causation of leprosy, have begun to realise the importance of doing what they can to render the condition of these helpless patients as tolerable as possible.

I shall make no attempt to describe the state of the sufferers. I have seen more repulsive cases in lazarettos in other countries, and have seen them both under more favourable and under less favourable conditions. I am of opinion that the lepers and lunatics should be removed to separate quarters, and this barren island should be used exclusively for convicts. Leprosy and lunacy are not criminal, though the former is often caused by the criminal conduct of those responsible for vaccination and for insanitary neglect, and the latter by the temptations of the dram shops, where the vilest and most health - destroying liquors are regularly dispensed. The sufferings of these unfortunate people are sufficiently severe without their being compelled to associate and spend their unhappy lives with convicts. Notwithstanding these difficulties, I was able to hold a brief converse with about fourteen of the inmates who were well enough, amidst their complicated maladies, to understand and reply to a few simple questions. One of the three leper cooks of the establishment kindly acted as my conductor, and pointed out to me those who could speak English. Several were at work as shoemakers and tailors, but the rest had no employment—and, I was informed, did not want any—to relieve the terrible monotony of their painful existence. Some of the inmates were suffering acutely, and needed tender nursing and such devotion as the Moravian Brothers and Dominican Sisters bestow upon lepers in other hospitals. Several of the patients make pets of a harmless snake, a variety of python common to the island, which they keep in cages near their beds.

After I had been introduced by my conductor, and had exchanged salutations with a few words of inquiry, my interrogatories were as follows :—Where were you born? How long have you been a leper? When did you come to Robben Island? Have you had the smallpox? Have you been vaccinated? How long after vaccination did the leprosy appear?

The cook, Christian Choutsee, a native of Cape Town, said he had been a leper four years, and the leprosy broke out "two years after the doctor stuck me in the arms." The answers to the last question were "two years," "three years," "a few years," "two or three years," "after the second vaccination." "Was vaccinated in 1879; leprosy appeared in 1883." "Vaccinated three times, last vaccination during small-pox epidemic in 1878; leprosy attacked me in 1887." "Vaccinated twice, first when twenty years of age. Leprosy appeared between first and second vaccination." "Vaccinated during small-pox epidemic of 1878. Leprosy broke out on me about a year after." "Vaccinated when a boy of between eight and nine years of age; have been a leper fourteen years; present age, twenty-six."

After going through the several male wards, I took an opportunity of making calls upon several persons, including the clergyman, the

superintendent of the male wards, and other officials. No one seemed to doubt that leprosy was spread by vaccination. The superintendent of the dispensary, who requested me not to publish his name, gave me particulars of the case of Augustus Lewis, of Cape Colony, who died of leprosy at Robben Island, the disease having been induced by vaccination. I had now been pursuing my inquiries several hours, and as the female leper ward was about a mile distant, and approached only by a rough, stony track, I was obliged, in order to keep my appointment with Dr. Impey, to forego my intended inspection of this department.

Dr. Impey is deeply interested in the pathological side of the leprosy question, and his position as superintendent of the largest leper institution in Africa affords him ample opportunity of pursuing his investigations. He has practised twelve years in South Africa as a District surgeon and Physician, and apart from his clinical experience gained through observations, and the medical care of the population of the island, he has found time to study the literature of the subject. He regards Dr. John D. Hillis's "Leprosy in British Guiana" as the most valuable and important work he has read. I called his attention to the cases of invaccinated leprosy cited by Dr. Hillis in the volume referred to, and he expressed no surprise at this, having come to a similar conclusion through his own personal researches in different parts of the Colony. Dr. Impey informed me that after careful investigation he had clearly traced to vaccination four out of twenty-eight cases of leprosy, which he had examined in the female ward. One of these still shows leprous discolourations at the point of vaccine inoculation, the disease having exhibited itself two years after vaccination. Dr. Impey will continue his investigations as to the causation of leprosy amongst the remainder of the patients; a procedure, let me observe, almost unknown at similar institutions. It is needless to say that the report of these investigations will be awaited with much interest. Although a believer in the protective value of vaccination as a mitigator of small-pox, Dr. Impey has met with so many cases of invaccinated syphilis and leprosy that he has felt it his duty in his reports, extending over a period of eleven years, to point out the mischief already perpetrated by this mistaken procedure; and he has called upon the Government to legislate for the immediate and total suppression of arm-to-arm vaccination. Dr. Impey considers that leprosy is contagious by actual inoculation, cases of which had occurred at Robben Island, and that to a certain limited extent it is hereditary.

#### CHAPTER 14: THE SEGREGATION OF LEPERS.

So far, I have said nothing concerning the growing demand for compulsory segregation of lepers. It is admitted on all sides that the forcible deportation and confinement of well-to-do lepers would be impracticable, and already there are too many laws which are cruel and oppressive to the poor, but which, by the wealthy, are easily evaded. So far as the well-to-do are concerned, the law of enforcing segregation of lepers at Molokai, as I have already shown, is an admitted failure, and the act of separation of the poor from their friends is the most heart-rending and painful experience which, in a tolerably long life, I have ever witnessed.

In the "Report on Leprosy by the Royal College of Physicians, 1862," I find the following:—"The Committee, having carefully considered the replies already received, are of the opinion that the weight and value of the evidence they furnish is very greatly in favour of the non-contagiousness of leprosy. The Committee can only repeat the statement made in their former report to the College, that the replies already received contained no evidence which, in their opinion, justified any measure for the compulsory segregation of lepers." Acting on this opinion, the Duke of Newcastle issued a circular to the Governors of the Colonies, stating "that any laws affecting the personal liberty of lepers ought to be repealed, and any action of the Executive Government in enforcement of them, which is merely authorised and not enjoined by the law, ought to cease."

Dr. George L. Fitch, formerly Medical Superintendent, Leper Settlement, Molokai, Hawaii, says :—"Segregation began in 1866 in Hawaii, and since that time has been followed out with a really brutal severity. At no time since the inauguration of the system has the proportion of cases segregated fallen as low as one-half, so far as I could find out, and I had the fullest opportunity to know of any one. The white population there are terribly in earnest, and, as they control the policy of the country, they have exercised every ingenuity in this matter, so that it may be considered certain that an average of two-thirds, at least, have been for the entire period under a restraint much more pronounced than is the case in Norway. Yet there is not the slightest evidence that the disease has decreased; at least, I know of no such evidence. From all I hear from there, the proportion of lepers continues as great, if not greater, than it has been for years. That the disease does not manifest as severe symptoms as formerly is certain, but I know of no reason to believe that the percentage of those afflicted has lessened at all. On the contrary, both the total number, and the proportionate number of cases, would seem to have steadily increased. . . . Of late years, so bitter a feeling has grown up among them in opposition to segregation, that in quite a number of instances the lepers and their friends have risen in arms to resist the officers sent to apprehend them. . . . Bring these three facts together. In India, up to 1815, lepers were buried alive to get rid of them; and still the disease persists. In Norway the disease is disappearing without segregation, for putting two cases out of five into hospitals, where they are allowed to carry on their handicrafts, and selling the products to those outside, cannot be called segregation. In Hawaii, where as thorough segregation as the Government, aided by public opinion, can enforce, is carried out, the disease steadily increases." — *New York Medical Record*, September 10, 1892. Art., "Etiology of Leprosy," p. 301.

Dr. George Thin, in his recent work on "Leprosy," though an advocate for the seclusion of lepers, shows himself alive to the difficulties of compulsion. In pp. 257-8 he says :—"A law enforcing the compulsory isolation of lepers can only be effective in any country where leprosy is common, if it is strongly supported by public opinion. Those who have little practical experience of lepers and leprosy must not forget that for a considerable time, and often for years, the stricken member of a family suffers comparatively little, requires little attention, is not specially repulsive in appearance, is as full of love for his parents and brothers and sisters, and in return is as much loved by them, as if he were not afflicted by the disease. To realise what compulsory isolation in an asylum of all the lepers in a country would mean, when such cases are considered, it is only necessary to apply in imagination the same law to

consumptives when their disease runs a slow insidious course. What would the consequences be in England if a law were passed that every husband, or wife, or child, who developed a slight cough, attended with weakness, and in whom slight physical changes were detected in the apex of one lung, should, on the strength of what his probable fate would be several years afterwards, be immediately and forcibly conveyed from his family with no, or scarcely any, hope of ever again rejoining them? Imagine the evasion, concealment, and subterfuge that would be practised, and the difficulty, if not impossibility, of passing a law which would be effective! As a matter of fact, already, and with no compulsory isolation, in all but the very poor, leprosy is in most countries concealed as long as it is possible."

A medical practitioner who has resided several years at Honolulu and Molokai informed me that he personally knew of a number of well-to-do lepers, some occupying prominent positions, including several Europeans, who from political and other influences with officials of the Government were allowed to be at large, and it was not intended to disturb them. Nor is it considered possible to amend this partial method of dealing with the difficulty, especially as the natives do not believe in contagion. At the Leper Asylum in Ceylon, as also in the West Indies, I found that only the poor were segregated in the lazarettos, and in every country I have visited, the compulsory segregation of *all* lepers is considered impracticable. Moreover, the experience in Hawaii has been the reverse of encouraging. Mr. R. W. Meyer, agent of the Board of Health at the Leper Settlement, Molokai, in his report dated April, 1886, observes that segregation has now been practised for twenty years, and the result is that there are as many lepers as ever; more than at the commencement.

In an article in *The Lancet*, August 26, 1882, p. 318, commenting on a report on leprosy in Hawaii, and referring to the segregation of lepers, the writer says: "Nothing can, we think, call for action such as is described in certain parts of the report, and which has also called forth a protest by the Assistant Attorney-General of the kingdom. This gentleman describes how people supposed to have leprosy have been taken summarily from their houses by the police authorities, and have, without a moment's preparation, been ordered into boats, and conveyed across to one of the island settlements, where, as he says, they, are practically doomed to death."

That compulsory segregation cannot be carried out save by setting aside every humane feeling is admitted by those who are familiar with its operation. Thus, in his official report to the Board of Health, Honolulu, Mr. R. W. Meyer observes: "After the most careful consideration, I find that this is a question which involves a great principle, and which duty to oneself and his fellow-men alone should decide; a question which demands the absolute setting aside of every influence resulting from a feeling of sympathy with the unfortunate sufferers."

In the "Report of the Select Committee on the Spread of Leprosy in South Africa" I find the following:--

Q. 52. "Do you believe there will be much difficulty in compulsorily removing these people?"—"Yes, there will be great difficulty. They will do what they can to conceal cases. They will steadily deny that any one in the house is affected by the disease I have found the most undoubted and notorious cases denied. They have a great aversion to remove. Most of them are married, and, in addition to the natural repugnance at parting from their wives, their sexual passions are particularly strong—in fact, they become, both mentally and physically, a lower type."— *Witness*, Dr. H. C. Wright, June 27th, 1889, District Surgeon at Wynberg.

Q. 92. "Take the case of a respectable man, educated and intelligent, would you separate him from his wife and family and remove him from his home?"—"I am afraid there is no help for it."— *Witness*, Dr. Simons, District Surgeon of Malmesbury, July 4th, 1889.

Q. 192. "I think that husband and wife should be separated, and that is a hard case, but necessary."— *Witness*, Dr. Beck, of Roudebosch, July 4th, 1889.

#### LEPROSY REPRESSION ACT.

Under this heading, the *Cape Times* of April 22, 1892, gives the following :—

##### ACT OF 1884 TO BE ENFORCED.

The Government have decided to promulgate the Leprosy Repression Act of 1884, and as at present decided the enforcement of the provisions of the Act will take place during the ensuing month. This action has doubtless been suggested by the disclosures of the census of a year ago, when the number of lepers in the Colony and the Transkei was shown to be 625—at least double the number casually reported from the various districts of the Colony. Since the taking of the census the number of known lepers has been increased to 664, and the promulgation of the Act will therefore necessitate the immediate provision of accommodation for the large number of sufferers who are still at large. The following will show the distribution of lepers in and out of hospital at the date of the census, in April, 1891 :—

##### IN HOSPITAL.

The Colony proper, as constituted in 1875: European or white, 21 —14 males and 7 females; other than European, 97 ;—77 males and 20 females.

##### OUT OF HOSPITAL.

The Colony, as constituted in 1875: Europeans, 30 ;—15 males and 15 females; other than Europeans, 256 ;—130 males and 126 females. Province of Griqualand West: Europeans, nil; other than Europeans, 17 ;—males, 12; females, 5. Transkeian Territories: Europeans, nil; other than Europeans, 204 ;—118 males and 86 females.

##### ROBBEN ISLAND.

A special report upon the lepers and accommodation for such upon Robben Island shows that, excluding the 54 coloured sufferers recently received from the Orange Free State, the number now on the Island is 162, of whom 16 are Europeans and 146 coloured persons. There are therefore over 500 lepers in the Colony, Griqualand West, and the Transkei still to be provided for. It is interesting in this connection to note that during the past year no fewer than 139 persons have voluntarily sought refuge within the leper wards of Robben Island Hospital. Of these 85 were males, 6 being European and 79 coloured persons. The European females admitted number 3 and the coloured females 51. During the same period 1 coloured male and 1 coloured female have been discharged from the island, whilst there have been 29 deaths, viz. Five European males and 16 coloured males, and 8 females, 1 white and 7 coloured. In view of the demand for accommodation, which will arise upon the promulgation of the Leprosy Repression Act, the wards at Robben Island are being largely extended, and we are informed that by the end of May the leper hospital will be completed and provision made for all the lepers known to exist in the Colony and the Province of Griqualand West. The Transkeian lepers, all of whom are coloured, will be centred at Engoobo, where a large asylum is now in course of construction.

The Leprosy Repression Act has since been promulgated in Cape Colony, and a systematic hunt for lepers has been carried on with the usual distressing concomitants—separation of parents from children, husbands from wives, friend from friend. A considerable number of lepers are in close concealment, carefully hidden by their friends. The well-to-do lepers have not been molested.

## CHAPTER 15: SELF-DEVOTION TO LEPERS

HEROISM and self-sacrifice in the interest of humanity, like that displayed by the brave Father Damien, are, happily for the human race, by no means of unusual occurrence, as is shown by the devotion of the Dominican Sisters at the Leper Hospital, Port of Spain, Trinidad; that of the Franciscan Sisters, from Syracuse, United States, at Molokai, Hawaii; and the Sisters from Montreal, who tend the lepers at Tracadie, New Brunswick.

Dr. M'Laren, Nova Scotia, in a paper on "Leprosy in New Brunswick," read before the Medical Society of that Province, says:—"In 1868 a community of nuns from the Hotel Dieu, Montreal, most unselfishly took charge of the nursing of the sick, and the work is done faithfully and cheerfully under the Sister-Superior Mother, Saint Jean, and the lepers are much better attended to 'than formerly. The patients have plenty of freedom with grounds of eleven acres to garden, fish, etc.'" —*Maritime Medical News, Halifax, Nova Scotia, July, 1890.*

Of another hero, the *St. James's Gazette*, London, September 30, 1891, says :—"The last mail from Japan brings news of the death of Father Testevuide, a Japanese Father Damien. He was a member of one of the French congregations, and was sent to work in the Japan mission field. In 1886, during his labours in the interior, he came across a case of leprosy, which so aroused his feelings that he determined to give himself up to the task of ameliorating the condition of Japanese lepers. A woman of about thirty years of age, having developed leprosy, was abandoned by her husband, and, as the disease advanced rapidly, she was placed in solitude in a loft over a rice mill. In course of time the ravages of the disease rapidly increased, and she lost her sight. In this condition she was found by Father Testevuide, who was working in the district. He visited her constantly and by reading and conversation sought to alleviate her misery; but he soon came to the conclusion that in her then condition she could receive but little relief unless she were placed in a hospital. There was no leper hospital in Japan, and the ordinary hospitals were naturally, for the most part, closed to such cases. From that time he devoted all his energies to the establishment and organisation of a leper hospital. Having succeeded in awakening public sympathy in the country, he collected sufficient money to build on the lower slopes of Mount Fujii a hospital which has for some years past been in full working order. His example was followed by some native philanthropists, and there are now three leper hospitals in the country. Father Testevuide's labours had undermined his health, which a visit to Hong Kong failed to restore, and he died there on the 3rd of August"

The Moravian Brothers have been sending missionaries of both sexes to live with and work among the lepers in the West Indies, in South Africa, and in Syria, devoting themselves sedulously but unostentatiously to this noble service during the past half-century. They were the pioneers in the effort to ameliorate the condition of these unfortunate sufferers. The Moravians have a leper asylum in Jerusalem, founded, managed, and largely supported by themselves.

The *Yorkshire Post* (Leeds), January 7, 1892, briefly refers to the death of an Anglo-Indian Father Damien reported from India. The victim was the Rev. W. D. Dalrymple, a Presbyterian missionary, who, having gone on a mission to lepers, contracted the disease some two years ago, and died last month at Rampur Beaulah, Bengal. Although his sufferings were indescribably great, he is said to have borne them with fortitude and resignation, and never once turned from the task he had set himself. Truly the age of martyrs is not past.

In the description of a visit to the Leper Hospital at Maracaibo, Venezuela, Consul Plumacher, of the American Legation, in a recent report to his Government, says :—"It was truly a sad sight to see deformed, mutilated trunks, with scarcely vestiges of extremities, seated before the camera; and there was something pathetic in the almost universal request to be supplied with pictures of themselves, which could only be constant reminders of their hopeless afflictions. In addition to the individual photographs, various large groups were taken, with an effect both sad and grotesque. There is one bright spot, however, in the dark picture of misery; this being the devotion and self-abnegation displayed by the near relatives of many of the sufferers, who, although enjoying themselves the blessings of health and strength, cheerfully submit to perpetual imprisonment, in order to minister to the wants of their husbands, mothers, and other relatives, thus alleviating their woes by their companionship and care. Many examples of this are seen to-day on the lazaretto island, and it speaks well for human affection that, even when the loved one has become a loathsome mass, conjugal ties and the claims of blood rise superior to the fear of contagion and the repulsive surroundings."

Miss Kate Marsden's labours among the Maories in New Zealand, and her extraordinary journeys through Russia, and among the wild tribes in remote parts of Siberia, with a view of learning the condition of the outcast lepers in districts where the disease is prevalent,

are well known through the reports in the *Times* and *Pall Mall Gazette*, which have been extensively copied in English and colonial journals. Miss Marsden's object is to learn by personal observation the condition of the lepers; to discover, if possible, methods of mitigating their sufferings, and to collect funds for the establishment of leper hospitals. Some time ago, Miss Marsden consulted M. Pasteur to see whether inoculation as a cure of the disease might not be resorted to. M. Pasteur held out no hopes of amelioration in that direction, nor did he suggest any other. It does not appear that Miss Marsden has made any inquiries regarding the effect of vaccine inoculation in disseminating the scourge, although, in districts like Dorpat in the Baltic provinces, the lepers are reported to be rapidly increasing, and already form as large a portion of the population as 17 per thousand. The growth of the disease has been co-incident with the development of the Jennerian practice. Miss Marsden's knowledge of the Russian language, and her earnest desire to get at the root of the evil, would enable her to break through official apathy, so obstructive of truthful research, should she be induced to undertake such a mission. It is surely as laudable to arrest one admitted source of the mischief as to prosecute an almost hopeless search for remedies.

Another lady, Mrs. Alice Hayes, has also done much to direct public attention to the neglected condition of the lepers in India, particularly the Europeans and Eurasians of Calcutta, who hide themselves and their sufferings from the public in the large cities, and refuse to consort with native inmates of existing institutions.

### CHAPTER 16: THE LEPROSY INVESTIGATION COMMITTEE.

By reason of the reports of the serious increase of leprosy in various countries, and the public interest excited by the self-sacrificing labours and death of Father Damien, an influential committee was convened for the purpose of investigating the causes of this recrudescence.

The first meeting was held on the 17th June, 1889, at Marlborough House, under the presidency of the Prince of Wales. On the 13th January, 1890, a subscription dinner was held at the Hotel Metropole, London, at which more than a hundred persons interested in the project sat down, and subscriptions amounting to over £2500 were announced.

This fund ultimately reached about £7000. The following resolutions were adopted at a meeting of the General Committee held at Marlborough House on the 30th June, 1889:—

- (1) That a sum of £500 be appropriated to a memorial to be erected to Father Damien in some public place in the Hawaiian Islands.
- (2) (a) That a fund be formed, the interest of which shall be devoted to the medical treatment and care of indigent British lepers in the United Kingdom. (b) And that a sum of money be set apart and placed under the control of trustees for the endowment of two student-ships, one student to make the United Kingdom and the remainder of Europe his field of investigation, and the other to go abroad and study the disease in China, the Colonies, and elsewhere. The studentships to be held for a period of three years, to be renewed by the trustees if thought desirable.
- (3) That a Commission be appointed, for not less than one year, consisting of three members, one to be named by the Royal College of Physicians, one by the Royal College of Surgeons, and one by the General Committee of the National Leprosy Fund, to go out to India for the purpose of investigating the disease of leprosy there, and that the Indian Auxiliary Committee be requested to add two members to this Commission.

The following Commissioners were appointed :— *Nominated by the Royal College of Physicians*—

BEAVEN NEAVE RAKE, Esq., M.D. (London), M.R.C.S. (England), L.R.C.P. (London), Government Medical Officer and Medical Superintendent of the Trinidad Leper Asylum.

*Nominated by the Executive Committee of the National Leprosy Fund*— GEORGE ALFRED BUCKMASTER, Esq., M.A., B.Ch., M.D. (Oxford), D.P.H. (Diploma of Public Health, Oxford), M.R.C.S., L.R.C.P. (London), formerly Radcliffe Fellow Magdalen College, Oxford, Lecturer on Physiology, St. George's Hospital, London.

*Nominated by the Royal College of Surgeons*— ALFRED ANTUNES KANTHACK, Esq., B.A., B.Sc., M.B., B. S. (London), F. R. C. S. (England), and L. R. C. P. (London), late Clinical Assistant Royal Ophthalmic Hospital, London, and Midwifery Assistant, St. Bartholomew's Hospital, London.

*Appointed by the Viceroy of India*—

(The late) Surgeon-Major BARCLAY, Secretary to the Surgeon-General to the Government of India.  
Surgeon-Major S. J. THOMSON, Deputy Sanitary Commissioner of the Second Circle in the North - West Provinces and Oudh.

The following order appeared in the *Indian Government Gazette* of the 21st November, 1890:— EXTRACT from the Proceedings of the Government of India in the Home Department (Medical), under date, Calcutta, the 21st November, 1890.

#### RESOLUTION.

The Executive Committee of the National Leprosy Fund having determined to appoint a Commission for the purpose of investigating the disease of leprosy in India, it is notified for general information that Dr. Beaven Rake, Mr. Kanthack, and Dr. Buckmaster (their full titles and qualifications are set out in the resolution) have been appointed Commissioners. These gentlemen have now arrived at Bombay, and have been joined there by Surgeon-Major A. Barclay, M.D., Secretary to the Surgeon-General with the Government of India, and Surgeon-Major S.J. Thompson, Deputy Sanitary Commissioner, North-Western Provinces and Oudh, who have been appointed by the Government of India to co-operate with them. The Governor-General in Council will feel obliged if public bodies and individuals desirous of producing evidence before the Commissioners will address the Local Government of the Province to which they may belong, in order that arrangements may be made for the presentation of such evidence before the Commissioners. Each Local Government has already been requested to depute an officer to assist the Commission in collecting and arranging the evidence that may be procurable in the territories under its control, and instructions should be given to all the civil and medical officers to give to the Commissioners any aid which they may ask for in the course of their inquiries. The Government of India will, on learning from the Commissioners the programme which they intend to follow, notify it for public

information.

#### ORDER

Ordered, that a copy of this resolution be forwarded to Local-Governments and Administrations, in continuation of the communication from this office, No. 11 Medical, 596-605, dated 15th September, 1890, to the Surgeon-General with the Government of India, and to the Members of the Leprosy Commission for information. It will be convenient if the Commissioners will address the Surgeon-General with the Government of India on any point on which they may desire to receive further assistance or information.

Also, that the resolution be published in the supplement to the "Gazette of India." (True Extract). (Signed) C. J. YALL, *Officiating Secretary to the Government of India.*

The Leprosy Commissioners, who left England for India on the 23rd October, 1890, completed their inquiries in the autumn of 1891, and prepared their report; but its publication has been delayed, ostensibly on the ground that the Committee of the National Leprosy Fund were waiting the issue of the Indian census returns as regards leprosy. It appears, however, from the facts disclosed in the following circular, issued in June, 1892, that several of the most important conclusions arrived at by the Commission are strongly objected to.

#### NATIONAL LEPROSY FUND.

##### *Memorandum on the Report of the Leprosy Commissioners.*

Your Committee, having been instructed to consider and report to you upon the publication of the Report of the Leprosy Commissioners in India, in 1890-91, beg to submit the following considerations :—

I. They desire to place on record their sense of the ability with which the Commissioners conducted their investigations while in India, and of the comprehensive and valuable nature of their Report.

II. The conclusions at which the Commissioners arrived have been summarised by them at the end of their report as follows—the evidence upon which these conclusions rest being displayed at length in the earlier pages of the Report :—

(1) "Leprosy is a disease *sui generis*; it is not a form of syphilis or tuberculosis, but has striking aetiological analogies with the latter."

(2) "Leprosy is not diffused by hereditary transmission ; and for this reason, and the established amount of sterility among lepers, the disease has a natural tendency to die out."

(3) "Though, in a scientific classification of diseases, leprosy must be regarded as contagious, and also inoculable, yet the extent to which it is propagated by these means is exceedingly small."

(4) Leprosy is not directly originated by the use of any particular article of food, nor by any climatic or telluric conditions, nor by insanitary surroundings; neither does it peculiarly affect any race or caste."

(5) "Leprosy is indirectly influenced by insanitary surroundings, such as poverty, bad food, or deficient drainage or ventilation; for these, by causing a predisposition, increase the susceptibility of the individual to the disease."

(6) "Leprosy, in the great majority of cases, originates *de novo*, that is, from a sequence or concurrence of causes and conditions, dealt with in the report, and which are related to each other in ways at present imperfectly known."

III. Thirdly, the Commissioners having been instructed to report upon the practical measures to be taken for the control or restriction of the disease in India, have suggested the regulation of lepers and leprosy by means of bye-laws framed by the various municipalities, which point they write as follows :—

(a) "The Commission are of opinion that the sale of articles of food and drink by lepers should be prohibited, and that they should be prevented from practising prostitution, and from following such occupations as those of barber and washerman, which concern the food, drink, and clothing of the people generally, quite apart from the dread a possible infection."

(b) "The Commission consider that the best policy in dealing with the concentration of lepers in towns and cities is to discourage it, and to this end would suggest that municipal authorities be empowered to pass bye-laws preventing vagrants suffering from leprosy from begging on or frequenting places of public resort, or using public conveyances."

(c) "The large presidency towns and the capitals of provinces in many cases already possess leper asylums, which might be enlarged by municipal funds or private subscriptions. Asylums should be built near towns where they do not already exist, and the authorities should have of ordering lepers infringing the regulations either return to their homes or to enter an asylum."

(d) "Competent medical authority should always be consulted before action is taken under such bye-laws."

IV. Upon the afore-mentioned conclusions of Commissioners, numbered 1, 2, 3, 4, 5, and 6, your Committee offer the following remarks :—

They desire to express their disagreement with the concluding words of No. 3—

"That the extent to which leprosy is propagated by contagion and inoculation is exceedingly small"—

not being satisfied with the evidence offered by the Commissioners for this opinion.

They cannot concur in the views expressed in No. 6,— namely, that

\* "Leprosy, in the majority of cases, originates *de novo*, that is, from a sequence or concurrence of causes and conditions, dealt with in the report, and which are related to each other in ways at present imperfectly known,"

[\\* See page 304](#)

being of opinion that the evidence adduced does not justify such conclusions.

V. The Commissioners, in the section of their Report entitled "Practical Suggestions," pp. 45 2-7, as also in other parts of the Report, have expressed opinions strongly adverse to compulsory segregation, either complete or partial. For instance, they say on p. 258—

"No legislation is called for on the lines either of segregation or of interdiction of marriages with lepers."

And on p. 453— "For India, complete compulsory segregation of lepers may be considered to be absolutely impracticable. Neither do the conclusions given before as to the nature of the disease justify any recommendation for absolute segregation."

And on p. 454— "It is impossible, for the same reasons, to advise compulsory partial isolation. Voluntary isolation is therefore the only measure left for consideration."

And on p. 456—

"In no case would the Commissioners suggest an Imperial Act especially directed against lepers as such."

And again on p. 456—

\*\* "In conclusion, the Commissioners believe, from the considerations and arguments adduced in the foregoing report, neither compulsory nor voluntary segregation would at pro effectually stamp out the disease, or even markedly diminish leper population, under the existing conditions of life in India."

[\\* \\*see page 304](#)

Your Committee, having already expressed inability to accept the reasoning upon which Commissioners have based the above conclusions, equally unable to accept the corollary that in any case of leprosy in India is either impracticable or undesirable. They entertain a precisely opposite opinion, and would be sorry if the Government of India encouraged by the report of the Commissioners to from taking the necessary steps in the direction of such segregation of lepers as may be found possible. opinions upon segregation are in accord with expressed in the following extract from a by Dr. Vandyke Carter :—

#### MODES OF SEGREGATION.

I. "By erecting plain asylums at certain centres, each of which would be a refuge common to several districts, and a place detention, tinder due management and supervision."

II. "By founding leper colonies, or village communities of the affected, who, while allowed more liberty of movement, should yet be prevented from mingling with the peasantry around: hence still the need of strict supervision. Many spots would serve—such as deserted forts, decayed villages, and places waste, yet not far from other sources of supply, or not without resources easily resuscitated."

III. "By requiring the strict isolation of leprosy subjects retained in their homes at express wish of friends. Suitable separate lodgment would be indispensable; unsuitable shelter is even now sometimes supplied. Joining of such home-isolation with more public measures should not be overlooked, for to it experience in Norway seems to point as a means essential to complete success within a moderate period of time; and in India it would have to be still more largely resorted to."

IV. "For carrying out the above, in addition to funds, legislative authority is needed to take up the vagrant sick, to remove the sorely diseased who is insufficiently guarded at home, and at times to enforce continued isolation of the infected until medical sanction of liberty be granted."

VI. Reserving their opinions as expressed in the foregoing paragraph and extract, your Committee give a general approval to the minor recommendations of the Commissioners, numbered above as (a) (b) (c) (d), for the regulation of lepers and leprosy in India, which they consider might with advantage be carried out; though they do not concur in the opinion that municipalities will be necessarily or universally the best means of effecting that object.

*Nominated by the Executive Committee of the National Leprosy Fund—*

GEORGE N. CUEZON (Under-Secretary for India), *Chairman.*

EDWARD CLIFFORD.

*Nominated by the Royal College of Physicians—*

DYCE DUCKWORTH, M.D., LL.D.

G. A. HERON, M.D., F.R.C.P.

*Nominated by the Royal College of Surgeons—*

JONATHAN HUTCHINSON, LL.D., F.R.S. (*With the exceptions noted below.*)

N.C. MACNAMARA, F.R.C.S.

\* Upon this paragraph Mr. Hutchinson appends a dissentient opinion, as follows :—

"I understand the Commissioners to mean by the expression '*de novo*' in reference to the origin of leprosy, that they believe that the disease may begin independently of personal contagion and in connection with climatic and dietetic causes. In that belief I entirely share. I also agree in the main with the rest of

the statements in the Commissioners' Report to which exception has been taken in our Committee. I feel convinced that if leprosy be contagious at all, it depends but to an almost infinitesimal extent upon contagion for its spread." JONATHAN HUTCHINSON, LL.D., F.R.S.

\*\* Upon this paragraph of the Report, Sir Dyce Duckworth and Mr. Hutchinson append independent or dissentient opinions, as follows :—

"I am in agreement generally with the recommendations of the Commission respecting *voluntary isolation*, and the issue of *Municipal Bye-Laws* regulating the habits of lepers. I know of no trustworthy evidence to prove that a leper in any community is a source of greater danger than is a consumptive patient, and I know that a person suffering from syphilis is a real and very positive source of danger anywhere. It would therefore be absurd on the face of it to adopt stringent laws for the leper and to let the syphilitic person go free.

"The intelligent layman now imagines that because bacilli are an essential feature of leprosy, therefore the disease *must* be readily contagious. This is simply quite contrary to fact. The same thing holds good exactly for consumption.

"I think a well-empowered and vigorously-supported Government Medical Executive Officer should be appointed in every large town, and in certain districts, to supervise the leprosy populations and report regularly upon them. It should be his business to see that the local regulations are fully carried out, and on his requisition only should any action be taken when necessary.

"Suitable asylums should be provided, and those now existing be sufficiently enlarged to meet the needs that will arise under suitable bye-laws.

"The project of leper-farms is, I think, a good one. More than this is, I believe, not within any practical scheme for amending the condition of lepers, and for diminishing the spread of the malady." DYCE DUCKWORTH, M.D., LL.D.

"I am strongly in favour of the maintenance (by Government or otherwise) of voluntary homes for lepers, but do not believe that segregation would effect anything in diminishing the prevalence of the disease. Compulsory segregation would I think involve injustice and entail much social misery. I believe that our Commissioners Report well expresses not alone the opinions of those who have signed it, but, in a general way, those of the educated classes of the present day throughout India." JONATHAN HUTCHINSON, LL.D., F.R.S.

#### ADDITIONAL REPORT.

"Your Committee having also been instructed to report upon the disposal of the balance of £800 still remaining to the account of the Executive Committee, recommend that a sum of £250 should be set apart for the prosecution of further investigations and the continued half-yearly publication of the journal for a period of five years, or until such time as this sum is exhausted; and that the remaining £550 should be devoted to the encouragement of local research in countries where there is reasonable evidence for believing that leprosy has recently originated, or where it exists under very exceptional circumstances—with the view of tracing the disease to its alleged origin."

It may be observed that for the Commissioners to have allowed that leprosy is easily inoculable (as is shown in this volume upon the evidence of accepted authorities in all parts of the world) would have been equivalent to the admission of the danger in all leprosy countries of the invaccination of leprosy. Such an avowal would have been inconsistent with the course adopted by the Commissioners and by the Committee of the National Leprosy Fund during the whole of this important inquiry, both of whom have practically ignored the evidence bearing upon the subject. When visiting Calcutta, for example, nothing would have been easier than for the Commissioners to have investigated the cases circumstantially reported by Dr. Roger S. Chew, which will be found in another chapter of this book. Having ignored these cases, one of the Commissioners, Dr. Beaven Rake, immediately on his return from India, gave evidence before the Royal Commission on Vaccination to show that leprosy was not communicable by vaccination, or, if so, only to so slight a degree that the danger might be disregarded. How far Dr. Rake's testimony has stood the test of cross-examination will be gathered by reference to the evidence in the Blue Book which had not been issued at the time of this writing.

On the subject of inoculation, the Commissioners conclude :—" The extent to which leprosy is propagated by contagion and inoculation is exceedingly small." It is a pity that the Commission should have bundled these two dissimilar sources of alleged causation together, as they cannot consistently be so treated. Nor have they defined the word "contagion," which many authorities, as I have shown, habitually use to cover inoculation. The dissemination of leprosy by *contagion*, using the word in its proper sense—i.e., by simple contact—has been disproved by eminent authorities, including superintendents of leper asylums of wide experience in all countries, as will be seen by reference to the chapter in this book entitled "Is Leprosy Contagious?" On the other hand it is conclusively established by a similar weight of evidence that leprosy is inoculable, and like other transmissible diseases can be propagated through a cut, sore, wound, or abraded surface, or be inoculated by flies and mosquitos, or spread by vaccination. Another point in which the Committee dissent from the views of the Commissioners is that of compulsory segregation or compulsory isolation, which they consider uncalled for by the evidence collected during their tours of investigation, or by the nature of the disease, and are of opinion that it would be impossible to stamp out the disease by either voluntary or compulsory segregation. The Committee of the National Leprosy Fund do not accept either the reasoning or conclusions upon which these recommendations of the Commissioners are founded. On the contrary, they are of the opinion that the segregation of lepers should be encouraged as far as possible in the interest both of the lepers and of the public. The Committee conclude by declaring that they can give only "a general 'approval to the minor recommendations of the Commissioners" on this point. Both the Committee and the Commissioners accept the important fact that leprosy is not diffused by hereditary transmission.

Setting aside the alleged leading causes of leprosy, such as heredity, contagion, and inoculation, as contributing little or nothing to the spread of this disease, the Commissioners resort to a theory which, up to the present time, has received but little countenance from the medical profession, that "leprosy in the great majority of cases originates *de novo*, that is from a sequence or concurrence of causes and conditions, dealt with in the Report." The present writer considers it highly probable that leprosy as well as other diseases may in numerous instances be accounted for in this way, but it must be observed that the factors, which are various forms of insanitation, have been in operation time out of mind, and do not in any way account for the remarkable recrudescence of the disease shown in this

volume. On the contrary the danger from malaria, overcrowding, impure water, unwholesome food, filthy deposits, has, under the instructive teachings of the late Dr. Southwood Smith, Sir Edwin Chadwick, and their followers, been gradually and sensibly diminishing, and it is triumphantly claimed that various diseases due to these causes have been decreasing also. It is obvious, therefore, that some other factor or factors, peculiar to this century and previously unknown, are at work. This factor, as high authorities now reluctantly avow, has been omitted by the Commission from the list of causations in their summary of conclusions—the latest and most daring official effort, to use a classic phrase, "to preserve vaccination from reproach."

Amidst this divergence of opinion between the conclusions of the Leprosy Commissioners and those of the Committee, the public will want to know what useful object has been realised by the large expenditure of time and money in promoting this lengthened inquiry. Will the authorities accept the conclusions of the Leprosy Commission, when they affirm that "the extent to which leprosy is propagated by contagion and inoculation is exceedingly small ;" or the opposite views entertained by the eminent members of the Committee of the National Leprosy Fund, who declare their disagreement with these amongst others of their conclusions?

The Leprosy Commissioners (all ardent supporters of the Jennerian practice) have searched far and wide for a rational theory that will account for the recent spread of leprosy in certain countries, but have utterly failed to discover one, and are almost driven to the conclusion that touches closely upon the facts collected in this volume. Under the head of "Transmission through an Intermediary Host," one of their number, Dr. Beaven Rake, says :—" There is at present no direct evidence to support this hypothesis, but it seems that some such theory might explain the alleged rapid increase of leprosy in Hawaii and New Caledonia."—*Journal of the Leprosy Investigation Committee., No. 1, Aug., 1890, pp. 50,51.*

To the present writer, vaccination seems to be the only intermediary host that passes direct into the blood (except in rare instances of accidental inoculation), and which covers all the facts of the case.

It appears that of the £7000 collected £800 remains, part of which it is suggested should be devoted to further investigation. It is to be hoped, if this is adopted, that less prejudiced and more competent inquirers will be appointed, and that in the future numbers of the *Journal* the accumulation of evidence, so shamefully ignored, showing how leprosy has been spread at the point of the vaccinator's lancet will find a place.

## CHAPTER 17: LEPROSY INCURABLE—HYGIENE THE ONLY PALLIATIVE.

LEPROSY has been regarded in every age and in every country as an incurable disease.

In the *Encyclopaedia Britannica*, leprosy is described as an incurable constitutional disease, marked externally by discoloured patches and nodules on the skin, and deeply implicating the structure and function of the peripheral nervous system.

How improbable was all hope of cure of leprosy may be inferred from ancient customs in various countries, notably in France.

Dr. Macnamara in his work on "Leprosy," p. 36, cites authorities to show that the leper was expelled from society, and looked upon as dead.

He observes :—" The leper was not looked upon in the eye of the law alone as defunct, for the Church also took the same view, and performed the solemn ceremonials of the burial of the dead over him on the day on which he was separated from his fellow-creatures and consigned to a lazar-house. He was from that moment regarded as a man dead amongst the living, and legally buried, though still breathing and alive. The ritual of the French Church retained till a late period the various forms and ceremonies to which the leper was subjected on the day of his living funeral. Ogee and Ploucquet have both described them.

"A priest robed with surplice and stole went with the cross to the house of the doomed leper. The minister of the church began the necessary ceremonies by exhorting him to suffer, with a patient and penitent spirit, the incurable plague with which God had stricken him. He then sprinkled the unfortunate leper with holy water, and afterwards conducted him to the church, the usual burial verses being sung during their march thither. In the church the ordinary habiliments of the leper were removed; he was clothed in a funeral pall; and while placed before the altar between two trestles, the *Libera* was sung, and the mass for the dead celebrated over him. After this service he was again sprinkled with holy water, and led from the church, to the house or hospital destined for his future abode. A pair of clappers, a barrel, a stick, cowl, and dress, etc., etc., were given to him. Before leaving the leper, the priest solemnly interdicted him from appearing in public without his leper's garb; from entering inns, churches, mills, and bake-houses; from touching children, or giving them aught he had touched; from washing his hands, or anything pertaining to him, in the common fountains and streams; from touching in the markets the goods he wished to buy with anything except his stick; from eating or drinking with others than lepers; and he especially forbade him from walking in narrow paths, or from answering those who spoke to him in the roads and streets unless in a whisper, that they might not be annoyed with his pestilent breath, and with the infectious odour which exhaled from his body; and last of all, before taking his departure and leaving the leper for ever to the seclusion of the lazar-house, the official of the church terminated the ceremony of his separation from his living fellow-creatures, by throwing upon the body of the poor outcast a shovelful of earth, in imitation of the closure of the grave."

Referring to more recent events, I find that in the report of the Special Sanitary Committee on the state of the Leper Settlement at Kalawao, Hawaii, 1878, addressed to the Hon. G. Rhodes, President of the Legislative Assembly, so little expectation of cure was there, "that lepers have to pay for their own coffins, and have formed a coffin association in order to provide a common fund for their

proper interment, and these sad creatures get up, as shown by the register of the Hospital, 'Coffin Feasts,' on which occasion money is contributed to provide for a decent termination of their woes."

Alluding to the disappearance of leprosy in England, Gilbert White observes in a letter to Mr. Barrington

"This happy change perhaps may have originated and been continued from the much smaller quantity of salt meat and fish now eaten in these kingdoms; from the use of linen next the skin; from the plenty of better bread; and from the profusion of fruits, roots, legumes, and greens, so common in every family." It may also be added that, at the time when leprosy disappeared from this country, the practice of inoculation and vaccination was unknown, otherwise there is little doubt that leprosy would have been perpetuated in England by the empoisoned lancet, as it is now in the West Indies, British Guiana, India, New Caledonia, the United States of Colombia, Venezuela, and Hawaii.

Commenting upon the Royal College of Physicians' Report, Drs. Tilbury Fox and Farquhar observe that:

"The cause of leprosy is as obscure as ever, and upon this particular matter the leprosy report gives us very little satisfactory explanation, beyond illustrations of the general statement that leprosy disappears *pan passu* with an improvement in the hygienic condition and diet of a people, and the cultivation of land in districts where it has abounded."—*India Office Report, London, 1872, p. 28.*

Sir Erasmus Wilson, in his article on "Leprosy" in Quain's "Dictionary of Medicine," refers to the various drugs which are recommended and used by one physician or another—quinine, strychnine, phosphates, nitric acid, acetic and carbolic acid, iodine, arsenic, perchloride of mercury, *asclepias gigantea*, *hydrocotyle asiatica*, *veronica quinquefolia*, *plumbago rosea*, acid nitrate of mercury, *potassa fusa*, acrid irritating oil of the shell of the cashew nut, chloride of zinc, etc. In no case is it mentioned that a cure is effected, or even to be expected, but rather the other way. "Hope," he says, "will gleam in the mind of the physician and patient; but cure, alas! is as distant as ever."

Dr. P. Abraham, the Secretary of the Leprosy Investigation Committee, who is familiar with all medical literature on the subject, gave his opinion at a discussion "On the Cure of Leprosy" before the Royal Medical and Chirurgical Society, May 27, 1890, that "the disease was probably not curable; though it might abort and die out."—(*British Medical Journal* May 31st, 1890.) And on another occasion he observed that therapeutic agents had proved failures and that there was no specific for the disease.

In a report of the Paris Congress of Dermatology, 1889, printed in the *Journal d Hygiène*, October 23rd, 1890, the subject of leprosy was discussed.

M. Cornil observed: "We must not confound a passing amelioration, a diminution or attenuation of the malady, more or less prolonged, with cure properly so called."

Consul-General Abbott, in a letter dated June 8th, 1891, Rio de Janeiro, says: "I do not think any radical cure for leprosy has yet been discovered."—*Journal of the Leprosy Investigation Committee, No. 4., December 1891i, p. 18.*

## HAWAII.

The health authorities in Hawaii, as well as the most experienced medical residents elsewhere, consider leprosy as practically incurable, though they acknowledge that life may be prolonged by good food, pure water, healthy habitations, and other favourable sanitary conditions. On one occasion, referring to the reports of certain medical practitioners as to their alleged and officially reported cures, I was told by one of the responsible officials that the cures were mythical, the particular cases cited having since exhibited further development of the disease.,

It is alleged that the external manifestations of leprosy, like those of some other maladies, disappear for a time, either with or without treatment, and cures are noised abroad; but the disease invariably reappears, and shows itself when least expected.

In the year 1866, the disease had begun to assume alarming proportions in the Sandwich Islands, and the people strongly suspected that the increase was partly, if not largely, due to vaccination. I am unable, however, to find any medical admission of the fact, until some years later. A law was passed in 1868, declaring the disease to be contagious, and requiring all lepers to be removed to the Island of Molokai, where the Government had set aside a piece of land on the northern side for a leper settlement. The preparations for the reception of these unfortunate people were, at first, of the rudest description. The patients were lodged in the cottages of the few Kamaainas, or freeholders on the estate, and were without any appropriate nursing or attendance; and, according to the evidence of Mr. Ambrose Hutchinson, who in 1884 was Under-Superintendent, as the disease was considered incurable, it was the custom to send along with each patient, by the same conveyance, the coffin he was soon to occupy.

The report of the Honolulu Board of Health to the Minister of the Interior for 1876 states (page 77) that the Legislature of 1874 made an appropriation of six thousand dollars towards the expenses (for curing leprosy) of Drs. Powell and Akana, who were offered every facility to try their skill. Six patients were experimented upon with various drugs. Dr. Akana claimed to have cured one, who was subsequently examined by a number of physicians and sent to Kalawao as a confirmed leper. The Board reported that all attempts to cure any patient afflicted with leprosy had failed.

In an address delivered by Mr. Dole on the subject of "Leprosy in the Hawaiian Islands," which the *Boston Medical and Surgical Journal* of May 15, 1884, commends to the attention of the National Board of Health, United States, is the following description of this malady :— "Leprosy is the worst known disease of the present and historic times. It has successfully defied medical skill. Physicians have not been able to say whence it comes, or to explain its laws. It has always and every where been found to be incurable. It attacks all races and all classes; no rank in life is safe—adults and children are alike exposed to its ravages. Medical skill can , make no limit; no assurance can be given from the lessons of experience against this most terrible, most loathsome, and most hopeless of all human diseases."

Dr. A. W. Saxe, in a card published in the *Hawaiian Gazette* of May 23, 1883, says that for leprosy there is no known cure.

In a paper on "Leprosy in Hawaii," published in the *Occidental Medical Times*, April, 1889, Dr. F. B. Sutliff, the writer, sums up the results of his experience in the Island of Maui, Hawaii. "Treatment," he observes, 'of any kind had, so far, proved useless. Improvement which has been noted in many cases is only temporary;" and again, p. 208, "The disease is hopelessly incurable, and certainly fatal."

In the biennial period ending 1881, the report of the Board of Health states that an appropriation of \$20,000 was made by the Legislature of Honolulu for the cure of lepers, or \$200 each; but no cures were effected, though numberless experiments on these unfortunates were tried, causing much suffering, and in one case the suicide of the victim experimented upon.

In his report to the Board of Health, dated November 14, 1885, and addressed to His Excellency W. M. Gibson, Dr. Edward Arning observes :—" There is scarcely a drug in the pharmacopoeia, at least scarcely a class of drugs, that has not been most systematically tried in the treatment of leprosy. Over and over again men of sanguine temperament have found what they called, a specific cure, but in every instance calm and unbiased judgment has afterwards pronounced a verdict of uselessness."

This distinguished authority also observes :—" I am fully satisfied that Dr. Unna has as yet not succeeded in perfecting a cure of leprosy in a single case. He himself has told me that one of the published cases of complete cure has since suffered a relapse."—*Biennial Report, Board of Health, Honolulu, 1892, p. 5.*

Leprosy is not confined, as many suppose, to native Hawaiians. Dr. E. Arning says :—" Among the white population, numbering 17,935, I knew of thirty-five leprosy cases."

Dr. N. B. Emerson, a lepra specialist of Hawaii, says:—" In spite of a number of claims to the contrary, we believe it safe to say. that no one has been able to prove, to the satisfaction of the medical profession, that a single case of this disease has been definitely cured."

In a volume entitled "Leprosy in Hawaii," published by the Hawaiian Government at Honolulu, 1886, p. 73, it is said :—" Experiments are carried on constantly on patients at Kalihi, and on very incipient, or rather doubtful cases, at their own homes. Though some patients have certainly improved a .great deal under careful treatment, we cannot, for the present, state one case of cure."

Dr. Prince A. Morrow, of New York, in "Personal Observations of Leprosy in Mexico and the Sandwich Islands," says, p.5:—" We know that leprosy has a prolonged, but somewhat indefinite, period of incubation, a slow and irregular course of development, a characteristic and well-defined symptomatology rendering its diagnosis easy, and that its prognostic significance' is most grave. It progresses almost invariably to a fatal termination."

Dr. Hoffman, of Honolulu, alluding to the Leper Hospital at Kalihi, of which he had charge for some years, reports that generally fifty cases were under treatment from time to time, these being 'equally divided between the tubercular and the anaesthetic. He says :—"I found no permanent benefit from treatment; better food and cleanliness, medicine suited to improve the general health of the leper, ameliorated the disease temporarily."—*Report on Leprosy, Honolulu, 1886 p 75.*

Dr. Arthur Mounitz, Resident Physician and Medical Superintendent of the Leper Settlement, Molokai, in his Report, dated Molokai, February, 1886, says of the Kalawao Hospital, where the worst cases are supposed to be accommodated :—"Of course, there are no cases of cure, and those who enter its portals remain until death releases them ;" and under the head of "Treatment," says:

"This is the briefest question of any to deal, with, but the most disheartening to a physician; for, so far, no remedy has been found beneficial." Dr. E. Cook Webb physician to a branch hospital at Kakaoko, in his report, dated March 1st, 1886, says:—" As regards the treatment of leprosy, I have but little to say. Notwithstanding any treatment which I have used, or seen used,. 'I cannot see any change in any single case.' I am fully convinced, after considerable study and experience, that personal cleanliness, good nourishing food, and regular habits have done more towards the relief of these unfortunates than all the medicines that have ever been prescribed for them in the past. In all the cases of leprosy. I have seen, the disease has steadily progressed to a fatal termination, notwithstanding all treatment. I am aware that I am taking strong ground against the many so-called 'cures' that have been devised, but in so doing I am not basing my opinion on my own study and experience alone, but on the medical opinions of those who for years have been in daily contact with the disease, and have made it a special study, and they 'have come to the conclusion that it is a disease *sui generis*, and incurable."

In the report of the President of the Board of Health, addressed to the Legislative Assembly, Honolulu, 1886, p. 49, in reply to the question, "Is Leprosy Curable?" Mr. F. W. Hutchinson says :—" To this question we are constrained to answer 'No!' At least not under any' known treatment."

Dr. Sidney Bourne Swift, late Resident Physician of the Leper Settlement, Kalawao, Molokai, Hawaii, in his report to the President of the Board of Health, refers to the failure of medical treatment and the numerous alleged cures reported by experimental bacteriologists. "What has become of the cases cured by Fitch, by Arning, by Goto, and by Lutz? Come to the Settlement and you will see them in their graves."—*Biennial Report of the President of the Board of Health to the Legislature of the Hawaiian Kingdom, Honolulu, 1892, p. 87.*

#### THE WEST INDIES AND BRITISH GUIANA.

Dr. Gavin Milroy, in the "Report on Leprosy and Yaws in the West Indies," published in 1873, p. 43, observes:—" We have already seen that in the Barbados Asylum several of the patients had been benefited when no medicinal remedies whatever had been used, the good results being attributed solely to the more regular mode of life, better supply of food, and better housing since their admission, and to their withdrawal from all occasions of intemperance on the one hand, and of destitution on the other. Like effects have been 'observed in the asylums of other Colonies."

On pages 99 and 100, Dr. Milroy says :—" There is a unanimous accord of opinion that the greatest benefit is derived from the adoption of hygienic measures, and that by improving the general conditions, physical and moral, of the leprosy poor, very much may be done to retard or arrest the malady in its early stages, and also to mitigate its severity when more fully developed. Medicinal treatment is universally admitted to be, of no avail, unless combined with the regular use of a nutritive, unstimulating diet, suitable clothing, protection against the vicissitudes of weather, personal cleanliness, and exercise in the open air. There is certainly no medicinal substance, vegetable or mineral, which exerts anything like a direct or specific effect on the malady.....

"The evidence is all but unanimous that leprosy very rarely, if ever, manifests any tendency to a spontaneous cure. When fully developed, a complete recovery is not to be looked for. It is quite apparent, however, that the progress of the disease may often experience a marked retardation of arrest when the patient is maintained in a favourable hygienic condition."

Dr. J. F. Donovan, Superintendent, Leper Home, Jamaica, in his annual report for 1891, says :—" For curative purposes, I think most authorities will acknowledge that we must look for some other method besides the administration of medicinal remedies, as drugs have been tried extensively and persistently, and have so far signally failed of effecting a cure of this formidable pest." — *Supplement to Jamaica Gazette, 18th June, 1891.*

In the same report, Dr. Donovan makes the following' statement as to the condition of patient No. 5, afflicted with tubercular leprosy :—" After medical treatment, the scaly eruption about the flexor aspect of joints has disappeared, the plaques of tubercle on face, forehead, etc., and the enlarged inguinal glands are in *statu quo* after a month's steady use of the inunction and mixture. Symptoms of pulmonary phthisis set in when the gurjun oil was discontinued, as it caused nausea, and subsequently diarrhoea ensued, which the patient attributed to the medicine. A variety of drugs were used to combat the hyper-pyrexia, but without effect."— *Supplement to the Jamaica Gazette, June 18th, 1891, page 81.*

Under the head of "Cure," Dr. J. F. Donovan observes in the same report :—" In some cases the tubercles decrease for a time; in a few years, it may however' be mentioned, that the tubercles have been known to subside spontaneously in some patients for a time, who have been taking no medicines; so too the tubercles may enlarge and increase in numbers during the administration of the drug, as was evidenced in three of our most prominent cases at the 'Home."

"There are few diseases which are less amenable to treatment than leprosy; the entire armoury of known drugs has been tried," says this medical superintendent, and found ineffective."

I may here observe that Dr. Koch's much vaunted tuberculin has been tried in almost every leprosy country on the globe, and found worse than useless. Much suffering has been caused by its use. The *Madras Times*, October 28, 1891, reports the visit of His Excellency Lord Wenlock to the leper hospital in this city, when his lordship had pointed out to him several patients upon whom Dr. Koch's lymph treatment had been tried. One of the patients complained that the experiment had subjected him to excruciating pain.

Dr. W. V. M. Koch, Acting Medical Superintendent, Leper Asylum, Trinidad, says :—" During the past year there has been scarcely any advance made in the treatment of this disease (leprosy) and it continues to baffle 'the most skilful physician. Various new remedies have been tried, but without success."

"No drug has yet been used which exerts a specific action on leprosy."—*Appendix to Report on Leprosy and the Trinidad Leper Asylum, 1891, pp. 72, 73.*

In the appendix to Dr. Beaven Rake's report on Leprosy and the Trinidad Leper Asylum," dated Maraval, February 4th, 1890, it is admitted that the inoculation of animals has proved a failure, and human beings are required as clinical material for experimental purposes. Dr. Rake, p. 36, says :—" If the Home 'Government could see its way to sanction the inoculation with leprosy of two or three condemned criminals in Trinidad, and the commutation of their capital sentences to imprisonment for life, important additions could be made to our present knowledge of the pathology and proper treatment (by segregation or otherwise) of the disease. I can safely predict that many criminals would gladly accede to such an alternative, on having the case clearly stated to them."

Dr. Beaven Rake, himself a great experimenter, says:—" Campana inoculated lepers with erysipelas, with the result that nearly all the

patients in the ward got erysipelas, and the ward had to be closed. No effect was produced on the progress of the leprosy."—*Report on Leprosy in Trinidad for 1890, p. 37.*

Dr. John D. Hillis, of Demerara, observes in his work, *Leprosy in British Guiana*, p. 209 :—" The treatment of leprosy has hitherto been attended with such very poor results that the disease is now regarded as incurable. Drug after drug—so-called specifics—have been tried, only to be laid aside as useless, the disease after a time returning with greater violence than ever." The writer 'then proceeds to describe some of the experiments to which the unfortunate lepers have been subjected. Out of seventy cases treated by Dr. Danielssen at the Lungeguard's Hospital, Bergen, only one was reported cured.

It appeared to me, however," says Dr. Danielssen (page 210), "if I could infect the leprous patients with constitutional syphilis, it might follow that the syphilitic poison might prove superior to that of leprosy, and that thus the system might be brought to that of a person labouring under constitutional syphilis, and might so become subject to the ordinary process of syphilisation." "This ingenious theory, however," remarks Dr. Hillis, "failed in practice, the leprosy remaining unchanged, whilst the syphilitic process went on."

Under the head of " Palliative Treatment," p. 215, Dr. Hillis says:—" Improving the sanitary condition of the leper, it is well known, has great influence in mitigating the disease; and the satisfactory results which have been realised in this direction at the General Leper Asylum may be seen in the following figures, taken from my official report for 1878, when the percentage of deaths to strength for the past four years was stated to be :—

1875.	1876.	1877.	1878.
17.36 per cent.	16.33 per cent.	11.49 per cent.	9.19 per cent.

In the appendix to the report of the Medical Officer of the Leper Asylum, Mahaica, British Guiana, for 880, printed by order of the Court of Policy, Dr. Oscar D. Honiball, Acting Medical Officer to the Leper Asylum, after alluding to the prominent physiological action of gurjun oil, which are purging and vomiting, considers it would be a fatal mistake to administer it in advanced cases. Dr. Honiball records with considerable regret and disappointment his failure to discern its alleged beneficial results. He has also made careful inquiries of the inmates, and the answer as to the beneficial results have been either of a negative nature or strongly adverse. Some say, 'I am not worse than when I came in.' On the other hand, very many bitterly complain of the deleterious qualities, attributing to its administration a rapid and violent increase of the disease. It is so nauseous, and the results following so very often serious, and at all times disagreeable and inconvenient, that the assumption of its curative properties should be based upon a surer basis than hypothesis."

Dr. Castor, Medical Director, Leper Hospital, Demerara (who acknowledges that vaccination is a certain mode of spreading leprosy) says that no therapeutic agent is of any avail as a cure.

Referring to Dr. Castor's report to the Surgeon-General, British Guiana, for 1888, the *Lancet*, March 8, 1890, p. 566, observes :—"Although every remedy reported successful elsewhere has been tried, no beneficial result has been obtained. Dr. Castor holds the opinion that the most that can be done in the way either of cure or prevention is 'by proper diet, dwellings, and sanitary surroundings to ameliorate the symptoms, and often thereby control them.'"

#### AMERICA AND CANADA.

In a chemical lecture on "Anaesthetic Leprosy," by Professor James Nevins Hyde, in the *American Practitioner*, February, 1879, the author says :—" Needless to say that mercury, iodine, quinia, arsenic, and a long list of other remedies, have utterly failed to eradicate the disease. A careful study of the results said to have been obtained by the use of gurjun oil, employed in the Beuperthuy method by Dougal, and of the cashew-nut by De Valence, will lead to the conviction that the benefit was largely due to the improved hygienic condition of the patients submitted to experiment. ' Where we are ignorant it is best to admit the fact; for we thus show that we have at least learned the alphabet of wisdom."

Dr. J. E. Graham, of Toronto, in reply to a communication from the Hawaiian Government regarding leprosy in New Brunswick says, that he has experienced " no good results from medical treatment. Much may be done by attending to the general health of the patients." *Leprosy in Foreign Countries, Honolulu, 1886, p. 158.*

Dr. H. S. Orme, President of the State Board of Health, California, in his valuable papers on "Leprosy, its extent and control," says :—"The general testimony is to the effect that any mode of treatment is disappointing. Arrest of progress is only temporary, being usually followed by suspension of treatment. Indeed it is not certain that long perseverance would be 'attended by permanent relief. At the Tracadie Hospital, patients have been discharged apparently cured, but they generally returned to die. The results are even less encouraging than the treatment of pulmonary consumption. The Health Authorities of the Hawaiian Islands consider leprosy practically incurable, though they acknowledge that life may be prolonged by certain medical treatment, by good food, and by favourable sanitary conditions."

Dr. James H. Dunn, Professor of Dermatology, Mineapolis, in a chemical lecture reported in the *North- Western Lancet*, March 1, 1888, says :—" The treatment of leprosy is accordingly largely palliative. Of course, cures— popular, medical, and secret—have not been wanting; but their unreliability has been repeatedly demonstrated. Of prime importance, if possible, is the removal of the patient to a country or part of the country in which the disease is not endemic, preferably a healthy mountainous district with good air,

nourishing food, and every hygienic appointment, and the use of baths and electricity in proper cases."

In reply to a communication addressed by me to the Superintendent of the Lazaretto, Tracadie, New Brunswick, Mr. J. A. Babineau, November 12, 1889, writes :—"Leprosy is considered incurable here, as elsewhere, for all attempts to cure the disease have failed."

Dr. J. C. Tache, Visiting Physician to the Tracadie Lazaretto, in p. 150, "Leprosy in Foreign Countries," says :—" The various and multiplied attempts made at different times in New Brunswick by medical men, or under medical guidance, to cure the disease have all failed."

Dr. A. C. Smith, writing from New Brunswick to the Hawaiian Government, says :—" I have never observed more than a temporary amelioration from any medical treatment, and only such as might be attributed to the effect of mind over body. My predecessor used coloured water, accompanied by strong assurances of benefit therefrom, and in every instance found a temporary improvement equal in degree to any apparent benefit to be found from the use of medicinal agents." "Leprosy in Foreign Countries," p. 156.

United States Consul James W. Siler, of Cape Town, South Africa, in the report to his Government, after referring to various so-called remedies,, observes :—" After all, these and other remedies only tend to prolong the disease; for, once affected with the leprous taint, the victim is doomed to slowly but surely rot away, until mercifully released by death."— *United States Consular Report for 1887*, p. 565.

Owing to the remarkable spread of leprosy in Venezuela, the United States Consul, Mr. E. H. Plumacher, has paid much attention to the treatment of that disease; and he reports to his Government (No. 119, for 1890, pp. 695-6) as follows :—"Various methods of treatment have been tested at the Maracaibo Lazaretto, especially the administration of the oil of chaulmoogra, which apparently gives encouraging results at first, but produces no lasting benefit. Its use is also attended with grave physical inconvenience, such as a morbid state of the liver; intestinal irritations, accompanied with a slimy and waxy diarrhoea; wandering pains in various parts of the body; eruptions upon the skin, principally attacking the hands, and various other unpleasant attendant symptoms, making the use of chaulmoogra at times intolerable." . . . This treatment has always been entirely voluntary, but no one has been able to persevere in its use. The iodides and mercurial preparations have also been tested, as well as the tincture of cantharides; but all of these remedies produced more or less identical effects—that of a temporary amelioration of the condition of the patient, but without well-founded hopes of anything approaching a genuine cure. . . . As already stated, temporary alleviation has frequently been obtained by various methods, as, in a disease like leprosy, any remedy which tends to improve the state of the blood and the general health will, no doubt, have its temporary ameliorating effect upon the malady itself. So many years of careful study, and of patient and conscientious application of all methods of treatment, have, in my opinion, satisfactorily demonstrated the incurability of the disease; and the most that can be done is to alleviate, as far as possible, the physical suffering and mental distress."

Miguel Valladores, Physician of the Lazaretto, Guatemala, says :—" I have observed that mercurial treatment aggravates the disease of leprosy in a patient."—*Leprosy in Foreign Countries: Honolulu, 1886*, p. 174.

#### INDIA AND OTHER COUNTRIES.

In a report to His Hawaiian Majesty, dated August 12, 1885, by Surgeon-General W. J. Moore, of Bombay, the author says:—" If leprosy is not what I hold it to be, we have still sufficient evidence that the great prophylaxis is sanitation. In sanitation I include the prevention as much as possible of whatever entails a state of human system below par, such as the cheapening of salt (an article of the greatest importance in the human economy), plentiful food, good clothing, suitable and, above all, dry lodging, drainage, conservancy—in short, everything tending to improve the condition of the population of a country. Leper asylums are good and charitable, but will not cure, eradicate, or prevent leprosy. There is no known cure for leprosy when once contracted. Lepers taken into an asylum and well cared for often apparently recover; but the apparent recovery is this: The cachectic debilitated leper becomes temporarily a robust leper, but he remains a leper still, and the disease eventually breaks out again. Apart from charitable motives, therefore, I would not recommend the Government spending large sums on leper asylums—such, for instance, as would be entailed by a 'State Leper Asylum,' as mentioned in Government Resolution No. 2009, dated 11th June, 1883. A more certain, albeit slow, progress will result from sanitation in the broadest sense of the term, which comprises the moral and amelioration of the condition of the people" And in a letter to the *British Medical Journal*, December 14, 1889, p. 1371, Sir William J. Moore observes :—" I feel most confidence in the diminution of leprosy in India, and in the prevention of leprosy in this country, from the influence and progress of sanitation in the most extended sense of the term, in which I include the cleansing generally of villages and towns, drainage, ventilation, good water supply, the cheapening of salt, the prevention of scarcity, opposition to imprudent marriages, and measures for the prevention of specific disease."

Mr. W. Walker, Inspector-General of Civil Hospitals, North-West Province of Oudh, in his report of June 26, 1885, to the Government, observes :—" I may say that medical treatment, in the sense of attempting a cure of the disease, has been abandoned, not only in these provinces, but all over India. Extensive experiments were made in 1875, 1876, and 1887, with regard to the efficacy of certain systems of treatment, and were found to be equally unsatisfactory. If the Government will refer to proceedings in the Medical Department, Nos. 20 and 23, dated March 10, 1887, there will be found the result of a fair trial given to gurjun oil, once a vaunted cure for leprosy. The results of this experiment may be taken as a fair example of the conclusions which have been forced on all trustworthy observers—namely, that good nourishing diet, cleanliness, and friction of the skin with any oil, are the only satisfactory means of retarding the progress of the disease. No other specific treatment is now attempted in any of our asylums. The patients are regarded as

incurable, and are only subjected to medical treatment when attacked by complications which may be hopefully dealt with."

J. Fairweather, Brigade-Surgeon, Inspector-General of Civil Hospitals, Punjab, says :—" All attempts at specific treatment have been abandoned for some years as useless."

Dr. W. R. Kynsey, Chief of the Medical Department, Colombo, Ceylon, in reply to a communication from His Hawaiian Majesty's authorities as to leprosy in India, writes :—" No treatment has yet been found of any permanent benefit. The best results have been obtained from hygienic and dietetic treatment alone." "Lepers," he says, "are chiefly found among the poorer natives, whose dwellings are small thatched huts, crowded, ill-ventilated, filthy, and strewn with mouldy and rotten vegetables and excremental deposits.— *Leprosy in Foreign Countries, Honolulu, 1886, p. 164.*

Mr. H. A. Acworth, Municipal Commissioner, Bombay, says :—" Who ever heard of a case of cure?"

Dr. R. J. Wright, Civil Surgeon, Jessore, India, says:—" Six hundred and nineteen lepers are reported in the Jessore district. The sex is not distinguished; but it appears that only fifty-four inherited leprosy, while six hundred and sixty-five have no idea of its cause. They believe the disease incurable, so it is difficult to persuade them to submit to treatment, and twenty who were treated with gurjun oil derived no benefit."—*Leprosy in Foreign Countries, Honolulu, 1886, p. 34.*

Dr. H. V. Carter, of Bombay, in a communication to the Hawaiian Government, relative to leprosy in India and Norway, dated 1884, says:—" *In limine*, I should state that the cure of leprosy by purely medical treatment has not practically contributed anything towards the obliterating of the disease. To rely, therefore, for a general amendment, upon any of the varied remedial measures often confidently put forward, would be to indulge in fallacies, hurtful as well as deceptive, and to encourage a kind of anticipation hitherto shown by experience to be futile."

Again, the same writer, in part II. of the same paper, observes :—" Nor has purely medical treatment ever proved curative; and, so far from leprosy in Norway showing a natural tendency to subside, there is ample evidence of a present activity, equal to that displayed by the disease twenty - five years ago." — *Leprosy in Foreign Countries, p. 96, Honolulu, 1886.*

In a summary of his work for 1890, in the Leper Asylum at Dehra Dun, India, Dr. M'Laren, the Medical Superintendent, gives the result of the treatment with resorcin ichthyol and gurjun oil, which were used a short time ago, but are now, apparently, abandoned. He says :—" There is not the least appearance of permanent benefit, or of any amelioration of the actual disease."— *Calcutta Englishman, March 7, 1891.*

In his "Remarks on Leprosy," the same authority observes:—"It may not be out of place here to mention that, since 1875, I have given the most careful attention to the treatment of leprosy; tried most conscientiously all the various drugs that have from time to time been recommended, and used unsparingly, and for prolonged periods, all outward applications that have been brought to notice, and must frankly admit that I have not witnessed the least *permanent* benefit from any one of these. . . . Once a leper, always a leper, is the sad outcome of my many years' close observation, let the treatment be what it may."—*My Leper Friends, by Mrs. Hayes, London, 1891. pp. 125-6.*

Under the head of "Treatment," the chief medical officer of Kashmir, Dr. A. Mitra, after alluding to the use of arsenic, chaulmoogra oil, and gurjun oil, observes that they have little or no power in arresting the progress .of the disease. And as regards nerve-stretching, which, in the early stages of the anaesthetic variety, produces very satisfactory results in a large majority of cases, he remarks "the result is not lasting."—*The American Journal of Medical Sciences, July, 1891.*

*The Bombay Gazette*, 17th July, 1891, reports the opening of the New Leper Asylum at Sehore, Bhopal, towards which Her Highness the Begum of Bhopal has contributed munificently, and has promised an annual grant of 4500 Rs. for the expenses of maintenance. The building will accommodate about 160 lepers. In his address, Surgeon-Major Dane frankly said, "We do not expect to cure these unfortunate people, as, notwithstanding the praises which are repeatedly being bestowed on some vaunted 'certain cures' there is no doubt that a cure for leprosy has still to be discovered." This benevolent lady, the Begum of Bhopal, Nawab Shahjeham, has been persuaded to extend vaccinations in her province, upon which she spends 5000 rupees yearly, employing 35 vaccinators, who performed 38,000 vaccinations last year, thus unwittingly spreading the fell disease at the point of the lancet, and helping to fill the wards of the hospital which her benevolence has established.

Babu Prosurmo Coomar Sein, Gurbetta, India, in reply to questions from the Hawaiian Government, reports as follows :—" After taking charge of this dispensary, I have treated twenty lepers. To some of them this disease was hereditary, to some it was owing to the contagion, and to others it was the effect of using mercurial medicines."

Surgeon W. D. Stewart, Civil Surgeon of Cuttack,. says :—" There is a belief that excessive use of mercury tends to develop the disease, by causing a deteriorated state of the blood and tissues."

Babu Jago Mohoun Roy, Orissa, reports :—" In the generality of the cases, especially among the Hindus,. venereal diseases, and perhaps administrations of mercury for their cure, have, I believe, been the cause of leprosy.'—*Leprosy in Foreign Countries, Honolulu, 1886, pp. 33,37,39.*

Surgeon-Major Geoffry C. Hall, Allahabad, in a communication to the *Indian Medical Record*, says :—" Is there any cure for leprosy?"

I reply, No. Can leprosy be mitigated? I say decidedly, Yes. But the fact remains, 'once a leper, always a leper.'

With regard to the vexed question of contagion, I am of opinion that leprosy is inoculable. . . . There is the fact that leprosy sores do heal in a great many cases without any treatment whatever. . . . But these sores healing do not, as so many people imagine, mean that the leprosy is cured, but merely that a local manifestation has been cured; the leper remains a leper, and sores will certainly occur at some future period.

All the remedies seemed to be equally inefficient. Nerve remedies had, I presume, altered nerve tissue to deal with, therefore they could not act in their usual way. The much bepraised resorcin and ichthyol were as useless as all the others, and the conclusions I have come to are :—(1) Lepers should be well fed; (2) kept scrupulously clean; (3) have someunction to keep the skin soft; (4) have their sores treated on rational principles. Then their lives are made less burdensome to them, and they are comparatively happy. The remedies used were strychnine, phosphorus, arsenic, mercury, potassium iodide, chaulmoogra oil, resorcin and ichthyol, gurjun oil, neem oil, and strychnia, and sweet oil with chaulmoogra oil and gurjun oil internally. I made sketches of some of the patients I treated, with remarks made during the course of treatment. I treated in all fifty patients, with in no case any marked benefit as regards the cure of the disease."—*Calcutta Daily News*,. November 3, 1891.

In an article on "Leprosy in Kashmir," by Ernest F. Neve, M.D., F.R.C.S., Ed., I find that, "as treatment, iodoform, iodide of potassium, mercury, arsenic, quinine, phosphate of soda, and mudar root, have been tried internally; while balsam of Peru and gurjun oil have been rubbed on externally. Carbohc, acid and iodine has been used for wounds. Nerve stretching has been adopted for anaesthesia and trophic ulcers. None of these is a specific."—*Lancet*, 16th November, 1889, p. 1000.

The *British Medical Journal*, August 10, 1889, contains an article, entitled, "Clinical Notes on Leprosy," by James J. L. Donnet, M.D., Inspector-General of Hospitals and Fleets, Honorary-Surgeon to the Queen. Under the head of "Treatment" is the following (p. 304):—"In the treatment of this disease the hygienic, the dietetic, and the palliative had more influence than the therapeutic. Where the cleansing of the skin by baths could be effected; where soothing or stimulating applications were made to ulcerated surfaces and to skin, to delay the distressing symptom of prurigo; where good and abundant food was given, fresh air obtained, and exercise without fatigue, taken, with attention to full ventilation of inhabited rooms; where measures were adopted to afford recreation and gentle excitement, and thus divert the mind from the disease itself, a marked difference and a decided improvement, were the consequence. Under these influences the disease made little advance. But it is one that follows a determined course, rapid in some, more dilatory and seemingly stationary in others, but never retrogressing, always advancing."

"Where drugs are administered internally, I remarked that only those possessed of dietetic properties—as, for example, cod-liver oil—were of any value. Mercury, arsenic, iodide of potassium, assacil (obtained by incisions into the bark of the *hura braziliensis*), ammonia, and other preparations, each acted on the system, *modo suo*, but not in the measure or way hoped for."

Dr. Max Sandreczki, in an article entitled "A Study on Leprosy," in the *Lancet*, August 31, 1889, p. 424, says:—"As to the possibility of cure, one may say without fear of contradiction that among adults it is excluded." . . .

"The discovery of the bacillus has not hitherto advanced the curing of leprosy. Neither the transmissibility nor the mode of propagation has been demonstrated. Unfortunately, we are not permitted here to make dissections, and it is almost impossible to procure objects for the microscope. In conclusion, I would remark that if the bacilli cause leprosy, and propagate it from one person to another, how can we explain the long latent period—the repose of the bacillus for years? Is it not probable that the human body, more and more degenerated by years of misery and by every sort of hurtful influence, becomes the soil favourable for the development and culture of the bacillus?"

In a discussion at the Royal Medical and Chirurgical Society on the cure of leprosy, Mr. Macnamara, the author of "Leprosy a 'Communicable Disease,'" observed that "he had never seen a case which he could regard as being even relieved by treatment." — *The Lancet*, May 31, 1890.

Dr. Thin, under the head of "Treatment," p. 203 *etseq.*, observes that iodide of potassium has been experimented with by Danielssen on a large scale. It always produces a more or less violent eruption of nodules with feverish symptoms. Dr. Thin adds: "It affects patients both as a powerful poison and as a means of cure." After devoting several pages to recording experiments in drug medications by Dr. Unna, which must have caused much suffering to the hapless patients, Dr. Thin observes :—"Alas, that strenuous exertions directed with such intelligence and experience, should after all have turned out fruitless! The bacillus, however, remains apparently uninjured; and, although the treatment does not save the patient from his inevitable fate, Dr. Unna has done good service in making such an exhaustive experiment with strong drugs that had not been sufficiently tested previously."—*Leprosy*, by Dr. George Thin, 1891, p214.

Dr. Andres Navarro Torrens, Physician-in-Charge of the Provincial Hospital, Las Palmas, Canary Islands, writes to me, 1889:—" I have not up to this day seen any positive and evident cure by medicinal treatment."

A communication from the Superior Council of Health, Mexico, says :—" In the medicinal treatment there have been employed, successively and without result, mercurials, hydrocotila sciatica, guano, yodadurados, arsenic, sarsaparilla, and tarantula, as diaphoretic measures."

"The therapeutic as well as the dipterocarpic methods of treating the disease have been hitherto ineffectual."— *Leprosy in Foreign Countries, 1886, Honolulu, p. 186.*

Dr. K. Yamamoto, surgeon on board His Imperial Japanese Majesty's ship "Rinjio," in a communication to the *Honolulu Press*, June 19, 1883, describes leprosy as an incurable disease.

A communication to the Hawaiian Government from the Faculty, "Barcelona, Spain, in reply to an inquiry as to the results of medical treatment, says :—" A great number of medicines have been tried to combat this disease, but, in almost all cases, without result."—*Leprosy in Foreign Countries, Honolulu, 1886, p. 194.*

Dr. Kaurin, Medical Superintendent, Leper Asylum, Molde, Norway, says that "hitherto no specific remedy for leprosy has been found. At an early stage the disease may be cured by good 'diet and regimen; by careful nursing of the skin, baths, and symptomatic 'treatment."—*Journal of the Leprosy Investigation Committee, January, 1891.*

After much careful reading, and inquiring into alleged cures in various countries, including those of Dr. Beauperthuy, of Venezuela; the remarkable results, reported by Colonel Chrystie and Father Muller in the Indian journals, \*

\*The latest communication I have seen from Father Aug-Muller, St Joseph's Leper Asylum, Mangalore, S.C., where the Mattel treatment has been tried, appears in the *Calcutta Daily News*, October 30, 1891, and the writer only claims "amelioration in the health of the inmates," but no case of cure. This is no more than the natural result of hygiene without medicine at all.

of Count Mattei's treatment the cures officially reported by certain foreign medical experts in recent Government reports of Hawaii; Dr. Koch's tubercular inoculation; and the nerve stretching and ulcer perforation at the Mucurapo Asylum, Trinidad, I find no evidence to warrant the belief in their ability to cure this disease. In every case the alleged benefit is only transitory, the tubercles and abscesses reappearing, often with increased malignity.

#### TUBERCULIN IN LEPROSY.

Dr. P. Ferrari, in an article on "Koch's Tuberculin in Leprosy," says :—" Dr. Ferrari gives the conclusions of several observers who have experimented with the tuberculin in leprosy. Dr. Danielssen considers (1) that tuberculin in leprosy gives general and local reactions, the former generally coming on four to six hours after the first injection, but sometimes in twelve hours, and rarely in two to three days—the local reaction is more tardy; (2) that unfavourable consequences ensue to the patient, the disease being aggravated, and that the reactions have some similarity to those produced by the preparations of iodine in lepers; (3) that the lymph does not kill the bacilli, but seems instead to give them nutriment and favours their reproduction and circulation in the blood; (4) that when immunity to the remedy is established the disease is in no way arrested, nor the bacilli destroyed. Dr. Ferrari has himself come to the conclusion, from the consideration of the above cases and of those of other observers, that tuberculin exhibits no direct useful action on the leper. As in tuberculosis, it may act on the torpid condition of the tissue, not so much by any specific effect as on account of the small resistance of the diseased tissue. He remarks particularly on the outburst of new tubercles during the paroxysms of fever."—*Journal of the Leprosy Investigation Committee, No. 4, December, 1891, pp. 46-47.*

Dr. J. L. Bidekap, Physician to the Department for Skin Diseases, Rig's Hospital, and Lecturer on Dermatology at the University of Christiania, Norway, says, under the title of "Curative Treatment:"—" There has been searched in vain for remedies which have a direct favourable influence on the disease, or specifics. Mercurial preparations have, of course, been tried to a considerable extent. They have, however, but little or no influence on the disease, and often do harm. The reported few favourable results, or even recoveries, of the employment of these agents have possibly been due to accident, or in some cases to an erroneous diagnosis, the disease having been confounded with syphilis. The same is also the case with iodine preparations, which, according to the experience of Danielssen, are liable to evoke acute outbreaks, and on the whole are hardly advantageous, any more than bromine combinations. Antimonial preparations, and particularly tartar emetic, have, among others, been tried by Danielssen in increasing doses for long periods, but, it seems, without notable effect. Arsenic seems to have little or no influence, and this applies to most remedies of the same class. Of vegetable drugs there are a great many which have been vaunted as specifics at the places where the people understood to gather and to use them. In the European hospitals, however, these remedies have proved more or less inert. I have used salicylic acid for long periods of time; but, contrary to the experience of others, I have seen more harm than benefit from the use of it."

"Of therapeutic remedies it is mainly baths, tepid tub and steam baths, which seem to act favourably, and the general health of the patients often improves greatly by their methodic employment."—*Abstract of Lectures on Leprosy, 1886, pp. 65-67.*

In a Report on Leprosy in New South Wales, Mr. Edmund Sager, the Secretary to the Board of Health, Sydney, says :—" In adopting the system of segregating cases of leprosy, the Board has had before it the fact that the disease is, so far as at present known, incurable, and that its efforts must be directed to prevent its reproduction or spread."

The Report of the Inspector of Asylums, Cape of Good Hope, presented to both Houses of Parliament, 1891, referring to leprosy, p. 30, says :—" There is no reason to believe that specific treatment has in any case effected a cure. Gurjun oil, arsenic, potassium iodide, and ichthyol have been tried without any result beyond what would be expected of healthy surroundings and good diet."

In the Report of the Select Committee on the Spread of Leprosy, Cape of Good Hope, under the head of "Minutes of Evidence," July 1889, I find the following:--

Dr. W. H. Ross, Police Surgeon at Cape Town for twenty-two years, under examination—

Q. 323. "During your stay at Robben Island has it ever been seriously attempted to treat leprosy as a disease in the same way, as any other disease would be treated at a public hospital or asylum?"—"We endeavour to alleviate their sufferings, but very little can be done, except to treat symptoms and complications as they arise in this incurable and hopeless malady."

Dr. H. C. Wright testified—

Q. 21. "Leprosy is a disease for which as yet we have found no cure."

Q. 33. "Have you had any experience of the remedies tried for the cure of leprosy?"—"I do not know of any cure."

Q. 36. "You are, however, of opinion that leprosy is incurable?"—"I do not think that we have found any specific for it. I think all authorities are agreed as to that."

Dr. Beck testified—

Q. 176. "Leprosy cannot be cured, the disease must run its course, and the patient dies."

Dr. J. H. Cox testified—

Q. 227. "I believe that it (leprosy) is not curable."

The Report (page ix.) says :—"In the anaesthetic form of the disease there is not much actual physical pain, but in that as well as in the tubercular form the patient undergoes a gradual physical and often moral decay which renders him an object peculiarly deserving of the compassionate care of the State."—*Cape of Good Hope, Report of the Select Committee on the Spread of Leprosy, July, 1889.*

As to therapeutic means, Dr. Alexander Abercromby observes :—"The animal, the mineral, and the vegetable kingdoms may be said to have been ransacked. By some the chloride of mercury and the bichloride, in combination with sarsaparilla, have been highly extolled; whilst others, relying more upon antimony as a curative means, have given it as their opinion that mercury is positively injurious. In large doses all seem to agree that it aggravates the disease."—*Thesis on Tubercular Leprosy, p. 20.*

The same authority, writing April 20, 1892, from Cape Town, in a letter to myself, says :—"After more than thirty years experience as regards the treatment of the disease 'medicine makes no impression upon it even in the earlier stages.'"

In a Special Report on Leprosy from Robben Island for 1891, Dr. S. P. Impey, Medical Superintendent, says :—"A good deal is said and done when small-pox threatens our country, but how much more dreadful is leprosy than small-pox. Small-pox may kill hundreds in a few days, but all who suffer do not die. Leprosy is fatal in all cases, and all who once catch it, after lingering for a few years a life worse than death, shunned by all, they become outcasts, with no hope of cure before them, and die objects of abhorrence and pity."—*Reports presented to both Houses of Parliament by Command of His Excellency the Governor of the Cape of Good Hope, Cape Town.*

The *Lancet*, of April 16, 1892, has a leading article on the results of this mode of treatment of leprosy Referring to the experiments of Dr. Danielssen (of Norway), it says :—

"The injections were made daily, unless the reactions were severe, when an interval of several days was allowed. In some of the cases the treatment had to be stopped even when only small doses had been reached, because the eruptions in the tuberculated and in the anaesthetic cases became so intense that the disease was evidently aggravated." . . . Drs. Babes and Kalindero, of Bucharest, treated seven patients with inoculations of the same material. Upon these the *Lancet* observes: "Unfortunately the conclusion drawn was that tuberculin aggravated the disease considerably, and, by setting free the bacilli, started fresh *foci* of the disease, and made the whole process more active.

As in lupus and phthisis, the patients became tolerant of the tuberculin after a time; but the disease progressed all the same, and fresh symptoms were frequently excited, lesions became red and sensitive In the anaesthetic form the patches enlarged, became redder and more sensitive, and new patches appeared" Dr Colcott Fox's patient, treated by Mr Cheyne at King's College Hospital, seems to have fared no better. The Injections (of tuberculin) "were followed by severe pains in the ulnar nerves, and in the calves and knees, with a temperature of 103° F. After the fourth injection extreme dangerous collapse followed the reaction, the eruption more prominent and large blebs formed on both feet, and there were other unpleasant symptoms. . . a purely non-tuberculated case of long standing which was almost quiescent, obscure pains at intervals being the only symptoms left; the injections therefore had obviously excited a neuritis and revived the typical macular eruption which had faded away." . . . In one case (treated by Dr. Goldschmidt, of Madeira), "intense and prolonged reaction ensued, followed by blebs and new swellings of skin and mucous membrane, while on the lower limbs absorption of the leprosy infiltration was produced." . . ., "Mr. Cantlie, of Hong Kong, used it (tuberculin) in seven cases, and he also found bacilli in the blood after injection, there having been none there before." . . . "In Dr. Radcliffe Crocker's case a single injection of two milligrammes excited an attack of leprosy fever, which lasted three weeks. Scores of new tubercles came out all over the body, but under gurjun oil inunctions they all disappeared again, and there was a little less infiltration in some parts. The patient, a tuberculated leper, had previously improved considerably with large doses of chaulmoogra oil, and had had no febrile exacerbation for two years

prior to the injection. As an ultimate result he was not really any worse; but three weeks' fever was a long price to pay for a single injection, and he did not care to have it repeated."

"The above cases do not exhaust the list of experiments, but they are sufficient to show that tuberculin is very uncertain in its immediate effects on leprosy; that while in some it produces no reaction or effect at all, in others, even with small doses, considerable and prolonged reaction may ensue; and that therefore not more than one milligramme should be given at first, and cautiously increased according to the patient's toleration of the fluid. Secondly, that it revives the activity of cases which have been quiescent for a long time, producing neuritis, bringing fading rashes into prominence, exciting bullae, and setting free the bacilli; these may get into the circulation and produce fresh cutaneous and other lesions. In the ultimate effect, while some patients have shown improvement that has not been proved to be permanent, and in some was certainly only temporary, on the whole the position may be summed up by stating that, as far as the results hitherto obtained are concerned, the improvement which may result is too uncertain, too limited in character and time, and purchased at too great a risk of aggravation of the disease by the dissemination of new foci, for it to be recommended as a treatment for leprosy; and although some of Dr. Hunter's or similar modifications of tuberculin might lessen the immediate disagreeable effects, the fact of its action being to set free bacilli rather than to destroy them should make us seek in another direction for remedial agents for the relief of victims of this much-dreaded disease."

It is admitted that lepers suffer acutely from neuralgic pains, which Dr. Sidney Bourne Swift says "are common amongst lepers of all types;" and the wretchedness of their condition is intensified by the drastic treatment adopted at many of the hospitals and lazarettos. The application of Koch's tuberculin is often attended with excruciating pains.

Under the head of "Cantharidin Treatment in Leprosy," the *British Medical Journal*, September 5, 1891, says:—"The injections caused severe pain, but no local reaction; they were, however, always followed by a rise of temperature in the leprosy cases."

The writer, when visiting a leper hospital a short time ago, was witness of the fashionable inoculative experimental treatment. The poor creatures were brought into the surgery one after another, some brave and others with a timid, appealing look in their eyes. To enable them to bear the pain of the hypodermic syringe, thrust by the operating physician deep into the flesh, they had a handkerchief between the teeth while held by the hospital nurse or attendant. The puncture of the instrument is usually the least painful part of the experimental process. The treatment, which is often continued for months, produces sickness, acute headaches, and fever.

The rage for experimental research has long since passed the bounds of decent humanity, and many who have investigated the facts are of opinion that legislation ought to be specially invoked in the interest of these, the most hapless members of the human family. It is a common experience for lepers in hospitals to attribute the aggravation of their maladies to therapeutic treatment in the hospitals, and this is confirmed by high medical authority.

In the report on "Leprosy and Yaws in the West Indies," by Dr. Gavin Milroy, London, 1873 (c. 729), the author observes:—"It struck me forcibly, on observing the persistency of the anemic condition of so many patients at Kaow Island (the Leper Settlement of British Guiana), and still more of Dr. Beauperthuy's three private patients at Bartica, that this symptom was in part due to the prolonged use of a medicine, which is found to be notably injurious in like conditions of the system in European practice." From the foregoing testimonials (and others which I have not space to adduce), confirmed by my own observations and inquiries, it appears to be the general experience that leprosy attacks most readily those whose vitality is reduced by malarial fever, syphilis or insanitary conditions—i.e., unwholesome food, and impure water, and is most speedily fatal to those unfortunates at the hospitals who have been selected as subjects for inoculation experiments, mercurial treatment, and other drug medication. Whatever benefit patients have obtained is admitted, by the highest authorities in all the countries I have visited, to have been due solely to improved sanitary conditions and hygienic treatment. One thing is certain, the unfortunate patients dread the experimental treatment to which they are subjected by lepra experts, often escaping from lazarettos and secreting themselves in the gullies and fastnesses of the hilly regions and in the jungle to avoid the terrible ordeal to which they would probably be subjected.\*

\*Dr. George L. Fitch, formerly Medical Superintendent, Leper Settlement, Kalawao, Hawaii, says:—"On November 14, 1883, I inoculated six lepers with the virus of syphilis, by taking ivory vaccine points, and scraping off the surface of a mucous patch on the inner side of the lower lip of a native woman. The points were then allowed to dry, and three hours afterwards I transferred the virus to the arms of six leper girls under twelve years of age. December 14 following I repeated the experiment, taking the virus from a hard chancre on a Portuguese who came to my office. I saw this man in March, 1884, three months later, in the office of a brother physician, and found he was suffering from secondary syphilis. The last time I used fourteen points and inoculated fourteen lepers therefrom, but no result followed in any of the twenty experiments."—*New York Medical Record*, September 10, 1892, p. 297.

It is acknowledged that there is no specific for leprosy, nor is there any drug which has permanently ameliorated the condition of the patient. Where gurjun, chaulmoogra, or other oils have been used externally there is a temporary alleviation, probably due to the massage or friction employed, but the disease, when it once has taken hold of the system, is absolutely unamenable to therapeutic treatment. On the other hand, there appears to be a consensus of opinion that, in the majority of cases, the condition of the lepers may be improved, and life rendered more tolerable, by their removal to a salubrious locality, with wholesome food, cleanly and orderly habits, cheerful recreation and employment for body and mind, and that under these conditions the disease may in rare instances die out. The worst picture of concentrated and hopeless misery I have ever seen was in 1884 in the Lazaretto of Damascus, where all these essentials were wanting. In view of these experiences, which can be multiplied to any extent, and on the ground of humanity, is it not time to put a stop to the torture to which the incurable sick lepers are subjected by drug medication and inoculation, and let these miserable creatures be made as comfortable as tender nursing, varied occupations, and amusements will allow, and permit them to die in peace? Not a few of them are the victims of the Jennerian system, and these are the smallest compensations we can make for the

irreparable injury done to them.

Above all, we can cease to propagate this fell disease. We can discontinue the enforcement of a medical practice which experience has shown to be a potent factor in its dissemination. This is the most terrible count in the long indictment against vaccination; but, as I have shown, it is amply sustained by the testimony, often unwilling testimony, of unimpeachable witnesses of the highest credit and authority. It may perhaps be thought that what I have quoted is only *ex parte* evidence, that possibly an equal array of high authorities may be cited on the other side. This, however, is not the case. There is here no conflict of testimony, so far at least as inoculation is concerned, and vaccination is one and the chief means by which inoculation is effected. If there are authorities of equal weight to be thrown into the opposite scale, in my careful personal inquiries and patient investigation into the subject I have not discovered them.

### SUMMARY.

The results arrived at in this volume may be briefly summarised as follows :— (1) That leprosy has greatly increased during the last half century, and that it is prevalent in many places where it was formerly unknown.

(2.) That whilst the opinion of medical authorities and experts varies considerably on the subject of the contagiousness of leprosy, the preponderance of authority is in favour of the theory that it is not contagious in the ordinary sense of the term, but is communicable by means of a cut, sore, or abraded surface; and this view is confirmed by my own personal investigations.

(3.) That other alleged factors such as malaria, a fish diet, syphilitic cachexia, heredity, and insanitation are admittedly unequal to explain the rapid growth of the disease in certain of our crown colonies and dependencies, as well as in other countries.

(4.) That on one point there is much agreement and hardly any dissent, namely, the inoculability of leprosy; and that the view of leprosy as an inoculable disease, while it is most clear to those who take the malady to be due to a bacillus, is older than the bacteriological evidence, and is not dependent thereon.

(5) That the most frequent opportunities of inoculating the virus of leprosy are afforded in the practice of inoculating vaccine, which is the only inoculation that is habitual and imposed by law; and that the evidence here adduced is calculated to show that vaccination is a true cause of the diffusion of leprosy.

(6.) That the official information, collected by interrogatories and otherwise, has not been hitherto of a kind to show how far vaccination has determined the amount of leprosy in recent times; and that any interrogatories that may be sent out in future should not be limited to ascertaining the effects, as regards leprosy, of hypothetically "pure" lymph. When on very rare occasions interrogatories have been submitted, they have been framed to ascertain the results of a purely hypothetical system of vaccination which is not anywhere discoverable in practice, and alleged to be unattainable (*i.e.*, with pure lymph, and free from hereditary taints, and the replies are therefore futile and misleading.

(7.) That with the exception of two groups of cases— those adduced by Dr. Roger S. Chew, of Calcutta, and Dr. S. P. Impey, of Robben Island—those reported in this volume have not been the result of special investigation, but have cropped up accidentally in the course of medical practice, and in some instances have been published by practitioners with apologies to the profession for presenting such unwelcome disclosures.

(8.) That the increase of leprosy in the Sandwich Islands, the West Indies, the United States of Colombia, British Guiana, South Africa, and New Caledonia, has followed *pari passu* with the introduction and extension of vaccination, which in nearly all these places, without previous inquiry or demand from the inhabitants, has been made compulsory.

(9.) That as leprosy is a disease of slow incubation, often taking years to declare itself, and in its incipient stages can be detected only by practitioners of large experience, it follows that, in countries where leprosy exists, there is great danger of extending the disease by arm-to-arm vaccination.

(10) Leprosy being one of the most loathsome diseases to which the human race is subject, and being practically incurable, it behoves all interested in the public well-being to do their best to *prevent* its diffusion, and, as a means thereto, to discourage the practice of vaccination on that ground, if on no other.

### APPENDIX

THE following items relate only incidentally to the main object of this volume, but may be useful to the reader as illustrating the methods by which vaccination has been fostered and made obligatory in some of our possessions.

These appendices refer briefly to the mischievous consequences of vaccination, and demonstrate its failure from its inception either to mitigate or to prevent smallpox, with facts showing the growing opposition to this form of State medicine, and the necessity of substituting sanitary amelioration.

Some particulars are also furnished of a medical vaccination census carried out in the year 1883 by a committee of vaccine experts, with the object of reinstating in public favour a practice which had been discredited by numerous vaccination fatalities, and notably by the Misterton, Sudbury, and Norwich vaccine disasters. Particulars of the more recent disastrous results of vaccination will be found in the third report of the Royal Commission on Vaccination. London: Eyre & Spottiswoode, 1890 (c. 6192).

**VACCINATION FRAUDS.**

The following is taken from the "Life of Jenner," by Baron, a warm partisan of vaccination, published in 1827, vol. i., pp.

557-559 :— "On the introduction of vaccine inoculation into India, it was found that the practice was much opposed by the natives. In order to overcome their prejudices, the late Mr. Ellis, of Madras, who was well versed in Sanscrit literature, actually composed a short poem in that language on the subject of vaccination. This poem was inscribed on old paper, and said to have been *found*, that the impression of its antiquity might assist the effect intended to be produced on the minds of the Brahmins while tracing the preventive to their sacred cow. The late Dr. Anderson, of Madras, adopted the very same expedient in order to deceive the Hindoos into a belief that vaccination was an ancient practice of their own.

"Shortly after the introduction of vaccination into Bengal, similar attempts were made to prove that the practice was previously known there also. . . A native physician of Bareilly put into the hands of Mr. Gillman, who was surgeon at that station, some leaves purporting to contain an extract of a Sanscrit work on medicine. This work is said to be entitled Sud'ha Sangreha, written by a physician named Mahadeva, under the patronage of Raja Rájusin'ha. It contained a chapter on Masurica or Chicken-pock. Towards the close, the author appears to have introduced other topics; and immediately after directing leeches to be applied to relieve bad sores he proceeds thus: 'Taking the matter of pustules, which are naturally produced on the teats of cows, carefully preserve it, and, before the breaking out of small-pox, make with a fine instrument a small puncture (like that made by a gnat) in a child's limb, and introduce into the blood as much of that matter as is measured by a quarter of a ratti. Thus the wise physician renders the child secure from the eruption of the small-pox.' This communication was shown to Mr. Colebrooke and Mr. Blaquiere, both eminent Sanscrit scholars, and they both suspected that it was an interpolation. . . . . I believe I may further add that Mr. Colebrooke made inquiries whilst in India, which fully satisfied him that no original work of the kind ever had existence. Sir John Malcolm has also been kind enough to ascertain that no such book is to be found in the library of the East India Company. From these statements it must be apparent, that the wellmeant devices of those who attempted to propagate vaccination in India have led to the belief that the practice was known to the Hindoos in earlier times."

It may be added that Dr. Anderson, above referred to, is congratulated by Jenner's biographer on his "unceasing exertions at Fort St. George."

**COMPULSORY VACCINATION IN BOMBAY----THE DANGER OF TUBERCULOSIS.**

Notwithstanding the proofs laid before the Royal Commission on Vaccination regarding the futility of the practice as a prophylactic against small-pox, its injurious consequences in spreading inoculable diseases, and the cruelty and injustice attending its enforcement, there are not wanting those who are continually plotting to extend the system, by means of coercive legislation, amongst populations who are known to entertain a widespread repugnance to vaccination, but who are without representative institutions. At a meeting of the Bombay Legislative Council (reported in the *Times of India*, February 24, 1892) held for the purpose of hearing the second reading of the bill to prohibit the practice of inoculation, and to make vaccination compulsory in certain districts of the Bombay Presidency, the Honourable Mr. Javerilal U. Yajnick moved certain amendments to the law. In the course of his argument, in which he points out the danger of transmitting leprosy and syphilis by means of arm to arm vaccination, he quotes the opinion of "an able and experienced medical gentleman," Dr. Bahadurjee, who in reply to an inquiry writes :—

"In answer to your letter in which you ask me my personal opinion on the arm-to-arm vaccination method which is intended to be enforced by the new Vaccination Bill, I have no hesitation in saying that, besides its being not suited to the peculiar conditions which obtain in this country, on professional grounds the method is objectionable, and for these reasons :— 1. Arm-to-arm vaccination obviously acts as a channel for the transference of some skin diseases, and affords a ready means for propagating such inherited constitutional taints as those of syphilis and leprosy. No doubt, special rules, with full details, will be framed for the guidance of the operators in their selection of proper subjects, with a view to avoid these mishaps; but, having regard to the class of men from whom the supply of district vaccinators is to be obtained, the detailed rules will be of as much use to them as the paper on which they are printed. 2. Syphilitic taint does not necessarily show itself in ill-health at the early age at which vaccination is practised and demanded by law. A child may be in fair health, and yet have inherited syphilis. Moreover, syphilis does not stamp itself on the face and arms, so much as on the back and legs—parts not generally examined by the vaccinator, and thus apt to be overlooked. Only yesterday I was asked to see a case of skin disease in a child. On stripping the child bare, I found him fairly healthy to look at, and could see no skin blemish on his person. But closer examination of the hidden parts revealed the presence of unmistakable condylomata (syphilitic). These condylomata unnoticed, I should have passed the child as a very fair specimen of average health, and a fit subject to take the lymph from. Syphilis, as betrayed in obtrusive signs, is not difficult to recognise, but when concealed, as is more often the case, it is by no means easy to detect it. 3. In the case of leprosy it is still worse. There is no such thing as a leper child or infant. The leper heir does not put on its inherited exterior till youth is reached. And it is by no means possible by any close observation or examination of a child to say that it is free from the leprous taint. Surely arm-to-arm vaccination will not help to stamp out leprosy. On the contrary, it has been asserted, and not without good reasons, that it has favoured the propagation of the hideous disease. 4. It is acknowledged that extreme care is required in taking out lymph from the vesicles to avoid drawing any blood, for blood contains the germs of disease. Extreme care means great delicacy of manipulation, and delicacy of manipulation with children is not an easy task, and requires some experience and training. Is this to be expected from the class of men who are going to act as public vaccinators in the districts? Supposing a district vaccinator to acquire it to some extent after considerable practice, what about the delicacy of manipulation of one

newly put on? 5 Puncturing a vesicle with such delicacy as not to wound its floor and draw blood is one great difficulty. But the selection of a 'proper' vesicle is another as great if not a greater difficulty. Products of inflammation are charged with the germs of disease, the contagion or contamination media, as much as the blood itself is. And the contents of an inflamed vesicle are quite as contaminating as the blood itself of a subject who, though charged with the poison of (inherited) syphilis or leprosy, has none of the obtrusive signs of the taint for identification. And out here inflamed, *i.e.*, angry-looking vesicles are not the exception but the rule, as can be easily told by personal observation and experience, and equally easily surmised if the habits of our poor be duly considered. Thus, even if no blood be drawn, the danger of transferring constitutional taints by the arm-to-arm method is by no means small; remembering that leprosy which claims India, and not England, for one of its homes, does not admit of any detection on the person of a subject from whose arm lymph may be taken, and that syphilis is more often difficult to detect than otherwise, and remembering, also, that both these are often met with largely in some districts."

With regard to tuberculosis, the most deadly of all diseases in Europe, the following extracts from the translation of an article in the *Gazette Hebdomadaire des Sciences Medicales*, by Dr. Perron, *Officier de la Legion d'Honneur*, which appeared in the *Vaccination Inquirer and Health Review* of December, 1890, may arrest the attention of the reflective reader. Dr. Perron says

"The possibility of conveying tuberculosis to man in the act of vaccination was long ago pointed out. Tuberculosis has, in fact, a special predilection for the bovine race which yields us our vaccine. There are few of these animals that escape its attacks; the calf, the heifer sometimes bear traces of it but a few weeks after their birth. It would then appear quite natural to suppose that the vaccine, taken from a bovine animal and inoculated by the skin, might thus convey tuberculosis to the vaccinated subject. It is by no means so, however; for it is demonstrated that the inoculation of tuberculosis by way of the skin is extremely difficult in itself, and that there is not the slightest fear of doing so by way of the vaccinal punctures. The direct conveyance of the tuberculosis contagion in this manner need not, then, be taken into account. If vaccination renders man more prone to contract tuberculosis, it is, in our opinion, by a method altogether different.

"We hold that we must, in this case, arrange our facts in accordance with the new theories of which we have spoken above; that we must, that is to say, consider, with respect to vaccination and the possibility of a tuberculous contagion due to it, the part which can be played in the organism by nocivity, or receptivity, in relation to micro-organisms.

"The cow, as we have said, is the tuberculous animal *par excellence*. She is often the bearer of specific granulations, sometimes even along with the appearance of ordinary health. She is, therefore, a soil eminently favourable, and therefore very receptive, for the bacillus of Koch. But along with tuberculosis there is another acute malady specially attaching to bovines, for it possesses the property of arising spontaneously among them, namely, the vaccinal disease, which, as we all know, shows itself locally by the appearance, on the teats and on the udder, of pustules, whereof we avail ourselves for human vaccination. Thus, then, two acute diseases, tuberculosis and vaccinia, find always in the cow the soil most favourable for their evolution; and that clearly because the medium of cultivation is propitious both to the bacillus of Koch and to the micrococcus of vaccine.

"If, as announced by Professor Bouchard, the medium created by a vaccination can be destructive to one or several microbic species, we may add that, by the law of reciprocity, a medium of cultivation may at the same time be favourable to one or several microbes. That is exactly what happens with the cow in respect of tuberculosis and vaccinia, diseases between which the soil of cultivation establishes, as we see, a striking connection.

"This is the time to examine what happens when we inoculate a human subject with cow-vaccine. By that act we bring the human organism into a state of immunity, which is certainly bactericidal as against the microbe of variola; that is the benefit we seek, and which constitutes the vaccinal immunity. But here is the important point; at the very time when we have created in the man the vaccinal soil, we run the risk of having, *ipso facto*, established that humoral state (*terrain humoral*) which is favourable to the tuberculous genesis, that is, the medium of culture which is receptive for the bacillus of Koch.

"The first and the most grave result which follows from this interpretation is, then, that vaccination, besides the advantages which it offers us in our contest with variola, presents the danger of opening the way for the invasion of tubercle.

"If we now turn back and examine the events of the last century or so, we can show a constant increase of tuberculosis, a fact never hitherto satisfactorily explained. There was a time when this malady existed only as an exceptional thing; now, actually, in spite of the incessant progress in public and private hygiene, in spite of all the material improvements that have been made, it tends more and more to rise to the rank of a pestilence. It should be remarked that it strikes by preference at the young lives, that is, those who are, nevertheless, at the age when the physical resistance to morbid causes is the strongest. Now, a malady which originates in exhaustion, in vital poverty, should display its power in the inverse order, and should fall most heavily on the old. We are, then, compelled to believe that young folk offer, for some quite special reason, an exceptionally favourable soil for the implanting of Koch's bacillus.

"Side by side with this growing extension of tuberculosis, we see developing, *pan passu*, and in the same period of time, that is to say, since the beginning of the century, the practice of vaccination. We may ask ourselves whether in this double simultaneous evolution there is not a hidden oneness? If tuberculosis, in spite of all sanitary precautions, has multiplied its attacks during the last hundred years, it is, we submit, because vaccination has come to create for it a propitious soil. That would explain, not only its advancing growth in all civilised countries, but also its special influence over the young subjects who are always more or less recently vaccinated, and consequently more receptive than the others in the presence of the bacillus.

"In all European armies, vaccination is the order of the day. On their arrival with their corps, the young soldiers are forthwith carefully revaccinated. Now, the military statistics of all countries show an enormous proportion of various forms of tuberculosis among soldiers, especially during the first and second year after their enlistment. Divers causes have been invoked for the explanation of the facts. First, the moral decline produced amongst young soldiers by their separation from their families. That might have been possible formerly, but it is not probable in our day when facility of communications generally permits the young soldier to remain in touch with his native country. Besides, in the army afloat, which is less favoured in this respect, we find no more cases of phthisis than in the army ashore. Nor can a bad hygiene be any longer pleaded, nor an inferior dietary, for the European States take the greatest pains to secure for their soldiers the best of material conditions, and succeed in doing so to a very satisfactory extent. Nor can over-work be alleged, for in time of peace the routine of the service requires, save under very exceptional circumstances, just as much exercise as goes to make up a healthy amount of daily exercise. To sum up, the young soldiers find with their corps material conditions of life, which, for a very large number, are superior to those of their native surroundings. Their life in the great towns, though evidently having an injurious effect, cannot by itself explain the numerous cases of tuberculosis of which we are speaking, for the barracks are in general well situated and looked after in accordance with the rules of health. Whence then can come these attacks of tuberculosis, so sudden, so numerous, upon subjects that, but a few months before, the council of revision rightly declared to be fit for service. Tuberculosis of the lungs, of the organs, of the joints, of the bones, etc., all these fatal evils show themselves in the garrisons of all countries with a frequency before which one might well despair. We believe that we must simply seek the reason for these facts in the revaccination which awaits the recruits upon their arrival at their corps, and which transforms them forthwith into a medium which is receptive towards those germs of tubercle which swarm in centres of population. This revaccination immediately upon enlistment is all the more regrettable and inopportune since just at that moment the young man, separated from his-family, his country, his familiar conditions of life, undergoes, without any period of transition, total and radical changes in his manner of life, and thereby finds himself less well equipped for resistance."

Referring to the efforts made by the Indian health authorities to escape the dangers of inoculated diseases by the introduction of animal lymph, the *Calcutta Daily News* of 9th February, 1892, says :—" In trying to avoid the Scylla of leprosy, syphilis, and kindred evils, they fall into the Charybdis of tuberculosis and other equally fatal maladies. When doctors disagree, patients usually have the reverse of a comfortable time, and in the present situation the public may well look around in alarm, and cry to be saved from the dangers with which the whole subject of vaccination seems to be beset."

#### THE REVOLT AGAINST COMPULSORY VACCINATION IN INDIA.

The first triennial report of the working of the vaccination department in Bengal has been recently published, and the Commissioner says that the Acts in the rural districts are practically a dead letter; vaccination is rejected by all the higher class of Hindus—the Brahmins, Marwaries, Rajputs, and Burmahs—while, among the Mahomedans, the Ferazis display the utmost repugnance to the Jennerian rite. In nearly every village, reports the Commissioner, there are families who persistently refuse vaccination, and secrete their offspring to escape the vaccinators. The *Madras Mail* of July 2nd, 1890, says that vaccination is very unpopular with many classes; and the *Madras Times*, April 16th, 1891, reports that summonses were issued against fifty-two recalcitrants for nonvaccination. At Midnapur, Bengal, where the vaccinations formerly averaged three thousand annually, the number fell to nine hundred last year.

The *Allahabad Pioneer*, September 23rd, 1891, says:—

"The Civil Surgeon of Coconada, in his report on vaccination in that town, says that it is a common occurrence for parents to wash out the vaccine virus immediately after vaccination; and the vaccinators further assured him that the natives are in the habit of rubbing in chalk, chunam, or flour, with a view, if possible, of preventing the vesicles rising on their children's arms."

The *Times of India*, July 14th, 1892, says :—

"The prejudice against vaccination in Burmah seems to be growing to quite a remarkable extent. The report for 1891-92 shows that in Lower Burmah the number of cases was only 129,509, or 10,812 less than in the previous year. In one district alone, Henzada, there has been a fall in two years from 10,134 to 5180, while in the Toungoo district the figures have declined from 8905 to 3069. The Prome, Thongwa, and Thayetmyo districts are also among those which exhibit a considerable decrease, and in most cases no explanation of the decline seems to be forthcoming; while such explanations as are offered the officiating Chief Commissioner 'cannot regard with any satisfaction.' In Upper Burmah there was an increase of some 20,000 cases, but this seems mainly due to the extension of the Act. In Upper Chindwin there was a great and unexplained decrease, and five other districts also show a decline, while in some of these and a number of other districts the people put every possible obstacle in the way of vaccination. *At Katha, Mohayon, and Mobin so strong is the prejudice against arm-to-arm vaccination that the vaccinators appear to have, narrowly escaped violence at the hands of the villagers, who organised an open resistance to the system.*"

The *Civil and Military Gazette*, Lahore, August 8th, 1892, says :—"It appears that the natives of Lahore are opposed to compulsory vaccination. The inhabitants of several *mohallas* in the city have drawn up memorials to the local Government asking that the resolution of the Municipal Committee for the introduction of compulsory vaccination in Lahore be cancelled."

The *Allahabad Pioneer Mail*, 6th October, 1892, under the head of Vaccination in Bengal, says :—"There has been a falling off of nearly two hundred thousand, or about 11 per cent, in the number of vaccination operations performed during the past year in Bengal,

as compared with the record for 1890-91. The number of operators has meanwhile increased by nearly one hundred; and an analysis shows an average decrease of about 107 cases per operator."

And in a leading article the editor observes:---

"If anti-vaccinationists can be numbered in their thousands in England, it is small wonder that they can be numbered in their millions in India."

Those familiar with the social condition of India are aware that every effort has been made to remove this dread of the operation which exists more or less all over the country. New lancets and scarifiers have been introduced, and various viruses have been experimented with, one after another—cow, calf, sheep, goat, lamb, buffalo, and donkey lymph — the last, the discovery of Surgeon O'Hara, having been specially urged upon the attention of District Boards and municipalities by the Government. Surgeon-Major W. G. King writes to the Indian *Medical Record* that he is using *vesicle pulp* or "lanoline vaccine," which is applied by stretching the scarifications and "alternately dabbing and rubbing in the paste." Buffaloes, he observes, appear likely to yield very much more vesicle pulp than calves, but they exhale an "abominable odour," which renders the work of collecting the pulp most repulsive. The Commissioners state that only the lowest and most ignorant classes readily submit. The law enforcing vaccination in British India, which are unparalleled for their severity, were passed without the consent and against the wishes of the people, whose objection to vaccination arises from a knowledge often gained by sad and bitter experience. They know that the fearful spread of leprosy in India and other countries is coincident with and, as they believe, due to the extension of vaccination, and they prefer to face the severities of the law, with its ruinous judicial penalties, or even to risk the dangers of the jungle, where they are sometimes compelled to seek refuge for their little ones, to the risks of this hideous and destructive scourge. That leprosy, confessed to be incurable, is inoculated by vaccination (a fact once vehemently denied) is now reluctantly admitted by the leading dermatologists of all countries, and by the most experienced chiefs of the leper asylums and public health departments in the West Indies, in South America, South Africa, and in the Sandwich Islands

The *Madras Times*, May 18th, 1892, says :—

"Every effort is probably made to obtain pure and healthy lymph, but if the causation of leprosy has not yet been satisfactorily traced, no guarantee can be provided against the presence of the germs of the disease in the lymph used for purposes of vaccination."

### VACCINATION IN THE WEST INDIES.

#### BARBADOS.

There is no compulsory vaccination in this island. The editor of one of the leading journals writes, 2nd May, 1890, that the feeling in the island is so strong against vaccination, that the advocates of vaccination are afraid to move in the matter, and any attempt to enforce it would probably create a riot.

In conversation with all classes and conditions of men (from December to February, 1888-9), from the Chief Justice, Sir Conrad Reeves, to the poorest boatman or sugar plantation labourer, from one end of the island to the other, I failed to discover a single advocate of compulsion. "Let those have it who want it, but don't force it upon me and mine," was the general reply. The police and postmen also get along admirably without re-vaccination. Epidemics are considered less frequent than in other well vaccinated districts, notably Jamaica, Martinique, Guadaloupe, and Hayti.

The natives are, a proud, independent, and more intelligent coloured population than any I met with in the West Indies, and rather look down upon other islanders who are without political representation, and are subject to enforced vaccination. The population in April, 1891, was 182,206, or 1096 to the square mile—-one of the densest in the world.

#### GRENADA.

In marked contrast to the parental freedom enjoyed by the inhabitants of Barbados, with its popular constitution and representative government, is the position of Grenada. I copy the following from the *Grenada People*, June 9th, 1892,—concerning the oppressive legislation in one of the most beautiful islands in our West Indian possessions, administered as a Crown Colony :—"During this week, upwards of thirty or forty of the peasants have been hauled before the police magistrate of the Southern District for alleged violation of the Vaccination Act. In nearly every case fines of half-a-crown' have been imposed, representing almost half of the week's wages which these unfortunates, if they are employed, can hope to earn. In face of the Royal Commission on Vaccination, we do not see why the law making vaccination compulsory should be still enforced. At most, it is of doubtful benefit; and doctors differ as to the positive good or injury which it does. The advocates of Jenner's specific can quote very few cases, if any, in its support; whilst its opponents point with force and truth to the positive injury it has inflicted. Here, in Grenada, pure lymph is seldom employed. As a consequence, many of the children submitted to the process of vaccination contract therefrom fatal diseases. The lymph, in many cases, is collected from children inheriting a taint of the scrofulous disease which prevails amongst the peasantry; and many an otherwise healthy child, after the process of vaccination, presents the appearance of a disgustingly yawsey patient.<sup>1</sup> As eminent medical men differ as to the value and utility of vaccination, we think it ought not to be made an offence punishable by fine or imprisonment if parents refuse to vaccinate their children; but that the law should be amended in the direction suggested by the Royal Commission in their recent report, *i.e.*, it should be optional with the parent whether the child should be vaccinated or not."

**VACCINATION A FAILURE AND A DANGER TO HEALTH FROM ITS INCEPTION.**

Early in the century, when cases of injury were first charged to vaccination by either the suffering victims or their relatives, they were met by emphatic denials on the part of the supporters of Jenner. Proofs of the failures and mischievous results of vaccination, as shown by Dr. Creighton in his remarkable historical work, "Jenner and Vaccination," accumulated from all quarters, but still the vaccinators held on to their creed, Jenner having supplied them with a theory broad enough to meet any contingency. He says there were some varieties of spontaneous eruption, all of which produced sores on the milkers, but only one of these was the *true* cow-pox, all the others being spurious and exerting no specific protective power over the constitution.

On the 18th June, 1890, evidence was adduced by me before the Royal Commission concerning the early failures of vaccinators and the mischievous effects of vaccination (See Third Report of the Royal Commission on Vaccination, pp. 150-151.) In the year 1806 the College of Surgeons instituted an inquiry into the results of vaccination. The results of this inquiry have been overlooked by all the advocates of compulsory vaccination, and notably omitted from Sir John Simon's remarkable "Papers relating to the History and Practice of Vaccination, presented to both Houses of Parliament," London, 1857. (The report of the Royal College of Physicians, which was favourable to vaccination, was included by Sir John Simon in these "Papers." The corresponding report of the College of Surgeons, which appeared in the same publication, but was adverse to vaccination, was ignored — an important historical omission.)

This report states that on the 15th December, 1806, a circular was drafted and referred to the Board of Curators, and, having received their approval, was despatched to 1100 members of the College in the United Kingdom, submitting the following questions

"1st. How many persons have you vaccinated?"

"2nd. Have any of your patients had small-pox after vaccination?"

"3rd. Have any bad effects occurred in your experience in consequence of vaccination? and, if so, what were they?"

"4th. Is the practice of vaccination increasing or decreasing in your neighbourhood? if increasing, to what cause do you impute it?"

To the 1100 circulars only 426 replies were received. Why nearly two-thirds of the members kept silent, when at the outset they were converted in multitude to vaccination, was left unexplained. The replies were thus summarised by the Board on, 17th March, 1807—  
"The number of persons stated in such letters to have been vaccinated is 164,381.

"The number of cases in which small-pox had followed vaccination is 56.

"The Board think it proper to remark under this head that, in the enumeration of cases in which small-pox has succeeded vaccination, they have included none but those in which the subject was vaccinated by the surgeon reporting the facts.

"The bad consequences which have arisen from vaccination are— 66 cases of eruption of the skin,  
24 of inflammation of the arm, whereof  
3 proved fatal."

A copy of the original report containing these remarkable admissions was produced by me before the Royal Commission and examined by the president and each member of the Commission then present.

I have before me a copy of Volume VIII. of the *Medical Observer*, an ably conducted Metropolitan journal published in 1810 (produced also before the Royal Vaccination Commission), and on pp. 183 to 197 I find recorded (with chapter and verse for reference to the authorities) the particulars of 535 cases of persons having small-pox after vaccination; also similar details of 97 fatal cases of small-pox after vaccination and of 150 cases of injury, together with the addresses of ten medical men, including two professors of anatomy, who had suffered in their own families from vaccination.

Concerning these remarkable evidences a leading physician, Dr. Maclean, observes :—

"Although numerous, they are nothing to what might be produced. It will be thought incumbent on the vaccinators to come forward and dispute the numerous facts decisive against vaccination here stated on unimpeachable authorities, or make the *amende honorable* by a manly recantation. But experience forbids us to expect any such fair and magnanimous proceeding, and we may be assured that under no circumstances will they abandon so lucrative a practice until the practice abandons them."

We commend these prophetic words, uttered years ago, to those who look for the impartial treatment of this question at the hands of professional propagandists at the present day.

**VACCINATION FAILURES IN 1817.**

"However painful the duty, we feel ourselves called upon to notice the numerous and accumulating failures of cow-pox in preventing small-pox, whether in the natural way or by inoculation. Our communications on the subject have been numerous, and some of the cases do not appear to have been modified by the previous disease. It is not easy to account for these distressing occurrences, but were we to hazard a conjecture, we would venture to suggest that it is possible the virus may have become so modified by being confined altogether to the human subject that its powers of producing the necessary affection of the constitution, which only can be regarded as the test of security, may be so nearly worn out as to be no longer a certain preventive. Hence the necessity of frequently renewing the efficacy of vaccination by procuring the virus directly from its original source.

"Variola continues and spreads a devastating contagion. However painful, yet it is a duty we owe to the public and the profession to apprise them that the number of all ranks suffering under small-pox, who have previously undergone vaccination by the most skilful practitioners, is at present alarmingly great." -*London Medical Repository*, pp 57 and 95. Edited by George Burrows, M.D., F.L.S., etc., etc., and Anthony Todd Thompson, F.L.S., M.R.C.S., etc. -

### ARM-TO-ARM *versus* CALF-LYMPH VACCINATION.

As the relative merits and demerits of animal and arm-to-arm vaccination are being discussed in the Indian press, I would here call attention to a few facts which appear to have escaped the attention of those who are urging the adoption of new compulsory laws in various districts. It is generally admitted that there is a growing discontent with vaccination in all quarters. In England household censuses have been made in nearly one hundred towns and districts, with the result that eighty-seven per cent. of the signatories are opposed to compulsory vaccination and sixty-eight per cent. certify that they do not believe in vaccination at all. In about ninety towns and poor-law unions the acts are a dead letter; and, owing to the sinister results of the practice, in many of our Colonies the authorities have ceased prosecuting vaccine recusants. In India, Sir John Gorst (*Times*, 17th July, 1891) informed Parliament that compulsory vaccination exists in four districts in Bengal and in 183 municipal cities and towns in different provinces. But the results cannot be considered encouraging even by the most ardent vaccine optimist. The Blue-Books of "Sanitary Measures in India" state the total vaccinations during the years 1886-89 inclusive as follows

1886-87,	5,265,024
1887-88,	5,552,710
1888-89,	6,099,733
1889-90,	6,161,407

The statistical abstract relating to British India gives the smallpox mortality during the same period, viz. :—

1886,	51,112
1887,	65,757
1888,	138,509
1889,	125,453

This increase of small-pox, co-incident with the rapid extension of vaccination, shows that it is a disease governed by causes entirely outside and independent of vaccination. And this opinion is confirmed by the highest authorities. Thus, in a memorandum of the "Army Sanitary Commission," published in the *Bombay Government Gazette*, Dec. 17th, 1885, the Commissioners say

"The first disease in the list—namely, small-pox, which yielded an increase of 1369 deaths, or nearly sixteen-fold that of the previous year's death-rate—had assumed an epidemic state in nearly all the districts of the city; yet Bombay has an effective vaccination service, with the use of calf-lymph." In vol. xviii. of "Sanitary Measures in India," page 203, in reference to the smallpox epidemic of 1884, it is stated :—" We are thus brought face to face with the fact that, notwithstanding the existence of an active vaccination service, small-pox swept over the provinces just as if there had been none." In the same volume, referring to Madras, the Commissioners -say:—" No less than seventy-four per cent. of the small-pox deaths in Madras town occurred among children under three years of age." In Punjab, "the Compulsory Act was in force in the Amritsar municipality, but here the deaths from small-pox were far more numerous than in any other town of the province." In vol. xix., page 113, is the following candid admission :—" Ten years' statistics afford no evidence that vaccination affects the usual epidemic course of the disease, and hence-this fact, in the face of the extensive vaccination work of the present and past years, appears to lead to the conclusion that in its epidemic form small-pox must be met by improving the sanitary condition of the people."

On page 10 of the Report on the Annual Returns of the Civil Hospitals and Dispensaries in Madras for 1888, under the head of Canara, South, I find that while vaccination is making satisfactory progress, the number of vaccinations having increased by 8053 cases, yet "small-pox was more prevalent than usual in the district, and was epidemic in the town of Mangalore." On pp. 9 and 10, under the head of Arcot, North, it is stated that small-pox was prevalent, and that vaccination "was performed in a careless and perfunctory manner." This careless performance of the Jennerian rite is the rule in our Crown Colonies where leprosy is prevalent, as I have found by personal investigation.

According to Sir Edwin Chadwick, Dr. B. W. Richardson, and all other sanitarians of repute, small-pox is a disease due to insanitary conditions, impure water, bad drainage, dirty living, and particularly to overcrowding; and, instead of removing these conditions, the Governments of India during the past thirty years have been spending their energies, and large sums of money, in extending vaccination. Now that the arm-to-arm system has been thoroughly discredited and shown to be futile as a preventive of small-pox and fertile as a disseminator of eczema, syphilis, and leprosy, the cry of the official vaccinator is not the sensible one of "do away with vaccination," but, let us change front and resort to the calf, sheep, buffalo, donkey, or to lanoline lymph—or anything, rather than confess that the Jennerian system is a humiliating failure. It is well known that animal lymph has been a fruitful cause of the spread of disease in Europe. On June 17, 1885, an official re-vaccination with "re-generated" lymph at the Island of Rügen, North Germany, caused an infection of a loathsome eruptive skin disease (*Impetigo Contagiosa*) of 320 children and adults. The details of this sinister affair, from Dr. Koehler, of the Imperial Medical Department, are in my possession, and have been brought before the Royal Commission on Vaccination now sitting. This disaster was due to the use of virus obtained from the Government calf-lymph

establishment, Stettin. In December, 1891, when in Launceston, Tasmania, I learnt that from 200 to 300 children and adults had been afflicted with ulcerative swellings and acute *septicæmia*, caused through animal vaccination in 1887, and that the law in that colony had been suspended. Animal vaccination has no claim to public attention by reason either of its safety or of its novelty. Mr. Farn, the Government Inspector of vaccine lymph, has declared before the Royal Vaccination Commission that he cannot tell by microscopic examination whether lymph is pure or not; and Dr. Robert Cory says that the admixture of lymph with blood, which occurs in the majority of-cases, does not prevent its being used.

Perhaps the most remarkable official pronouncement on this-subject ever made in England is that of the late President of the Local Government Board, during the debate in Parliament on Supply, July 22nd, 1887, at which the writer was present. The object of the declaration was to allay public anxiety as to the safety of the lymph supplied by the Government. Mr. Ritchie, in the course of his speech, said :—" The honourable member for East Donegal (Mr. Arthur O'Connor) said something about lymph. He said, I think, that it was the virus of modified small-pox. I cannot agree with the honourable member in his definition as to that point. I am informed that no lymph which is used for vaccination of any kind has ever, within the memory of man, passed through the human body. Dr. Jenner's first lymph was derived from an animal source; and the lymph which is now sent out is calf-lymph. None of the lymph, I say—at all events in historic times—has passed through the human body; therefore I cannot think that the honourable gentleman is in any way justified in calling the lymph modified small-pox."

Mr. Arthur O'Connor :—" What is it, then?"

Mr. Ritchie :—" I am afraid I am not qualified to give the honourable gentleman a medical opinion of what lymph is. I have told him whence it is derived, and he will see there is no ground for calling it modified small-pox."—*Hansard's Debates, 3rd Series, vol. 317, p. 1803. July 22nd, 1887.*

The chief of the Public Health Department was clearly not aware that until a comparatively recent period arm-to-arm vaccination was practically the *only method in vogue*; and at the time Mr. Ritchie's declaration was made, to the effect that none of the lymph in use had passed through the human body, at least three-fourths of the lymph in use in the United Kingdom was the variety known as arm-to-arm vaccination virus.

#### **DR. R. H. BAKEWELL ON THE RISKS OF VACCINATION.**

In a paper read before the Auckland (New Zealand) Institute, 20th July, 1891, and printed in vol. xxix. of the "Transactions of the New Zealand Institute," Dr. R. Hall Bakewell, formerly Vaccinator-General and Medical Officer of Health for the Colony of Trinidad; author of the "Pathology and Treatment of Smallpox;" Fellow of the Royal Medical and Chirurgical Society of London, etc., says :—" The permanent change in the blood is quite another matter. I commenced, but have never completed, some microscopical investigations into the conditions of the infant's blood before, during, and after vaccination. It is evident that a fertile field for inquiry is open here; and without a series of well-conducted examinations, extending over children of different races, and in different climates, no positive conclusions could be arrived at. But of one thing we are quite certain, as it does not need the aid of a microscope; there is a large destruction of the red corpuscles during the febrile stage of vaccinia, followed by an anaemic condition. How long this anaemic condition lasts we have no trustworthy observations to tell us; and how far it extends—that is, what is the actual loss of red corpuscles—is, as far as I know, in the same state of uncertainty. Of course, we often find parents complaining that children who were perfectly healthy before vaccination have lost colour, strength, and flesh after it, and have never recovered their previous good health. But these complaints, tinged as they evidently are by a strong prejudice against compulsory vaccination, must be received with caution. Still, there is such a mass of evidence of this kind that it ought to be allowed some weight.

So much for the inevitable results of vaccination. The accidents of vaccination may be roughly classified under the following heads:--

1. Inflammatory: including erysipelas and other septicaemic diseases; glandular swellings; phagedaena, sloughing, or mortification at the points vaccinated.
2. Eruptive diseases, mostly of a pustular character, occurring with or immediately after the vaccine eruption; eczema, herpetic eruptions, ecthyma, and impetigo.
3. The inoculation of constitutional diseases—syphilis, leprosy, tubercle.

Now, as regards the inflammatory diseases, there are some vaccinators of large experience who assert that they have never seen any ill-results of this kind arising from vaccination. Well, some people are very lucky, but they have no right to argue from their limited experience that such accidents never occur. I have been very fortunate in my midwifery cases; I have never lost a case in my own practice for thirty-five years; but for all that I do not deny that women die in childbirth. I have seen erysipelas more than once or twice, or a dozen times. In the West Indies it used to be common. The inflammation that followed the vaccination of coloured children was very intense, and the number of insects attacking the unfortunate children no doubt contributed to carry the germs of erysipelas to them. Glandular swellings, particularly in scrofulous children, are not rare. I had myself a case in which each vaccine vesicle was followed by mortification of the skin beneath it, and a phagedaenic ulceration which required very vigorous measures to stop it. This was in a young woman during the epidemic period in Trinidad. I am not sure whether it was a primary vaccination or a re-vaccination. The latter, as is well known, causes very severe inflammation, pain, glandular irritation, and erysipelas in the majority of adults, besides severe and most oppressive febrile disturbance; at least, this is the case at the time of epidemics, when re-vaccination is most

practised.

*Post vaccinal eruptions* are so very common amongst the children of the poorer classes in England that they form one of the stock arguments against vaccination.

*The inoculation of constitutional diseases* used to be laughed to scorn in my younger days. It was said in my hearing by Sir John Simon, K.C.B., then Mr. Simon, the Medical Officer of the Privy Council, that no such inoculation could take place without gross carelessness or unskilfulness on the part of the vaccinator. I used to be of the same opinion ; but a case I saw some sixteen or seventeen years ago convinced me that an infant might look perfectly healthy, and yet be the subject of unmistakable hereditary syphilis. The evidence that syphilis has been communicated by vaccination is simply overwhelming. I may refer to the report of the Committee of the House of Commons on compulsory vaccination; the third report of the Royal Commission on vaccination now sitting in London; the work of Mr. Jonathan Hutchinson, F.R.S., late President of the Royal College of Surgeons of England, on syphilis, in which he devotes a chapter to the description of vaccinal syphilis; and my own experience in this colony and elsewhere. I have seen three cases in this colony alone.

"On my return to Trinidad I had to encounter an epidemic of small-pox which spurred us on to vaccinate right and left, and to revaccinate all who would submit to the operation. But so firmly fixed was the belief of the people that vaccination from a child of a leprous family would be a possible cause of the vaccinated persons becoming leprous, that not even the fear of such a terrible epidemic of small-pox as was then going on would induce them to allow themselves or their children to be vaccinated from any vaccifer in whose family any member was a leper. And then, to my astonishment and dismay, I found that there was hardly a Creole family in the island—white, coloured, or black—free from the taint of leprosy."

#### SIR JAMES PAGET ON SURGICAL PATHOLOGY.

"After the vaccine and other infectious or inoculable diseases, it is, most probably, not the tissues alone, but the blood as much as or more than they, in which the altered state is maintained; and in many cases it would seem that, whatever materials are added to the blood, the stamp once impressed by one of these specific diseases is retained; the blood, by its own formative power, exactly assimilating to itself, its altered self, the materials derived from the food.

"And this, surely, must be the explanation of many of the most inveterate diseases; that they persist because of the assimilative formation of the blood. Syphilis, lepra, eczema, gout, and many more, seem thus to be perpetuated: in some form or other and in varying quantity, whether it manifests itself externally or not, the material they depend on is still in the blood; because the blood constantly makes it afresh out of the materials that are added to it, let those materials be almost what they may. The tissues affected may (and often do) in these cases recover; they may have gained their right or perfect composition; but the blood, by assimilation, still retains its taint, though it may have in it not one of the particles on which the taint first passed; and hence, after many years of seeming health, the disease may break out again from the blood, and affect a part which was never before diseased."—*Lectures on Surgical Pathology, 4th ed., pg. 39. 1876.*

#### DR. M. D. MAKUNA'S MEDICAL VACCINATION CENSUS.

Prior to the appointment of the Royal Commission on Vaccination in 1889, the latest professional examination of the vaccination question was in the form of a medical inquiry, initiated by Dr. Montague Makuna, late superintendent of the Fulham Small-pox Hospital. Its object was to remove, if possible, the widespread feeling of mistrust prevalent, in various parts of the United Kingdom, as to the benefits and safety of vaccination, which had been discredited in public estimation by reason of the failures and mischiefs of the operation, with details of which the press was flooded. The inquiry was made by a committee of thirty medical gentlemen, most of whom were vaccine specialists. The meetings were held in the Council Chamber of Exeter Hall, London, under the presidency of Dr. C. R. Drysdale, senior physician of the Metropolitan Free Hospital, a gentleman who has devoted much time to this important question. Dr. Drysdale promised the Committee to read a paper on the results of the inquiry. The proceedings were reported in the *Midland Medical Miscellany* and in the *Medical Press and Circular*. A circular letter, with copy of the report of the first meeting of the Committee, was sent to members of both Houses of Parliament.

At the first meeting of the Committee, held on 15th February, 1883, Dr. Makuna, in explaining the objects of the proposed inquiry, referred to the opposition to vaccination; an opposition which has become intensified since vaccination has been made compulsory. A medical inquiry was, therefore, considered indispensable, and it was anticipated that the evidence disclosed in favour of vaccination would be so unanimous and conclusive, as to effectually restore public confidence in the practice, and to put an end to all opposition. The chairman, Dr. Drysdale, said he considered the proposed inquiry would be of great value to the profession and to the public, and expressed a desire that the Local Government Board and other authorities should be requested to co-operate.

The attention of the Local Government Board, the British Medical Association, the Epidemiological Society, the Medical Officers of Health, the Royal College of Physicians, as well as ambassadors, consuls, etc., was specially called to the inquiry, and they were requested to contribute facts and information from all parts of the world.

A circular was drawn up and approved by the Council, and sent to 4000 medical practitioners, a considerable portion of whom were public vaccinators, medical officers of health, and vaccine specialists. The circular elicited 384 answers, and the results were published in a pamphlet entitled "Transactions of the Vaccination Inquiry."

An analysis of the answers (made by Mr. Thomas Baker, Barrister-at-Law) shows that the seven questions submitted have been answered by 384 medical men, of whom 102 are public vaccinators, vaccine specialists, medical officers of health, or officials.

The following is the third, and one of the most important, submitted to this medical inquisition, viz. :— *What diseases have you in your experience known to be conveyed or occasioned or intensified by vaccination* . To this question 13 give no answer, and 139 answer "None,"\*

\* No. 17 says: "Two deaths from erysipelas occurred after vaccination in my practice, both commencing on the ninth day." Therefore, that so many answer, "None," may be accounted for by the fact that public vaccinators commonly do not see the vaccinated child after the eighth day.

but many qualify this reply by the words, "in my own practice," "direct," "not serious," "personal," etc. On the other hand, the list of mischiefs (many fatal) includes the following, as recorded by 232 medical witnesses. (This enumeration has been checked by the Rev. Isaac Doxsey, F.S.S., and Mr. J. H. Lynn :—)

	Witnesses		Witnesses.
Abdominal phthisis	1	Boils	8
Abscesses	11	Bronchitis	1
Angeioleucitis	2	Bullae	1
Arm disease needing amputation	1	Cancer	1
Axillary Bubo	1	Cellulitis	5
Axillary gland, enlargement of	1	Convulsions	4
Blindness	1	Diarrhoea	4
Blood poisoning (fatal)	1	"Died"	1
Diseased Bones	1	Phagedsenic action	1
Diseased Joints	1	Phlegmon	2
Dyscrasia	1	Pityriasis	1
Ecthyma	1	Pneumonia	1
Eczema	60	Prurigo	3
Eruptions	5	Psoriasis	1
Erysipelas	120	Pynmia	7
Erythema	22	Pyrexia	1
Gangrenosa	3	Rickets	1
General Debility	1	Scald head	1
Herpes	3	Scarlatina	3
Impetigo	7	Scrofula	9
Inflammation	10	Septicimea	1
Latent diseases developed	2	Skin disease	21
Lichen	2	Struma intensified	4
Marasmus	1	Syphilis	43
Meningitis	2	Tuberculosis	1

Mesenteric disease	1	Ulceration	6
OEdema	2	Varioloid	1
Paralysis	1		

The following *qualified* admissions are also made, viz.

Eczema	4	Nettle rash	1
Esypelas	6	Syphilis	10

On the 19th of April, 1886, the results of this medical census were laid before the Right Hon. James Stansfeld, then President of the Local Government Board, and in May a copy of the analysis was sent to him at his request. And on the 25th June, and on the 2nd July, 1890, I called the attention of the Royal Commission on Vaccination to this important inquiry, and presented an analysis of the results for its consideration. The facts ought, in the interest of the public safety, to be widely disseminated through the press, and made known to magistrates, boards of guardians, and others concerned with the enforcement of the Vaccination Acts.

It has, I think, been clearly proved on the evidence of medical specialists, that to the long catalogue of diseases conveyed at the point of the lancet in vaccination must now be added that of leprosy. This terrible indictment has been denied again and again by those who have not taken the trouble to investigate the facts for themselves, and have shut their eyes to the facts revealed by others. Is it reasonable to suppose that negative statements, however confidently made, can destroy the positive testimony of careful investigators such as Dr. John D. Hillis, Professor W. T. Gairdner, Dr. Edward Arning, and Dr. S. P. Impey? The fact that syphilis is communicable by vaccination was emphatically repudiated by a President of the Local Government Board not long ago, and the terrible Algiers vaccine disaster in 1880 was officially proclaimed an impossible occurrence. The fact that leprosy may be communicated by vaccination is now reluctantly admitted even by those who are most anxious to clear the rite from this reproach. In concluding a defence of vaccination from the charge referred to in No. 4 of the *Journal of The Leprosy investigation Committee*, Dr. Beaven Rake says: "It is evident that the risk of transmission of leprosy by vaccination is so small that, for all practical purposes, it may be disregarded." Dr. P. Abraham says: "The possibility of an occasional accidental inoculation of the disease by vaccination might be admitted;" and Dr. C. F. Castor, in a paper defending vaccination from this stigma, observes: "The opinion expressed that vaccination from a tainted source will produce the disease (leprosy) is, I believe, a true one."

### MEDICAL DENIALS AND ADMISSIONS.

The four numbers of the *Journal* issued by the Leprosy Investigation Committee contain a large amount of testimony from authorities in every part of the globe. A conspicuous feature, and one which has been commented upon in the press, is the confusion and contradiction of medical opinion, and this confusion is not restricted to theorists who have never visited countries where leprosy prevails, but is exhibited amongst superintendents of leper hospitals, well-known dermatologists, and eminent general practitioners. Most of the theorists are able to cite facts in support of their several beliefs, and maintain their conflicting opinions with equal confidence. Some of the most prominent of these views have been dealt with, but it would be beside the scope of this work to refer to them all. Beyond the general admission of the alarming increase of the disease, there is but one point upon which there is any approach to a consensus of opinion, and that is, that leprosy is a disease communicable by inoculation. Conversing with directors of leper institutions, experienced practitioners, and careful observers in countries where leprosy prevails, whatever their particular theories about it, I have found no one who denies that it is inoculable. In some instances, when pressing the logical issue of these answers I have said, "Then the disease is also communicable by vaccination," this has often been admitted, though sometimes with hesitation and reserve, and generally accompanied with the proviso that leprosy cannot be invaccinated if pure lymph only is employed and the operation be skilfully performed. Even if this were true, how pure lymph can be selected in tropical countries where the disease is generally of slow incubation, and does not manifest itself for years, and where the vaccinifer is never properly examined, is a mystery not explained. Moreover, while the State can enforce vaccination, it cannot compel the use of healthy vaccinifers, nor enforce careful operation. In nearly all leprosy countries arm-to-arm vaccination still furnishes the chief sources of supply. The perennial cry of public vaccinators is that the lymph is "unsatisfactory." Animal lymph is often attended with excessive inflammation, and the practitioner is obliged to dilute it with glycerine, lanoline, and other substances, and its use is much more expensive. Moreover, a good deal of the so-called animal lymph in vogue is really only arm-to-arm vaccine, inoculated into calves, buffaloes, sheep, and donkeys, and partakes of the diseases both of man and of animals. Of the many cases of ulcerative and of fatal vaccination which have come under my notice during the past twenty years not a few have been due to the use of carefully-selected animal vaccine.

Dr. Robert Cory, Medical Director of the Government Calf Lymph Establishment, London, testified before the Royal Commission, November 17, 1889 (Q. 4390), that out of 32,000 cases there were 260 returned with sore arms, and 38 with eruptions. Then there were 16 cases of erysipelas, and nine of axillary abscesses, and (Q. 4392) eight deaths were reported to the Station of children who had

been vaccinated with animal lymph. The same witness testified (Q. 4369) that lymph taken from the cow leads to greater inflammation, and has a greater tendency to produce ulceration, than lymph which has been humanised.

### HOW LEICESTER DEALS WITH VARIOLOUS OUTBREAKS.

The success of what is known as the "Leicester Experiment" has created considerable public interest both at home and abroad, and, in response to repeated inquiries, I am able to furnish the following particulars from the pen of Mr. Councillor Biggs, of Leicester. Mr. Biggs was for several years a member of the Board of Guardians, and is now a member of both the Sanitary and SmallPox Hospital Committees. He has had much to do with the substitution of sanitary amelioration and isolation for the now discarded system (so far as Leicester is concerned) of vaccination.

Our procedure in the notification of a case of small-pox may (he says) be described in the words of our Chief Sanitary Inspector, Mr. F. Braley :—"When a case is reported, I at once go to the infected house, and try to ascertain where the disease was contracted, where the patient has been working, where he has been visiting, and his movements generally for the last ten or twelve days. I also make a point of seeing all persons who have visited the infected house during the time stated; in addition, I visit all factories and workshops where other members of the family have been employed; and by this-means have been able to get cases removed when the first symptoms of the disease appeared.

"Immediately on the removal of the patient, I superintend the fumigation of the house with sulphur; liquid disinfectants are used freely in the drains and about the yard, and the ashpit is emptied and disinfected; the next day the bedding is taken to the disinfecting chamber and subjected to the hot-air process.

"Up to the present time I have succeeded in getting almost every person connected with the infected houses into quarantine. In a very few cases I have experienced opposition.

"The above represents practically all we do of a special character beyond the ordinary treatment in cases of supposed infection. Those who are prevailed upon to go into quarantine usually remain for fourteen days, the period within which small-pox is supposed to incubate after infection. So far from the authorities having to resort to harsh measures to enforce quarantine, this period of rest is made to be of so pleasant and agreeable a character that, at its expiration, many have been reluctant to leave the hospital.

### VACCINATION OPTIONAL.

"This fact disposes of an accusation which is constantly being hurled at Leicester, namely, that we not only forcibly seize those who have been in contact with small-pox cases, and compulsorily detain them in quarantine, but that, whilst they are there, we compel them to submit to vaccination or re-vaccination.

"Let us examine as to how far this favourite theory of our opponents has any foundation in fact.

"Of fifty-five persons who voluntarily went into quarantine during the three years a 1886-88, only twelve were vaccinated or re-vaccinated whilst in quarantine. If to these twelve we add three others who underwent the operation immediately before entering the hospital, there remain forty persons, or, 72.7 per cent, of the above fifty-five, who were neither vaccinated nor re-vaccinated during the quarantine period.

"Applying the same percentage to the 128 persons quarantined before a 1886, we find a further number of thirty-five persons who voluntarily submitted to the operation, who, when added to the other fifteen, make only fifty for the extended period. Thus, out of a total number of 183 persons who have passed through the quarantine wards since the introduction of this system in 1877, no fewer than 133 were neither vaccinated nor re-vaccinated whilst in the hospital.

"During this period from fifteen to twenty persons absolutely refused to go into quarantine at all, and we had no power to compel them.

"Nearly all those who were quarantined belonged to the poorest classes, and to these a fortnight's holiday with free board and good, if not comparatively luxurious, living, would prove to be no mean attraction. Those who had good homes remained there in preference to going to the hospital. Thus no infringement whatever of personal liberty has taken place against those who have put themselves for a time under the 'Leicester Method' of treatment; unless indeed, the gastronomic allurements above referred to might have proved an inducement to some to voluntarily yield up their personal liberty for a time.

### SUCCESS OF THE LEICESTER METHOD

"After the subsidence of the great small-pox epidemic of 1871-73, which caused 360 small-pox deaths, when the town was thoroughly well vaccinated, up to the year 1889, which was the last year for which I could prepare statistics for the Royal Commission on Vaccination—that is, during the sixteen years from 1874 to 1889, inclusive—no fewer than thirty-three importations—mostly from well-vaccinated districts—and a large number of successive outbreaks of small-pox, were successfully stamped out. The town was thus saved from the further spread of the disease, with its possible ravages, by the 'Leicester Method' of treatment, *without recourse to vaccination*, and also without the slightest approach to arbitrariness on the part of the authorities, or any infringement of personal liberty.

### ECONOMY OF THE "LEICESTER METHOD."

"It is sometimes assumed that this 'Leicester Method' of isolation, quarantine, disinfection, and sanitation is so expensive as to be practically prohibitive.

"On the contrary, our 'Leicester Method' is extremely economical as well as effective. Besides, it is now well-known that, however thoroughly a community is vaccinated, so little reliance is placed upon this supposed safeguard, that on the outbreak of small-pox recourse is at once had to the very measures which have been so persistently decried when used to the salvation of unvaccinated Leicester.

"From 1874 to 1889 the cost of public and private vaccination at Leicester was not far short of £10,000 (being about £9,818 2s. 11d.). During the same period the cost of quarantine, including compensation for destruction of infected clothes, bedding, disinfectants, etc., was under the modest sum of £500 (or about £488 11s. 2d.). This represents a saving in favour of our Leicester method, as against vaccination, of over £9000 in the course of sixteen years. This £9000 was completely thrown away, to say nothing of the impaired vitality and spread of disease which vaccination necessarily implies. The £500 cost of quarantine, etc., did all the effectual work of saving the town from the ravages of small-pox threatened by the thirty-three importations, and absolutely averted the real danger implied by the occurrence of 116 small-pox cases in the midst of our crowded population.

#### JUSTIFIED BY RESULTS.

"Perhaps it will not now be out of place to briefly enumerate the substantial reasons which justify the Leicester people in the course they have pursued in respect to vaccination, and in adopting sanitation as their defence in the conflict with zymotic disease.

"Taking the groups of years dealt with by me before the Royal Commission on Vaccination, our average annual small-pox death-rate during 1853-57, with a moderate amount of vaccination, was only 91 per million population. But when vaccination had been continually and largely practised for a quarter of a century, and had reached over 90 per cent. to the annual births, and when, of course, its assumed protective power should have been greatest, our small-pox death-rate had progressively risen to an annual average of 773 per million population in 1868-72. Since that time vaccination has rapidly declined in the Borough, now being only about 2 per cent. Of the births, and small-pox mortality has disappeared from our midst.

#### SAVING OF LIFE IN LEICESTER.

"Our death-rate from the seven principal zymotic diseases, namely, small-pox, measles, scarlet fever, diphtheria, whooping-cough, common fevers (typhus, typhoid, and continued fever), and diarrhea, averaged annually for the five years 1868-72 no fewer than 6852 per million living, with over 90 per cent, of primary vaccinations to births. This is the highest vaccination rate and zymotic death-rate we have ever had recorded for Leicester. In 1888-89, when primary vaccinations were only about 5 per cent, of the births, the zymotic death-rate had fallen to only 2304 per million. On our Leicester population alone this would mean a saving of nearly 680 lives each year.

"Without going into unnecessary details, I may observe that the improvement in our general death-rate amongst children shows equally remarkable results. With over 90 per cent, of primary vaccinations to births in 1868-72, our death-rate from all causes, of children under five years of age, was 107; under ten years, was 61 ; and under fifteen years was 45 per 1000 living under each of those ages respectively. While in 1888-89, with only about 5 per cent. of primary vaccinations to births, each of these death-rates had fallen enormously. The death-rate under five years had declined to 63, that under ten years to 35, and that under fifteen years to 25 per 1000 living at each of the given ages respectively.

"This would represent a saving of about 880 lives under five years, of about 988 lives under ten years, and of about 1080 lives under fifteen years of age, inclusive and respectively for each year in Leicester.

"When it is remembered that the claim put forward for vaccination is its preservation of the younger lives, especially those under five years of age, the life-saving result of the 'Leicester method,' as shown above, is particularly striking. And it proves, unmistakably, that our watchword, 'Sanitation,' carries with it far more potency to deal with zymotic disease and with small-pox than the now discredited cry of 'Vaccination.'

#### THE GENERAL HEALTH OF LEICESTER.

"Once more our general death-rate, that is, our death-rate from *all causes* and at *all ages*, gives results no less important. In 1868-72, when vaccination had reached its climax in Leicester, our death-rate was about 27 per 1000 of the living population, being nearly 5 per 1000 above the general death-rate for all England and Wales. In 1888-89, when vaccination had virtually ceased to be practised in the town, notwithstanding our disadvantageous geological and geographical position, in a valley, with one of the most sluggish rivers in England and a clayey and impervious water-logged subsoil, our incomplete, and therefore inadequate, drainage, our death-rate had fallen so rapidly, with declining vaccination, that it had actually fallen below the general death-rate of England and Wales. The death-rate for England and Wales was 17.9 for 1888-89, and that for Leicester 17.5, or 5.1 gain in favour of Leicester in less than twenty years.

These figures as compared with times of high vaccination mean an additional saving of about 1400 lives each year in Leicester alone, above the normal rate of saving in England and Wales. If this extra gain could be similarly achieved by the cessation of vaccination in

the population of the whole country, other things being equal, it would mean an enormous saving of life beyond that which has actually been effected. The population of the United Kingdom for 1888-89 was estimated by the Registrar-General to be over 37,000,000. On this population an annual saving of about 189,000 lives would be effected. Even allowing an ample margin for possible errors in the calculations of the Registrar-General, these figures are sufficiently momentous to claim serious consideration.

"When it is borne in mind that England and Wales include all the rural districts, where the death-rate is very low, and that here our people are chiefly an artizan and manufacturing population whose circumstances are ever inimical to the health of the younger lives, Leicester's progress from being one of the unhealthiest of towns to its present proud position must be acknowledged to be marvellous.

"With such remarkable results before us, the Leicester people can calmly await the verdict of thoughtful minds, assured that their course of action in rejecting vaccination, and their reliance upon sanitation, will in the long run break down existing prejudice, and that it will ultimately receive general approval and adoption."

It need only be added that a full report of the Leicester system has been presented by Mr. Biggs before the Royal Commission on Vaccination, which will be found in the fourth report of the evidence.

### COW-POX AND VACCINAL SYPHILIS.

The following extracts from Dr. Creighton's "Natural History of Cowpox and Vaccinal Syphilis" (London, 1887) express the conclusions of his historical inquiry—namely, that cow-pox is a disease resembling small-pox only in name, but resembling the great pox both in name and in reality, and that so-called vaccinal syphilis is only cow-pox in its original form, as the milkers used to experience it:---

"The real affinity of cow-pox is not to the small-pox but to the great pox. The vaccinal roseola is not only very like the syphilitic roseola, but it means the same sort of thing. The vaccinal ulcer of every-day practice is, to all intents and purposes, a chancre. It is apt to be an indurated sore when excavated under the scab; when the scab does not adhere, it often shows an unmistakable tendency to phagedaena. There are doubtless many cases of it where constitutional symptoms are either in abeyance or too slight to attract notice. But in other instances, to judge from the groups of cases to which inquiry has been mostly directed, the degeneration of the vesicle to an indurated or phagedaenic sore (all in its day's work) has been followed by roseola, or by scaly and even pemphigoid eruptions, by iritis, by raised patches or sores on the tonsils and other parts of the mouth or throat, and by condylomata (mucous tubercles) elsewhere." (Page 155)

"The first duty of everyone is once for all to disabuse his mind of Jenner's invention of the name *variolae vaccinae* for cow - pox. The affection of the cow's udder was long recognised by common folk as a pox in the original and classical English sense of the word the name of it in Norfolk was pap pox No one had dreamt of discovering any resemblance in it to the pustules of the foreign contagious skin disease which came to be called the small pox until Jenner by a masterstroke of boldness and cunning, placed the Latin name *variolae vaccinae* first on his title page as if he were merely expressing in scientific form the universally accepted meaning of the colloquial name There was no candid or overt attempt in the body of his essay to justify that daring innovation; most of his readers from that time to this have hardly realised that it was an innovation at all, for the reason that Jenner adroitly left his title page to justify itself. His trumped-up name somehow passed without challenge, except for a grammatical objection on the part of Pearson, and a general criticism by Moseley; and although the want of likeness, still more in circumstances than in form, between the pustules of small-pox and even the modified kind of inoculated cow-pox vesicle, has been pointed out in elaborate detail by several writers, and ought, indeed, to be so obvious to any one as not to need pointing out at all, yet the Jennerian fable of *variolae vaccinae* continues to be the creed of the medical profession." (Page 157.)

"The rational theory of the Morbihan disaster (of vaccinal syphilis in 1866) is that ulceration, followed by induration and (or) phagedaena, is part of the natural history of cow pox infection that it is nearly always latent or kept in check; that in some circumstances it may be brought reverted to; that these circumstances, in the particular epidemic, date and number of the vesicles raised on the vaccinifer, and the draining of their lymph to the last drop, so as to vaccinate an enormous number; and lastly, that a continuous reproduction of lymph from that stock tended to confirm and even to intensify the reawakened powers of the cow-pox matter, as evidenced by the more decided 'syphilitic' character of the secondaries (mucous patches on the tonsils) in two cases of the last group." (Page 140.)

"The origin of vaccinal syphilis remains, as Bohn says, 'shrouded in mystery.' Readers who have followed my argument hitherto will not be surprised if now I claim the phenomena of so-called vaccinal 'syphilis' as in no respect of venereal origin, but as due to the inherent, although mostly dormant *natural history characters of cow-pox itself.*" (Page 124)

### THE AUTHOR'S PERSONAL STATEMENT OF THE RESULTS OF VACCINATION

During the past twenty-two years it has been my experience to travel in all parts of the United Kingdom, from Land's End to the Shetland Islands, and in almost every state in Europe, from the Mediterranean to the North Cape, in countries intervening between the Tagus in the west, and the Volga, Danube, and Bosphorus, in the east; also in Morocco, Algeria, Upper and Lower Egypt, Asia Minor, Upper and Lower Canada, Nova Scotia, and most of the states and territories of North America; also in Venezuela and British Guiana, South America, in the Windward and Leeward Islands, the French and Danish West Indies, in the archipelagoes of Greece and Hawaii, the Island of Ceylon, in Tasmania, New Zealand, the colonies of Australia, and in South Africa.

In nearly all these countries I have made it my business to inquire into the methods and results of vaccination, procuring information from public officials and from intelligent private individuals, and I have hardly ever inquired without hearing of injuries, fatalities, and sometimes wholesale disasters, to people in every position in life, and these have occurred from the use of every variety of vaccine virus in use. My informants have included governors, chief magistrates, consuls, professors of medicine and surgery in Continental universities, members of legislative assemblies, superintendents of leper asylums, editors of medical and hygienic journals, chiefs of military and general hospitals, presidents and medical officers of state and colonial health departments, superintendents of small-pox hospitals, clergymen of all denominations, missionaries, heads of educational establishments, and the best informed amongst old residents in the places visited.

In one country it was my privilege to be furnished with a general letter of introduction from a minister of State (since Prime Minister), which gave me access to all the official and medical authorities. Often the fatality described to me has befallen the infant of a poor mother, who with dread forebodings in her mind has tried to shield her offspring from the vaccinator's lancet as long as she could, and, like a fugitive slave, only surrendered to the minister of the law when overtaken in pursuit or her place of refuge discovered, or, like that of a distinguished Moslem (Suffey Bey Adem), my travelling companion in 1884 from Damascus to Beyrout, who had lost a daughter, a nephew, and a niece (vaccinated together about a year before our interview), all of whom died of the operation, after the most acute suffering. At other times I have seen stalwart soldiers and post office officials seriously injured, and in more than one instance crippled and ruined for life, by compulsory revaccination. I have personally investigated vaccine disasters at two military hospitals, one in Europe and the other in Africa, where, in one case, three, and in another case thirty soldiers ultimately died of the operation, and more than twice this number were seriously, and, in most cases, permanently injured. In Australasia I have personally inquired into a case of wholesale disaster— of acute septicemia, exhibited by terrible ulcerations following vaccination with calf lymph—to several hundred persons, and have seen the sad consequences in permanently ruined health I have received several thousand written statements from parents, who allege that their children have been seriously or fatally injured by vaccination I have proved beyond doubt, by personal inquiries in various countries where leprosy is increasing, that the increase is due to vaccination, and have furnished the testimonies of numerous medical authorities, and of official reports (all mention of which has been omitted from our leading medical journals), in support of these incriminating allegations. These facts have been detailed by me in the *Times*, *Nonconformist*, *Echo*, *Leeds Mercury*, *Manchester Guardian* and *Examiner* and *Times*, *Leicester Post*, *Newcastle Leader*, *Scottish Leader*, *Cardiff Daily News*, *Gloucester Citizen*, *Hospital Gazette*, *The Tocsin*, *Journal d' Hygiene* (Paris), *Birmingham Gazette*, *The Vaccination Inquirer*, and other influential and well-known English, American, and Colonial journals; and some of them were quoted by me, with chapter and verse, before the Royal Commission on Vaccination, now taking evidence in London, and will be found in the third official report of the proceedings.

I may also mention that numerous facts of a sinister character were contributed by many of the delegates representing the leading European States at the International Anti-Vaccination Congresses held in Paris, Cologne, Berne, and Charleroi, the reports of which have been published and presented to the chiefs of Governments, and of Public Health Departments in all countries. Not only have the facts been submitted to Continental Ministers of State, and to successive Presidents of the Local Government Board in England, but in December, 1890, I laid them before Mr. Langridge, Chief Secretary to the Government of Victoria, Australia, and before leading officials in other Colonies. It seems to me, therefore, that, in view of these experiences, and in the presence of such unimpeachable facts, the opposition which has arisen, and is growing daily in nearly all countries, is a commendable and patriotic struggle, which should be encouraged in every possible way. The laws (often cruelly enforced), which compel the parents of this and other countries to put the health and lives of their offspring into the hands of irresponsible State officials, with the alternative of severe and not seldom ignominious punishments, are a grave national blunder, and constitute a species of tyranny wholly indefensible; and it behoves every good citizen to endeavour, by every constitutional means, in the interests alike of justice, of individual and parental rights, and in defence of the public health, and of our helpless children, to get these laws completely and permanently extinguished.

[\[Vaccination\]](#)

## EXTRACTS

In an article entitled the "Dreadful Revival of Leprosy," in the *San Fernando Gazette*, Isle of Trinidad, 22nd February, 1890, the writer says :—" It may not be generally known that as far back as 1805 there were only three lepers in Trinidad; eight years later there were 73 out of a population of 32,000. Twelve years later, when an attempt was made to segregate them upon a small adjacent island, it was found that these afflicted persons had increased so rapidly that the scheme had to be abandoned. In 1878 there were 860 out of a population of 120,000, and later statistics show that the number of lepers was increasing four times as rapidly as the population." .....Dr. White, surgeon to the United States Navy, who visited the islands in 1882, in a report to his Government estimates the concealed cases at 3 per cent. of the population. p41.....According to the same writer on the subject, leprosy was discovered in the island in 1840, but Mr. D. Meyer, Agent for the Honolulu Board of Health, in the appendix to the report presented to the Legislative Assembly of Honolulu in 1886, says it was in 1859 or 1860 that he saw the first case of the disease. 1840 was the date of its introduction is the opinion p42....To account for the appalling spread of this terrible scourge of humanity within such a short period of time, the evidence points conclusively to one prominent cause--vaccination. There is no evidence to show that leprosy increased in Hawaii until after the introduction and dissemination of the vaccine virus.

In a communication to the Government of Hawaii, Dr. Kynsey remarks that leprosy is not confined to any community, but is more frequently observed among the Singhalese and Tamilins; seldom among the Eurasians, and more rarely among Europeans, and is chiefly found among the poor, ill-fed, ill-housed classes of the community. The Eurasians, I may observe, as well as the better-class Europeans, absolutely decline to be vaccinated from native lymph sources, to which the native population are obliged, reluctantly, to submit.p78

The day after my visit, 31 of the inmates were taken from the Suspect Hospital to Honolulu, and thence from the King's Wharf were forcibly deported to the living grave at Molokai, from whence no traveller returns. The scene was of the most painful description. These afflicted creatures were torn from their friends and relatives, husbands from wives, children from their parents, frantic with uncontrollable grief. Lovers were separated, their lips trembling with emotion, amidst unutterable wailings, wringing of hands in the agony of despair, and heart-breaking experiences which I shall never forget, and which the pen of a Balzac, or Victor Hugo, could only adequately describe. p44.....This goes on year after year, and will probably continue until medical men themselves turn their attention from experimental treatment to preventive measures, and themselves petition Governments to suppress the mistaken system of vaccination, which, it is admitted by the highest authorities, has been a prolific source of this terrible evil.

The *New Orleans Medical and Surgical Journal* 1880, published a communication from Dr. T. H. Bemiss, Lahaina, Hawaii, on the introduction and spread of leprosy in these islands. "Alarmed," says the writer, "by an invasion of small-pox in 1853, a general vaccination of the whole population was ordered, p118

A well-known medical practitioner at Honolulu gave me a photograph of Keanu, which distinctly shows the appearances peculiar to inoculated tubercular leprosy at the point of insertion in the arm, as well as in other parts of the body. And he considered the experiment an absolute demonstration of the inoculability of the disease. He also unhesitatingly expressed the opinion that the dissemination of leprosy in Hawaii was largely due to inoculation by the lancet of the public vaccinator, a most serious matter not only for Hawaii, but for all other countries where the repulsive

and destructive disease is endemic. Dr. Arthur Mouritz, Medical Superintendent of the Leper Settlement, Molokai, says it is doubtful whether one per cent, of the Hawaiians would resist intentional inoculation.p128.....Nor can they be considered remarkable, knowing how the disease had been propagated by the vaccination lancet. In one instance reported to Queen Liliuokokalani, an entire school in Hawaii was swept away, with the exception of a single survivor, by this means.

In all countries where leprosy is endemic, Europeans resolutely object to be vaccinated with lymph from native sources; and, notwithstanding the law, when imported lymph cannot be obtained they and their children remain unvaccinated. As a consequence, the population of Europeans attacked with leprosy is comparatively small and, indeed, of rare occurrence, except in the case of soldiers who are subject to the military regulation of revaccination. p129

## JAPAN

Leprosy has existed from time Immemorial in this country, and there is an old established leper settlement at the hot springs at Kusatsu, to the north of Tokio. Leprosy is reported to be increasing considerably, and according to a communication in the *Liverpool Mercury*, September 22nd, 1891, three leper hospital asylums have been established in Tokio during the past ten years. One of these hospitals, treated in 6 years 4249 cases, of which 3852 were those of Japanese patients. The *Pioneer* (Allahabad) of September 9th, 1891, reports that leprosy has spread in the Japanese villages to an alarming extent during the past few years. In one village near Toimachi, in the Gifu Ken province, every inhabitant is a leper. The Japanese Government is taking steps to look after their afflicted people.

*The Lancet* for May 25th, 1889, states that vaccination was made compulsory in the seventh year of Meiji (1874). It will be noted therefore that the rapid diffusion of leprosy took place shortly after the introduction of the compulsory law, and has kept pace with the progress of vaccination in this community. Dr. Tamanoto, of the Imperial Japanese Navy, says that when leprosy occurs in a family it is the custom to conceal it.

## COLOMBIA

"He remarks that in Antioquia (Colombia) not a single case of leprosy was known thirty years ago. Since then, the disease has spread in all directions, and the number in this town is now said to be over 800. I may add that, during the interval, vaccination has been introduced in all the Republics of South America with the usual sinister results."--[William Tebb](#) (1893 Book: LEPROSY AND VACCINATIONp48)

*In all the French colonies vaccination has been prosecuted with rigour, and has been followed by the increase of leprosy, just as in England the increase of infantile syphilis is due to arm-to-arm vaccination, as shown in the third report of the Royal Commission on Vaccination. The barbarous therapeutics, the tattooing and burning, have existed among the natives from time immemorial. Vaccination has been but recently introduced.*

"I should be sorry to see a leper cook, and I go further than that. In vaccinating, I think hardly a medical man would take vaccine lymph from the arm of a leper infant. I know it has been our practice for the last twenty years not to do so." p64

## SOUTH AFRICA

The Colonial legislature would have served the cause of the public health more effectually by directing their attention to municipal sanitation, and discouraging the practice of vaccination, which, according to the opinion of district surgeons, and the best informed authorities in South Africa, has been instrumental in largely spreading both syphilis and leprosy. It is hardly possible for a disinterested observer and inquirer to come to any other conclusion. p72.....Dr. Alexander Abercromby, author of "Thesis on Tubercular Leprosy," writing to me from Cape Town, April 20th, 1892, says the disease is now "spreading rapidly amongst the white population and better class of people."

He records the curious fact that, of about 120,000 souls in Mitylene, 15,000 are Mussulmans, and amongst these there is not a single leper to his knowledge. Dr. Zambaco omits to note the fact that Mussulmans in most countries have a rooted aversion to, and distrust in, vaccination, and escape the ordeal whenever they can.' p100

"A sad case occurred here a short time ago, which shows the danger that arises from the practice of vaccination in an island where leprosy is treated as of no account. A few months ago a little girl, the daughter of the Rev. Mr. —, a Wesleyan missionary, who came to the West Indies from England two or three years before, fell ill. On examination by the doctors it was found that the poor child had contracted leprosy. The only probable means of communication was by inoculation; and thus the parents, endeavouring to save their daughter from the very remote danger of small-pox, inoculated her with the horrible poison that will make her life a living death and herself a loathsome and repulsive, spectacle. p145

:—" Dr. Gavin Milroy, in his 'Report on Leprosy and Yaws in the West Indies' (House of Commons Command Papers, c. 729) states on pages 32, 33, 'In the frequent conversations which I subsequently had with many of these gentlemen (the medical officers in the West Indies) I learned the fact that the European and most of the higher creole families were always extremely anxious about the source of the lymph to be used in the vaccination of their children, from the dread of a leprous taint being thus acquired. None of my informants appeared to partake of this belief themselves, but all recognised the propriety of avoiding the use of lymph from children of families known or believed to be afflicted, especially as infants themselves rarely, if ever, exhibit any outward manifestations of the malady.' "Dr. Milroy says that the Vaccinator-General, Dr. Bakewell seemed to give countenance to the *popular belief* as to the transmissibility of leprosy by vaccination." p155

In Barbados we find a strong prejudice against vaccination, for Dr Browne writes:—"It has been a general rule not to vaccinate from the *apparently unhealthy*, or those of leprous taint, not so much from any opinion founded on fact of the possibility of conveying the disease, as *from respect to the general prejudice prevailing* p154

Dr. Freeland, Government Medical Officer of Antigua :—" In some of these islands, leprosy had no doubt spread from the want of precautions to separate the diseased from the healthy, from poverty, from overcrowding, or from decomposed food, *and from, I fear the system of arm-to-arm vaccination, which now so universally prevails.*" p154

"I could trace the first authenticated cases of leprosy back to about 1830, but the terrible spread all over the islands did not take place until very nearly thirty years later, at a time when an epidemic of small-pox had given rise to very general and very careless vaccinations throughout the group .....attach far more importance to an instance of an increase of leprosy soon after vaccination on a much smaller scale, and during a much more recent period than the above. I have it on good authority that a very remarkable new crop of leprosy cases sprang up at Lahaina, on the island of Maui, about a year after most careless vaccination had been practised there." p157

Amongst other incidents, the Princess refers to an interview with one, Kehikapau, in the presence of several persons. - Kehikapau called the Princess's attention to the circumstance of his having contracted the disease from vaccination. He also mentioned that, through the same agency, all his schoolmates had died of the disease, induced in this way. According to the Report of Surgeon J. R. Tryon, of the United States Navy, leprosy has spread "from year to year in Hawaii, and has increased to a marked degree since the indiscriminate and careless vaccination practised during the severe epidemic of small-pox in 1853." — *Medical and Surgical Memoirs, 1887, vol. 2, ft. 1252, by Dr. Joseph Jones, President of the State Board of Health, Louisiana.* "After referring to the relation of leprosy with syphilis in the Hawaiian Islands, the author says :—"Vaccination was also inquired into. Alarmed by an invasion of small-pox in 1853, a general vaccination of the whole population was ordered, and physicians being at that time very few on the islands, non-professionals aided in the work. p160

In the report of Dr. H. W. Blanc, Professor of Dermatology and the Chief Sanitary Inspector for the city of New Orleans, November 27, 1889, addressed to the President of the Board of Health for the State of Louisiana, where leprosy has been provokingly prevalent, it is stated that leprosy, syphilis, and tuberculosis are transmitted by vaccination. p179

And in a leading article, November 22, 1891, this same influential Indian journal, referring to leprosy vaccination, observes :—"There seems to be no possible room for doubting the reality of the very grave danger to which attention is drawn..... It is notorious that inoculation, that is, the direct introduction of the virus into the blood, is the chief, if - not the sole, means by which leprosy is communicated. p183

7.—" A Hindu male, Bhaleshur, aged ten years. Six months after vaccination, three and a half years ago, a white patch appeared over his left clavicle and on vaccine site. Half of the patch on clavicle ulcerated, and the ulcer, finch broad and 3/4 inch long, refused to yield to either arsenic or mercury, both of which he had taken for two years. The clavicle is denuded of flesh, and plainly visible to the naked eye, while the ulcer itself is of a leprosy type. p195

It is certainly amazing to find that probably the chief factor in the dissemination of leprosy in the present day—Jennerian vaccination— should have been practically set aside by the Indian Commissioners. Considering the amount of conclusive evidence now before us, many, like myself, must have felt appalled to find that this was so. p206

Dr. Roger S. Chew, of Calcutta, who was for six years in the Medical Department of Her Majesty's Army in British India, and has devoted fourteen years to the study of leprosy in India and other countries, furnishes, in his pamphlet on leprosy, a table giving the results of his investigations into

the causation of the 1034 cases which have come under his treatment. Of these, he says, insanitation is responsible for 105 cases, vaccination for 148, and 72 cases are due to other forms of inoculation. p190

Dr. Sutherland, of Patra, says :—" When serving with the native army, I found repeatedly that men who had in early life the character which I regard as a proof of the existence of a leprous taint, which I have already described, frequently had to be invalided in after years for leprosy, and subsequent observation and inquiry have led me to the conclusion that the opinion I have formed regarding what I have named a leprous taint was correct, and that this condition precedes the appearance of the disease in its aggravated form; and I think I am warranted in concluding, from the data given above, that this leprous taint exists in one out of every ten of the adult rural population of this district. In stating this, I am aware that my views will probably astonish persons who have not given the subject the attention I have."—*Royal College of Physicians Report, p. 188.* p218

Some (soldiers) have had their arms amputated and been discharged from the service, and others have sustained lifelong injuries. It must be noted that soldiers, when quartered in tropical countries where leprosy and syphilis prevail, are often obliged to submit to several re-vaccinations. In Capetown, a soldier belonging to the North Stafford Regiment, on duty near Government House, informed me (February 9th, 1892) that since he joined the army he had been vaccinated thirteen times. He was badly pitted with small-pox. 221

"Amongst 62 persons affected with this disease now in treatment in the Hospital dos Lazaros, in this city, 26 were vaccinated p232

It is clear by Dr. Abraham's mode of argument that leprous vaccination, as an important factor in the increase of the disease, is the last thing he will admit. All other possible sources of dissemination must be excluded before a theory so fatal to medical prestige can be tolerated. Any other of the numerous theories promulgated to account for new centres of leprous contamination the doctor is ready to consider, but vaccination (to use a classic phrase) "must be preserved from reproach," and the reputations of its distinguished advocates maintained. p239

The testimonies elicited by this inquiry as to the communicability of leprosy and syphilis seem to have had no practical effect on the College of Physicians. In a letter from that body on "Vaccination and Leprosy," dated London, August 17, 1871, and addressed to the Earl of Kimberley, it is stated that, while it is admitted that in a few instances syphilis has been transmitted by vaccination, "yet with reference to leprosy it must be observed that there is no evidence adduced beyond the merest presumption that this disease has ever been transmitted by vaccination." p245

The alarming increase of leprosy in Hawaii, which took place after the introduction of vaccination by the missionaries p245 end

Owing to the increase of leprosy in South Africa, inquiries by Select Committees of the Legislative Assembly were instituted in 1883 and 1889, but the interrogatories relate chiefly to the spread of the disease, and to its contagious or non - contagious character. The questions were submitted *viva voce*, and vaccination as a possible factor in the dissemination of leprosy is carefully ignored. p248

This correspondence, implicating vaccination, and pointing out a much-neglected source of danger, is absolutely ignored in the *Journal of the Leprosy Investigation Committee*; while communications from all parts of the world, in which the most diverse and conflicting theories are advanced by

persons whose opportunities for observation and inquiry have necessarily been of a very meagre description, have found insertion in its pages. p254

Moreover, leprosy is an insidious disease, and in its early stages cannot be diagnosed and detected save by experienced medical practitioners accustomed to treat this particular malady. Of the enumerators, not one in a hundred could detect a case of leprosy if he saw it, except when presented in its most aggravated and repulsive form. p259

Dr. John D. Hillis, F.R.C.S., formerly the Superintendent General of the Leper Asylum, Mahaica, in his work, entitled "Leprosy in British Guiana" (1881), says, p. 148:—"With regard to this country one important fact is the immunity from leprosy enjoyed by the aboriginal tribes of British Guiana." This immunity from the disease is attributed to the circumstance that no Indian will allow himself or his children to be vaccinated p265 .....In a communication to me, dated Rio de Janeiro, May 20th, 1892, Dr. Lima says :—" Now, about the Indian races, those who live away altogether, without any interference or intercourse with civilisation, their freedom from leprosy can be explained not only by the absence of the Jennerian vaccination, but also by the non-intercourse with people capable of being the conductors of the germs of the disease." p266

*Aliwal North* (Report, 1885 ).—"Vaccination has been extensively performed amongst both Europeans and natives." In the following year (Report, 1886), the same officer remarks that "small-pox has raged," of which he has treated about 450 cases, and adds that "syphilis has made vast strides." Two years later (Report, 1888), we read :—" Syphilis is still very prevalent. I have frequently drawn the earnest attention of the Government to the sad havoc this disease is dealing amongst the inhabitants."

While showing the utter failure of the extensive vaccination practised in 1884 to prevent the serious epidemic of small-pox which occurred the following year, these three official reports show how the most loathsome of diseases are disseminated by the vaccinator's lancet. The District Surgeon urges the Government to appoint a Commission of Inquiry. p271

Vaccination, he says, is carried out in the Colonies in a most careless and perfunctory manner. He has seen the operator pass his lancet from one arm to another without the smallest attempt to disinfect the instrument or discriminate between the diseased and the healthy, in districts where both leprosy and syphilis are endemic. From other reliable sources I am satisfied that this is the rule rather than the exception. Canon Baker believes that leprosy is chiefly communicated by means of inoculation, and that arm-to-arm vaccination is a prolific cause of the spread of this fearful plague in South Africa. ....While the vaccination laws for several years have not been enforced against the white population in Natal, all the natives are vaccinated either under persuasion or threats, the operation being carried out in the usual careless manner, with arm-to-arm virus taken from native children without previous examination, and not the slightest attempt is made to clean or disinfect the lancets after each operation. Hundreds of natives, as I am informed on unimpeachable authority, have died of blood-poisoning and of inoculated diseases. ....A member of the Legislative Council, Sir John Bisset, reported in Parliament that many were "blood poisoned, presenting a horrible sight, and dying masses of corruption." In January, 1891, leprosy disseminated in this way

was discovered in fifty kraals in one electoral division alone. The natives in their simplicity submit to vaccination, being told that it was the "Incosi" (King) that ordered it, and this was the way the white man secured himself against the plague of small-pox.p274.

"Was vaccinated in 1879; leprosy appeared in 1883." "Vaccinated three times, last vaccination during small-pox epidemic in 1878; leprosy attacked me in 1887." "Vaccinated twice, first when twenty years of age. Leprosy appeared between first and second vaccination." p280

The Leprosy Commissioners (all ardent supporters of the Jennerian practice) have searched far and wide for a rational theory that will account for the recent spread of leprosy in certain countries, but have utterly failed to discover one, and are almost driven to the conclusion that touches closely upon the facts collected in this volume. p309

It may also be added that, at the time when leprosy disappeared from this country, the practice of inoculation and vaccination was unknown, otherwise there is little doubt that leprosy would have been perpetuated in England by the empoisoned lancet, as it is now in the West Indies, British Guiana, India, New Caledonia, the United States of Colombia, Venezuela, and Hawaii.....Sir Erasmus Wilson, in his article on "Leprosy" in Quain's "Dictionary of Medicine," refers to the various drugs which are recommended and used by one physician or another—quinine, strychnine, phosphates, nitric acid, acetic and carbolic acid, iodine, arsenic, perchloride of mercury, asclepias gigantea, hydrocotyle asiatica, veronica quinquefolia, plumbago rosea, acid nitrate of mercury, potassa fusa, acrid irritating oil of the shell of the cashew nut, chloride of zinc, etc. p312 Ch 17

I may here observe that Dr. Koch's much vaunted tuberculin has been tried in almost every leprosy country on the globe, and found worse than useless. Much suffering has been caused by its use. The *Madras Times*, October 28, 1891, reports the visit of His Excellency Lord Wenlock to the leper hospital in this city, when his lordship had pointed out to him several patients upon whom Dr. Koch's lymph treatment had been tried. One of the patients complained that the experiment had subjected him to excruciating pain. .... It appeared to me, however," says Dr. Danielssen (page 210), "if I could infect the leprosy patients with constitutional syphilis, it might follow that the syphilitic poison might prove superior to that of leprosy, and that thus the system might be brought to that of a person labouring under constitutional syphilis, and might so become subject to the ordinary process of syphilisation." "This ingenious theory, however," remarks Dr. Hillis, "failed in practice, the leprosy remaining unchanged, whilst the syphilitic process went on."

.....Needless to say that mercury, iodine, quinia, arsenic, and a long list of other remedies, have utterly failed to eradicate the disease. p322--325 ch 17

*The Bombay Gazette*, 17th July, 1891, reports the opening of the New Leper Asylum at Sehore, Bhopal, towards which Her Highness the Begum of Bhopal has contributed munificently, and has promised an annual grant of 4500 Rs. for the expenses of maintenance. ....This benevolent lady, the Begum of Bhopal, Nawab Shahjeham, has been persuaded to extend vaccinations in her province, upon which she spends 5000 rupees yearly, employing 35 vaccinators, who performed 38,000 vaccinations last year, thus unwittingly spreading the fell disease at the point of the lancet, and helping to fill the wards of the hospital which her benevolence has established. p333 Ch 17

The remedies used were strychnine, phosphorus, arsenic, mercury, potassium iodide, chaulmoogra oil, resorcin and ichthyolin, gurjun oil, neem oil, and strychnia, and sweet oil with chaulmoogra oil and gurjun oil internally p335 ch 17

"The first and the most grave result which follows from this interpretation is, then, that vaccination, besides the advantages which it offers us in our contest with variola, presents the danger of opening the way for the invasion of tubercle.

"If we now turn back and examine the events of the last century or so, we can show a constant increase of tuberculosis, a fact never hitherto satisfactorily explained. There was a time when this malady existed only as an exceptional thing; now, actually, in spite of the incessant progress in public and private hygiene, in spite of all the material improvements that have been made, it tends more and more to rise to the rank of a pestilence....."Side by side with this growing extension of tuberculosis, we see developing, *pan passu*, and in the same period of time, that is to say, since the beginning of the century, the practice of vaccination. We may ask ourselves whether in this double simultaneous evolution there is not a hidden oneness? If tuberculosis, in spite of all sanitary precautions, has multiplied its attacks during the last hundred years, it is, we submit, because vaccination has come to create for it a propitious soil. ....In all European armies, vaccination is the order of the day. On their arrival with their corps, the young soldiers are forthwith carefully revaccinated. Now, the military statistics of all countries show an enormous proportion of various forms of tuberculosis among soldiers, especially during the first and second year after their enlistment. ....Whence then can come these attacks of tuberculosis, so sudden, so numerous, upon subjects that, but a few months before, the council of revision rightly declared to be fit for service. Tuberculosis of the lungs, of the organs, of the joints, of the bones, etc., all these fatal evils show themselves in the garrisons of all countries with a frequency before which one might well despair. We believe that we must simply seek the reason for these facts in the revaccination which awaits the recruits upon their arrival at their corps, p358 appendix

Those familiar with the social condition of India are aware that every effort has been made to remove this dread of the operation which exists more or less all over the country. New lancets and scarifiers have been introduced, and various viruses have been experimented with, one after another—cow, calf, sheep, goat, lamb, buffalo, and donkey lymph — the last, the discovery of Surgeon O'Hara, having been specially urged upon the attention of District Boards and municipalities by the Government. Surgeon-Major W. G. King writes to the Indian *Medical Record* that he is using *vesicle pulp* or "lanoline vaccine," which is applied by stretching the scarifications and "alternately dabbing and rubbing in the paste." Buffaloes, he observes, appear likely to yield very much more vesicle pulp than calves, but they exhale an "abominable odour," which renders the work of collecting the pulp most repulsive. The Commissioners state that only the lowest and most ignorant classes readily submit. The law enforcing vaccination in British India, which are unparalleled for their severity, were passed without the consent and against the wishes of the people, whose objection to vaccination arises from a knowledge often gained by sad and bitter experience p363 app

"The number of cases in which small-pox had followed vaccination is 56."The Board think it proper to remark under this head that, in the enumeration of cases in which small-pox has succeeded vaccination, they have included none but those in which the subject was vaccinated by the surgeon reporting the facts.

"The bad consequences which have arisen from vaccination are— 66 cases of eruption of the skin,

24 of inflammation of the arm, whereof

3 proved fatal

"Although numerous, they are nothing to what might be produced. It will be thought incumbent on the vaccinators to come forward and dispute the numerous facts decisive against vaccination here stated on unimpeachable authorities, or make the *amende honorable* by a manly recantation. But experience forbids us to expect any such fair and magnanimous proceeding, and we may be assured that under no circumstances will they abandon so lucrative a practice until the practice abandons them." 366 app

This increase of small-pox, co-incident with the rapid extension of vaccination, shows that it is a disease governed by causes entirely outside and independent of vaccination. And this opinion is confirmed by the highest authorities. Thus, in a memorandum of the "Army Sanitary Commission," published in the *Bombay Government Gazette*, Dec. 17th, 1885, the Commissioners say:

"The first disease in the list—namely, small-pox, which yielded an increase of 1369 deaths, or nearly sixteen-fold that of the previous year's death-rate—had assumed an epidemic state in nearly all the districts of the city; yet Bombay has an effective vaccination service, with the use of calf-lymph." . In vol. xviii. of "Sanitary Measures in India," page 203, in reference to the smallpox epidemic of 1884, it is stated :—" We are thus brought face to face with the fact that, notwithstanding the existence of an active vaccination service, small-pox swept over the provinces just as if there had been none." In the same volume, referring to Madras, the Commissioners -say:—" No less than seventy-four per cent. of the small-pox deaths in Madras town occurred among children under three years of age." In Punjab, "the Compulsory Act was in force in the Amritsar municipality, but here the deaths from small-pox were far more numerous than in any other town of the province.arm to arm

According to Sir Edwin Chadwick, Dr. B. W. Richardson, and all other sanitarians of repute, small-pox is a disease due to insanitary conditions, impure water, bad drainage, dirty living,. and particularly to overcrowding; and, instead of removing these conditions, the Governments of India during the past thirty years have been spending their, energies, and large sums of money, in extending vaccination. Now that the arm-to-arm system has been thoroughly discredited and shown to be futile as a preventive of small-pox and fertile as a disseminator of eczema, syphilis, and leprosy, the cry of the official vaccinator is not the sensible one of "do away with vaccination," but, let us change front and resort to the calf, sheep, buffalo, donkey, or to lanoline lymph—or anything,. rather than confess that the Jennerian system is a humiliating failure. It is well known that animal lymph has been a fruitful cause of the spread of disease in Europe. It is well known that animal lymph has been a fruitful cause of the spread of disease in Europe. On June 17, 1885, an official re-vaccination with "re-generated" lymph at the Island of Rügen, North Germany, caused an infection of a loathsome eruptive skin disease (*Impetigo Contagiosa*) of 320 children and adults

The perennial cry of public vaccinators is that the lymph is "unsatisfactory." Animal lymph is often attended with excessive inflammation, and the practitioner is obliged to dilute it with glycerine, lanoline, and other substances, and its use is much more expensive. Moreover, a good deal of the so-called animal lymph in vogue is really only arm-to-arm vaccine, inoculated into calves, buffaloes, sheep, and donkeys, and partakes of the diseases both of man and of animals. Of the many cases of ulcerative and of fatal vaccination which have come under my notice during the past

twenty years not a few have been due to the use of carefully-selected animal vaccine. Dr. Robert Cory, Medical Director of the Government Calf Lymph Establishment, London, testified before the Royal Commission, November 17, 1889 (Q. 4390), that out of 32,000 cases there were 260 returned with sore arms, and 38 with eruptions. Then there were 16 cases of erysipelas, and nine of axillary abscesses, and (Q. 4392) eight deaths were reported to the Station of children who had been vaccinated with animal lymph. The same witness testified (Q. 4369) that lymph taken from the cow leads to greater inflammation, and has a greater tendency to produce ulceration, than lymph which has been humanised.appendix

#### LEICESTER:

"Taking the groups of years dealt with by me before the Royal Commission on Vaccination, our average annual small-pox death-rate during 1853-57, with a moderate amount of vaccination, was only 91 per million population. But when vaccination had been continually and largely practised for a quarter of a century, and had reached over 90 per cent. to the annual births, and when, of course, its assumed protective power should have been greatest,. our small-pox death-rate had progressively risen to an annual average of 773 per million population in 1868-72. Since that time vaccination has rapidly declined in the Borough, now being only about 2 per cent. Of the births, and small-pox mortality has disappeared from our midst. ....

With over 90 per cent, of primary vaccinations to births in 1868-72, our death-rate from all causes, of children under five years of age, was 107; under ten years, was 61 ; and under fifteen years was 45 per 1000 living under each of those ages respectively. While in 1888-89, with only about 5 per cent. of primary vaccinations to births, each of these death-rates had fallen enormously. The death-rate under five years had declined to 63, that under ten years to 35, and that under fifteen years to 25 per 1000 living at each of the given ages respectively.

"This would represent a saving of about 880 lives under five years, of about 988 lives under ten years, and of about 1080 lives under fifteen years of age, inclusive and respectively for each year in Leicester.appendix

These figures as compared with times of high vaccination mean an additional saving of about 1400 lives each year in Leicester alone, above the normal rate of saving in England and Wales. If this extra gain could be similarly achieved by the cessation of vaccination in the population of the whole country, other things being equal, it would mean an enormous saving of life .....of about 189,000 lives would be effected. Even allowing an ample margin for possible errors in the calculations of the Registrar-General, these figures are sufficiently momentous to claim serious consideration.

## PREFACE

THE remarkable spread of leprosy during the past thirty years has excited much public attention. Having for many years been interested in the public health, I have been prompted to investigate the causation of this increase. My attention was first called to the growing ravages of leprosy during a visit to Asia Minor in the year 1884, and to one source of infection the extent of which is as yet imperfectly realised (I mean vaccination), by the perusal of the evidence brought before the Select Parliamentary Committee on Vaccination of 1871 by Dr. R. Hall Bakewell. In 1888-89, during a visit to the Virgin, Leeward, and Windward Islands, British Guiana, and Venezuela, I took the opportunity of investigating this serious allegation. In the course of my inquiries I obtained particulars of a number of cases of leprosy due to vaccination. These were furnished by highly respectable colonists, but were often coupled with the request that no names were to be published, either of the suffering families or of those who communicated the details. This reluctance, which is entitled to every consideration was due to the fear of exposing relatives, and damaging their social standing in the community where they reside. Although the danger of communicating leprosy by vaccination has been admitted in official and other reports, I have on many occasions found it extremely difficult to get at the facts, copies of important documents having been repeatedly refused by officials both at home and abroad, and notably in the French Colonial possessions.

It is perhaps too much to expect that those who regard Jenner as one of the greatest of human benefactors will display much energy in bringing to light such cases as I have referred to.

Some of the obstacles in the way of independent investigation of this subject are alluded to in a communication, read before the Royal Vaccination Commission, from Dr. Charles E. Taylor, Secretary to the Legislative Council, Island of St. Thomas, Danish West Indies. Dr. Taylor states that during his 20 years residence at St. Thomas, D.W.I., he has known many cases of the communication of leprosy by means of the vaccinator's lancet, but he adds that the sufferers or their families invariably decline to have the fact disclosed. One resident physician in Honolulu, who told me how the disease had been disseminated by means of vaccination in Hawaii, strongly deprecated making the details known, as he would not answer for the consequences. Despite these difficulties, however, a good many cases are recorded by medical men of high standing and wide experience, and some of them are here presented to the reader. Cases have come under my cognizance in which the reports of district surgeons, showing the spread of terrible diseases by means of vaccination, have been officially suppressed.

In June, 1890, I appeared as a witness before the Royal Commission on Vaccination, and gave evidence as to the results of my inquiries up to that date. This evidence will be found in the third report of the proceedings, pages 154-161.

At that time my investigations had been mainly limited to the West Indies, British Guiana, and Venezuela. Since then I have extended my - personal investigations to Norway, California, the Sandwich Islands, Ceylon, Egypt, New Zealand, Cape Colony and Natal in South Africa, and most of the Colonies in Australia, and have put myself in communication with superintendents of leper asylums and leading dermatologists in all other countries where leprosy is endemic. The results of these inquiries, with other collateral evidence bearing on the subject, are briefly set forth in this volume. While the *pros* and *cons* of the theories of heredity, fish-eating, malaria, and contagion, have been frequently dealt with by wellknown writers, this is, I believe, the first attempt made to

bring together a body of evidence regarding the inoculability of leprosy and the evidence of its communicability by means of vaccination.

To physicians, superintendents of leper hospitals librarians of public institutions in Norway, Hawaii, the West Indies, the United States, and other countries, I am indebted for valuable official and other documents bearing on the subject, which I have freely quoted.

The *British Medical Journal* of July 3, 1886, p. 24, in a leading article on the investigations into the causation of leprosy, undertaken by Dr. Edward Arning in Hawaii at the instance of the Hawaiian Government, observes that this inquiry "is likely to have results of great importance both to science and to practical medicine." This prophecy is indeed likely to be fulfilled, but hardly in the manner anticipated by the writer. Amongst the most important of Dr. Arning's discoveries is that vaccination has been instrumental in widely disseminating leprosy amongst the helpless and confiding population of that beautiful Archipelago.

Leprosy is one of the most loathsome as it is one of the most tissue-destructive diseases known, and when going through the wards of leper hospitals I have frequently noticed with pain the poor afflicted creatures bending their heads and covering their hands to conceal from strangers the sight of their distorted features and mutilated limbs. It is hardly possible to conceive, much less describe, the depth of human misery caused by the spread of this hideous and destructive disease; but some idea of its nature may be gathered from the following description of leprosy, which may well excite the sympathy of the philanthropist. It will be found in a recent work on leprosy by Dr. Thin, pp. 99-100. It is translated from Leloir, an eminent French authority on leprosy, and refers to the tubercular variety of the disease. "If the patient," he remarks, "does not die of some internal disorder or special complication, the unhappy leper becomes a terrible object to look on. The deformed leonine face is covered with tubercles, ulcers, cicatrices, and crusts. His sunken, disfigured nose is reduced to a stump. His respiration is wheezing and difficult; a sanious, stinking fluid, which thickens into crusts, pours from his nostrils. The nasal mucous membrane is completely covered with ulcerations. A part of the cartilaginous and bony framework is carious. The mouth, throat, and larynx are mutilated, deformed, and covered, with ulcerated tubercles. The patient breathes with the greatest difficulty. He is threatened with frequent fits of suffocation, which interrupt his sleep. He has lost his voice, his eyes are destroyed, and not only his sight but his sense of smell and taste have completely gone. Of the five senses hearing alone is usually preserved. In consequence of the great alterations in the skin of the limbs, which are covered with ulcerated tubercles, crusts, and cicatrices, the pachydermic state of skin which gives the limbs the appearance of elephantiasis, and of the lesions of the peripheral nerves which are present at this time, and by which occasionally the symptoms of nerve leprosy are combined with those of tubercular leprosy, the sense of touch is abolished. The patient suffers excruciating pains in the limbs, and even in the face, whilst the ravages of the disease in his legs render walking difficult and even impossible. From the hypertrophied inguinal and cervical glands pus flows abundantly from fistulous openings. In certain cases the abdomen is increased in size on account of the liver, spleen, and mesenteric glands being involved. With these visceral lesions the appetite is irregular or lost. There are pains in the stomach, diarrhoea, bronchial pulmonary lesions, intermittent febrile attacks, and a hectic state. The peculiar smell, recalling that of the dissecting room, mixed with the odour of goose's feathers, or of a fresh corpse, is indicated, but badly described, by the authors of the Middle Ages, who compared it to that of a male goat."

Dr. John D. Hillis, formerly of British Guiana, says of the anaesthetic variety, that it is "known also as *leuke* of the Greeks, *baras* of the Arabians, joint-evil of the West Indies, *sunbahirii* of the East Indies, and dry leprosy, in contradistinction to the other form also known as humid leprosy; is characterised by a diseased condition of the nerves, and a peculiar eruption, the primary characteristic of which is loss of sensation, or anaesthesia; hence its name. After a time ulcerations form, a sort of dry gangrene of the limbs sets in, and joints drop off, and finally there is more or less paralysis. It would take a large volume to describe the signs or symptoms of leprosy, but the preceding account is -sufficient to show what an alarming affection we have to deal with."

In Mrs. Hayes' little book, "My Leper Friends," is a chapter on leprosy, by Surgeon-Major G. G. Maclaren, M.D., in which the writer observes, pp. 123-4: Acting on the strength of my own convictions as to the transmissibility and communicability of leprosy, I established the Dehra Dun Asylum on the principle already noted (the presence of a *bacillus* in the blood), and it has answered so far admirably; all its inmates living as happily as they can under their unfortunate conditions, and ending their existence contentedly! I have had, of course, ample opportunity of studying the nature of the disease, and its effects on the different organs of the body, and in many examinations I have made, *post-mortem*, I can testify that not a single organ in the whole body is exempt from the attacks and inroads of this dire and, loathsome malady. It invades the brain, spinal nerves, the eyes, tongue, and throat, the lungs, the liver, and other digestive organs. In addition, as is generally known, it maims and deforms the external parts of the body in a manner too revolting to describe. It is painful to witness the amount of deplorable suffering some of these creatures endure. True it is that many feel but little pain—one of the forms of the disease producing *anaesthesia*, or insensibility of the parts affected; but this is the case in a few only. The majority suffer in variously painful degrees, according to the organ or part implicated, and it is a mistake to think that their sufferings are little. Many, in the earlier forms of the ailment, lose their sense of sight, smell, and taste, and when their lungs or throat is attacked (a common form), their agonies are dreadfully distressing and painful to behold. The inroads of the disease are slow and gradual, which makes it all the more trying, and the painful and lingering death to which most are doomed is a condition that one dreads to dwell on." It was the terrible nature of the disease that fostered the growth of the *sumajh* in India, the leper being accompanied to the grave with tom toms, where, in a sitting posture, he was buried alive.

In the West Indies, in British Guiana, in the Sandwich Islands, and in South Africa, when cases of invaccinated diseases were related to me, I was urged by the sufferers and by their friends to make known their grievances to English people and to the Imperial Parliament, and, if possible, to bring public opinion to bear upon a mistaken and mischievous system which, without doing the least good, has been the cause of such terrible and far-reaching consequences. Acting upon these entreaties, and upon others contained in communications from various leprosy countries, I have presented to the public through the press, and to members of Parliament, such facts on this subject as came before my notice up to July, 1890. I now offer to the public further evidence and testimonies, on behalf especially of the afflicted population of our Crown Colonies and Dependencies, whose grievances have been so long and so flagrantly disregarded. Every attempt to introduce compulsory vaccination in the populous Island of Barbados, British West Indies, has been thwarted, owing to the widespread belief that leprosy and syphilis are communicated by the vaccine virus. In St. Thomas, Danish West Indies, and in Georgetown and other parts of British Guiana, it has, for similar reasons, been found practically impossible to enforce the vaccination law, and, in

spite of severe compulsory enactments, entire districts remain unvaccinated by reason of this special danger; while, in the Sandwich Islands, a bill for the repeal of the vaccination law was introduced in the Legislative Assembly, July, 1890, by J. Kalua Kahookano, representative from North Kohala, Island of Hawaii.

Under the head of "The Legislature," the *Daily Commercial Advertiser*, Honolulu, November 9, 1892, publishes the recent report of the Sanitary Committee, as follows :—

"Hon. J. S. WALKER, President of the Legislature.

"SIR,—The Sanitary Committee report consideration of Bills Nos. 9,13 and 25, and Petitions Nos. 33, 152, and 206, relative to Vaccination.

"The object of all these bills and petitions is to repeal the law compelling parents and guardians to cause the children in their charge to be vaccinated.

"The complaints against the present system were very pronounced, and the repeal of the law making vaccination compulsory was strongly urged."

The committee met the Board of Health and conferred with them upon the subject, and under date of June 25th, addressed a communication to the Board, in which is the following :—

"Hawaiian Legislature, June 25, 1892.

"DAVID DAYTON, Esq., President, Board of Health. "SIR,—An effort is being made in the Legislature to repeal or amend the law relating to vaccination; the object being to leave vaccination optional with parents and individuals.

" The chief objection raised against the present compulsory system appears to be the belief of some that leprosy, and other diseases, have been propagated by means of vaccination.

"It is said that some of the vaccinating officers are careless in the use of vaccinating instruments, operating first upon one person and then another without cleansing the instrument; and that there is distrust of the quality of virus used, in some cases serious inflammation and illness following the inoculation.

"The petitions and proposed measures relating to the subject have been referred to the Sanitary Committee, and the committee desire the views of the Board upon the subject.....

"Any suggestions the Board may be pleased to make will be appreciated.

Respectfully submitted,

WILLIAM O. SMITH, *Chairman Sanitary Committee*

The official report of the Honolulu Board of Health for 1892 shows that resistance to vaccination is spreading in many districts in these islands, and at the same time there is observed a sensible diminution in the number of lepers. In New Zealand, prosecutions for non-vaccination have for some time been abandoned. In the South African Colonies of Natal and Cape Colony the vaccination laws are enforced only during outbreaks of small-pox, and vaccination is everywhere regarded with mistrust. In the Transvaal and Orange Free State vaccination is entirely optional. In England there are about one hundred towns and poor law unions where the vaccination laws are a dead letter. In several of the Swiss cantons compulsory vaccination has been tried and abolished, and in no canton is there any penalty for non-vaccination. An attempt was made to pass a federal vaccination law in 1881, and was defeated in a Referendum by 253,968 votes against 67,820. In the Australasian Colony of Tasmania the compulsory law has been suspended by reason of its

deleterious effects on the health of the people. In the Colonies of New South Wales, and Queensland, Australia, the people have successfully resisted every attempt to impose the hotly-disputed Jennerian dogma upon them. Dr. Manning, the medical adviser to the Government of New South Wales, reports that in 1891 vaccination was only partially carried out in thirteen Country districts. In ninety-two districts, no vaccinations were reported. The extent of the mischief already experienced will never be known, but sufficient is already admitted to arrest the attention of all who are seriously concerned for the public health and for the well-being of the community. Is it not, therefore, the duty of every medical practitioner to personally inquire into the matter for himself; and no longer to shelter himself behind the orthodox belief in the benign character of vaccination? For nearly a century Jenner's prescription has been tried and found wanting. Each of the reports of the Royal Commission on Vaccination already published establishes the failure, mischievous effects, and injustice of the compulsory infliction of an artificial disease upon healthy people, while some of the most distinguished names in the profession have testified to its being the certain vehicle for the dissemination of leprosy. These names include Sir Erasmus Wilson (sometimes called the father of dermatologists), Dr. John D. Hillis, Dr. Liveing, Sir Ranald Martin, Professor W. T. Gairdner, Dr. Tilbury Fox, Dr. Gavin Milroy; Dr. R. Hall Bakewell, formerly Physician to the Leper Asylum, Trinidad; Dr. A. S. Black, of Trinidad; Dr. Edward Arning; Dr. Walter M. Gibson, late President of the Honolulu Board of Health; Professor H. G. Piffard, New York; Dr. A. M. Brown, London; Dr. Frances Hoggan, Dr. Blanc, Professor of Dermatology, University of New Orleans; Dr. Bechtinger, of Rio; Professor Montgomery, of California; Dr. Sidney Bourne Swift, late Medical Director, Leper Settlement, Molokai, Hawaii; Dr. P. Hellat, St. Petersburg; Professeur Henri Leloir, Lille; Dr. Mouritz; Surgeon Brunt; Dr. John Freeland, Government Medical Officer, Antigua; Dr. S. P. Impey, Superintendent, Leper Asylum, Robben Island, Cape Colony; and many others.

On the subject of leprosy there are no higher authorities; therefore, considering that the evidence adduced in the following pages is founded upon an accumulation of facts and the testimony of eminent dermatologists, it is hardly open to doubt the intimate relation between the spread of leprosy and the increase of vaccination. May I not, then, urge that a concerted effort—by petitioning Parliaments, Legislative Councils, and other governing bodies, and by the powerful aid of the press—should be made to abolish the compulsory infliction of a disease fraught with such disastrous and far-reaching consequences to the human family? Until vaccination is disestablished and discontinued, and sanitary amelioration substituted for the inoculative experiments, drastic drug medication, and nerve stretching, practised in various leper asylums, I am convinced that this dreaded disease will march onward with accelerated destructive force, and its ultimate extirpation will be rendered well nigh impossible.

No one can be more conscious of the shortcomings of this treatise than the author; but if the painful facts herein disclosed should induce some able and independent pathologist to continue these researches in the interest of the public and regardless of consequences, the author will feel that his efforts have not been altogether fruitless.

REDE HALL, BURSTOW, BY HORLEY, SURREY, *January 2<sup>nd</sup>, 1893*

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## CHAPTER 1: THE INCREASE IN LEPROSY

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THE awakening of public interest in the leprosy question is due to the accumulation of evidence from nearly all parts of the world, showing that this fearful scourge, for reasons which are now being investigated, has greatly increased, and is still increasing.

At a dinner given at the Hotel Metropole, January, 1890, in aid of the National Leprosy Fund, at which the Prince of Wales presided, Sir Andrew Clark said that, "after making due allowances for the scare and disturbance which had been occasioned, there remained the obvious and indisputable fact that leprosy was a real question. He could produce overwhelming testimony of this fact, and the evidence was conclusive not only that leprosy did exist in larger measure in recent years, but that new germ centres were springing up in various quarters, and the old centres were widening. Before England and the civilised world there was looming a condition of affairs which might by growth threaten civilisation"

Sir Morell Mackenzie, in an article entitled "The Dreadful Revival of Leprosy," which appeared in the *Nineteenth Century* for December, 1889, after referring to, its diffusion in Europe and America, says :—" In almost every other quarter of the globe leprosy is rife at present, and wherever it exists it seems to be slowly but surely extending its ravages. It is impossible to estimate even approximately the total number of lepers now dying by inches throughout the world, but it is certain they must be counted by millions. It cannot be comforting to the pride of England — 'the august Mother of Nations' —to reflect that a very large portion of these wretched sufferers is to be found amongst her own subjects."

Dr. A. M. Brown, in his comments on "Leprosy in its Contagio-Syphilitic and Vaccinal Aspects," says, page 6 :—"From all that we can learn, leprosy is now alarmingly on the increase, particularly in some of our Colonial dependencies, and the fact has been causing much anxiety in later years."

The actual number of lepers throughout the world is far more than is stated in official statistics; for all authorities agree that there are cases, in some countries very numerous, which have never been reported, "the patient and his friends" (in the words of Dr. Charles W. Allen) "knowing with what horror the public regards the disease, naturally shunning publicity, and the physician humanely guarding his secret." From personal inquiries in many countries, particularly in Ceylon, Hawaii, South Africa, British Guiana, Venezuela, and the West Indies, I can fully confirm Dr. Allen's conclusion. In Hawaii leper-hunting is a dangerous business, as many of these unfortunate beings consider death preferable to the best managed lazaretto, where, besides loss of freedom and the companionship of fond relatives, they are obliged to dwell amidst the most repulsive and saddening surroundings. While on a visit to the General Hospital, Honolulu, my attention was called to a police officer, Kealioha Mani, who was lying severely, and probably fatally, wounded by a leper whom he was endeavouring to arrest. A short time ago a party of lepers armed themselves with five new Winchester rifles, and fired upon the police sent in pursuit. The love of freedom burns as brightly in these afflicted people as in their more fortunate countrymen.

In an article on leprosy in Hawaii, in the *Occidental Medical Times*, April, 1889, Dr. F. B. Sutliff, Sacramento, California, who spent four years as Government Physician at Wailuku, on the island of Maui, observes:—"The work of segregation has at no time been faithfully carried out. A large number of milder cases are not disturbed at all, and a good many others have been permitted to go free because of some influence, political or otherwise, that they may have possessed. . . . It is seldom that a leper desires to go away from his home to an hospital, and the study of his life after he knows himself to be a leper is how to live with his friends and keep out of the way of those whose business it is to know all about him. I never before saw a place where the people can hide so easily. . . . They are quick to take alarm, and a look from the Government Physician, an inquiry concerning their name, is enough to cause them to change their residence at once." Dr. Sutliff says he has every reason to believe that there are at least four lepers not reported for every one that is.\*

\*Dr. L. Roussel, Government Medical Officer, in his report dated 30th October, 1888, Port Mathurin, Mauritius, says, "It is seldom lepers come to the Dispensary for treatment. Most of them hide themselves in the mountains, and do not like to move about in public."

Dr. H. S. Orme, President of the State Board of Health, California, in his instructive treatise on Leprosy, says, "I have no doubt that the practice of *secreting lepers is general throughout the world*, wherever the disease prevails; and it is not difficult, in an early stage, for lepers to evade the authorities and go about their usual business."

The largest number of lepers segregated in any one year was in 1873, when the numbers received at the leper settlement, Molokai, according to the official reports, was 487, for several years previous to which arm-to-arm vaccination has been prosecuted with great and unparalleled energy. The destructive results of this misguided policy are everywhere manifest for those who are not too prejudiced to see what is plainly before them.

#### RUSSIA.

Leprosy is reported to be increasing in Russia with startling rapidity. A St. Petersburg correspondent of the *London Standard*, January 18, 1891, says:—"The Town Council of Riga, aroused by the rapid spread of leprosy in the neighbourhood, has voted a sum of nearly six thousand roubles for the establishment of an asylum and hospital, which it is hoped will be ready to be opened in August. In 1887, Dr. Bergmann discovered thirty-seven cases in the town, and twenty-one in the environs. There are now over one hundred. In and around Dorpat, where the disease has attained alarming proportions, the late Professor Von Wahl strongly urged the necessity of leper colonies, such a system of compulsory isolation being in conformity with the provisions of the existing, but unenforced, law of Livonia."

As to the prevalence of "prokaza," or leprosy, in Russia, Dr. O. Petersen and Professor Munch have collected eight hundred and seventeen cases, which, however, must be considered far below the actual number. The former observer has noted forty-three cases from the records of the St. Petersburg hospitals in the last sixteen years.

Archdeacon Wright in his instructive work, "Leprosy an Imperial Danger," says that leprosy has increased so much of late in the Russian provinces of the Baltic that last year a "Society for Combating Leprosy" was founded at Dorpat, under the presidency of Professor Wahl, but otherwise composed entirely of lay members. Dr. Hellat, of Dorpat, travelled through the district, and showed that the reports made to the Government were very imperfect. In Livonia, where official statistics reported 108 cases, he found 276. In Courland he discovered 76 cases, and in Esthonia, 26. From other sources I hear that in the neighbourhood of Dorpat the lepers number as many as 17 per 100, and another report says that in certain districts 10 per cent of the population are affected. From more recent reports (May, 1892) I learn that the Town Council of Riga, alarmed by the ever-increasing proportions attained by the fearful malady, have just erected a leper hospital, at a cost of 60,000 roubles, which already contains 98 authenticated cases. The British Consul at Riga, in his report for 1891, says:—"It is difficult to discover the victims of this dire malady, as their relations and friends hide them from the sanitary inspectors."

In a communication from Dr. P. Hellat to Dr. P. S. Abraham on "Leprosy in the Baltic Provinces," dated 10th October, 1891, St. Petersburg, Mochovaia, 44, the writer says :—"My observations, continued for three consecutive years, gave the astonishing result that leprosy was very widely spread in the Baltic provinces; certainly considerably more than we formerly thought ourselves justified in believing. The number of lepers in certain districts is as much as 2 per cent, of the population. Furthermore, the investigation showed that the disease was steadily on the increase."—*Journal of the Leprosy Investigation Committee, No. 4, December, 1891, pg. 7.*

#### BOKHARA.

The *London Daily Chronicle* of October 29th, 1891, contains the following (per Reuter's telegram):--

"St. Petersburg, October 27th.—The Emir of Bokhara has had several consultations of late with Russian medical men concerning the prevalence of leprosy in his dominions, and especially in the north-eastern quarter of the town of Bokhara, called Gonzari Pissiane, which spot may indeed be considered as the hotbed of leprosy in Central Asia. The lepers are allowed to lead an independent life in this quarter; they are allowed to contract marriages, and no supervision, whether medical or otherwise, is exercised over them. It has resulted from the advice tendered him at these consultations that the Emir has decided upon the foundation of a special hospital for the lepers, at which they will be treated by specialists in their disease."

#### NORWAY.

The present writer has been under the impression that leprosy had diminished in Norway, the diminution being generally admitted to be due to the segregation of lepers in the hospitals at Troudhjem, Molde, and Bergen; but Dr. Vandyke Carter, who has closely investigated the subject, considers that :—"So far from leprosy in Norway showing a natural tendency to subside, there is ample evidence of a present activity equal to that displayed by the disease twenty-five years ago."—*British Medical Journal, Nov. 28th, 1885, p. 1048.*

#### ICELAND.

The Rev. W. T. M'Corrick, in a lecture delivered at Brighton, says:—" Before leaving, I was enabled to gain some details respecting leprosy, which is of a bad kind, and indigenous to the country, from Mr. Patterson, the British Consul, to whom Archdeacon Wright had written for information when publishing his book on this disease, and also Dr. Scheving. I learned here that in the year 1800 there were 150 cases out of a population of 50,000, but that now, out of a population of 72,000, the numbers had decreased to 25. I must state, however, that on further inquiries from an older and more experienced doctor near Laugardalir (Gudmunson, I think, was the name) I was told that the disease was increasing, and that one in every thousand was a sufferer from this hideous complaint. There are no hospitals for leprosy in Iceland, though Dr. Henderson, who travelled through the island in 1814, states that there were four then in existence.—*Journal of the Leprosy Investigation Committee, No. 4, December, 1891, pp. 69, 70.*

#### THE WEST INDIES.

During my visits to the Virgin Islands, the Leeward and Windward Islands, and British Guiana, 1888-89, I had opportunity of conversing with intelligent residents, including governors, medical practitioners, superintendents of leper hospitals, magistrates, prison chaplains, editors of newspapers; and the general opinion was that leprosy was largely on the increase. In some islands, such as Jamaica, St. Kitts, and Trinidad, there are leper communities, which are gradually increasing; and appeals are frequently made in the Colonial Press for their segregation in hospitals.

In a dispatch to the Colonial Secretary, Dr. R. Hall Bakewell, Vaccinator-General, Trinidad, said : —" The very great increase of leprosy in this island, particularly among persons in easy circumstances, is the subject of general remark, and although we have no statistical evidence of the fact, yet it seems admitted on all hands."—*Page 7, Compendium of "Extracts from Report and Returns" in the "Royal Gazette," Trinidad, March 1st, 1871.*

On the 22nd January, 1889, I visited the lazaretto at Barbados, a crowded institution. A new ward was then in course of construction, to accommodate 32 more patients; but the applications from the single parish of St. Michael were greater than the extra beds to be provided. I may mention that the island of Barbados comprises thirteen parishes, with a total population of about 180,000 of which St. Michael's contains about a sixth; and it is estimated that 150 to 200 more beds ought to be provided under the present system of voluntary segregation. If the segregation, which includes only the leprous poor and pauper class, were compulsory, as some now demand, the alarming spread of the disease, which is endemic in all the islands, would be yet more fully exhibited.

The *Official Gazette*, Barbados, May 5th, 1890, p. 524, says :—"With a daily average of 104 there have been 16 admissions, 3 discharges, and 4 deaths. The Poor Law Inspector, Mr. C. Hutson, says: — "Considering the overcrowding of the wards, it is, I think, wonderful that we keep so clean."

The census returns from Barbados show that while the population during the ten years, 1871 - 81, had only augmented 6 per cent., the lepers had multiplied 25 per cent.

According to the Surgeon - General's report of hospitals in Trinidad for 1880, No. 41, p. 38, the number of patients in the Leper Asylum on June 30, 1880, was 124.

The report for 1888, *Trinidad Royal Gazette*, p. 1116, says :—" The admissions have been limited to the amount of accommodation, and there were fourteen lepers at the end of the year in the Colonial hospitals, awaiting vacancies for admission to the Asylum."

The Asylum (at Mucurapo, Port of Spain, Trinidad), which I visited in February, 1889, contained at that time 180 patients (under the medical superintendence of Dr. Bevan Rake), who are admirably cared for by the French Dominican Sisters. Every bed is occupied. In his report to the Surgeon-General for 1887, Dr. Rake says:—" The new infirmary at the Asylum was opened in August last, and was quickly filled, 19 patients being admitted on the 19th, and nine more on the 25th. Since then it has been constantly full."

I was informed by the lady superintendent that a new ward was, to be built at once, to contain 30 additional beds. There were then, she said, fourteen lepers in the Colonial (Port of Spain) Hospital awaiting vacancies for admission to the asylum.

In the last report on leprosy in Trinidad, dated March 1st, 1891, by Dr. W. V. M. Koch, acting Medical Superintendent, it is stated (p. 65) that the new infirmary ward, which was finished at the end of 1889, and occupied early in 1890, has been full all the year round. There was a rush of patients to fill it.

The *Trinidad Leprosy Report* for 1890 (p. 31) says that during the year a new ward containing 30 beds has been opened. The asylum contains 210 inmates, "every bed being occupied."

Dr. Bevan Rake says :—" There is, I fear, little doubt that the disease is increasing in Trinidad as in other tropical countries."—*Papers on Leprosy, Trinidad, p. 34.*

In an article entitled the "Dreadful Revival of Leprosy," in the *San Fernando Gazette*, Isle of Trinidad, 22nd February, 1890, the writer says :—" It may not be generally known that as far back as 1805 there were only three lepers in Trinidad; eight years later there were 73 out of a population of 32,000. Twelve years later, when an attempt was made to segregate them upon a small adjacent island, it was found that these afflicted persons had increased so rapidly that the scheme had to be abandoned. In 1878 there were 860 out of a population of 120,000, and later statistics show that the number of lepers was increasing four times as rapidly as the population." The writer arraigns the authorities for their supineness, and urgently calls upon them to take the necessary steps to arrest the progress of this fearful disease.

In a leading article in the *St. Christopher Gazette* (of St. Kitts), the 17th May, 1889, entitled, "The most pressing question in the Colony," the writer quotes Dr. Boon's last quarterly report, which (he says) "clearly and forcibly showed the Government the enormous increase in our leper population during the last six years." Dr. Boon, who held the position of Acting Government Analyser of Vital Statistics, says :—" There is one subject to which I would specially call the attention of the Government, and that is the necessity of legislation with regard to lepers. I am satisfied that the disease is increasing rapidly in this island (St. Kitts)."

In the *Lazaretto*, No. 11, a paper published in the West Indies, the editor asserts that a careful census carried out by medical officers would demonstrate that St. Kitts and Nevis contain more lepers per thousand of the population than any other British possession. He also considers that the disease has increased in Antigua, and there are no fewer than 300 lepers in the Leeward Islands. The *Lazaretto*, No. 21, for April 20th, 1891, estimates the number of lepers in the two islands of St. Kitts and Nevis at 200. In 1871 Dr. Munro discovered, by a personal census, that there were 72 lepers at St. Kitts, a number which has now increased to 135, or at the rate of 90 per cent. in twenty years. To accommodate the growing community of lepers, a large lazaretto has recently been built at Sandy Point, ten miles from Basse Terre, St. Kitts, which already contains eighty inmates. The *British Medical Journal* for June 20th, 1891, says that a petition was lately sent to the Governor, Sir W. F. Haynes-Smith, with the request that it might be sent to the Queen. Amongst other things it states that leprosy is most prevalent in these islands, and that the number of persons afflicted with it is rapidly increasing.

The London *Daily Graphic* for August 15th, 1891, publishes the following:—" Sir Morell Mackenzie writes—' I beg to enclose a copy of a letter recently received by Dr. Munro, formerly medical officer of St. Kitts, West Indies, which shows conclusively that leprosy is extending in that colony.'

"The letter from Dr. Boon, referred to by Sir Morell, runs as follows :—" 'In your time I believe there were about fifty lepers in St. Kitts; at present there are 120 known lepers, and I think there are a good many more that are kept hidden from the medical men. I am at present getting as complete a list as possible of the lepers here. One thing is very noticeable in Nevis, namely, the way in which the leprosy spreads in each neighbourhood from single cases. It is not easily traced in St. Kitts, as the people there do not own land like the Nevis people, and are consequently more nomadic. One thing has struck me very much, and that is the number of shop-keepers that have contracted the disease.'

"We have also received a letter from Dr. Boon, who says :—" 'The enclosed photograph of mendicant lepers, subscribed for by a few gentlemen of this island for the purpose of forwarding to you for publication in the *Daily Graphic*, will give a slight idea of the risks by contagion to which the population of this colony is daily subjected. Leprosy has attacked people of all conditions in the West Indies. A few years ago a newly-appointed inspector of police enforced the local 'Vagrant Act,' and prevented the squads of mendicant lepers from perambulating the town, begging from house to house, and importuning people in the streets. Through the action of the then President of the Island, the inspector was forbidden by the Governor to interfere in any way with these lepers. The fact that a member of the former gentleman's family was afflicted with this disease may have had something to do with his action in the matter. We count among our lepers (other than mendicants) bakers, butchers, salesmen in groceries and provision shops, fishermen, printers, editors, circulating - library keepers, shopkeepers, planters, agricultural labourers, and carpenters. In a lodging-house kept by a leper, members of the Bar lodged when on circuit, and slept on the same bed used by the leper when he had no lodgers. Another leper kept a creche, and tended about twenty infants at a tithe in his room for over ten years.'"

In the report of the Blue Book of St. Vincent, British West Indies, 1890, the Acting Administrator observes:—"It is

greatly feared that leprosy, which has already proved so great a scourge to some of our colonial possessions, will become a serious trouble in St. Vincent.

Our administrator of the islands, Mr. Irwin C. Maling, reports to the Colonial Office that the disease, though perhaps slowly, is surely on the increase; and though the average of patients treated at the Leper Asylum is only 15, there are many more at large. No law exists to compel those afflicted with the disease to go to the asylum and receive proper medical attention, but the subject is one which will receive the early attention of the Local Government."

On June 2nd, 1890, Mr. Gourley, M.P., called the attention of the Under-Secretary of State for the Colonies to the considerable population of lepers in the West Indies, which, he said, was daily increasing. Sir W. F. Haynes Smith, of the Leeward Islands, who informed me in 1889 that leprosy was seriously on the increase in the West Indies, issued an address to the Federal Council in April, 1891, in which he quotes the opinion of the medical profession that the disease has greatly increased, and that the only satisfactory explanation of the spread of the disease is that under certain conditions it is communicable and contagious. Sir William Robinson, Governor of Trinidad, writing to the Secretary of State from Government House, 9th May, 1889, says :—" After fifteen years' residence in the West Indies, I can fully corroborate Dr. Rake's statement that leprosy is on the increase, and I am not surprised at it."—*Papers on Leprosy, Trinidad, p. 35.*

In the report of the superintending medical officer of Jamaica, dated July, 1891, it is stated that 420 cases of leprosy in the island are known to the district medical officers, but it is conjectured that a good many living in unfrequented districts are not reported, and that some cases in families of the better classes are not to be found in these returns. The actual number is estimated at 450, or one in 1378 of the present population of the island, reckoned at 620,000. This is a decidedly low estimate. A new ward, capable of accommodating forty beds, has just been made ready for the reception of these unfortunate patients.

A communication from Dr. N. Lacary, physician to the lepers in the French Antilles, dated Basse-Terre, Guadeloupe, January 16th, 1892, and sent by request of the chief of the Sanitary Department at Guadeloupe, in reply to an inquiry for the statistics in respect to leprosy, states that it is impossible to report with accuracy the number of persons known to be more or less subject to leprosy throughout the various districts. The island of La Disirade, in which the Lazar-house is situated, may afford some exact figures, and contains one hundred diseased (leprosy) persons from Guadeloupe and its dependencies, and from Martinique. The lepers frequently secrete themselves, and it is impossible to give the exact figures of those who are at large. It is recognised throughout the islands that leprosy is on the increase.

#### JAPAN.

As my communications to the Authorities in Japan requesting information remain unanswered, I have but few details to report. Leprosy has existed from time Immemorial in this country, and there is an old established leper settlement at the hot springs at Kusatsu, to the north of Tokio. Leprosy is reported to be increasing considerably, and according to a communication in the *Liverpool Mercury*, September 22nd, 1891, three leper hospital asylums have been established in Tokio during the past ten years. One of these hospitals, treated in 6 years 4249 cases, of which 3852 were those of Japanese patients. The *Pioneer* (Allahabad) of September 9th, 1891, reports that leprosy has spread in the Japanese villages to an alarming extent during the past few years. In one village near Toimachi, in the Gifu Ken province, every inhabitant is a leper. The Japanese Government is taking steps to look after their afflicted people.

Mr Hamilton Cartwright, in *The Lancet* for May 25th, 1889, states that vaccination was made compulsory in the seventh year of Meiji (1874). It will be noted therefore that the rapid diffusion of leprosy took place shortly after the introduction of the compulsory law, and has kept pace with the progress of vaccination in this community. Dr. Tamanoto, of the Imperial Japanese Navy, says that when leprosy occurs in a family it is the custom to conceal it.

The Rev. Father Vigroux, Missionary Apostolic, in an article in the *Catholic Review*, which also appears in the *Tablet*, May 14th, 1892, says that 44 patients have already been admitted to the Leper Hospital at Gotemba, Japan, founded by the late Father Testevuide. There is accommodation for as many as eighty.

#### THE GRECIAN ARCHIPELAGO, TURKEY, AND SYRIA.

In the Island of Samos, with a population of 42,000, there are 43 registered lepers, and many others unregistered; to segregate whom the Prince of Samos has built an asylum. In Constantinople Dr. Dujardin Beaumetz estimates that there are three thousand, some of them at large, and others in the hospitals.

In Syria lepers abound, and the most repulsive examples I ever saw were in the lazaretto at Damascus, where the supervision and accommodation was of the most wretched description. For their comforts they depended on the alms given by casual visitors. In Palestine I noticed many lepers, in the most hideous state of deformity, begging. This was in 1884. The Constantinople correspondent of the *Times* writes (July 31st, 1889):—" Dr. Zambaco has made a special study of leprosy, and purposes to present to the congress 'the result of his assiduous labours on the subject. Like some others, Dr. Zambaco has come to the conviction that leprosy is non-contagious. He offers practical arguments and proofs in support of his opinion. There are in Constantinople alone upwards of 250 lepers, all of whom Dr. Zambaco has personally attended. Of these, 25 individuals only are isolated in a special locality at Scutari—the remainder are to be seen in the streets, and in contact, without any restraint, with the rest of the population. In the Islands of the Archipelago there are at Crete 8000 lepers; and at Rhodes, Cyprus, Mytilene, Tenedos, and other smaller islands, they are also numerous, and excepting in the larger ones, free in their movements. Dr. Zambaco has prepared to lay before the congress, and for publication, a most interesting work upon the subject of leprosy in the Levant, containing numerous illustrations, portraits, and biographies of patients living and dead, with accounts of curious cases of cure, non-contagion, and remarkable facts observed by him, which cannot fail to attract attention of scientific men with respect to the disease which has come so prominently before the public."— *Times*, August 6, 1889, p. 10.

### EGYPT

During my visit to Egypt in February, 1891, endeavoured to ascertain the facts as regards leprosy in that country. I called at several hospitals, and conferred with a number of officials connected with Government, but without obtaining much information. Dr. Selim Zeidan, the medical director of the General Hospital at Luxor, informed me that during the past few months five lepers had presented themselves for admission, but he was obliged to refuse them. This was due not to want of space, but to lack of funds. In a communication to Dr Abraham, dated 4th Nov-1890, and published in the *Journal of the Leprosy Investigation Committee*, Dr Greene, of Cairo, director of the Sanitary Department, Egypt, states that the total number of cases reported is 2058, "but this does not by any means represent the whole of the lepers in Egypt, for many districts, where I have reason to suppose some exist, sent in blank returns."

### THE UNITED STATES

Dr. Blanc, of New Orleans, Clinical Lecturer Dermatology at the Medical College, and Dermatologist to the New Hospitals, has had opportunities for observation. In a report to Louisiana Board of Health, May, 1889, he refers to 42 known cases of leprosy at New Orleans, twelve cases at La Fourcho, and six cases (these doubtful), at St. Martinsville; and in only a very small number could he discover the causation in heredity.

In the *New York Medical Journal*, July 13th, 1889, Dr. R. W. Taylor states that during the past fifteen years he has almost constantly seen from one to three lepers in the crowded wards of the hospitals on Blackwell's Island, New York. Other authorities give similar reports of the New York hospitals.

Dr. Charles W. Allen, Dermatologist, in his article on "Leprosy" in the *New York Medical Journal*, March 24th, 1888, calculates the number of lepers in the United States at 150. "Unquestionably," says Dr. Prince A. Morrow, "is leprosy gaining ground in this country, and the disease prevails over more than a fourth of the habitable globe."

### THE SANDWICH ISLANDS

In the Sandwich Islands leprosy is allowed to be the chief of the destructive forces which are gradually depopulating the native race of this beautiful archipelago. Its rapid increase is by far the most urgent and anxious question of the hour, and successive Medical Officers of Health seem powerless to cope with it.

In a leading article on "The Nature of Leprosy" *The Lancet*, July 30th, 1881, p. 186, says :—" The great Importance of the subject of the nature and mode of extension of leprosy is evident from the steady increase in certain countries into which it has been introduced. In the Sandwich Islands, for instance, the disease was unknown forty years ago, and now a tenth part of the inhabitants are lepers. In Honolulu, at one time quite free, there are not less than two hundred and fifty cases; and in the United States the number is steadily increasing."

According to the latest returns handed to me (October, 1890) by Mr. Potter, the Secretary to the Board of Health, Honolulu, 1154 lepers were segregated in Molokai, to which must be added thirty, sent from the Hospital of Suspects at Kalihi to Molokai on the 30th of the same month, while there are probably several hundred secreted by relatives in the various islands. On 31st March, 1888, the number officially reported to be at large in the various islands amounted to 644, but, efforts have been made during the past three years to capture these afflicted creatures and segregate them at Molokai.

The experiment of segregation, coupled as it is with enforced separation of relatives and friends amongst a race who are very gregarious and affectionate, is attended with great difficulties, and found impossible to carry out successfully.

A medical practitioner informed me that well-to-do lepers were not interfered with, and he gave me the names of several at large who occupied prominent positions in the island; and he observed that it was not intended to disturb them, notwithstanding the law which imposes segregation upon all lepers regardless of distinction.

Dr. J. H. Kimiball, of Honolulu, ex-President of the Board of Health, in his official report for 1890, observes:—"Some very bad and unmistakable cases are in hiding in the fastnesses of the mountains or high up in the valleys, fed and secreted by their friends, while some mild cases change their place of residence so often as to baffle the efforts of the officers of the law for their arrest."

Dr. Edward Arning reported that he had visited the remotest gulches and corners of the islands, where few white men penetrate, and had found lepers at large, including some bad cases. He suggests that it may be just-as well to leave these poor wretched creatures where they are, as they are more out of the way there than at Kakuako or Kaluapapa. Dr. John S. M'Grew, in a communication to General James de Comby, the United States Resident Minister, says :—" From political and other influences with officials of the Government, many lepers are permitted (in Hawaii) to go at large without being questioned—really dangerous cases of leprosy."

Dr. White, surgeon to the United States Navy, who visited the islands in 1882, in a report to his Government estimates the concealed cases at 3 per cent. of the population.

Mr. Dayton, the President of the Board of Health, Honolulu (an old resident in the island, who has had a wide experience in the service of the public health), was kind enough to furnish me with facts relating to the introduction, establishment, and increase of leprosy throughout Hawaii, and the steps taken to deal with it by isolation, medical treatment, and hygiene, and also with copies of official reports published by the Board of Health.

According to the same writer on the subject, leprosy was discovered in the island in 1840, but Mr. D. Meyer, Agent for the Honolulu Board of Health, in the appendix to the report presented to the Legislative Assembly of Honolulu in 1886, says it was in 1859 or 1860 that he saw the first case of the disease. That 1840 was the date of its introduction is the opinion of Dr. W. B. Emerson, ex-President of the Board Health, Honolulu, who, in his report published in *Practitioner* of April, 1890, attributes the introduction of the disease to a case reported by the Rev. D.D Baldwin, M.D., to the Minister of the Interior, May 26th, 1864. In 1863 Dr. Baldwin received reports from the deacons of his church at Lahaina with the names of 60 people who were believed to be affected with this disease. In a very few years leprosy increased to an enormous extent, and in 1868 Dr. Hutchinson reported 274 cases.

Dr. Emerson says :—" Leprosy has made fearful strides. It is not necessary to trace with precision the curve that represents the increase of leprosy in these islands from that date to the present time. It is a fearful story, and should teach us that leprosy is undoubtedly communicable."

In his report dated Molokai, March 3 1st, 1888, Mr. Meyer says :—" That the spread of this scourge in these islands has been truly fearful is known to every one here, and that it could not have spread as it has done unless it were communicable, appears to me to admit of no doubt."

To account for the appalling spread of this terrible scourge of humanity within such a short period of time, the evidence points conclusively to one prominent cause--vaccination. There is no evidence to show that leprosy increased in Hawaii until after the introduction and dissemination of the vaccine virus.

Small-pox was introduced from San Francisco in the year 1868. In that year a general vaccination took place, spring lancets being used, which the President of the Board of Health (Mr. David Dayton) informed me were difficult, if not impossible, to disinfect—the operation causing irreparable mischief. The synchronicity of the spread of leprosy with general vaccination is a matter beyond discussion, and this terrible disease soon afterwards obtained such a foothold amongst the Hawaiians that the Government made a first attempt to control it by means of segregation. Another outbreak of small-pox occurred in 1873, and yet another in 1881, both followed by general arm-to-arm vaccination and a rapid and alarming development of leprosy, as may be seen in successive reports of the Board of Health. In 1886 the then President of the Board of Health recorded his conviction, in an official report, to the effect that "to judge by the number of cases in proportion to the population, the disease (leprosy) appears to be more virulent and malignant in the Hawaiian Archipelago than elsewhere on the globe." Leprosy became then, and is now, the most pressing question in these islands.

## VISIT TO KALIHI

In October, 1890, I started from Honolulu in company with Mr. C. B. Reynolds, the Chief Executive Officer of the Board of Health, to visit Kalihi, a place three miles away, where persons supposed to be tainted with leprosy were incarcerated. It consists of cottages, dispensary and recreation ground, the whole surrounded by a double wall to prevent escape, and is a dreary place of abode. There were 74 patients in the establishment, most of whom exhibited distinct traces of this loathsome malady, including some unusually bad cases. Within this enclosure was a comfortably furnished cottage which Sister Rose Gertrude had recently occupied, but had now vacated. Both the cottage and the dispensary of which this lady had the charge were in a bad state of disorder, and presented a painful contrast to rooms in the care of the Dominican Sisters at Trinidad, and in other Asylums I have visited.

The day after my visit, 31 of the inmates were taken from the Suspect Hospital to Honolulu, and thence from the King's Wharf were forcibly deported to the living grave at Molokai, from whence no traveller returns. The scene was of the most painful description. These afflicted creatures were torn from their friends and relatives, husbands from wives, children from their parents, frantic with uncontrollable grief. Lovers were separated, their lips trembling with emotion, amidst unutterable wailings, wringing of hands in the agony of despair, and heart-breaking experiences which I shall never forget, and which the pen of a Balzac, or Victor Hugo, could only adequately describe. Mr. Reynolds said that at times it seemed more than he could stand and he did all that was possible to mitigate their sufferings. He told me that in ten days time there would be another contingent to undergo the same sorrowful experience. This goes on year after year, and will probably continue until medical men themselves turn their attention from experimental treatment to preventive measures, and themselves petition Governments to suppress the mistaken system of vaccination, which, it is admitted by the highest authorities, has been a prolific source of this terrible evil.

## THE MAURITIUS.

In the Mauritius, according to Dr. Seizor, in the *Progres Medical*, 1886, translated by Dr. P. Abraham, and quoted in his work on leprosy, lepers of all races, including Europeans, can be counted by hundreds without difficulty.

## MADAGASCAR.

The Paris correspondent of the *Daily News* telegraphs, August 12th, 1890, that the French Catholic missions in Madagascar have taken up the lepers there, and have built a lazaretto at Ilafy, near Antananarivo. A second hospital for 200 lepers, who are not so invalided, is at Abohivaraka, where they work in the rice marshes.

## CANADA

In May, 1885, the lazaretto at Tracadie, New Brunswick, contained 21 lepers, and others were known to be at large.

The *British Medical Journal*, July 18th, 1891, says:—"Owing to the increase of leprosy in British Columbia, the inhabitants recently memorialised the Canadian Government, asking that some steps should be taken to check the progress of the evil. It has accordingly been resolved to found a leper colony in D'Arcy's Island, which lies off the coast. As soon as the arrangements are complete all the lepers in the colony (most of whom are Chinamen) will be transferred to this island. Dr. F. H. Smith, the superintendent of the well-known lazaretto at Tracadie, New Brunswick, has been requested to investigate the alleged increase of leprosy in the towns of the Pacific slope of the Dominion"

## UNITED STATES OF COLOMBIA.

In the consular report to the Foreign Office, sent by Mr T H Wheeler, the British Consul at Bogota, dated September 26th, 1890, I find various facts confirming previous reports as to the rapid development of this disease Referring to the number of lepers Mr Wheeler says —" A well-known physician of Bogota, the editor of the *Medical Review* of the city, has stated, in an article lately published in that review, that one tenth part of the inhabitants of Santander and Boyaca are lepers. As the population of these two departments is about 1,000,000 this estimate would give 100,000 lepers in that portion of Colombia alone. The medical officer of the principal lazaretto of the country, who has travelled extensively in the departments of Santander and Boyacá, with a special view of studying the question of leprosy, estimates that they contain some 30,000 lepers I believe that both these estimates are very much exaggerated, but the number of lepers must be very great in those two departments, as I am aware from my own observations in travelling through them in 1883. Some months ago the Government of Santander endeavoured to obtain from the various municipal authorities official returns of the number of lepers in the department. Reports were sent in from about half the municipalities, giving notice of 1804 lepers, of whom 388 were living in the lazaretto of the department. But no returns were sent in from the districts

known to be most infected with leprosy, and in any case, no satisfactory census upon such a subject can possibly be taken in Colombia. On the merest suspicion that anything of the sort was intended, every leper, who could possibly do so, would at once disappear, and remain hidden until it was all over, for fear of being dragged to a lazaretto and separated from his family and friends, and amongst the population, in general, there is no such dread of the disease as would lead them to give information against any lepers who might be concealed in their neighbourhood.

"Santander and Boyaca are the departments most infected with leprosy; next to these are Cundinamarca, Tolima, and Antioquia, in the order named, but a certain number of cases are to be found in all the other departments. In Cundinamarca, where the number is more easily estimated than in any other part of the country, there are said to be over 4000 cases of leprosy, and in Antioquia from 800 to 1000. In the whole Republic, there cannot, I believe, be less than 20,000 cases, and there are probably many more.

"Leprosy is most common in Colombia amongst the lowest classes, whose homes and mode of life render them liable to exposure to cold and damp, but it is by no means confined to the poorer class, as many people of wealth and position have been attacked by it."

There are two lazarettos in Colombia, one in Agua de Dios, where one consul found 520 lepers in July, 1890, the other at Contratacion, department of Santander, with 390 of these afflicted people. A Bill has recently been laid before Congress asking for an appropriation of £10,000 for the construction of a new lazaretto, but the disease has reached such proportions as to render such a sum quite inadequate to cope with the ravages of the disease. Mr. Wheeler says that it seems inevitable that leprosy should continue to spread more and more throughout the country, unless some great effort is made to arrest its progress. He remarks that in Antioquia not a single case of leprosy was known thirty years ago. Since then, the disease has spread in all directions, and the number in this town is now said to be over 800. I may add that, during the interval, vaccination has been introduced in all the Republics of South America with the usual sinister results.

Mr. Edward H. Hicks, M.R.C.S., practitioner in Bogota, says :—" The local authorities have called attention to the alarming spread of leprosy in the Republic of Colombia, South America. In districts in which the disease was formerly unknown it has appeared to spread with great rapidity. As to articles of diet, the greater number of cases occur where fish cannot be obtained in these places."—*British Medical Journal*, Nov. 8th, 1890.

The *New York Herald*, of April 10th, 1892, says:—" Reports about the spread of leprosy in the Republic of Colombia are of the most alarming character, and should receive the very serious consideration of the United States health authorities. Every district in Colombia is said to be more or less infected."

In the last annual report of the Consul-General of the United States of Colombia (1890-1) it is observed that the question of the great increase of leprosy has become a very grave one for the country. Prior to the year 1860, the numbers of the afflicted were comparatively stationary; but since that time the increase has been much more rapid, and the disease has spread to districts in which it was previously unknown, almost the whole of Colombia being now infected. Children are frequently seen in the lazarettos in a leprous state, and the mortality is exceedingly high.

Dr. Alzevedo Lima, chief medical officer, Hospital, Rio de Janeiro, says :—" Has leprosy increased in Brazil within the last years? It seems that it has, but we have no exact data to guarantee a positive affirmation. However that may be, it is no exaggeration to say that in Rio de Janeiro there are more than 300 lepers disseminated throughout the city "—*Journal of the Leprosy Investigation Committee*, December, 1891, p 25

The last census of Brazil returned the number of lepers at 5000, but Dr. Lutz, a lepra specialist, estimates it at 10,000 and upwards.

#### BRITISH GUIANA.

In January, 1889, I visited Demerara and Essequibo, British Guiana, but owing to the state of my health I was unable to visit the leper asylums at Mahaica and Gorchum. During my sojourn, the newspaper at Berbice (where the leper asylum is located) published a statement to the effect that, for want of accommodation in the asylum, lepers in the worst stages of the malady had been seen in the streets and bye-ways. In the report of the Surgeon-General of British Guiana for 1887, Dr. C. F. Castor says:—" I hear on all hands that leprosy is spreading — not only here, but all over the world—very considerably." And in a communication to the secretary of the Leprosy Committee, dated 21 November, 1891 (*Journal No. 4, p. 36*), Dr. observes:—" No one for a moment doubts that leprosy is spreading' I was able to obtain only one report of a date earlier than 1887, that of the Surgeon-General for 1879, in which Dr Manguet says —" Many children are brought to me in the incipient stages the disease (leprosy)," and added that the disease was spreading.

When going over the Colonial Hospital, Georgetown, British Guiana, Dr Ferguson spoke to me of the serious increase of leprosy in the colony, and said that they were obliged at the general hospital to receive lepers for whom there was no room at the asylum. He pointed out to me five lepers in one ward with other patients. Dr J L Veendam, a Government medical officer, who had at that time resided sixteen years in the colony, and has medical charge of four sugar estates, assured me that leprosy was much more widely disseminated in the colony than was generally supposed, and that this was the case amongst all classes of society. Referring to a ball which was to be given that evening to Governor Haynes Smith, he added, 'I know lepers who will mix with the gay through this evening.' Some time ago Dr Veendam medically examined all the labourers on the four estates under his charge, 250 in number, and found about 50 who were more or less tainted with leprosy.

One of the highest authorities, Dr. John D. Hillis, F.R.C.S., for ten years Medical Superintendent of the principal lazaretto in British Guiana, and who has devoted twenty years to the consideration of this important subject, says :—"To the most casual observer (in British Guiana) the increase must be apparent, irrespective of the fact that the asylums cannot be enlarged fast enough to contain the cases that are compelled, by want or the rapid advance of the fell disease, to seek admission and relief within their walls, whilst hundreds of others, it is well known, do not enter but remain outside to mingle with others or contaminate their surroundings. Not only is leprosy on the increase in the colony, but the increase has been greatest in the last decade. . . . Wherever the writer goes, he meets with lepers walking about among, and, mixing with, the people, may be in the church, or in shops. As the signs and symptoms of the disease become better known, they will perhaps be more easily recognised by the uninitiated."

In 1858, the lepers were located at the present Institution at the mouth of the Mahaica Creek, which not very long ago was enlarged to meet the ever increasing demand on its accommodation.

On 31st. December, 1859, there were only 105 inmates at the Asylum. In 1869, they had increased to 300, and the place could hold no more. Increased space was provided, and in 1889 we find, from the official reports, over 500 of these unfortunate inmates. Around this leper asylum, outside its boundaries, there are large numbers of lepers not included in these returns. Dr. Hillis states that, while the increase of the population in twenty years, between 1858 and 1878, was only 45 per cent., the increase of lepers was 160 per cent.

Dr. George Thin, in his work on "Leprosy, p. (1891), says :—" It is estimated that in 1890 the number of lepers in British Guiana was 1000, or one in 250 of the population." My own inquiries led to suppose the number was larger, as from all that could gather there were about 500 lepers in the asylums at Mahaica and Gorchum, and I saw several at the General Hospital, Georgetown, for whom there was no room in the asylum. These were by old medical residents to be far less than the total leper population.

#### DUTCH GUIANA

Leprosy is making rapid progress in Dutch Guiana, and a devoted priest, who has been attending to the temporal and spiritual wants of the people, was reported in October, 1890, to be dying of the disease. Bishop Walfingh, of Surinam, has recently visited Holland, with the object of raising funds to build a suitable hospital, and has met with a successful response to his benevolent appeal.

#### VENEZUELA.

In the early part of 1889 I visited Venezuela, pursuing my inquiries as to leprosy in Carracas, Bolivar, and other places. From all the information I could obtain I learned that its spread, though less conspicuous than in the adjoining territory of British Guiana, is making constant advance. From a report made by the United States Consul at Maracaibo, Mr. F. H. Plumacher, the American Government in 1890, I find that leprosy began to be felt as early as 1828, and in 1841 the National Government, under the direction of President Bolivar, purchased an island four miles east of Maracaibo, and erected an hospital and dwelling-houses for the accommodation of these afflicted people. In 1876 the cases had assumed alarming numbers, so as to seriously to endanger the sanitary future of the State. In the year 1890 there were 125 patients in the lazaretto, and many more at large in the city and environs, and all attempt to segregate them is thwarted by the efforts made by friends for their concealment. This increase here, as in other countries, is coincident with the extension of the practice of vaccination.

#### AUSTRALASIA.

Leprosy is not unknown in the Australasian colonies, and is especially noticed in a report dated 7th May, 1890, and

ordered to be printed by the Legislative Assembly of New South Wales. This report was handed to me by the President of the Board of Health. From it I find that, at the close of 1889, there were 30 cases of leprosy under official cognizance.

The *Lancet*, of August 1st, 1891, says that the number of lepers has more than doubled during the past ten years.

Referring to the report for 1891 (which has not yet reached me) the *Sydney Mail* of February 20th, 1892, under the head of "Leprosy," observes :—" Those of the public who are the least disposed to alarmist views will probably regard as highly serious the statements now made public regarding leprosy in New South Wales. The statements give a great shock to the feeling of confidence based on the supposed comparative immunity of persons of European races from the attacks of this terrible disease. Of course, it has always been known that where the conditions are specially favourable to contagion, the supposed racial protection ceases to be a safeguard. But it is, nevertheless, startling to learn that of ten persons found by the Board of Health during the year to be suffering from leprosy five were natives of this colony of European descent, while four were Chinese, and one a Kanaka. At the beginning of the year there were 13 lepers under detention at the lazaretto, while those so detained at the end of the year numbered 21, of whom eight were natives of New South Wales of European descent, 11 Chinese, one Javanese, and one Kanaka. During the time the lazaret has been available there have been 31 patients, of whom one could not be detained, and nine have died."

Our colonists are becoming alarmed at the invasion of leprosy in New Zealand. The *New Zealand Herald*, Auckland, June 14th, 1890, in an article headed "Leprosy Among the Natives," says :—" A gentleman at Hokianga writes to a friend here—'My brother was north a few days ago on a vaccination tour at Herekino, and he reports an outbreak of leprosy at Herekino amongst the natives, several of whom died from it. Others are in a fearful state. Their fingers and toes rot off, their nose, teeth, and jaws are corroding, and their bodies are rotten. He has reported the matter to the Government. Strange to say, it got this length before we heard of it. The natives are scared, and avoid each other. Timoti Puhipi recommends the lepers being deported to the Three Kings' Island.'"

A petition by Dr. Bakewell of Auckland, New Zealand, formerly superintendent of the Leper Asylum, Trinidad, for an inquiry into leprosy in New Zealand, has been presented to the Public Petitions Committee, and referred to the Government for consideration.

Dr. George Thin states that a school in New South Wales has been closed by order of the Minister of Public Instruction, in consequence of reports that some children in it are developing symptoms of leprosy.—*Leprosy*, p. 247.

#### OCEANA.

The *Sydney Morning Herald*, of March 27th, 1891, says :—" The spread of leprosy among the Pacific islanders seems to be going on steadily, judging from the following report, which we take from the *Samoa Times* of January 31st—' We hear (says that journal) that leprosy has established itself at Penrhyn Island, and that there are no less than ten fully-developed cases there. The doctor of H.M.S. Cordelia, which has lately been cruising in that quarter of the Pacific, confirms the statement, and is of opinion that the disease has been brought to Penrhyn from the Hawaiian Islands by a number of refugees from the latter place. The same authority also states there is a case of undoubted leprosy at Manaheke Island. These facts strengthen the argument we have used in our columns, as to the urgent desirability of steps being taken to prevent leprosy becoming an established institution in our midst.'"

#### NEW CALEDONIA

In the French penal colony of New Caledonia, leprosy has made its way with fearful rapidity. Previous to 1853 leprosy was unknown in the colony, but recently two leper asylums have been established. In a report on leprosy, presented to the Parliament of Victoria by the Secretary to the Board of Health, Sydney, it is stated that the Board of Health has received a communication from His Excellency the Governor of New Caledonia, M. Pardon, to the effect that the disease is extremely prevalent in that Colony, where about 500 of the native population are affected, and seven persons of European parentage, six convicts, and one child, all French, have been officially reported as suffering from the malady.

The *Journal of the American Medical Association*, March 22nd, 1890, says :—" Leprosy is reported to have found its way to New Caledonia, the French penal colony, and already there are hundreds of cases among the natives and convicts."

The *British Medical Journal* of April 25th, 1891, has the following :—" Dr. M. A. Legrand has recently published an account of the introduction of into the French convict settlement of New Caledonia which is at once interesting and instructive. In 1846, when missionaries first landed in the island, the was entirely unknown there, nor did it exist in 1853, when the French formally annexed it. In October, 1880, M. Vauvray, chief of the Health Department, sent back five

negroes from the New Hebrides on the ground that they had lost their fingers and toes from leprosy. He at the same time requested the authorities to prevent the introduction of lepers into the colony. In September, 1883, M. Brassac reported that there were several cases of leprosy in the north part of the island, and suggested the establishment of a lazaretto for their reception. The authorities, however, took no steps, and in 1888, Dr. Forne, chief physician and president of the Committee of Hygiene, presented an elaborate report, in which he stated that the cases of leprosy could then be numbered by hundreds, especially in the north. But the committee adopted the ostrich-like policy familiar to such bodies, and it was not till the following year that, yielding to the force of public opinion, the executive decided to establish two leper houses, one at Pic des Morts, near the Bay of Canala, and the other in the Isle of Goats in the Noumea roads. Forty lepers were confined in the former, and twenty in the latter. In May, 1890, the total number segregated was seventy, and there had already been fifteen deaths. A third lazaretto is about to be established not far from Houailou. Though it was not until 1883 that the first cases of true leprosy among the aborigines of New Caledonia were observed, more or less legendary accounts of earlier appearances of the disease are current among them. Thus a Chinaman, covered with hideous sores, is said to have arrived in 1866 or 1867, and to have lived for several years with a native tribe, several of whom afterwards developed disease of the same nature. Whatever may be the true history of the importation of leprosy, there can be little doubt that it was imported, and at the present time, according to M. Legrand, it exists everywhere in New Caledonia, and has acquired a foothold in the great majority of the native tribes. Europeans have also suffered. The course of the disease appears to be more rapid than elsewhere, a fact which M. Legrand attributes to the habit which the natives have of scarifying the maculae and the tubercles, often to a considerable depth, with pieces of glass, and to their ruthless use of caustics. M. Legrand considers that these barbarous therapeutics, together with tattooing and burning with moxas, which seems to be their fashion of expressing affliction at the loss of relatives, have much to do with the spread of the disease. He explains the ravages made by the disease in virgin soil like New Caledonia by the fact that the people, not being aware of the danger, take no precautions against it."—*Archives de Médecine Navale, February, 1891*

*In all the French colonies vaccination has been prosecuted with rigour, and has been followed by the increase of leprosy, just as in England' the increase of infantile syphilis is due to arm-to-arm vaccination, as shown by the Minutes of Evidence with the third report of the Royal Commission on Vaccination. The barbarous therapeutics, the tattooing and burning, have existed among the natives from time immemorial. Vaccination has been but recently introduced.*

#### FRANCE.

M. Besnier, a member of the French Academy of Medicine, has reported that leprosy, far from disappearing by degrees, is spreading rapidly. Since the extension of the French colonial possessions, soldiers, sailors, traders, and missionaries, have fallen victims to it in large numbers.—*British Medical Journal, October 22nd, 1887, p 919.*

According to the London *Evening Standard*, October 26th, 1891, Dr. Besnier reports the number of lepers in Paris at 100, there being at the St. Louis Hospital eight persons afflicted with this disease.

#### SPAIN.

"Leprosy has been on the increase in different parts of Spain for some years past, and the extension of the disease has at last aroused the attention of the Government. On February 16th the Director - General of Beneficence and Sanitation sent a circular letter to all governors of provinces calling on them to take such steps as may seem necessary under the circumstances."—*British Medical Journal, March 5th, 1892.*

In a communication to the *Lancet*, January 16th, 1892, "On the Origin and Spread of Leprosy in Parcent, Spain," founded upon investigations by Drs. Codina and Zuriaga, Dr. George Thin introduces the following table and comments :—

*"Table Showing the Cases of Leprosy in the Towns referred to in this Report.*

Towns	No of inhabitants	Date of invasion	Cases up to 1887	Males	Females	Total	Remarks
Parcent	150	1850	65	21	7	28	I gathered the data stated in the present table during my visit to the towns in the district of Parcent. Although I have endeavoured to obtain my information as accurately as possible, I am unable to guarantee its correctness. the towns sometimes hide the truth as to the number of lepers existing; but if there are any, they will
Languart	400	1868	31	20	5	25	
Pego	1200	17--	---	14	6	20	

Orba	160	1873	25	12	6	18
Pedreguer	720	1809	79	9	3	12
Murla	120	1870	14	8	2	10
Sagra	100	1848	13	5	3	8
Benidoleig	80	1869	7	4	1	5
Gata	440	1860	6	3	1	4
Jalon	560	1867	8	2	1	3
Denia	650	17--	---	3	1	4
Oudara	325	1862	7	2	1	3
Tounos	80	1860	10	2	1	3
Beniarbeig	130	1871	6	3	--	3
Sanet	90	1884	3	1	1	2
Alcahali	98	1870	6	2	--	2
Jaica	320	--	--	2	1	3
Benichembra	120	1872	3	1	--	1
			285	114	40	154

consist in showing too small, rather than too great, a number of lepers.

"There is nothing in the soil, occupation, food, or race to account for any difference in the number of lepers which are to be found in these towns respectively. It also shows that the proportion of lepers to the population of the towns is not connected with the length of time that the disease has lasted, and therefore is not in relation to the opportunities given by heredity, even if it were assumed that heredity was a cause. Parcent, which is the most striking example, shows in twenty-seven years, in a population of 150 inhabitants, 65 cases of leprosy, of whom 28 were living at the end of that period; whilst Pego, with 1200 inhabitants, and where the disease has lasted since last century, had only 20 living lepers. Pedreguer, in which we know there was leprosy in 1809, with a population of 720, had in about forty years 79 lepers, of whom 12 were living at the date of the report whilst Murla, with only 120 inhabitants, had had 14 cases in seventeen years, of whom 10 were living at the date of the report.

"Excluding heredity as an insufficient cause of these cases, and as otherwise being discredited, the difference of the rate of increase of leprosy in these similarly situated villages is best explained by the assumption that the opportunities for contagion have been greater in some cases than in others, even if we did not have the statements which I have collected from two independent sources—namely, from the Mayor of Parcent, referred to by Dr. Zuriaga, and from Dr. Codina's report to the Director-General at Madrid. Another sad fact comes out from a study of this table—namely, that in many of the towns the appearance of the disease is comparatively recent and that in this part of Spain leprosy is spreading. The necessity for a hospital in Parcent seems to have been realised at last, for we find that a commission visited the neighbourhood in June, 1887, for the purpose of finding a site, and were uttered one by the municipal corporation free of cost."

No inquiry appears to have been made, either by Dr. Codina, Dr. Zuriaga, or Dr. Thin, as to vaccination being a possible cause, which, according to a communication to me from Senor U. Montez, the Spanish Consul in London, has been obligatory for many years. This gentleman writes (London, May 26, 1892):—"Apart from previous ordinances on the subject, the law making vaccination obligatory on the whole of Spain is dated the 28th of November, 1855." This mode of propagation, where the contaminating virus enters directly into the blood, is surely more credible than the one suggested by Dr. Thin, of contagion (simple contact), unless Dr Thin, like other pathologists, interprets the word to include inoculation and vaccination.\*

\* Baron, in his "Life of Jenner," vol i., p. 604, says that Mr. Allen, Secretary to Lord Holland, writing to Jenner from Madrid in 1803, observes:—"There is no country likely to receive more benefits from your labours than Spain; for, on the one hand, the mortality among children from small-pox has always been very great; and, on the other hand, the inoculation for the cow-pox has been received with the same enthusiasm here as in the rest of Europe." . . . The result, however, was the reverse of satisfactory; the writer adding, that "the inoculation of

the spurious sort has proved fatal to many children at Seville, who have fallen victims to the small-pox after they had been pronounced secure from that disease."

### THE UNITED KINGDOM.

The following appears in the *British Medical Journal*:—" Dr. T. Colcott Fox, one of the Honorary Secretaries of the Dermatological Society, has been good enough, in reply to an inquiry, to forward for publication the following list of cases of leprosy shown to that Society since its foundation:--

DATE.	EXHIBITOR.	WHERE FROM
July 12th, 1882	Mr. Hutchinson	India
"	Dr. E. B. Baxter	Dutch and Chinese parentage
Oct. 11th	Dr. Crocker	Singapore (shown at International Medical Congress)
Dec. 13th	Dr. Liveing	India
Mar. 14th, 1883	Mr. Hutchinson	?
"	"	?
Oct. 10th	Mr. M. Baker	Antigua
	Dr Sangster	? If English case. Sections of nerves.
Jan. 9th, 1884	Mr. Baker	?
Feb. 13th	Dr. Crocker	?
"	Dr. Stowers	India
Mar. 13th	Dr. Allchin	?
July 11th	Dr. Crocker	?
Jan 9th 1885	"	India
May 1885	Mr Hutchinson	?
July 1885	"	Cape Colony
" "	Dr Crocker	?
Oct 10th 1888	Dr Cavafy	?
Feb 13th 1889	Dr Crocker	?

"Dr Fox adds that he has also seen the following private cases since 1879:---

1. Boy from Demerara. . . . .
2. Girl from Demerara. . . . .
3. Man from Cape Colony.
4. Man from India. . . . .
5. Lady from Orange Free State.
6. Lady from Honolulu.
7. Lady from Cape Colony.
8. Officer from Bengal.
9. Man from India.

"Dr. Fox adds that he has seen three cases in hospital practice, but all these have also been under the care of other physicians at other hospitals.

"Dr. Larder has now two cases in the Whitechapel Infirmary."—*British Medical Journal, March 30th, 1889.*

### SOUTH AFRICA.

In consequence of the serious increase of leprosy following the imposition of vaccination in Cape Colony, a Select Committee was appointed by the Legislature in 1883 to take evidence as to the cause of such increase, but, strange to say, no inquiry was made, nor were any interrogatories submitted to the witnesses, as to vaccination being a possible factor in the case. Mr. T. Louw, M.P., was appointed Chairman of the Committee.

Dr. Henry Anderson Ebdon, President of the Medical Board, testified that he had resided many years in India—the Punjaub, the Himalayas, Rajputana, Western India, where leprosy is prevalent, and in other parts. He has been in the Cape, consecutively, close upon 22 years, and during that time had seen a great deal of leprosy. He was sure it was on the increase.

Q.—" As you are inclined to think that the disease is contagious, do you think it

dangerous to the health of other people to use food prepared by leper hands?"

"I should be sorry to see a leper cook, and I go further than that. In vaccinating, I think hardly a medical man would take vaccine lymph from the arm of a leper infant. I know it has been our practice for the last twenty years not to do so."

The Rev. Canon James Baker testified that "the increased spreading of the disease in many parts of the colony is now generally admitted. It is spreading among both the white and the coloured races, especially in places near the sea coast."

In the appendix E to this report, is a letter from Dr. Wm. R. Turner, dated Vrendenburgh, 1st Sept., 1883, in which I find the following :—" Leprosy in parts of Saldanha Bay is spreading so rapidly that, if some measures are not at once taken by the Government, all the surrounding districts will probably become infected. I know of more than twenty cases in one place alone, in every stage of the disease, and am sorry to say it is not confined to the coloured portion of the inhabitants."

The conclusion stated in the official report is "that leprosy prevails extensively in this Colony, and is steadily spreading among both white and coloured classes."

In June 11th, 1884, an Act was passed by the Legislative Assembly, Cape of Good Hope, entitled, "The Leprosy Repression Act, 1884," with the following preamble :—" Whereas the disease of leprosy is prevalent in this Colony, and has lately been spreading, and continues to spread, and it is desirable to check the extension of such disease, and, if possible, to exterminate it."

At a public meeting in Cape Town in December, 1890, Sir Gordon Sprigg said that there were between 600 and 700 lepers in Cape Colony.

In a paper read before the Epidemiological Society of London by Dr Phineas S. Abraham, p. 3, I find the following :—" In the South African Reports for 1886, a decided increase of leprosy is stated to have taken place in the districts of Alexandria, Bedford, Clanwilliam, Herschel, Malmesbury, Paarl and Stockenstran; and for 1887 the spread of the disease is reported not only from most of these districts, but also from Wynberg, Stutterheim, and Kokstadt. The majority of the medical officers speak very strongly on the subject. For example, one of them (from Alexandria) writes that 'leprosy is certainly spreading rapidly, and unless some active and efficient measures are soon taken, it will become a matter for the most serious consideration.' - Another (from Bedford)—' I believe it to be considerably on the increase, and should be stringently dealt with.' Another (from Malmesbury)—' With reference to leprosy I cannot but repeat my statements of the last years to the effect that the disease is slowly but surely increasing, each fresh case acting as the nucleus to a more or less extended infection.' Another (from Paarl)—'It is deplorable to see what strides it is making.' And in 1887, 'As for leprosy, although it is making rapid strides, there is no notice taken of it' (*i.e.*, by the authorities). More than one of these district surgeons, indeed, assert or imply that the Boards of Management, and others who have the power to put the Act in force, shirk the duty on the score of expense, and that the Public Health Act is to some extent a dead letter."

In consequence of the continued increase of this disease, another select Committee of Inquiry was appointed in 1889, under the presidency of Chief Justice Sir J. H. de Villiers. In the appendix J to the Report, printed by order of the Legislative Council, pp. xiv. and xv., the Rev. Canon J. Baker, F.L.S., F.S.Sc., says :—" I entertain no doubt that leprosy is spreading in this colony at the present time. Observant and intelligent persons have assured me that they have recently met, in various parts of the colony with more cases than in previous years.

"There are many and great difficulties in getting correct information on the subject. I have known patients to be carefully concealed, and the relations of the affected do not like to be spoken to as to the mode of contraction of the disease. I have given great offence by calling attention to particular cases. I believe the number to be much greater than is known by medical practitioners, or by the Government authorities."

From the minutes of evidence it appears that Dr. H. C. Wright, district surgeon at Wynberg, being under examination, testifies as follows :—

Q. 5 "Will you state roughly the number of cases in your district? "—"About twenty; but it is impossible to state exactly. A great number of cases are concealed. I have not the slightest doubt that there are more cases than have come under my notice. There are, for instance, some cases I suspect to exist, because I am aware that leprosy is in the family, and lately some of these people have disappeared ; they are never seen, and, I believe, are hidden away."

Dr. Simons, District Surgeon of Malmesbury, was asked :—

Q. 75. "Since your appointment as District Surgeon, have you known any increase in the number of persons affected ?"—"Yes; certainly."

Q. 76. "Is the disease principally confined to coloured persons?"—"No; it is not confined to coloured persons. I know of several cases where families of white farmers are affected."

Dr. W. H. Ross, Police Surgeon in Cape Town, was asked :—

Q. 230. "During the time you were Police Surgeon in Cape Town, did you meet with many cases of leprosy?"—"Yes; in going about, I used to see about a dozen a day among the poorer classes."

The Hon. Dr. Atherstone, M.S.C., who has practised in the colony 50 years, chiefly in Graham's Town, where he was District Surgeon for 26 years, and who has always taken a great interest in the subject, said :—

Q. 341. "I am decidedly of opinion that it (leprosy) is spreading."---July 18, 1889.

The following are *Extracts from the Report of the Select Committee on the Spread of Leprosy, President, Sir J. H. de Villiers, July, 1889, p. 8*:—"The result of the inquiry has been, in the first place, to establish the fact that leprosy is on the increase in the colony. Many of the District Surgeons say that, in their particular districts, there is no such increase, and others again are unable to express any opinion upon the question, but in the more populous districts of the colony, such as the Cape and the Paarl, and even in some of the outlying and less populous districts, such as Alexandria and Stockenstrom, the District Surgeons report a marked increase in the number of cases. It should be borne in mind that the victims of this loathsome disease naturally endeavour to conceal it from others, as much and as long as possible, and that many more cases are sure to exist than have come under the notice of the medical men, whose answers have been received, or whose evidence has been taken. Your committee estimate the number of lepers in the colony to be upwards of 600."

On page 12 is an extract as follows :—"The committee conclude—(1) 'That leprosy is on the increase in this colony.' (2.) 'That the disease will continue to increase unless effectual measures are adopted to check it, and if possible to stamp it out.'"

On the 8th April, 1890, the Governor of Cape Colony and High Commissioner Sir Henry Loch laid the foundation-stone of a new leper hospital at Robben Island, which will provide 200 beds for the unfortunates stricken with a fatal and repulsive disease. A writer in the *Cape Argus*, May 20th, 1891, who signs himself "Epaminondas," and seems, by the character of his frequent communications, to be much concerned regarding the inadequacy of the measures undertaken to check the ravages of the scourge, concludes his letter thus—"In the cause of humanity; for the suppression of the deadly disease; for the safety of the general bulk of the inhabitants, and, last but not least, the alleviation of the afflicted, it seems to me that it is the bounden duty of the Government to meet the question face to face, and devise some means to cope with this terrible and, if unchecked, disastrous evil now pervading the Colonies, and Transkei particularly."

In the valuable Consular Reports issued by the Government of the United States I find one for June, 1887, from Consul Siler, of Cape Town, which is not without interest and instruction. Mr. Siler says, "Not until 1845 was any attempt made by government to check or -to stamp out the disease. In that year a leper asylum was established at Robben Island, seven miles from Cape Town, and, up to 1884, 744 lepers had been admitted to the institution, and comprised but a very small proportion of the leper population, as the segregation of lepers was not made compulsory. In fact, lepers mingle freely with the other citizens, and their appearance is so common that they attract little attention in the streets. At the Cape Town Fish Market I have seen lepers at work cleaning and curing fish, and the disgusting sight did not seem to deter buyers."

The rapid increase of the disease, particularly among the European population, as described in the recent reports of district surgeons, has aroused the Colonial Government to action, and a second and larger asylum is in process of construction, the present accommodation being -wholly inadequate to provide for all the afflicted applying for admission.

A correspondent writes to the *Cape Argus*, May 21, 1891, and, referring to the alarming increase of leprosy in South Africa, says :—"it is now two - years since the out-cry commenced, and yet, what has the Colony done for the benefit of the wretched people cursed with this insidious disease, and for the protection of their neighbours? Here, in the Transkei, nothing! It is notorious that in every magistracy in the Transkei leprosy is rife and spreading rapidly, and, sad to say, over

the lepers themselves there is absolutely no restraint. They frequent the public offices and trading stations unchecked.

By their horrible hospitality, they provide lavish feasts of Kafir beer, invitations to attend the same being scattered broadcast. Fancy drinking Kafir beer, prepared and filtered by leprous hands? And this is done every month in the year!"

Under the head of "The Public Health," the South African Directory for 1891, p. 446, observes that "with a view of checking the spreading of venereal disease and leprosy, which have for some years past been reported to be phenomenally prevalent in various districts of the Colony, Acts were passed in 1884 and 1885 giving the Government powers whereby it was hoped that these disorders would eventually be stamped out." One of these is entitled, "The Leprosy Repression Act," which gives the Colonial Secretary power to forcibly remove and incarcerate any known leper in a leper asylum or hospital. This drastic measure had not then been promulgated or put in force. There are many lepers in good positions in the Colony, of both white and mixed races, whose friends would make any sacrifice rather than have them segregated with their fellow-sufferers, either in Robben Island or elsewhere. Those who advocate the forcible deportation of lepers from their friends (most of whom would willingly keep them from public observation in thinly-settled districts) can know little of the heart-breaking scenes constantly witnessed at the separation of these afflicted persons at Honolulu when about to undergo perpetual banishment to Molokai, Hawaii. Although a terribly repulsive and loathsome disease, leprosy is not communicable by simple contact. The Colonial legislature would have served the cause of the public health more effectually by directing their attention to municipal sanitation, and discouraging the practice of vaccination, which, according to the opinion of district surgeons, and the best informed authorities in South Africa, has been instrumental in largely spreading both syphilis and leprosy. It is hardly possible for a disinterested observer and inquirer to come to any other conclusion.

The Cape Town *Times* of March 5th, 1892, says:

"A correspondent writes to the Orange Free State *Express*, under date February 25: The first batch of these unfortunates (the Theba 'Nchu contingent), twenty in number, were despatched from here on Saturday last, and probably twelve or fifteen more will leave here within a few days. The lepers are all natives, mostly Baralongs. It was hard work for the Landdrost, with the aid of the mounted police, to hunt them up. It would take too much time to relate all the cunning (in this case excusable) devices resorted to by the families of the lepers to evade the law. It was a heartrending sight to see how mothers and children parted. It must be done, for the sake of the general safety, but it was an awful spectacle to see and hear the cries of distress, especially of the sound relations who remained behind."

Referring later to the same deportation of lepers, the Port Elizabeth *Telegraph*, March 12th, says—"Although the large number of fifty-four lepers have been despatched to Robben Island, it is believed that others have managed to conceal their condition from the authorities." . . . "It is a very remarkable fact that, whilst in the last census the number of lepers were returned (from this district) as four, already fifty-four have been discovered suffering from the loathsome disease of leprosy."

Dr. Alexander Abercromby, author of "Thesis on Tubercular Leprosy," writing to me from Cape Town, April 20th, 1892, says the disease is now "spreading rapidly amongst the white population and better class of people."

#### INDIA.

In the speech delivered at Marlborough House, London, June 17th, 1889, the Prince of Wales stated that one of the chief centres of Leprosy is India, where there are 250,000 lepers, and that our colonies contained unnumbered victims to this loathsome disease. The *British Medical Journal*, September 13th, 1890 (p. 639), reports that "a comparison of statistics regarding lepers during the thirty years 1851-81, shows that their number has been increasing in India at the rate of about 30,000 every ten years. During the last ten years the rate of increase is supposed to have been higher." I have before me communications from staff surgeons, medical officers of health, superintendents of leper hospitals, and medical practitioners, showing the spread of leprosy in various provinces of India, and in other countries. The Rev. G. M'Callum Bullock, of the London Mission, Almora, writing 21st August, 1889, says :—"It is the general opinion of residents, both European and native, that leprosy has increased in Kumaon during the past thirty years, and there are upwards of 1600 lepers in Kumaon alone out of a population of 1 1/8 millions."

Dr. C. T. Peters, in his report on cases of leprosy treated at Belgaum, Presidency of Bombay, dated Bombay, June, 1879, says:—"Judging from Mr. M'Corkhill's figures, there were not less than 22.8 per cent. of the population, in the Belgaum districts alone, afflicted with some form or other of leprosy."

In a paper read before the Calcutta Microscopical Society, December, 1890, Dr. W. J. Simpson said it was certain that

leprosy was on the increase, an opinion confirmed in a letter to me, dated August, 2 1st, 1889, by Dr. Chunder Ghose, Medical Superintendent of the Leper Asylum, Calcutta.

The City Coroner of Bombay says that leprosy is vastly increasing in that city. The *Times of India*, February 21st, 1891, estimates the number of lepers at large in Bombay, at 1000. At a meeting of the Municipal Council of Bombay, reported in the *Times of India*, April 12th, 1889, various speakers describe the terrible state of things existing in the city. Mr. Kirkham saw lepers near the public tank dressing their terrible sores, scratching their ulcers against the iron railing of the Elphinstone High School, where the boys sat on coming out of school. Dr. Blaney said, "all over Bombay, in dark corners, in gullies where rats and bandicoots had taken their abode, these lepers were hiding themselves, thrown out by their families, to pine away neglected and forlorn."

At a meeting of the General Committee of the "Homeless Leper Relief Fund," Bombay, held at the Municipal Rooms, the President, Sir Dinshaw M. Petit, said that the hospital (which contains over 200 patients) was overcrowded, and further admissions had to be refused. Having no homes or places of refuge, lepers hang about the bazaars of the large cities in India, forced by their necessities to sell fruit or vegetables, and to expose their maimed bodies to the gaze of the public, in order to obtain a wretched living.

Referring to the newly opened Matoonga Asylum, Bombay, Mr. Commissioner Acworth writes, May 26th, 1891 :—"With accommodation for 190, I had yesterday 226 inmates, but fortunately a new ward has just been completed, and this overcrowding will temporarily cease, though only temporarily. If I had room for 500 I could fill the asylum in a week."

The *Times of India*, May 21st, 1892, says :—"While the Matoonga Asylum is seriously overcrowded with lepers, and there are, besides, between forty and fifty bad cases in the Byculla Leper Dhuramsala, Sir Dinshaw's lakh of rupees and the land for the extension of the asylum lie still idle because of the deadlock between the Government and the Municipality over the police charges question. As the Government decline to budge in this matter, the Corporation, not altogether unjustifiably perhaps, refuses to undertake the responsibility of the Leper Asylum. Unless something is done to remedy this state of things, our streets will again be overrun with homeless lepers, and Mr. Acworth's labours in the cause of these afflicted people will practically be brought to naught."

The *Lahore Civil and Military Gazette*, May 30th, 1891, in a graphic narrative of the suffering caused by leprosy, bearing the signature "A. H.," in the leading article column, observes :—"A great deal has been said and written on the subject of the lepers and leprosy by people who have seen and pitied the miserable condition of native lepers, who parade their affliction before the public in our streets and thoroughfares, soliciting alms from the passer-by. The majority of English ladies and gentlemen who are told such persons are lepers understand and know so little about the horrible disease that they are inclined to regard them as ordinary crippled beggars, afflicted with a disease peculiar to natives, and from which Europeans are happily exempt. This is far from being the case: leprosy seems to have obtained a terrible hold over our white brethren and sisters in India, many of whom are hiding away, alone and forgotten, in the thickly populated slums and by-lanes of our large cities. I could conduct my readers to godowns and huts where English men and women are to be found in Calcutta in a horrible condition; some in the last stage of the disease."

In a Presidential address on the "Geographical Distribution of Diseases in Southern India," delivered at the annual meeting of the South Indian and Madras branches of the British Medical Association, Surgeon-General George Bidie, M.B., C.I.E., speaking on the subject of leprosy, said :—"According to census returns the proportion of lepers amongst the population of Madras is 4.4 per 10,000, against 5.2 in Bengal, and 8.5 in Bombay; but there is reason to believe that these figures fall short of the actual extent of the disease. In Madras it is on the whole slightly more prevalent in coast districts than in inland, the ratios being 4.9 in the former, and 4.4 in the latter, per 10,000 of population. The proportion of lepers in the several districts ranges from 2.0 in Coimbatore to 10.5 in Madras city. The districts showing the highest ratios next to Madras are Nilgiris 8.0, Tanjore 7.0, and Chingleput, Malabar, and North Arcot, each 6.0 per 10,000. The disease attacks Europeans and Eurasians as well as natives, but is most common in natives. The propagation of leprosy is no doubt largely influenced by heredity, but recent observations appear to show that it is also contagious. In localities in which lepers are at large with the disease in an active state, and having open sores, there seems to be an increased tendency to fresh cases amongst the general population."—The *British Medical Journal*, p. 115, July 20, 1889.

#### BURMA.

In a communication from Mr. C. G. Bayne, the Officiating Secretary of the Chief Commissioner of Burma, to the Secretary of the Government of India, dated Rangoon, 6th December, 1889, and published in the *Journal of the Leprosy Investigation Committee* for February, 1891, it is said that the majority of officers questioned state distinctly that, in their

opinion, leprosy is increasing in Burma. Mr. Smeaton, Commissioner of the Central Division, says :—"In the opinion of the majority of the gentlemen consulted, there are more lepers now than there were ten years ago." Mr. Norton, Deputy Commissioner of Rangoon, remarks :—" Those best qualified to form a judgment on the subject are of opinion that lepers are more numerous now than formerly." Surgeon-Major Baker and Dr. Frenchman have come to the same conclusion. Mr. Bayne observes :—" The opinion of these officers is of special value, because both of them, particularly Dr. Baker, have paid much attention to leprosy, and have much experience of it. Dr. Baker gives reasons which are based on observations of actual facts, and are not merely impressions."

#### CEYLON, TONQUIN

In Ceylon, as I learned by personal inquiries made in the island in January, 1891, leprosy is extending rapidly amongst the native population. The Leper Asylum at Hendala, near Colombo, one of the oldest in India, which in 1880 contained only 100 lepers, has now 208; and Dr. Meier, the resident Superintendent, does not hesitate to say that, in his opinion, the disease is steadily increasing.

There are about 200 lepers at large in the city of Colombo, and about 1800 in the island. Dr. Kynsey, the Surgeon-General for Ceylon, reported in 1885 that leprosy had decidedly increased since 1862, as the number of patients then in the asylum was 63, but had increased in 1885 to 151. Dr. Kynsey says :—"I have no doubt that a certain reproduction of the disease is going on, whatever the factors are at work, and that the proportionate growth of leprosy in the colony is by no means diminishing."

In a communication to the Government of Hawaii, Dr. Kynsey remarks that leprosy is not confined to any community, but is more frequently observed among the Singhalese and Tamilins; seldom among the Eurasians, and more rarely among Europeans, and is chiefly found among the poor, ill-fed, ill-housed classes of the community. The Eurasians, I may observe, as well as the better-class Europeans, absolutely decline to be vaccinated from native lymph sources, to which the native population are obliged, reluctantly, to submit.

An Anti-Leprosy Association has recently been organised in Bengal by certain benevolent members of Hindu communities in the Presidency. Their efforts are being directed especially to ameliorate the condition of the lepers in the Santhal Parganas, forming the southern portion of Bhagalpur, a very poor district, where the people can do little to help either themselves or their afflicted neighbours.

The *British Medical Journal* gives an account of a leper village near Hanoi, Tonquin, where, out of a population of 400, nearly one-half are affected with leprosy. The lepers of Hanoi doubt the contagiousness of leprosy, and the chiefs of the village affirm that there has not been a single case of contagion.

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## CHAPTER 2: IS LEPROSY CONTAGIOUS?

ONE of the most debatable points in connection with the spread of leprosy is that of contagion, and amongst dermatologists there are rival schools—contagionists and anti-contagionists. In the report of the Committee of the Royal College of Physicians, issued in 1867, thirteen were in favour of contagion, and thirty-four physicians and experts in various parts of the world were convinced that the disease was non-contagious. The chief authorities in Norway, including Boek and Danielsen, who had forty years experience, were opposed to contagion; and this is the prevailing view in Norway at the present time.

Dr. G. A. Hansen says :—"If people wash themselves, and take the least care of themselves, when they come in contact with lepers, I do not think there is any danger whatever. It is a remarkable fact that not one of the nurses or servants in our Asylums (Norway) has caught the disease, although they daily wash and dress the patients."

In the pursuit of my investigation, I have been confronted on every hand by the most conflicting theories with regard to the causation of leprosy, and particularly with regard to this question of contagion. The contagionists, when pressed, I found invariably included inoculation, and interpreted the word in that sense. They admitted that the leprous discharge might be touched with impunity, when the integument is intact, but not otherwise. Every nurse, doctor, attendant or laundress, in the hospital, is bound to come in repeated contact with pus from ulcerated tubercles. It is only by the insertion of the leprous virus into the blood, through a sore, prick or abraded surface, that the disease is communicable. This view is now held by the highest authorities in all parts of the world. At the same time, there are others who hold that the disease is transferable in a lesser degree by inhalation, heredity and cohabitation.

From personal inquiries made at asylums and lazarettos in various countries where leprosy is endemic, I am convinced that, apart from the risk of inoculation, there is little or no danger of contagion, using the word to mean simple contact between unbroken surfaces of the body. So far as my investigations have extended, the only country where the belief in communication by simple contact prevails to a certain extent is Hawaii; but here also I found much diversity of opinion, not a few using the word contagion to include inoculation, both accidental, as in a cut or a sore, and by design, as in vaccination.

I believe that the instances of communication apart from inoculation of this disease (if they exist at all) are extremely rare, but the theory is opposed to the results of most inquiries.

A medical resident of sixteen years' standing in British Guiana told me that the disease was being extensively disseminated in some unexplained and mysterious way, as the infected population had greatly augmented of late years; you encountered them in churches, at balls and public meetings, in the streets, and the market-place. Several leprous patients were pointed out to me at the Colonial Hospital, in close proximity to the other inmates, and I may observe that only the worst cases (and these belonging to poor families) are segregated at the Leper Hospitals. The lazarettos at Gorchum and Mahaica, British Guiana, at Trinidad and Barbadoes, were full to overflowing; new wings were in progress, or had recently been added, and the demand considerably exceeded the present accommodation in each establishment. No one appeared to be afraid of contagion, and I could not learn of a single case so communicated. After going through the various buildings of the Leper Asylum at Mucurapo, Trinidad, and seeing the unfortunate patients in every form of this hideous

and mutilative disease, I said to the lady superintendent (of Dominican Sisters), who had been in charge of the institution for seventeen years, "Have you no fear of contagion?" "Not the slightest," she promptly replied. "And you and your assistants do all that conscientious nursing requires?" (This includes washing the sores and bandaging the limbs of the unfortunate inmates.) "Certainly, and feel it a joy and privilege to be of service to these afflicted people." "Has any case of infection by contact to doctor, nurse, attendant, or laundress ever been reported during your superintendence?" "Not one."

This experience was confirmed at the lazarettos in Barbados and elsewhere; and some of the nurses and attendants have been employed from ten to thirty-two years. At the leper asylum in Ceylon, I learned that the laundry work had been managed by one family for three generations, and no case of infection had ever been recorded of laundress, nurse, or doctor. Similar experiences were related to me in South America, South Africa, and at the leper asylums in Norway.

The officials connected with the leper settlements at Molokai, and the Hospital of Suspects, Kalihi, near Honolulu, where I saw some of the worst cases, have not the slightest fear of contagion. They told me that they had never known a medical attendant or nurse contract the disease by simple contact. Of inoculation through sores, or wounds in the skin, or the entrance into the blood through the minutest prick or abrasion, a wholesome fear is entertained, not only amongst the native population, but by the officials; and not without sufficient reason, as will be seen by the facts detailed in another chapter.

The British Consul in Crete, in a memorandum to Baron Ferdinand de Rothschild, M.P., on the subject of leprosy in that island, concludes that the disease is not contagious, from the fact that there are "several cases of healthy women married to, and living with, lepers for years without being in the least affected. In fact, if the disease were decidedly contagious and hereditary, it would inevitably spread much more than it does, considering that the lepers are perfectly at liberty to marry among themselves or with healthy persons, and that their children remain with them like those of other people, without any precaution being taken on their behalf."

Dr. Arthur Mouritz, in his official report to the Honolulu Board of Health, dated Molokai, February, 1886, says :—" The washerwoman for the hospital Kalowao (Molokai) has washed the soiled clothes of the worst cases, certainly many of them so, in the settlement for the past seventeen years."

In a communication by Dr. Van Deventer Director of the Suburban Hospital, Amsterdam, to the Hawaiian Government, the writer says :—" Not one case of contagion has ever been recorded."

Dr. Trousseau, of Honolulu, who told me he devoted much attention to the causation of leprosy in Hawaii, says :—" Is leprosy infectious or ever contagious in the proper sense of the word, that is, by contact mere and simple? I emphatically say 'No.'" I am supported in that opinion by the whole medical world, and by my personal experience."

Dr. Manget, formerly superintendent of the Leper Asylum, British Guiana, observes :—" My own opinion is in favour of the contagiousness of leprosy, and that it may be propagated by the matter of ulcerated tubercles being applied to any raw surface; but I admit that I have met with cases which would seem to preclude the idea that the disease can be considered contagious in the ordinary sense of the term."

In the Leprosy Committee Report of 1887, signed by Dr. C. Handfield-Jones, chairman, it is stated "The committee believe that leprosy is not contagious in the conventional sense of the term, but, if at all, is only so in low degree and under exceptional circumstances."

Dr. Max Sandreczi, director of the Hospital for Children, Jerusalem, says :—" I am obliged to declar that the result of my researches gives me the conviction that leprosy is by no means contagious, and that consequently the exclusion and isolation of the patients is both a useless and a cruel measure."—*Lancet Aug. 31, 1889, pg 423.*

The *Lancet*, June 22, 1889, p. 1252, says :—"There hardly an hospital in London that has not had within its walls cases of leprosy within the past decade—in-patients, it is true, who have contracted the disease in countries where it is indigenous. Nor, so far as we know, has there ever been an instance of the communication of the disease from one of those subjects others in this country."

Mr. Jonathan Hutchinson, F.R.S., LL.D., in answer to the questions published in No. 1 *Journal of the Leprosy Investigation Committee*, "Is leprosy contagious?" suggests to inquirers into this subject the following important considerations :—"A certain number of lepers arrive every year in England from abroad. They usually remain in England and are allowed to mix freely with their friends. Children are permitted to go to schools, married couples continue co-habitation, inmates of hospitals and workhouses are, unless specially loathsome, placed in the general wards; in brief, not a single precaution against contagion is ever taken, and yet the disease never spreads. Precisely the same statements are true of French practice. It is believed that there are six lepers in Paris at the present time, and I am told that two leading Paris surgeons have each a leper employed as a household servant. Yet the disease never spreads in Paris any more than in London.

"The officers of leper hospitals, surgeons, nurses, and students, hardly ever become the subjects of the disease. . . In Norway I believe that no instance of an official becoming a leper has ever been known, although the exposure has been most free."

And in a footnote to his article, page 74, Mr. Hutchinson adds:—"Surgeon-Major Porteous, in 1855, published a list of servants who had been employed in the Leper Hospital, Madras. It included eleven servants who had been employed in the wards in periods varying from ten to fourteen years. None of them had become the subjects of leprosy."

Dr. Van Someron, who had charge of the hospital six years later, says :—" There is no record of any of the medical officers connected with the lazarettos having become affected with the disorder, nor have I heard of its ever having attacked the attendants of those who in private families were its victims."

Dr. W. Munro, the author of a work on leprosy, explains his views of contagion as follows :—" I do not pretend to express any distinct belief as to the probability of the disease being conveyed by simple contact, being more inclined to believe that it is carried by inoculation in most cases."

The *Lancet* of June 28, 1890, referring to the theory of contagion in connection with the spread of leprosy, says :—" But there are conditions and limits to the contagion: probably it occurs only through inoculation." This opinion is supported, according to the *British Medical Journal*, October 11, 1890, in the despatch from the Government of India relating to the isolation of lepers. It particularly notes that many of the medical authorities in India consider that the evidence at present

available goes to show that leprosy is contagious only in the sense that it is inoculable. The "Report of the Royal college of Physicians on Leprosy," issued in 1867, states "that the all but unanimous conviction of the most experienced observers in different parts of the world is quite opposed to the belief that leprosy is communicable by proximity or contact."

Sir Erasmus Wilson says leprosy is endemic, but not contagious.

Dr. William B. Atkinson, secretary of the State Board of Health, Philadelphia, in diagnosing the case of John Anderson, a Swedish leper, observes that there is no danger of contagion except by inoculation.

Dr. Shoemaker, of Philadelphia, says leprosy is only contagious through inoculation.

In a study on leprosy, based on personal observation, Dr. L. Duncan Bulkley has arrived at the conclusion that the disease is not in any proper sense of the word contagious, but there is reason to believe that under certain conditions it can be inoculated.—*Family Doctor*, June 11, 1892.

Dr. H. M'Hatton, Macon, Georgia, concludes a paper "On the Propagation of Leprosy," published in the "Transactions of the Medical Association of Georgia," by stating that it is non-contagious, and quotes the report of the committee of the English College of Physicians to the effect that, out of sixty-six answers to their inquiries, only nine speak of it as contagious, forty-five as non-contagious, and twelve are silent.

Dr. John L. Mears, Medical Superintendent of San Francisco Board of Health, says—" Although this disease (leprosy) may not be contagious in the ordinary acceptation of that term, we are satisfied that it is communicated by inoculation."

Drs. Fox and Graham report in the transactions of the American Dermatological Association for 1883, page 197, as a result of their combined investigations, that leprosy is contagious by inoculation, and *there is no reason for believing that it is transmitted in any other way.*

Dr. P. W. Farrar, Nevada, Iowa, W.S., in a communication to Mr. L. F. Andrews, Secretary, State Board of Health, February 21st, 1885, p. 205, says:—"Leprosy is not contagious in the usual acceptance of the term. It requires actual inoculation of pus or blood into the circulation through open vessels or abraded surfaces, and there must be favourable cachectic condition to the action of the virus."

Dr. Bevan Rake in a communication to the Acting Surgeon - General, dated Maraval, 11th July, 1889, says :—"In a paper received from St. Louis, Missouri, only the other day, I saw that Dr. Bockmann estimates that there must be in Minnesota about 100,000 persons of Norwegian descent whose ancestors were lepers; and yet leprosy never appears amongst them; all the leprous Norwegians in the State are imported, so that leprosy does not appear to have spread there either by heredity or contagion."

In an article entitled "Notes on Leprosy as observed in Antigua, West Indies," Mr. John Freeland, Government Medical Officer, observes :—" On the subject of contagion I certainly agree with Mr. Hutchinson when he says that the profession divides itself into two camps, one asserting contagion and the other denying it; but I think that the contagionists, or those who believe that contagion takes an important share in the spread of the disease, are, in this part of the world at least, in a decided

minority. No one, I imagine, would absolutely deny that contagion might be artificially effected by inoculation; but the chances of such an event happening accidentally are so remote that it can hardly be taken into account."—*British Medical Journal, October 5th, 1889.*

Dr. James H. Dunn, Professor of Dermatology in the Minnesota Hospital College, in a clinical lecture on leprosy, reported in the *North - Western Lancet*, March 1st, 1888, said : — " The question, Is leprosy contagious? has been a source of much discussion and contention. At times and in some countries it has been looked upon as markedly contagious. Some writers still regard it so; but at the present day the great majority of dermatologists teach that it is not, at least not in the ordinary sense of the term. There is no evidence to show that the malady. has in any instance spread by contagion in a country where leprosy is not endemic."

Mr. T. H. Wheeler, the British Consul of Bogota, South America, in his Report for 1890 to the Foreign Office, No. 804, observes that although public opinion favours the belief prevalent in Colombia that leprosy is contagious, in the climates of Tocaima and Agua de Dios it is not so :—" For . more than one hundred years that these places have been the chosen resort of lepers in all stages of the disease, who have mixed freely with the other inhabitants of the district, there is no case on record of the disease having been contracted by contagion."

Dr. Alfred Ginders, in a communication to the Inspector-General of Hospitals, etc., Wellington, New Zealand, on Leprosy among the Maoris, dated Rotorua, 4th July, 1890, states his opinion that the disease is not infectious or contagious in the ordinary sense, but "that, in all probability, the worst cases have arisen from direct infection of the blood by inoculation, either accidental or premeditated." The only premeditated form of inoculation in vogue is that induced by the lancet of the vaccinator.

The Medical Superintendent, Leper Asylum, Calcutta, Dr. Madhub Chunder Ghose, in his Report to the Honourable H. Beverly, President of the District Charitable Society of Calcutta, 27th August, 1889, says :—" It seems to me, after an experience of fifteen years in the asylum, that leprosy is not contagious or infectious in the proper acceptance of the term. Recently I have taken the full history of all the lepers in this asylum, and, with one or two exceptions, the origin of the disease could not be traced to contagion; some acquired the disease from an hereditary taint, some from the effects of syphilis, and the indiscriminate use of mercury; but in most of the cases the origin of the disease could not be satisfactorily traced, but I have no doubt that the disease can be communicated by an abraded surface absorbing leprosy matter."

Dr. Ghose adds :—" To prove my assertion as to the non-contagiousness of leprosy, I beg to bring forward the following facts, that is to say, my own personal experience of the disease for over fifteen years. There is an inmate of the asylum, by the name of Doris, who is a non-leper, and who has been at the asylum for over twenty years, sleeping in the same ward, constantly mixing with the lepers, eating with them, etc., and he has not contracted the disease.

"There is also an idiot boy at the asylum, a non-leper, who has been an inmate for over ten years; he also sleeps, eats, and mixes freely with the lepers; this boy, also, has not the slightest trace of the disease.

"The dhoby attached to the asylum, with his father and grandfather before him, have washed the clothes of the lepers for more than thirty-five years; none of those showed any signs of the disease.

"The native doctor, Runchanun Dass, who lived with his family for over ten years in the premises of the asylum, neither contracted the disease, nor did any of his family.

"The dressers, Buddye and Narain, acted, the former for twelve years, and the latter for ten years: they did not suffer from the disease.

"The dressers, Rajjian and Jaddao, have been attached, off and on, the former for eight years, and the latter for ten years (this man is yet at the asylum as a dresser), and I have recent news regarding Rajjian, who has gone to his country: these men are unaffected. The dressers have, daily, to handle sores, wash unhealthy ulcers, apply ointment, etc., besides having to shave the lepers periodically. The present Christian cook and his father have been working at the asylum for over twenty years. The father died a non-leper, and the son is free of the disease.

"Other cooks, who work for a few years and then go to their country, have never been attacked. The sweepers, Roohon and Bustee, have worked more than seven years without contracting the disease. Both the men have been discharged, and are yet living. Other sweepers, who have been working a short time each, also have not suffered.

"The Durwana have not contracted the disease. The present Durwan has been now over five years in service.

"I have myself been attached to the asylum now for over fifteen years, visiting the lepers daily, cutting and handling them, without having suffered.

"My predecessor, Dr. K. Stewart, was in medical charge of the asylum for over twelve years, and remained free of the disease till his death. My assistant, Dr. H. W. Mitnish, M.R.C.S., England, has been at the asylum for over eight years, and is healthy."—*Report presented to the Hon. H. Beverley, M.A., dated Calcutta, 27th August, 1889.*

Dr. Vandyke Carter, of Bombay, says:—" I have not met with any evidences of the contagious nature of leprosy that bear sifting."

Dr. Day, of Calcutta, who, according to Dr. Balehandra Krishna, L.M. and S. of Bombay, has made leprosy his special study, says, in the *Indian Mirror*, that he does not believe in the contagious nature, of leprosy.

Dr. J. Jackson, Bengal, in reply to a communication from the Royal College of Physicians, writes :—" It is not contagious in the ordinary sense of the term. . .—*Leprosy Report, p. 202.*

When Mr Commissioner Acworth, of the Bombay Municipal Corporation, paid an official visit to the Madras Leper Hospital, he was informed that the sweepers employed to wash the ulcers of the lepers did not contract the disease, although some of them had been doing the work for fourteen years.

Mr. A. Mitra, L. R. C. P., L. R. C. S. (Edinburgh), Chief Medical Officer, Kishmir, in an article in the *American Journal of Medical Sciences*, Philadelphia, 1891, observes :—" Of course, contagion by inoculation is possible, and often takes place in various ways. In India, people usually have their feet and skin bare, and, therefore, there is every likelihood of inoculation."

Mr. A. Mackenzie, Secretary to the Government of India, writing from Simla to the Minister of

Foreign Affairs, Honolulu (October, 1885) says:—"On the whole, it is believed that the medical evidence tends to show that the disease is not contagious. In support of this view, it may be mentioned that not a single servant of the asylum at Almora, in the Kumaun District of the North-Eastern Provinces, appears to have contracted the disease during the thirty-one years for which there is information."

Dr. W. A. Kynsey, the Surgeon-General, Ceylon, says:—"It (leprosy) is not considered contagious in Ceylon, and lepers are not generally shunned by their relatives or friends for fear of infection, but are often maintained by them in their own houses. It is, in my opinion, not contagious as syphilis, Parangi, the exanthematous diseases. There is no conclusive evidence in the hospital records of, communicability by direct contact with, in close proximity to, diseased persons. The attendants of the hospital have for years been in close association with lepers in all stages of the disease, the head-servant for more than twenty years; and the washing of the establishment has been performed by a family in the neighbourhood for four generations; but not a trace of the disease, as I have reason to know, has been observed among *them*."—*Leprosy in Foreign Countries*, p. 9.

Dr. Dixon, Medical Superintendent of Robben Island, Cape of Good Hope, in a report published in the *Journal of the Leprosy Investigation Committee*, No. 3, July, 1891, says :—"The evidence gathered from officials and patients long resident on Robben Island shows that there is no authentic instance, with possibly one exception, of any non-leprous person on the island having contracted the disease, either direct or indirect, with the leper residents."

Dealing first with the possible exception, the circumstances were as follows :—A lad, son of the shoemaker, constantly associated with the lepers; he ate of food given to him by them, and was in the habit of fishing with their tackle; it is stated that on one occasion, when using the lepers' tackle, *he had a wound on his finger*. For about ten years he exhibited symptoms, said to be those of leprosy. He died in 1888, having suffered for about ten years. It cannot be held that there is conclusive proof that this solitary case originated by contagion.

The evidence of the older officers goes to show that, until about the year 1884, all the lepers' soiled and filthy linen was washed by the female lunatics in cold water only, and was often mixed with the underclothing of the lunatic patients in the process of washing. This practice was probably in vogue for upwards of thirty years, yet there is no alleged or recorded instance of any lunatic patient contracting leprosy on Robben Island.

Dr. W. H. Ross, Police Surgeon in Cape Town, was asked—

Q. 252. "You are aware that the bacilli have been in the saliva 'of lepers, would not that render the disease liable to be spread by the act of kissing?"—"Not unless there was some cracked surface on the lips or mouth. I have never known of a case of leprosy having been contracted on the island, although they mix there freely." — *Report of Select Committee on the Spread of Leprosy, Cape of Good Hope, July, 1889. Minutes of Evidence.*

Mr. Davidson of Madagascar says :—"Leprosy is contagious by inoculation only."

Dr. W. V. M. Koch, the Acting Superintendent of the Leper Asylum, Trinidad, writing on the

subject of contagion, explains that "the entrance of the (leper) germ into the system will take place if it is brought into contact with an absorbing surface—any abrasion of skin or mucous membrane being sufficient for this purpose."— *Surgeon General's Report for 1891*, pg. 71.

Dr. Alexander Abercromby writes to me from Cape Town, April 20th, 1892, that after thirty years experience he holds that leprosy is partly contagious, and explains that he does not use the word contagion in the strict sense, "but when there is a discharge from a leprosy sore, and this coming .in contact with the tissues of a healthy person will develop the disease; or the saliva of a person coming into contact with a slight abrasion of cuticle, or healthy mucous surface."

Under the head of "Leprosy in Havana," the *British Medical Journal*, June 18th, 1892, says that the number of cases in the Real Casa Hospital de San Lazaro at the present time averages 80 to 90, but seldom reaches 100. In 32 cases (40 per cent.) no family history of the disease could be obtained. 'In no single case could leprosy be traced to contagion, and of the 25 persons employed in the hospital, only one (a chaplain) contracted the disease during the last 12 years. Dr. Arango, the present medical superintendent, has never known any case in which the disease could be distinctly traced to contagion, and he knows persons who have lived twenty-eight or thirty years in the hospital without contracting it."

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### CHAPTER 3: LEPROSY COMMUNICABLE BY INOCULATION

WHILE the preponderance of medical and scientific opinion is against the theory that leprosy is, in the ordinary sense of the word, a contagious disease, the evidence in favour of its being communicable by inoculation is overwhelming. Even those who strongly uphold the theory, of contagion invariably include inoculation as one of the principal means of communication. However widely authorities differ as to the other causes to which leprosy is attributed, such as climatic influences, unwholesome and putrid food, want of salt, a fish diet, malaria, heredity, contagion, syphilis. and insanitation, we may safely affirm that there is a practical consensus of opinion as to its inoculability.

To the question, Is leprosy inoculable? Sir William Moore, K.C.I.E., late Surgeon-General, Bombay Staff, Hon. Physician to the Queen, says :—"Professors Damisch and Kobner proved by an experiment that leprosy may be communicated to animals by inoculation. There is also the well-authenticated case of a boy, Miller, who pricked himself with a needle used by a leper, from which injury leprosy developed. Then there was a case of a medical student pricking himself when performing a *post-mortem* examination on a leper."

Sir William Moore has himself cited (*Journal of the Leprosy Investigation Committee*, No. .1, p. 28) a case of inoculation in a person with an injured hand who was employed to rub sulphur ointment on leprosy patients, his family being quite free from the disease, and no history of previous association with lepers being obtainable. He considers that the sulphur ointment had no protective influence. "All that is required is the transmission of leprosy discharge, which contains the microbe or germ of leprosy, to the healthy body. But in order that the poison may act it is necessary that it should come in contact with an abrasion or sore on a healthy skin. An infinitesimal portion of leprosy discharge is quite sufficient."—*Leprosy and Leper Houses*, pp. 2 and 3.

In a communication to the secretary of the Leprosy Fund, dated June 2, 1890, Sir William says:—"Leprosy has been attributed to the following causes:--(1) Climatic heat; (2) unsanitary conditions ; (3) want of salt; (4) vegetable diet; (5) fish diet; (6) lime in water; (7) malaria. But facts show that none of these are the causes." After giving the reasons for this conclusion, the writer adds :—"My views that leprosy is a phase of inherited syphilis, communicable, however, by inoculation, and the reasons for such views, have been expressed in my 'Manual of. the Diseases, of India,' 1887."

This view accords with the most eminent medical authorities in all countries where leprosy prevails. In a report on Leprosy in Cyprus, by Dr. Heidenstam, chief medical officer for the island, transmitted by the High Commissioner, Sir Henry Bulwer, to Lord Knutsford, and presented to both Houses of Parliament, March, 1890, the author, after dismissing various theories put forward to explain the spread of leprosy, such as heredity, the use of putrid food, salt pork, mal-hygiene, malaria, and miasma, says :—"My researches have led me to the conclusion that leprosy is what should be termed an inoculable disease, inasmuch as the virus is transmitted into the system in like manner as many other maladies, notably syphilis, anthrax, glanders, etc.; but it has not the same action in all constitutions, nor in all circumstances of life, and is of a long and slow incubation. My further researches and studies have not in any way altered the opinion I then expressed, and I am more than ever convinced that the direct cause of leprosy is simply and solely due to the inoculation of the virus of a person affected into another up to that time free.

"It has been advocated that instances of the communicability of leprosy have been rare, and so

doubtful that it is impossible to rely on their authenticity. In this island, at least, I have met many cases where the slightest doubt could not be entertained."

Dr. Olavide, of Madrid, at the Paris Dermatological Congress of 1889, maintained that leprosy was evidently a parasitic disease, contagious, and inoculable. This authority refers to a curious fact, that it is observed by preference amongst the soldiers and monks who have resided previously in America and in the Philippine Islands. In Spain, while vaccination is not always carried out amongst the civil population, it is rigorously enforced in the army, as I was informed some years ago by the then British Consul; Mr. M'Pherson, of Madrid.

At the same Congress, Dr. Zambaco-Pacha, communicating the results of his inquiries concerning leprosy in the Isle of Mitylene, mentions that while he is an anti-contagionist, the discovery of the leprous bacillus has somewhat shaken his ideas. He records the curious fact that, of about 120,000 souls in Mitylene, 15,000 are Mussulmans, and amongst these there is not a single leper to his knowledge. Dr. Zambaco omits to note the fact that Mussulmans in most countries have a rooted aversion to, and distrust in, vaccination, and escape the ordeal whenever they can.\*

\*This repugnance was made known to me by means of personal investigations in Ceylon in 1890-91. "The First Triennial Report of the Working of the Vaccination Department in Bengal" mentions, amongst other races, the Mahomedan Ferazis, who display the utmost repugnance (as do also the higher classes in India) to vaccination.

Dr. Sutherland, of Patna, observes that :—"Another test of the prevalence of leprosy in this district was to ascertain the proportion of leprous persons in Patna gaol. Among Mussulmans, two were affected, or one in twenty-eight; while among the Hindoos there were seventeen persons affected, or one in every sixteen."

"This is certainly a startling assertion, one person in every sixteen affected with the taint of leprosy, and yet it comes from the pen of a careful *observer*."—*Leprosy a Communicable Disease, by Surgeon C N. Macnamara, p. 15 and 16.*\*

\*The *Madras Times*, Nov. 28, 1891, referring to the opposition to vaccination, which, the editor observes, is by no means confined to the ignorant populations,' says :—"Official 'reports show notably that the Lubbays and Mahomedans, as a class, resist vaccination, and do much to prevent the authorities from tracing the age of children over six months, with a view to enforcing the Act. Male vaccinators, it is remarked, are prohibited from entering their houses on the ground that these are *gosha*, and Hindu female vaccinators are unable to cope with the difficulty satisfactorily. It has been proposed to employ a Mahomedan female vaccinator, but a suitable woman who can read, write, and serve notices has not yet been found."

In the *Archives de Médecine Navale et Coloniale*, September, 1890, is an article by Dr. F. Forne on the "Contagiousness of Leprosy," of which theory the writer is a firm adherent. Dr. Forne says:—"One of the arguments invoked for the purpose of denying the contagious character of leprosy consists in saying that the persons attending on the lepers—religious persons, infirmiry attendants, medical men—do not contract leprosy. It is important to refute that assertion by showing that it is contradicted by facts." The writer then proceeds to give details of the case of Father Damien, who, after sixteen years' residence at the leper settlement at Molokai, succumbed to this disease, as Dr. Forne supposes, through contagion. Of this there is not the slightest proof, unless contagion is understood to include inoculation, and that this is intended would appear by the following reference to another case to illustrate the author's theory:—"Dr. Hulin de Goden, medical officer of the leper settlement of Desirade (French Antilles), says that Sister A. became leprous after having pricked herself in the fingers of her hand with a sewing-needle while mending articles that had been used by

lepers. Whether it was after having pricked her fingers matters little, since it is by the skin of the hands that the leprous contamination would have taken place in both cases. He observes that, in general, the washing of linen is habitually practised under the supervision of the Sisters, while sewing, on the contrary, is more often carried out by themselves.

"The accidental inoculation would have taken place before 1878, the date of the first leprous manifestations; in 1881 the affection had taken so considerable a development that Dr. Hulin de Goden decided to isolate the patient.

"An analogous fact has been observed in Tahiti, where leprosy has been transferred by passing from the native race to the white race, absolutely in the same manner as we have the fact produced in the Sandwich Islands, in New Caledonia, and in Guiana.

"A religious woman from Europe, free from hereditary taint, who was working at the linen-drapery of the hospital at Tahiti, inoculated into herself the terrible malady with a sewing-needle under the same conditions as the religious woman of Guiana, She was sent back to France in 1881 as being affected with leprosy."

Dr. Woods, cited by Dr. Hahn, expresses himself, thus:—"In the hospitals of Calcutta, and other districts of the East Indies, hospital attendants, positively free from all hereditary taint, have contracted leprosy by means of accidental inoculations undergone in the exercise of their functions; Dr. Robertson, Director of the Leper Settlement of Seychelles, became leprous during his period of service in that house."

Dr. Forné says: "Dr. Hillebrand cites the following case :—At Borneo a young European boy was in the habit of playing with a child of colour affected with leprosy. One day this latter plunged the point of his knife into an anaesthetised part of his body, an operation which was immediately repeated by his comrade with the same knife. Some time afterwards the European started for Holland, there attained his maturity, and, at the end of nineteen years, returned to Borneo fully affected with leprosy."

In a memoir read by Besnier before the Academy of Medicine, Paris, October 11th, 1887, Leloir, a high authority, is stated 'to have pointed out that lepra would appear to be contracted by inoculation and not by contact, from the fact that the epidermis does not, as a rule, contain bacilli, and that the epidermo-dermic basal membrane apparently constitutes a barrier to the passage of the micro-organism in either direction.

One of the latest contributions to 'this important subject is an able work entitled "Leprosy," by Dr. George Thin (London, 1891), in which the question of contagion is fully discussed. The author has succeeded in bringing together (pp. 139-166) the largest number of examples of alleged contagion of any writer I have met with. Some of these are distinctly traceable to inoculation by means of sores, pricks, gunshot wounds, abraded surfaces. The following are amongst the examples:—

No. 14.—Dr. Duncan, Civil Surgeon, Julpaiguri district, states that a healthy woman sustained a gunshot wound in the thigh. She had no leprous relations, but her husband was a leper with ulcerations on his hands. The woman became a leper.

No. 53.—A young coloured boy, while suffering from an eruption, played with a boy who was a leper; the previously healthy boy became a leper about a year afterwards, whilst his family remained

untainted.

No. 67.—Dr. W. H. Ross cites a case which occurred in a European family without any leprosy taint. J. K., while playing with leper boys, pricked himself with one of their fishing hooks, and became an undoubted leper.

On page 162 Dr. Thin remarks: "No one doubts that syphilis is a contagious disease, because surgeons, nurses, and attendants may fulfil their duties for many years in Lock hospitals without becoming infected; and it is a matter of every-day experience that a member of a large family may pass through all the infectious stages of syphilis, living in constant association with brothers and sisters, without the disease being transmitted; yet it is quite certain that in all those cases the disease could be communicated by an inoculation of the simplest kind." From this illustration we infer that Dr. Thin considers leprosy transmissible by inoculation, and sometimes uses the word contagion in that sense, as I have noticed with many other writers on leprosy.

On page 66 Dr. Thin quotes Dr. Donelan as authority for a case of leprosy due to inoculation.

Professor Cayley, F. R. C. S., says (*Journal of the Leprosy investigation Committee*, p. 36) that leprosy is directly inoculable.

Dr. John Murray, Inspector- General of Hospitals London, in a communication to Dr. P. 5. Abraham, Secretary of the National Leprosy Fund, June 9th, 1890, says: "I consider that it (leprosy) is communicable from the sick to those that are well, probably through a broken surface, as an ulcer or wound, and that it may be communicated by inoculation."

Dr. Liveing, physician to the Middlesex Hospital, in his Gulstonian Lectures for 1873, says:—"Facts, too, are slowly accumulating which tend to prove that the casual inoculation of leprosy matter is one actual means of spreading this fell complaint." Dr. Hoegh, in his "Report on Leprosy" for 1855, quoted by Liveing, "suggests that the disease is communicable through the *Itch Acarus* (presumably the *acarus scabici*) which in Norway commonly infests the skin of lepers."

In his handbook on the "Diagnoses of Skin Diseases," 1880, p. 284-5, Dr. Liveing writes:—"Leprosy has within the last thirty years been imported and spread rapidly amongst natives of certain islands where it was before quite unknown. It is probable that in a certain stage of the disease it is inoculable. This appears to me the most reasonable explanation of its progress amongst a new population."

In reply to a communication which I addressed to the superintendent of the Leper Asylum, Bergen (which institution I visited in 1889), Dr. G. Armauer Hansen, the Physician General of Leprosy in Norway, the discoverer of the *bacillus leprae*, says :—"I think leprosy to be inoculable; I, moreover, think that leprosy in most cases is transferred by inoculation."

Sir Erasmus Wilson, F.R.S., in his work on "Cutaneous Disease," 1864, says :—"Lepra is a blood disease. The origin of the disease is doubtless an animal poison, but the source and nature of the poison are unknown. One remarkable case lately under our observation has led to the belief that it may be communicated by inoculation."

## INDIA

Dr. Balchandra Krishna, L.M. and S., in his pamphlet entitled "Leprosy in Bombay in its Medical

and State Aspects," suggests a mode of reconciling the conflicting opinions as to the contagious nature of leprosy. He quotes the *Lancet* of June 29, 1889, "The discovery of the *bacillus leprae* by Hansen has greatly strengthened the belief in contagion. This bacillus has never been found in any disease or condition other than leprosy, while it has invariably been found by competent observers in the skin of tuberculated lepers from all parts of the world. In the non-tuberculated cases, on the other hand, it is invariably absent in all the sores in the diseased nerves. But, it has been found in the nerves themselves when the disease is not of too old a standing, and in those skin lesions of mixed nerve and skin leprosy not dependent upon disease of the nerve trunks. This goes far to explain the non-transmissibility of nerve leprosy. The evidence, on the whole, then, is strongly in favour of the disease being communicable; but all are agreed that it is only so in the *ulcerating stage* of the *tubercular* or the *mixed form* by inoculation of the pus on an abraded surface, either directly from the patient, or from the stained clothing or other objects contaminated by the secretions from the leprosy sores. It is certainly not communicable by aerial infection in the same way as small-pox or other exanthemata."

"This seems to me," says Dr. Krishna, "to explain satisfactorily the reasons why some observers found cases which convinced them of the contagious nature of the disease, while others met with some which did not show any contagious nature. It also explains the three cases which I have mentioned above, as on no other hypothesis can they be explained."

In a paper on leprosy in the *Times of India* (Bombay), August 13, 1889, Dr. Balchandra Krishna says that the evidence in proof of the communicability of the disease from man to man is overwhelming.

Brigade-Surgeon H. V. Carter, of Bombay, referring to the spread of leprosy, says: "The direct communicability of leprosy is at least a good working hypothesis."

Surgeon-Major Pinkerton, in his evidence before the Royal Commission on Vaccination, testified that leprosy was increasing in the cities of India, and believed that it was inoculable.—*Second R.C. Report, p. 6.*

In a letter to the *Times*, June 12, 1889, Surgeon-Major Pringle, late of the Sanitary Department, Her Majesty's Army, Bengal, refers to the danger of spreading leprosy by both inoculation and vaccination. "The fact is, the amount of the virus of leprosy with which Father Damien was unknowingly fatally inoculated might have been, and probably was, very minute. I am amply justified, from a careful study of smallpox inoculation and vaccination during the whole of my thirty years' Indian service, in stating that, unless prompt and stringent measures are taken in Bombay, leprosy inoculation will become far more possible, and hence probable, than it may appear at present."

Dr. Joq. Frank Periera, Medical Superintendent of the Leper Asylum, Bombay, India, in a communication to the *Times of India*, November 18, 1890, gives his opinion that the contracting of leprosy is mainly due to its inoculation by means of open sores from one person to another, and adds: "In most, if not in nearly all the cases treated by me, their previous histories have, almost without exception, disclosed the fact of the disease being due chiefly to heredity and inoculation."

Dr. Cunningham, the special adviser to the Government of India, admits the principle of the inoculability of the disease.

As to the supposed cause of leprosy, "my experience," says Dr. S. M. Shircore, of Moorshedabad, India, "does not tend to the belief that this disease is contagious in its nature, unless by direct inoculation."

Dr. H. A. Ackworth, Municipal Commissioner, Bombay, who has devoted much attention to the leprosy question, writes to me from Bombay, 24th May, 1891:—"All the medical men that I have met have agreed 'that in whatever of any other methods leprosy may be transmissible, it is certainly so by inoculation.'"

Dr. W. K. Hatch, M.B., Surgeon, Bombay Army, reports in the *British Medical Journal*, June 2 6th, 1886, p 1713, that on June 27th, 1885, a student, while making a *post-mortem* examination on the body of a confirmed leper, cut his left forefinger at the top, and received a small abrasion, which resulted in certain characteristics of leprosy. This writer has been promised further particulars.

Dr. Neve, of Kashmir, says that in leprosy the *bacillus lepra* is always present; that the period of incubation is so long, "that a few positive instances of inoculation or contagion outweigh an immense amount of negative evidence."—*Leprosy, by Dr. George Thin, p. 62.*

Dr. G. D. M'Reddie, Civil Surgeon, in his letter to Dr. Ghose, dated Hurdor, the 18th February, 1888, states:—"From observations I know leprosy is hereditary. It is also contagious in the sense that it is necessary for the discharge from a leprosy ulcer to come into direct contact with the broken skin of the recipient, or the blood of a leper to be inoculated into the system, as in vaccination."—*Report on Leprosy to the Hon. H. Beverley, MA., by Madhub Chunder Ghose, Leper Asylum, Calcutta, August 27th, 1889.*

Surgeon C. N. Macnamara sums up the question of the communicability of leprosy as follows:—"The arguments, therefore, against the communicability of leprosy do not refute those in favour of it; consequently, I can arrive at no other conclusion than that leprosy is communicable; but it is necessary for the propagation of the disease by this means that the discharge from a leprosy sore should enter the tissues of a healthy person, and, further, the disease may even then (unless under peculiar circumstances) remain undeveloped in the system for years."—*Leprosy a Communicable Disease, p. 43.*

### SOUTH AFRICA.

In Appendix A to the "Cape of Good Hope Report of the Select Committee on the Spread of Leprosy," 1883, is an interesting communication from the Rev. Canon James Baker, dated Kalk Bay Rectory, August 10, 1883, as follows:—"My own opportunities for investigation have been rather exceptional, and my advantages considerable. In early life I was a student of Medicine, and subsequently of Chemistry and Natural Philosophy, at University College, London. My appointment as chaplain to the Lunatic Asylum and General Infirmary on Robben Island, where I remained nine years, put me in the way of getting experience among lepers, and I commenced at once and continued to make the nature of this terrible disease a special subject of inquiry. In my present sphere of duty I see, unhappily, many cases for investigation. The increased spreading of the disease in many parts of the colony is now generally admitted; it is spreading among both the white and the , coloured races, especially in places near the sea coast.

"Leprosy is not to be compared with small-pox or scarlet fever, as to contagion, any more than

typhoid fever, but this can be conveyed in excreta, finding its *nidus*, or seat of incubation, in one part of the body only; and so, while many will escape leprosy who handle patients as they may handle decomposing corpses, with the skin of their hands unbroken, others may have their blood-vessels or absorbents come in fatal contact with the active poison of the disease."

In the body of the same report I find the evidence of a number of witnesses of wide experience, who have given the subject much attention. Hon. Dr. Atherstone, Member of the Legislative Council, and F.R.C.S., Eng., who has practised in the Colony fifty years, chiefly in Graham's Town, where he was District Surgeon for twenty-six years; also Consulting Physician of the Albany General Hospital, and President of the Leprosy Inquiry Committee of 1889, testified as follows :—" I have formed a very decided opinion as to the nature of the disease, and the manner in which it is transmitted from one to another, and spread all over the country. Recent microscopic investigation has established the fact that the diseased tissues and secretions are invaded by numerous parasitical, rod-like organisms called bacilli, always of the same form and size, no matter from what part of the world the leper comes, or what part of the body is examined, whether the tubercles, lymphatic glands, cartilages, or suppurating sores. This specific bacillus of leprosy is no doubt the true cause, and it is spread by inoculation, either by direct contact with the secretion, or suppurating sores of the leper, or transmitted by the clothes, utensils, pipes, etc., containing' these parasitical germs of the disease."

Q. 345. "You are then of opinion that it is contagious?"—"Yes; in the mode I have described; not in the ordinary sense of the word."

On page 8 I find the following :—"Another result of our inquiry has been to remove any doubt that might previously have existed as to the contagiousness of the disease. Your committee are satisfied that where the disease has not been derived by heredity from one of the parents or grandparents, it has in every instance been contracted by means of contagion. It is quite possible that the disease may not be communicable except to a person having some wound or abrasion in the skin; but when it is borne in mind that the victims often suffer from a discharge of matter from the hands. or other limbs, it is not difficult to conceive how readily the disease may be communicated to persons coming in contact directly or indirectly with the sufferer."

Dr. Abercrombie, member of the Cape Town Medical Board, says (Answer 6a) :—" It would be communicated to a person who came in contact with a leprosy person if he had a sore or an abrasion. For instance, if he were to touch a leprosy person with a sore finger, use the same knife and fork, or drink out of the same glass."

Sir Samuel Needham, superintendent of the Old Somerset Hospital, says:—" I do not think it is contagious, except in cases of cohabitation, when persons are reduced to a low state of health, through being badly fed, or when they get a cut or wound inoculated by contact with a leprosy patient."

Dr. W. H. Ross, twenty-two years Police Surgeon at Cape Town, in reply to Question 311, "Do you know the case of a little boy who contracted leprosy on the island?" said:—" I know the case. The boy had no leprosy relations. He associated with leprosy, and one day, being out fishing with them, he ran a fish hook into his finger. Leprosy shortly afterwards made its appearance."

In the "Report of the Select Committee of the Legislative Assembly on Leprosy," July, 1889, are the

following answers from the same witness :—

Q. 346. "I know of several cases in which the disease was communicated by inoculation."

Q. 351. (1) "It has been conclusively shown that it is always accompanied, if not caused, by a specific bacillus or bacilli, distinctly recognisable under high powers of the microscope in all the stages, in the skin, tissues, glands, secretions, nerves, and bones of the parts affected, undergoing ulceration and destructive degeneration by the pressure of interstitial tubercular deposits. (2) These specific rod-like bacilli, like other fungoid growths of the lowest type of generative life, such as dry rot in old wood, etc., it appears, can only gain access to the system in persons in a low state of vitality, either from poverty and filth, defective nutrition, or depressed nervous energy or constitutional debility, from heredity, or other causes of enfeebled condition of health, admitting of the growth and reproduction of the germs of these low organisms.

(3) In such weakened state of the constitution, hereditary or acquired, these bacilli may be introduced into the system by direct contact with any abraded absorbent surface of the skin or mucous membranes, as in wounds, sores, pricks, etc., or with the mucous surfaces of the lips, mouth, nose, eyes, etc., but chiefly in parts distant from the centre of circulation, as in the toes, fingers, etc., where they may find a lodgment from the diminished vitality of the part being insufficient to destroy them, although sufficient to prevent its rapid growth."

Dr. J. C. Tache, Titular Professor, Laval University, Visiting Physician of the Tracadie Lazaretto, New Brunswick, Canada, reports to the Hawaiian Government ("Leprosy in Foreign Countries," 1886, p. 142-3):— "There is a case, the facts of which are established beyond the possibility of cavil, in which the disease appears to me, as well as it did to those who witnessed it, to have been produced by the absorption of liquid matter discharged from the body of a woman who had been in a cachectic state from leprosy. At the funeral of that woman, the body was carried on the shoulders of four strong young men. The day was hot, and, on a sudden, liquid matter began to ooze out through a joint of the coffin, wetting the shoulder of one of the carriers. The wet, combined with the heat and the pressure of the sharp edge of the coffin, produced an abrasion of the skin of the young man. The contact of the liquid with the abraded surface lasted a part of the time of the procession, and the whole length of the service, as it was only on his way home that the young man washed his sore shoulder, and changed his clothes. Some months after, that man, whose health had always been robust, began to feel unwell. In a short time the symptoms of leprosy made their appearance, and he died of the disease eleven years after the occurrence. There had never been any case of leprosy in his family, whose ancestral genealogy is traced for several generations back. In fact, the disease was not yet known as leprosy, being of recent appearance in the locality, and among these people. He was the fourth case in that place, the other three being the woman spoken of, the husband and sister of the woman, in the ancestry of whom there had never been any trace of the disease. The fifth case in that locality was the sister of the young man." It is noticeable that the incubation of this disease was of comparatively short duration.

Dr. Manget, Surgeon-General, British Guiana, in the Report of the Royal College of Physicians on Leprosy," p. 45, observes:—" My own opinion is in favour of the contagiousness of leprosy, and that it may be propagated by the matter of ulcerated tubercles being applied to any raw surface; but I admit that I have met with cases which would seem to preclude the idea that the disease can be considered contagious in the ordinary sense of the term."

Dr. Charles W. Allen, attending physician to the North Western Dispensary for Skin Diseases, Surgeon to the Charity Hospital, in an article in the *New York Medical Journal*, March 3 1st, 1888, on leprosy, concludes that the disease is transmissible by inoculation from one individual to another.

In a remarkable article on "Leprosy, its Extent and Control," by Dr. H. S. Orme, published in the 20th volume of "Transactions of the Medical Society of the State of California" (1890), page 180, Dr. Saxe is quoted as giving the case of a physician's son who acquired the disease after inserting a pin into his leg which a little Hawaiian leper had just previously thrust into an anaesthetic patch on his own leg.

Dr. S. Kneeland, of Boston, U.S., who visited Honolulu in 1872, says :—" There can be no doubt that it (leprosy) is spread by cohabitation, and inoculation of its diseased fluids, in the same way as syphilis."—*Dr. Hillis on "Leprosy in British Guiana,"* p. 192.

Dr. J. C. Graham concludes an article in the *Canada Medical and Surgical Journal*, October 1883, as follows :—" In all probability the disease is communicated solely by means of inoculation; and opportunities for such inoculation are very few indeed, unless there has been a long and intimate contact with a diseased person."

Dr. Graham here omits from his purview the universal practice of vaccine inoculation, which sometimes carries with it the sources of leprosy and of other diseases.

In a leading article in the Philadelphia, U.S.A., *Medical News* on "Leprosy in its Relation to the State," the writer says:—" From time to time we hear of lepers reaching this country, either from Norway, the West Indies, or from China, and it becomes a very important question how to deal with such cases. Up to a few years ago, opinion was very strongly against the contagious nature of the disease, but since Hansen's discovery of the *bacillus lepra* facts have been accumulating to show that the virus is a fixed contagion, communicable by inoculation, like syphilis and glanders."

Dr. William B. Atkinson, Secretary to the State Board of Health, Philadelphia, in his official report for 1890 of a case of leprosy (John Anderson, a Swede), observes: "There is no danger of contagion except by inoculation. The transmission of leprosy by inoculation or contact has been a debatable point with the profession for many years; but since the disease has been better studied, and the discovery of the *bacillus leprae*, a minute organism found in every case of true leprosy, opinion is gradually but surely coming round to the recognition that leprosy may be communicated by the unhealthy to the healthy to a much greater extent than has hitherto been considered probable."

The *American Journal of the Medical Sciences*, October, 1882, has a communication on "The Question of Contagion in Leprosy," by Dr. White, who remarks that heredity as the only, or as an important factor is out of the question. "It would have required several generations to have accomplished such results; we must look, then, to the customs of the race as exceptionally

favourable to inoculation, and as the only possible explanation. It is probable that leprosy, like syphilis, may be communicated under all circumstances by which some of the fluids and other products of the infected *foci* of a diseased person come in contact with abraded or excoriated, possibly with the uninjured surface of a healthy person. It would be necessary that the diseased products should be at the surface of the skin, or mucous membrane, and this would generally be accompanied during the process of softening by which the impermeable layers were removed. Thus the nodular form in its ulcerative stage would necessarily be the most dangerous phase of disease, whereas the anaesthetic form might exist for years with little danger of communicating itself to its surroundings. In this sense we may conclude that leprosy is contagious, and in these ways, probably, the disease mostly spreads in a family, a community, a nation."

Mr. Plumacher, United States Consul at Maracaibo, Venezuela, observes in his official report for 1890 (p. 695) with reference to leprosy :—" I confess freely that I am not a believer in the theory of contagion properly so called. It will be easily understood that should matter from a leprous ulcer come into absolute contact with the blood of a healthy person inevitable infection would result, and leprosy be engendered, in the same manner that the surgeon at times meets his death through blood poisoning contracted in the dissection of a cadaver."

The United States Consul to Cape Colony, Mr. James W. Siler, in the official report on leprosy to his Government, dated March 24th, 1887, observes :—"This specific bacillus of leprosy is no doubt the true cause, and it is spread by inoculation by direct contact with the secretion or suppurating sores of the leper."

In a paper read before the State Medical Society by Dr. R. J. Farquharson, Secretary of the Iowa State Board of Health, Des Moines, and published in the *New York Sanitarian*, July, 1884, the author says:---

"Leprosy is not contagious in the ordinary acceptation of that term. It requires an absolute inoculation of pus or blood into the circulation through open vessels or abraded surfaces, and at the same time it is assumed that we must have the cachectic conditions favourable to the action of the virus."

Dr. Wood, of the United States Navy, in the Fourth Report, Navy Department, says that the dressers in the hospitals of Calcutta and other portions of the East, positively free from hereditary disease, have in many instances developed it, under circumstances connecting the inoculation with their duties.

The *New Orleans Medical and Surgical Journal* 1880, published a communication from Dr. T. H. Bemiss, Lahaina, Hawaii, on the introduction and spread of leprosy in these islands. "Alarmed," says the writer, "by an invasion of small-pox in 1853, a general vaccination of the whole population was ordered, and physicians being at that time very few on the islands, non-professionals aided in the work. It is charged by some that, as a natural result of the labours of the heterogeneous force so appointed, not only syphilis but also leprosy was greatly increased. In my last circuit trip in my district, I found very few adults who had never been vaccinated. This involves the question of inoculability, in my opinion the main, if not the only means of propagation, other than inheritance."

The same journal, 1888, says that "leprosy may be communicated from a leprous to a non-leprous person by means of a specific virus, which acts somewhat like the specific poison of syphilis,

depending upon thin or denuded surfaces for its absorption, and which remains potent, very probably for an indefinite period of time."

Dr. R. Hall Bakewell, formerly Superintendent of the Leper Asylum, Trinidad, testified before the Select Committee of the House of Commons in 1871, that the inoculation of leprosy was proved as much as any fact in medical science.

In a paper read before the Auckland (New Zealand) Institute, July 20, 1891, and printed in vol. xxiv. of the "Transactions of the New Zealand Institute," Dr. Bakewell says :—" That bacilli exist in both leprosy and tubercle is beyond all dispute; that the bacilli of these diseases may be grown and cultivated in suitable media is ascertained as a fact respecting one of them—tubercle— and, although not experimentally proved as regards the bacillus of leprosy, yet is almost beyond doubt. Artificial nutrient materials have hitherto failed, and it is not allowable to try the only natural medium—the blood and tissues of a person living under conditions likely to develop leprosy. I have no doubt, from seeing the origin of leprosy cases, and studying several hundred cases of the disease, that it is not only inoculable, but that it spreads by inoculation or absolute contiguity, and I have no hesitation, after twenty years' consideration of the subject, in affirming again the opinion given before the Committee of the House of Commons."

Dr. N. B. Emerson, President of the Honolulu Board of Health, says :—" The great problem that confronts the Board of Health is the leprosy question, and the medical profession in the Hawaiian Islands are, I believe, unanimous in the belief that leprosy is a communicable disease, and a transplantable disease, communicable by inoculation."

In a communication to the Secretary of the National Leprosy Fund, dated Dublin, 6th October, 1890, Dr. John D. Hillis, F.R.C.S.I., late Medical Superintendent, Leper Asylum, Demerara, says :—" My views on leprosy are explained in my work, 'Leprosy in British Guiana,' published by Churchill & Son. A further experience of ten years has convinced me more firmly than ever that leprosy is a communicable disease, most probably by inoculation. In tropical climates, many suffer from ulcers, excoriations, etc., which may render them more susceptible when brought so much into contact with lepers."

Dr. Arthur Mouritz, who occupied the position of physician to the Leper Settlement, Kalawao, Molokai, in 1886, says :—" The *contagium* of leprosy enters the system by inoculation at broken surfaces of the skin, fissures, or chaps, on external mucous surfaces, and possibly by punctures of insects, or the presence of parasites, scabies, etc." In his report to the President of the Board of Health, Honolulu, dated February, 1886, the doctor says:—" Some weight must be attached to the views of the foreigners themselves. They, one and all, such as are now alive, emphatically declare their belief that the disease is contagious. Some give evidence of contact (immediately followed by local symptoms—direct inoculation), infection of the whole system speedily following, this again succeeded by external manifestations of leprosy within a comparatively short period."

In his "Biennial Report to the Legislature of the Hawaiian Kingdom," session 1890, Dr. T. H. Kimball considers the fact of the inoculation or transplantation of leprosy to have been proved in those islands, and that the *bacillus lepra* carries the infection.

Dr. Ginder, who investigated cases of Maori leprosy at Taupo and Rotorua, New Zealand, in his "Report to the Inspector-General of Hospitals, etc., Wellington," dated 4th July, 1890, concludes

"that in all probability the worst cases have arisen from direct infection of the blood by inoculation, either accidental or premeditated."

From inquiries made from those who were intimately acquainted with the late Father Damien, I have no doubt that in his case the disease was induced by means of inoculation of leprosy virus from other patients, when he resided in Molokai, through sores on the skin. While possessed of many noble traits, this worthy and self-sacrificing missionary was conspicuous for neglect of ordinary hygienic precautions.

Dr. W. Munro, in his work on leprosy, quotes a series of cases to show that leprosy is spread by contagion, but explains in page 80 the wide interpretation he gives to this much misunderstood word. He observes "that by using the word 'contagion' I do not pretend to express any distinct belief as to the probability of the disease being conveyed by simple contact, being more inclined to believe that it is carried by inoculation in most cases, though long-continued contact even of unbroken healthy with diseased skin may be sufficient."

The doctor gives particulars (p. 84) of several cases of inoculation, all of which, he says, tend to show that inoculation is the chief, if not the only, manner by which the disease is propagated, such propagation taking place quickly only when some special circumstance, as the person being wounded, makes inoculation easy and certain. This writer does not believe there is any evidence of its being communicated in food or drinks, and the only danger from association with lepers is "*when the healthy person has any cut or sore about his hands by which he might be inoculated.*"

Dr. John Freeland, Government Medical Officer, Antigua, in a communication dated Antigua, Sept. 15, 1890, says :—"When I wrote to the *British Medical Journal* in October last that no one would deny that contagion might be artificially produced by inoculation, I meant, of course, inoculation by means of the actual introduction of secretion from the leper's sore into the skin of the healthy, effected either directly by the lancet, or accidentally conveyed through the broken surfaces of the leper and the healthy coming in contact." Dr. Freeland relates how that "T. S., a healthy and robust lad, who was denied board and lodging by his relatives on account of his irregular and late hours, sought accommodation and residence in an out-room situated in a leper's yard. After a time, he received rather a severe wound on one of his feet, and I was called upon to attend him, when I naturally protested against his surroundings, and wished him to go into hospital, not only that he might have every comfort and care, but that he might also be at once removed from his diseased neighbours. He would not, however, consent to leave his house, and I continued attendance long enough to discover that my patient had, since his accident, been systematically using the same basin, the lotion, and even the very rags and bandages that were, perhaps, but a few hours removed from the ulcerated surfaces of his leprosy companion. I need not tell you that the healthy wound soon developed into an intractable and sloughing sore, and was, after some time, followed by those general, but unmistakable, symptoms of leprosy, which went on progressing until the disease was fully formed, and the lad died, an ulcerated and necrosed leper." — *The Lazaretto, St. Kitts, West Indies, October 6, 1890.*

### THE INOCULATION OF THE CONVICT KEANU.

Whatever doubts have heretofore existed as to the inoculability of leprosy, there can hardly be any after a dispassionate consideration of the facts connected with the experiment on the condemned convict at Honolulu. The prisoner Keanu was inoculated with leprosy by Dr. Edward Arning on the

30th September, 1884, and again in November, 1885, *after previously making a most searching inquiry as to any leprosy taint in his family, and a dose examination of his own body.* This examination satisfied Dr. Arning that no trace of the disease could be found in him. Every precaution was taken to secure his isolation from contaminating surroundings, and means were adopted to ensure that he was not employed outside the prison walls. On the 2nd September, 1888, Dr. N. B. Emerson, then President of the Board of Health, and Dr. T. H. Kimball, Government Physician, examined the prisoner and signed the following certificate :— "This is to certify that we have this day carefully examined Keanu, who was inoculated in November, 1885, and we find his condition as follows:— "Ears tubercular and considerably hypertrophied; forehead the same; face, nose, and chin show flattened tubercular infiltration; mouth clean, no tubercles; face generally presents a leonine aspect.

"Hands puffed, fingers swollen at proximal phalanges, tapering to distal phalanges; tips of forefinger and thumb of left hand are ulcerated from handling hot tin cups of tea or coffee, indicating anaesthesia.

"Body—Back thickly mottled with flattened tubercles and the surface uneven to feel, colour of the same—a yellowish brown; front of the body, chest and abdomen, presents plaques of tubercular infiltration of larger size than back, separated from each other by wider intervals and of a brighter colour, in some cases a ruddy pink, especially over upper part of sternum.

"Legs—The infiltration thins out as far down as the knees, there being one large bright patch on the inside of the left thigh ; legs below knees quite clean and skin smooth and even to touch.

"Feet — (Edematous; have poor circulation; bluish colour; soles of feet clean.

"Seat of inoculation, outer aspect of left forearm, upper third, shows a dark purplish scar, about one-and-a-half inches long by five-eighths of an inch wide, irregular in shape, keloid in aspect, dense and inelastic.

"The tests for anaesthesia were not made. Eyes with sclerotitis, muddy and infected.

"No signs of palsy about muscles of face, orbiculares palpebrarum, hands, or forearms.

"It is our decided opinion that this man is a tubercular leper.

"N. B. EMERSON, M.D.,  
*President of the Board of Health.*  
"J. H. KIMBALL, Government  
*Physician, Honolulu."*

In the spring of 1890 Dr. D. W. Montgomery, Professor of Pathology, California University, microscopically examined a piece of Keanu's skin, and discovered the *bacillus leprae* both singly and in groups. This bacillus has been found, according to the *Lancel*, by competent observers in the tuberculated form of leprosy in all parts of the world, and has never been found in any other disease or condition. Keanu has since been sent to the lazaretto, Molokai, a confirmed and incurable leper—a punishment ten times more severe than the death penalty, and, in my judgment, utterly unjustifiable. In a letter on "Leprosy" in the *British Medical Journal*, September 24, 1887, Dr. William Jelly observes :— " I daresay the poor Kanaka convict (Keanu), had he known what leprosy

is, would, without hesitation, have preferred the guillotine, the garotte, or the hangman's rope."

Regarding this official declaration, Dr. C. N. Macnamara says:— "This report establishes unequivocally the fact that the inoculated man has become leprous; and, as he had been inoculated three years previously, there is every reason to believe that the disease is the result of the inoculation. This is very much borne out by the fact that at the seat of inoculation there is what is described as a dark, purplish scar of about one inch wide, keloid in aspect, dense and inelastic.

"The importance of a positive result like this cannot be outweighed by a considerable number of negative experiments; although, so far as we know, this is as yet the only direct experiment that has been made from a leper to a sound individual, and we do not believe that its importance is lessened by the fact that inoculations made from a diseased part of the body to an apparently unaffected part of the body of the same person have, in some cases, not led to development of the disease in the inoculated part within a comparatively short lapse of time.

"The communication of leprosy in this case confirms the views generally entertained by those who hold that the disease is contagious, the idea being that it can only be conveyed from one person to another by a direct communication of leprous tissue into the moist, living tissue of the person infected; in short, that when it is contagious, it is contagious in the same way that syphilis is understood to be contagious."—*Leprosy a Communicable Disease*, p. 45.

In an article in the April (1890) number of the *Occidental Medical Times*, Dr. Sidney Bourne Swift, Resident Physician, Leper Settlement, Molokai, reports the present condition of Keanu as follows :—"Age 70 years; weight 178 pounds; leprous infiltration beneath integument of face and forehead; tubercular enlargement of lobes of both ears, the right more than the left; ulceration of palate, and extensive ulceration of pharynx; tubercular enlargement of uvula; tubercular enlargement of alae of nose; partial occlusion of nasal fossae, due to leprous infiltration beneath pituitary membrane; chronic conjunctivitis and phrygium-like growth on both eyes; almost deaf; voice hoarse, and with a nasal inflection. Anaesthesia of both hands and feet, although no pronounced enlargement of ulnar or tibial nerves; numerous tubercles distributed over the entire body, but most marked on the upper and lower extremities; three small but angry-looking ulcers on outer aspect of left leg; softened tubercle on dorsum old age."

In an article on "Personal Observations of Leprosy in the *New York Medical Journal* for July 27th, 1889, Dr. Prince A. Morrow, after describing the results of the inoculation by Dr. Arning and the development of tubercular leprosy in the convict, observes that, during his visit to Molokai, he excised a small sub-cutaneous tubercle and a portion of the underlying skin. Numerous sections of this specimen were made by Dr. Fordyce, and in all of them the presence of bacilli was exhibited under a microscope. Dr. Morrow estimates that in the Sandwich Islands "about one half the cases are tubercubus, about one-third are anaesthetic, and the remaining sixth represent the mixed form; the tubercular type is the most rapidly fatal."

Dr. F. B. Sutliff, who spent four years studying cases of leprosy in Maui, Hawaii, says, referring to Keanu's inoculation :—" This case will always stand alone; I suppose no other man will ever be purposely inoculated with leprosy. The facts in the case that point towards the inoculation as having been the direct and only cause of the disease are many and strong. Still they will be attacked by those who would rather maintain their own ideas than discover the truth.\*

\*In an article on Keanu's inoculation, the *Occidental Medical Times*, April, 1892, Dr Sidney Bourne Swift intimates that the case made out by Dr Arning is inconclusive, inasmuch as other members of Keanu's family have been found to be affected with leprosy. Keanu's own son, Eokepa, aged about 23 years, and his first cousin, Maleka, on his mother's side, are lepers, living in the leper settlement. Eokepa left school in 1873 on account of this affliction. These cases are by no means inconsistent with the facts contained in the reports above quoted, and it must not be forgotten that the lepra disease was first discernible at the points of inoculation. Nor can they be considered remarkable, knowing how the disease had been propagated by the vaccination lancet. In one instance reported to Queen Liliuokokalani, an entire school in Hawaii was swept away, with the exception of a single survivor, by this means. However, the case for inoculation does not rest upon Dr. Arning's experiment, but on the unimpeachable evidence of numerous reputable witnesses in all parts of the world, and on the fact admitted by pathologists that, given suitable conditions, all bacterial diseases are inoculable.

A well-known medical practitioner at Honolulu gave me a photograph of Keanu, which distinctly shows the appearances peculiar to inoculated tubercular leprosy at the point of insertion in the arm, as well as in other parts of the body. And he considered the experiment an absolute demonstration of the inoculability of the disease. He also unhesitatingly expressed the opinion that the dissemination of leprosy in Hawaii was largely due to inoculation by the lancet of the public vaccinator, a most serious matter not only for Hawaii, but for all other countries where the repulsive and destructive disease is endemic. Dr. Arthur Mouritz, Medical Superintendent of the Leper Settlement, Molokai, says it is doubtful whether one per cent, of the Hawaiians would resist intentional inoculation.

### LEPROSY COMMUNICATED BY INSECTS.

Both in the West Indies, and in British Guiana, I found the belief prevailing amongst the people, as well as, to a certain extent, amongst medical practitioners, that leprosy was inoculated into the blood by mosquitos.

Nor is there anything improbable in the idea. Sir William Moore, late Surgeon-General, Bombay Staff, "is of opinion that one of the chief sources of danger is due to flies and mosquitos. These pests of Indian life may carry enough leprosy discharge to communicate the disease to a healthy person. None of us can make sure that the fly or mosquito, which irritates by its persistent attention, has not come from a leper. A fly investigates a leprous sore or discharge, carries a particle of poison in its proboscis, or feet, and next settles on some abrasion of the skin of a healthy person !" Dr. Manson, in China, says that elephantiasis has been conveyed by a mosquito. (The "elephantiasis" conveyed by mosquitoes appears to have been another kind of disease than leprosy).

In Dr. Wilson's communication on leprosy in *The Lancet*, Nov. 13, 1880, p. 779, the writer says:—"Dr. Manson received some reward from the Chinese Government a few years ago, for the discovery that leprosy was caused through the introduction of a poison into the blood by the bite of the mosquito, and although little has been heard of this discovery since, the idea seems to receive support from many facts, and explains the curious occurrence of that dreadful malady in the arctic regions, where the mosquito abounds."

Dr. Albert S. Ashmead has an article on "Leprosy in Japan" in the *Journal of Cutaneous and GenitoUrinary Diseases*, vol. viii. page 220, copied into the *Journal of the Leprosy Investigation Committee* for July, 1891, in which the danger of minute inoculation by insects is referred to as follows :—"The Japanese guard carefully against mosquitos and other insects, and wherever insects most abound the most endemic leprosy is found. In addition, those parts exposed to insect foraging are the seat of primary skin lesions of leprosy, as also mucous membranes most exposed to germs in

food and water."

And it may be remarked that, if leprosy may be communicated by means of mosquitos and other insects, where the inoculated virus is infinitesimal in quantity, how much greater in proportion is the danger of such contamination in vaccination? In' the latter case the vaccine lymph may, and often is, taken from children where the disease lies dormant, in the incubating stage, without declaring itself by the smallest signal to the eye of the most experienced physician. In all countries where leprosy is endemic, Europeans resolutely object to be vaccinated with lymph from native sources; and, notwithstanding the law, when imported lymph cannot be obtained they and their children remain unvaccinated. As a consequence, the population of Europeans attacked with leprosy is comparatively small and, indeed, of rare occurrence, except in the case of soldiers who are subject to the military regulation of revaccination. This repugnance to native lymph on the part of Europeans in the West Indies was pointed out by Dr. R. Hall Bakewell, Vaccinator - General, Trinidad, in his remarkable evidence before the Select Parliamentary Committee of 1871, and has been referred to by Dr. Castor, of British Guiana, and other authorities.

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**CHAPTER 4: VACCINATION WITH REFERENCE TO LEPROSY**

HAVING shown, on the authority of some of the most eminent dermatologists and superintendents of leper asylums, and from the testimony of those who have devoted special attention to the study of leprosy, that the disease is inoculable and spread by inoculation, we proceed to inquire whether there is evidence that this inoculation may be due in whole or in part to vaccination. When dealing with this question, I am aware that I am treading on delicate ground, inasmuch as vaccination has been lauded as an operation benign in its nature, free from peril, "the greatest discovery in the history of medicine," \*

\*Sir John Simon, late Chief Medical Officer to the Local Government Board, speaking of Jenner and vaccination in his "English Sanitary Institutions," London, 1890, p.123, *note* says :—"I venture to predict that the new evidence [before the Royal Commission on Vaccination], so far as it may regard the merit of his discovery, will establish more firmly than ever that Jenner's services to mankind, in respect of the saving of life, have been such that no other man in the history of the world has ever been within measurable distance of him."

and, out of half-a-million prescriptions or so, the only one possessing such transcendent merits as to justify its universal compulsory enforcement. It is, moreover, considered by many ardent advocates to be impolitic to do or say anything calculated to discredit vaccination. It is hardly necessary to remind our readers that there has never been a scarcity of medical inventions which have held out similar promises. Smallpox inoculation, which, according to Dr. Moore, cost the nation millions of lives, was universally accepted by the profession for the best part of a century as a discovery "highly beneficial to mankind;" and it would not have been difficult, had it been originally an English discovery, to have obtained a munificent grant from Parliament, and possibly to have persuaded the Government to make it obligatory and universal. The practice of bleeding and cupping was in vogue for at least three centuries, and the use of huge doses of mixed and noxious drugs for nearly as long a period. Jenner received a reward of £30,000 from Government on his explicit assurance that vaccination would make an end of small-pox. The evidence brought before the Royal Vaccination Commission in London, by statisticians and able pathologists, abundantly shows that, while it has had no effect in diminishing either sporadic or epidemic small-pox, it has been a prolific source of the spread of inoculable maladies, such as skin disease, pyaemia, eczema, phlegmon, and, notably, leprosy and syphilis.

**THE WEST INDIES.**

One of the earliest medical practitioners to call public attention to the spread of leprosy by vaccination was Dr. R. Hall Bakewell, president of the Board of Health, Trinidad, who, as Vaccinator-General of that island and Visiting Physician of the Leper Hospital, possessed unusual opportunities for observing the effects of vaccination upon the health of the people. In a communication dated 31st December, 1870, Trinidad, to the Colonial Secretary, London, Dr. Bakewell says :—" The question is not as simple as it appears. It is not a question of half-a-dozen minute punctures in an infant's arm *versus* an attack of small-pox. It is a question of performing on every child that is born into the world, and that lives to be three months old, an operation sometimes, though very rarely; fatal; sometimes, but not frequently, attended with severe illness, always accompanied by considerable constitutional disturbance in the form of fever; sometimes, in an unknown proportion of cases, introducing into the system of a healthy child constitutional syphilis, but suspected in the West Indies of introducing a poison even more dreaded than that of syphilis—leprosy. And the parent is required by law to subject his child to these evils, most of

which are only possible, but one of which is certain (the fever), for the purpose of avoiding the chance of an epidemic of small-pox, which, when it does occur, may or may not attack the child.

"It may be taken as proved that the syphilitic poison may be, and has been, introduced into the system of a previously healthy child by means of vaccination. But we know that leprosy is a constitutional disease, in many respects singularly resembling constitutional syphilis; like it, attended by stainings and diseases of the skin; like it, attacking the mucous membrane of the nose, throat, and mouth; like it, producing falling off of the hair, diseases of the nails and bones; and, like it, hereditary. Why should not the blood of a leprosy child, whether the leprosy be developed or not, contaminate a healthy one?"

"It seems to me not merely a popular opinion, but a medical one also. In returning to Europe in the spring of this year, I met several medical men from Demerara and other tropical countries, and they all considered that leprosy might be, and is, propagated by vaccination.

"Such cases as the following are difficult to account for, unless one adopts the hypothesis that leprosy is contagious (and, if contagious, *a fortiori* inoculable). The daughter of a colonel in the army, who held a staff appointment in one of our tropical colonies, contracted leprosy while in the colony. There could be no hereditary tendency, for both the parents are English, and it could not have arisen from bad diet. The young lady herself was a creole, but I was not able to discover whether she had been vaccinated from a creole or not. When I called in to see her in England, the disease was so far advanced that nothing could be done for her.

"Four cases at this moment in this colony are whites, both of whose parents are Europeans."—*Royal Gazette, Trinidad, March 1, 1871.*\*

\*Since the above was written I have been informed by the father of one of the patients that Sir Ranald Martin, on being consulted after seeing the case, pronounced that the leprosy had been caused by vaccination.—*Footnote to Dr. Bakewell's Report.*

Dr. Bakewell was summoned on behalf of the Government to give evidence before the Select Vaccination Parliamentary Committee in 1871, and testified as follows (Answer 3563, p. 207 Official Report) :— "There is a very strong opinion prevalent in Trinidad, and in the West Indies generally, that leprosy has been introduced into the system by vaccination; and I may say that, as Vaccinator-General of Trinidad, I found that all the medical men, when they had occasion to vaccinate either their own children or those of patients in whom they were specially interested, applied to me for English lymph; and that was so marked that in one instance a man, who had never spoken to me before, wrote me quite a friendly letter, in order to get lymph from England when he had to vaccinate his own child. It is quite evident that the only reason for wanting lymph from England must be that they consider it free from contaminating the system by leprosy; because, of course, there is an equal chance, and probably a greater chance in England, of the lymph being contaminated by syphilis."

Question 3564 and Dr. Bakewell's answer (pp. 207-8) are as follows :— Q.—" Have you had experience of any case in which Leprosy has been introduced by vaccination?"

A.—" I have seen several cases in which it seemed to be the only explanation. I have a case, now under treatment, of the son of a gentleman from India who has contracted leprosy, both the parents being of English origin. I saw the case of a child last year, who, though a creole of the Island of

Trinidad, is born of English parents, and is a leper, and there is no other cause to which it is attributable. Sir Ranald Martin, who is a great authority on these points, agreed with me that the leprosy arose from vaccination." \*

\*Since the above evidence was communicated, twenty years ago, Dr. Bakewell has availed himself of opportunities for extending his researches into the causation of leprosy in New Zealand, which have served only to confirm and strengthen his previous conclusions. In a paper read before the Auckland (New Zealand) Institute, 20th July, 1891, and printed in vol. xxiv. of the "Transactions of the New Zealand Institute," Dr. Bakewell observes that the inoculation of leprosy by means of vaccination is now exciting much attention, and he gives the results of his more recent Inquiries into the subject of vaccination, citations from which will be found in the appendix to this volume.

In a State paper addressed to Earl Granville, consisting of correspondence on the subject of leprosy, presented to both Houses of Parliament by command of Her Majesty, May, 1871, Dr. Bakewell refers to a boy, aged 15, brought from Guadaloupe by Dr. Brassac at the expense of the French Government, in which the disease was attributed to vaccination from a leprosy source.

No notice seems to have been taken of this startling testimony by the Select Vaccination Committee in their Report; and it was not until the publication of Professor Gairdner's remarkable cases in the *British Medical Journal*, June 11, 1887, that further inquiry was attempted. In the same year Governor Robinson, of Trinidad, issued a circular to medical men in the Colony, referring to these cases. This letter contained the query, "whether the disease (leprosy) is communicable by vaccination, lymph from healthy vesicles alone being used." It is obvious that the form in which the question was submitted was, but little calculated to elicit the true facts. If "healthy vesicles" alone were used, it is clear that no disease, other than *vaccinia*, could result, and vaccination would be acquitted from a serious indictment, which was the evident intention of the experts who formulated the question. To discuss whether, and how far, impure lymph; or the arm-to-arm lymph in general use in countries like Trinidad, where leprosy is endemic, could convey leprosy, would have been to travel beyond the scope of the inquiry. To this circular twenty-seven replies were received, which may be summarised as follows :—

(a) Upon the matters of experience, two of the witnesses, Dr. Alston and Dr. Chittenden, do not clearly indicate how far their experience warrants them in expressing an opinion upon the question. Of the remainder, four, Dr. de Verteuil, Dr. R. F. Black, Dr. R. H. Knaggs, and Dr. Bevan Rake, appeal confidently to their own practice. The others do not appear to have had sufficiently extensive experience to warrant a conclusion.

(b) As to the communicability of leprosy by vaccination, two of the writers, Dr. de Verteuil, and Dr. Bevan Rake, consider that leprosy cannot be inoculated by vaccination, if pure lymph be used. Dr. Black is of opinion that leprosy can be inoculated, though lymph from healthy vesicles alone be used. All the others express themselves with uncertainty and hesitation, or else disclaim having an opinion worth expressing upon the subject. Dr. de Montbrun, senr., says that leprosy would not be inoculable if every medical practitioner selected very healthy infants, born from healthy parents. and used only the lymph which exudes spontaneously after the puncture of the vesicles. Hardly any of the witnesses refer to the notorious difficulty, not to say impossibility, of ascertaining what families are leprosy; concealment, for prudential reasons, being the rule, as admitted by intelligent inhabitants in all the leprosy districts I have visited. Dr. Robert Francis Black, who has resided sixteen years at Port of Spain, Trinidad, informed me that his attention had been directed to the subject, and he had not the smallest doubt as to the invaccination of leprosy. He replied to the

circular as follows:--

76 Queen Street, Trinidad,

July 16, 1887.

SIR,—I have the honour to acknowledge the receipt of your confidential circular, No. 1818, dated 12th instant, and beg to state, for the information of His Excellency the Governor, that my experience of leprosy agrees with the statements of Professor W. T. Gairdner, of Glasgow, contained in your circular, and that I am of opinion that the disease in question is communicable by vaccination, lymph from healthy vesicles alone being used.

I myself have seen two or three cases of leprosy following vaccination, and have questioned the parents closely, but failed to ascertain or detect any family taint in either. Both the parents were respectively from Africa and China, the other was of creole parentage, but all the children were born here. With reference to these facts, I may mention here that, as far as I can recollect, the periods of incubation after vaccination were from two to three years; in fact, immediately after vaccination all were seized with obstinate cutaneous eruptions. As these were casual cases, I kept no memoranda, and as they did not return I lost sight of them, they probably concluding that it was hopeless to do so. I am also of opinion, for the reasons here stated, that arm-to-arm vaccination, at least in Trinidad, where leprosy is decidedly on the increase, is bad, as many very respectable families here are tainted with the disease, and nearly all the Portuguese have some member of their families actually diseased.

In conclusion, I may mention that I am also of the opinion that leprosy, like syphilis, tubercular phthisis, and cancer, is hereditary and contagious.

I have the honour to be, Sir,

Your obedient servant, R. F. BLACK,

Dr. C. B. Pasley, Acting Surgeon-General, etc.

Dr. Gairdner's cases are reported in the *British Medical Journal*, June 11th, 1887, with the following title: "A Remarkable Experience concerning Leprosy; involving certain Facts and Statements bearing on the, Question—Is Leprosy Communicable through Vaccination?" By W. T. Gairdner, M.D., LL.D., Professor of Medicine in the University of Glasgow :—

"The time seems to have arrived when, without injury or offence to anyone concerned, it is possible to bring under the notice of my medical brethren some facts, and some inferences arising more or less directly out of the facts, in a case which occurred to me some years ago, but which I have found it necessary hitherto to deal with as involving matters of professional confidence not suitable for publication. Even now I shall deem it expedient to frame this mere narrative in such terms as shall not point to any definite locality, or to any recognisable person, among those chiefly concerned; although, by a formal certificate granted only the other day, I feel, as it were, absolved from the last tie that bound me, even under the most fastidious sense of professional duty, to reticence.

"Six or seven years ago, the parents of a young boy, fairly healthy in appearance, but with a peculiar eruption on the skin, brought him to me, and along with him a letter from a medical gentleman whom I had entirely, or almost entirely, forgotten, but who stated himself to have been a pupil of mine in Edinburgh considerably over twenty years before. It is unnecessary to enlarge on the particulars of this case, further than to state that, after more than one most careful examination, in which I had the assistance of my colleague, Professor M'Call Anderson, we came to the conclusion which we announced to the parents, that the boy was suffering from incipient, but still quite well-marked, leprosy in its exanthematous form; a diagnosis afterwards amply confirmed. What struck me at the time as most peculiar was, that this case, coming from a well-known endemic seat

of leprosy (an island within the tropics) and with a letter involving medical details by a medical practitioner of many years' local experience—sent to me, moreover, for medical opinion and guidance—should not have been more frankly dealt with by a diagnosis announced even to the parents, before they left the island. The father of the child was a sea-captain constantly engaged in long voyages—for the most part between this country and the island alluded to. Both father and mother were Scotch, and there were several other children, all reported as quite healthy, as also were both the parents. Under these circumstances I wrote to the medical man—who in the sequel may be called, for brevity, Doctor X.—simply stating the diagnosis arrived at, and indicating the line of treatment proposed. The parents were informed that it would be best for the child to live in this country, and his mother agreed to remain with him accordingly. And, as they appeared anxious to have every available suggestion and advice, I mentioned the name of Dr. Robert Liveing as having given much attention to the subject, and offered to write to him if they would take the boy to London, as they appeared desirous of doing. Although I wrote to Dr. Liveing, circumstances unknown to me led to a change in their plans, and, instead of going to London, they went to Manchester, where I believe some physician was consulted, but I do not remember who he was. Ultimately, the mother determined for a while to settle in Greenock, and I placed her accordingly in communication with Dr. Wilson of that town, who for some time thereafter remained in medical charge of the case.

"Meanwhile, the course of post brought me in a few months a reply from Dr. X., not only entirely assenting to our diagnosis as communicated to him, but stating that he had been perfectly well aware from the first of the case being one of leprosy, but had deliberately chosen not to affirm the fact or even to allude to it in any way, either in his communications with the parents or in his letter to me. No reason was assigned for this (as it appeared to me) very remarkable reticence; but, as I did not wish to have the credit of having discovered for the first time what a gentleman so much more familiar with the disease might have been supposed to have overlooked, I took means to inform the parents of Dr. X.'s reply, and of his having been all along of the same opinion with regard to the disease as we were.

"After this the matter passed out of my mind, and for several years I neither saw nor heard of this child except accidentally and in a way entirely to confirm first impressions. About three years ago, however, while engaged in lecturing on specific diseases, and among others, briefly, on leprosy, I made an effort to find out something more about this patient. The mother had removed to Greenock, and had brought over the whole family to Helensburgh, where, as I learned, they were visited by Drs. Reid and Sewell, and from the latter I now learned that the poor boy had gone steadily to the worse, and was extremely feeble, covered with sores, and in a most deplorable condition physically, but still receiving every attention and care that constant medical treatment, with the most faithful and loving maternal nursing, could afford to lighten his sufferings. I accordingly proposed, within the next few days, a visit to my old patient, as a matter of satisfaction to myself. Unhappily there was no other apparent object, either as regards diagnosis or treatment, for a visit which was, nevertheless, very gratefully accepted.

"The case was now in the most advanced stage of leprosy, proceeding to mutilation of the extremities, and accompanied not only by external sores, but presumably by internal lesions, which had reduced the patient to the last stage of emaciation. It was on this visit that the curious particulars now to be related were first brought to my knowledge by Dr. Sewell, and afterwards confirmed by the statement of the mother, showing very clearly, though, of course, upon second-hand information

to a certain extent, that Dr. X. had a very special reason for his extraordinary reticence in the first instance. Her husband, who in his frequent voyages had opportunities of coming into communication with Dr. X., had remarked to him how very strange it was that, even in writing to a medical man about the case, he had given no hint of his opinion about it. The Doctor's reply to this was, in the end, to the effect that he had kept silence because he did not wish to compromise a boy of his own, whom he (Dr. X.) believed to be a leper, and from whom he believed at the time that the boy he had sent to this country had become infected with the disease. He further explained that he had vaccinated his own boy with virus derived from a native child in a leprous family, and, as I understood (though perhaps not definitely so stated) that leprosy had declared itself in the native child after the vaccination; and, further, that (using his own child as a *vaccinifer*) he had vaccinated our patient directly from him. Before sending the last-named patient away with his parents, he had satisfied his own mind not only that his own boy was leprous, but that he had in this way become the source of the disease to another; but, the disease in his own child being in a very mild form, he was anxious not to disclose its existence. Meanwhile Dr. X. had died; his estate had passed into the hands of trustees; and I was informed that this reputed leper-boy had been, under the instructions of his father and his guardian, placed and retained at a public-school well known to me in this country, and that the boy was pursuing the usual course of a public-school education, in entire unconsciousness or the disease with which he was supposed to be affected.

"This information, so communicated, placed me in rather a difficult dilemma, namely—was I justified in taking steps to ascertain the truth of the story as regards Dr. X.'s boy, either by personal investigation or, at least, by inquiries conducted so as to result in a well-grounded and scientifically exact opinion as to the facts? And, further, supposing that such opinion should turn out to be that Dr. X.'s boy was a leper, was it a matter of duty on account of others to formally disclose the fact, be the consequences to the boy what they might? It was hardly probable that a boy generally known to be a leper would be retained permanently in any public school in this country, even had it been unquestionably a matter of medical doctrine that such a proceeding was quite safe. On the other hand, the boy was receiving the benefits of an English education at the express wish and on the responsibility of his father and guardian, and without (so far as appeared) any misgivings on the part of anyone. He was an orphan, and in what was to him a foreign land; his remaining under instruction might be, and probably was, a matter of the greatest possible importance to him. To bring him, therefore, even by an indiscreet inquiry, under the ban which in many or most countries still attaches to leprosy was certainly no part of the business of an outsider, and could only be justified at all by an overwhelming sense of duty to others.

"Under these circumstances I thought it well to consult, privately, one or two of those friends in London whom I believed to know most about leprosy, and among others Dr. Liveing, whom I was able to remind, at this stage, of my previous letter. These friends concurred in assuring me that, in the rather improbable event of their being personally consulted as to the retention of a leper in a public school (it being presumed, of course, that he was physically fit otherwise), they would have no hesitation at all in affirming that the other boys would not be endangered by such proceeding. As I happened to be very well acquainted with one of the medical officers (though not the ordinary medical officer) of the school in question, I communicated these opinions to him, and stated to him at the same time the extraordinary circumstances which had begotten, for me, such a lively interest in the son of Dr. X. In the course of a few days I was informed that an inquiry had been held by the medical staff; that the boy had been sent for and privately examined (though not ostensibly ill in any

sense); and that it was, beyond all doubt, considered to be a case of leprosy. The medical authorities decided, however, that under the circumstances it was not their duty to sound the alarm, or in any way to disturb the boy's education.

"From this time onwards (except the death of the first patient soon afterwards) I heard nothing more of these matters till a *few* weeks ago, when I was asked to see Dr. X.'s son professionally on behalf of the school authorities; and, if so advised, to request Dr. Anderson also to give an opinion as to the present state of health of this young man, who happened at the time to be visiting some friends in Glasgow. It was represented to me that he had maintained, on the whole, fairly good health since I last heard of him through my medical friend, and had not been incapacitated from school work except on account of a contagious eczema which had been prevailing, and with which he had been affected in common with other boys. Apparently, however, the opinion had arisen that his general health was not quite so good, and that, in view of a cutaneous affection of this kind, apparently communicable, existing, it was no longer expedient that he should remain at the school. Indeed, I could not but come to the conclusion that his removal, on public grounds, had been practically settled; and with every desire to soften the blow as much as possible to the poor boy, it was felt to be necessary that his guardian, at least, should receive unequivocal and unbiased testimony as to the actual state of the facts and circumstances under which the decision was arrived at. Under these circumstances I saw and examined this boy, and made a report, along with Dr. Anderson, to the effect that the disease was evidently leprosy, though of a remarkably mild type, as shown by discolorations and cicatrices, and also by large, anaesthetic areas on the back of one limb. All breaches of surface, however, and all discharge had ceased at the time of our report, and Dr. Anderson felt still in a position to affirm that no danger to others could occur from the boy's remaining at school. On this last point I did not feel able to give an unqualified assent to my colleague's opinion; but as regards the matters of fact and observation there was no doubt whatever, and our report accordingly on these was substantially as above."

In further explanation Professor Gairdner, in a letter to the *British Medical Journal* August 8, 1887, says :— "In submitting to you some curious facts and statements which had been brought under my notice as bearing on the above subject ("Leprosy and Vaccination": *British Medical Journal* June 11, 1887)I was exceedingly careful not to obtrude any opinion of my own. It was clear from the first that the mere statement of such detail would waken up some old controversies, and would perhaps involve very serious practical issues; but these considerations did not appear to me to justify withholding the facts, but rather the public statement of them in as unbiased a form as was possible."

Referring to these cases, Dr. C. Burgoyne Pasley, Acting Surgeon General, Trinidad, observes :—"The fact remains, that an unlucky boy, of undoubted European parentage, acquired a most loathsome disease, and died a miserable death as the result of vaccination, carefully or carelessly performed as the case may have been."—*Papers on Leprosy, Government Printing Office, Trinidad. 1890.*

The same medical authority says :—" If by accident I draw blood in puncturing the vesicle on the arm of any child, I invariably reject the child as a vaccinifer, no matter how healthy it may appear, or how abundant the supply of lymph may be, fearing to inoculate any constitutional disease, leprosy, syphilis, *etc.*"—*British Medical Journal* 1p. 270, July 30th, 1887.

A correspondent of the London *Daily Graphic*, writing from St. Kitts, 5th June, 1890, reports the

following under the title of

"A SAD CASE."

"A sad case occurred here a short time ago, which shows the danger that arises from the practice of vaccination in an island where leprosy is treated as of no account. A few months ago a little girl, the daughter of the Rev. Mr. —, a Wesleyan missionary, who came to the West Indies from England two or three years before, fell ill. On examination by the doctors it was found that the poor child had contracted leprosy. The only probable means of communication was by inoculation; and thus the parents, endeavouring to save their daughter from the very remote danger of small-pox, inoculated her with the horrible poison that will make her life a living death and herself a loathsome and repulsive, spectacle. Hoping that by returning to England he might get something done for his daughter, the missionary resigned his charge and made preparations for his departure. But a new trouble awaited him. The Royal Mail Company's steamers could not take a leper as a passenger; but one of Messrs. Scrutton's vessels agreed to take the sorely distressed family to England. They got on board, and started on their voyage. But ill luck again attended them, for, while leaving the island, and when nearly opposite their old home, the, ship struck on a reef; and, although all on board were saved, the missionary and his family remain here, where they have been so sorely tried."

While in Trinidad, I made inquiries of a highly intelligent merchant, who has resided forty-three years in the West Indies, and has always been much interested in the public health. He says the belief is general in the islands that leprosy is being extensively disseminated by vaccination, and he furnished me with particulars of a number of healthy families where leprosy and other diseases have broken out after vaccination, of others who, in spite of, a law enforcing vaccination, have preferred to undergo the worry and penalties of prosecution to the terrible risks of this hideous and incurable malady. In some instances the children infected with leprosy have been sent by their parents to France and England, where, after treatment by some of the most distinguished physicians, they have either succumbed to the disease or returned to die at home; and in one case the mother died of a broken heart on seeing her eldest son come back a complete wreck, loathsome to the sight. All the victims described by my informant were in good circumstances,, and none were even sent to the Leper Asylum, where only the poor are interned. He says that had he kept a record he would have been in a position to have given details of very many cases, with all the attending circumstances, and adds, "I have come to the conclusion that we are indebted to vaccination for not only this (leprosy), but many other diseases, especially those of a scrofulous nature, as well as syphilis."

In a communication to the *Lazaretto*, St. Kitts, August 25, 1890, Dr. John Freeland, Government Medical Officer, Antigua, West Indies, says:--"In some of these islands leprosy has no doubt spread for the want of precautions to separate the diseased from the healthy, from poverty, overcrowding, or decomposed food, and from, I fear, the system of arm-to-arm vaccination which now so universally prevails."

The following letters, read before the Royal Vaccination Commission, from Dr. Charles E. Taylor, of St. Thomas, Danish West Indies, secretary and member of the Colonial Council of St. Thomas and St. John, member of the Board of Health, etc., illustrate the difficulties which obstruct the investigation into this momentous subject, owing to the dread which is generally felt by inhabitants of its becoming known that members of their family are tainted with this fearful malady, and probably also to an unwillingness to cast reproach on a prescription so extensively recommended by

the profession as vaccination:--

St. Thomas, Danish West Indies

Virgin Islands, Jan. 2 1890.

DEAR Sir to your inquiry with reference to the spread of leprosy in the West Indies, I beg to say that it is difficult to obtain testimony with regard to this disease having been conveyed into families either by vaccination or otherwise.

There is such a dread of the hideous fact becoming known, and though parents will talk about such and such a case, when it is pushed home to themselves, and their evidence requested for public purposes, even so important as a Royal Commission, they beg to be excused.

My own experience has compelled the conviction that leprosy has on numerous occasions been propagated by the vaccinator's lancet in these islands. Children have been brought to me a year or two after vaccination who have shown unmistakable signs of leprosy, and whose parents assured me that such had never been b their family before. On the other hand, inquiry into the antecedents of the child from whom the lymph had been selected revealed the existence of leprous taint either on the paternal or maternal side.

My own experiences have been confirmed by Dr. Bechtinger, formerly a resident and practising physician here, whose extensive researches entitle his opinion to great weight amongst pathologists.

The belief also, in the British West Indies as to the conveyance of leprosy in this way is widespread, and forms one of the strongest grounds against compulsory vaccination that I know of.

In view of such a fact, and in face of such a terrible danger it is my conscientious opinion that every physician should hesitate before subscribing to such a doctrine.

I have the honour to be,  
Yours very respectfully,  
CHARLES E. TAYLOR, M.D., F.R.G.S., etc.

A later communication from Dr. Charles Taylor is published in the *Public Opinion* of Nov. 27th, 1891.

It is dated :—

St. Thomas, Danish West Indies, October 20.

I have read the report of the evidence given before the Royal Commission on Vaccination in London with much interest, and with regard to the connection between vaccination and leprosy, an experience in these islands of over twenty years enables me to confirm the truth of this terrible indictment. On more than one occasion cases have come before my notice of leprosy in families which could only have been inoculated with the vaccine virus, none of the family having previous to vaccination been afflicted with this malady. Leading dermatologists in all parts of the world, and the most experienced physicians in the West Indies, are of the opinion that leprosy is spread most readily by means of inoculation, either through a wound or an abraded surface, and still more readily by puncturing contaminated vaccine virus into the arms of healthy persons. The reports of the medical officers of health and physicians to the leper asylums in the West Indies show that leprosy, which thirty years ago was stationary or subsiding, has increased. This, I have every reason to believe, and it is also the opinion of other competent medical men, is coincident with the introduction and spread of vaccination, for there are a number of islands where the disease was

almost unknown previous to its inoculation in this way. Were it not for the reluctance which all physicians, have to expose families tainted with leprosy, they could give evidence as startling as the cases mentioned by John D. Hillis, of British Guiana; Dr. Bechtinger, formerly of St. Thomas; Dr. R. Hall Bakewell; and Dr. Black, of Trinidad. The possibility of spreading such a dire disease by means of the lancet is one too grave to be longer disregarded, and, it is needless to say, a serious matter for these islands, the most lovely in the world, where children, whose parents may be the most healthy, are liable to leprosy through arm-to-arm compulsory vaccination. May I venture to hope that the English Press will have the humanity and courage to speak out and compel colonial authorities to withdraw the vaccination enactments, which on these grounds alone are so dangerous to ourselves and our families. CHARLES E. TAYLOR, M.D.

So great is the dread of the invaccination of leprosy and syphilis, that when I visited the island of Granada in January, 1889, a gentleman connected with one of the public institutions of the island told me that he had two unvaccinated children, and, that rather than incur the risk of invaccinated leprosy or syphilis, he had sent them with his wife to a place of refuge in the mountains. He was not sure, he said, whether this *ruse* would succeed, as the authorities were very sharp.

When I visited Barbados in January, 1889, Mr. E. Racker, the proprietor of the *Agricultural Reporter*, Bridgetown, informed me of a case of leprosy communicated by vaccination, which he had personally investigated. Mr. Racker was intimately acquainted with the father, a member of the Legislative Council, and on one occasion, when visiting his house, noticed that his friend's youngest child was afflicted with leprosy. The father said it was due to vaccination with lymph taken from a child subsequently discovered to be leprosy. Though he believed in the benefits of Jenner's discovery, he declared that there should be no more vaccination in his family. I may observe that so widespread is the belief in Barbados that leprosy and syphilis are communicated by vaccination, that every attempt to make it compulsory has been defeated. Nevertheless the advantage of vaccination is believed in by several men with whom I conversed, and there is a considerable amount of vaccination practised, to which I attribute no small share in the admitted augmentation of this disease before referred to. The hideous risk, attending the practice of vaccination is illustrated by the following letter of Mr. Racker, who writes .2nd May, 1890:—" I know all about the case reported in the *British Medical Journal* by Dr. W. T. Gairdner. I am one of the executors to the will of Dr. J. C., but I had no idea that the boy was suffering from leprosy until I got a letter from the head master of Dollar, enclosing a letter from Dr. Gairdner.

"I think I told you how I once consented to have my children vaccinated, and how at the last moment I changed my mind, and would not allow them to be operated on, Well, that boy, Dr. J. C.'s son, was the one from whom they were to be vaccinated. What a narrow escape I had!"

Mr. Alexander Henry, Vice-Chairman of the Council of the British and West Indian Alliance, and formerly editor of the *St. Kitts Gazette*, who has resided some years in the West Indies, and has devoted much attention to the spread and causation of leprosy, writing 12th June, 1890, says :—" A medical officer of health cautiously admitted to me that leprosy was contracted by means of careless vaccination. Now, careless vaccination means vaccination from arm to arm, which is almost universal in these islands. I do not believe there is a doctor of any standing in the West. Indies who would deny that leprosy can be inoculated. It is admitted that owing to the slow incubation of the disease it is difficult to distinguish a leper; and when you take into account that medical officers are constantly complaining to the Government 'that they cannot get a supply of calf-lymph,' and add to

this the indiscriminate and careless yet vigorous manner in which they carry out the vaccination laws upon an ignorant and simple people, who have no means of asserting themselves, I think we may safely conclude there is a high probability that leprosy is spread by vaccination."

When or how leprosy entered this island is perhaps unknown. Certain it is, however, that the dread disease has recently been advancing by leaps and bounds. In proof of its increase here I quote the following passage from a recent quarterly report of Dr. Alfred Boon, one of the Government medical officers and acting analysts of Government statistics. Dr. Boon says :—"The opinion that it is, as many hold, increasing in the island, is supported by the fact that in the four years 1885 to 1888 thirty-four such deaths were registered."

In a later communication received by me from Mr. Henry, dated October 8, 1891, he declares his conviction that vaccination is one of the chief factors in the spread of this fearful disease in the West Indies. After referring to the small-pox epidemic in Martinique, in 1887, and the consequent extensive re-vaccination propagated in St. Kitts, the writer proceeds :—" But, you may ask, how did that affect the labouring class, who are known to have a strong prejudice against vaccination, and among whom the disease of leprosy is most common? This is the incident to which I wish to draw your attention. There is in force in St. Kitts (and in most of the other islands) a law to compel all boatmen and porters to take out a yearly license. Now, it so happened that, at the time when the boatmen and porters required to renew their yearly badge, the small-pox was raging in Martinique, with, of course, the usual panic in St. Kitts. The boatmen and porters were informed by the Inspector of Police, or by his authority, that no one could have his license renewed unless he had been re-vaccinated that year. I need not point out the unspeakable dangers which such a system of indiscriminate—almost reckless—arm-to-arm vaccination exposed adults of the class among whom leprosy is rampant. In considering the medical aspect of the practice, you must bear in mind that the defence of the arm-to-arm vaccination by the medical officers is their admission that it is almost impossible to obtain pure calf lymph in the islands. Can you wonder, then, that there should exist a strong prejudice and an unspeakable dread of vaccination among the lower classes in the West Indies?" In support of this contention, that the majority of the West Indian islanders fear the practice of vaccination, Mr. Henry adduces the evidence of the medical officers themselves :—" Dr. Gavin Milroy, in his 'Report on Leprosy and Yaws in the West Indies' (House of Commons Command Papers, c. 729) states on pages 32, 33, 'In the frequent conversations which I subsequently had with many of these gentlemen (the medical officers in the West Indies) I learned the fact that the European and most of the higher creole families were always extremely anxious about the source of the lymph to be used in the vaccination of their children, from the dread of a leprous taint being thus acquired. None of my informants appeared to partake of this belief themselves, but all recognised the propriety of avoiding the use of lymph from children of families known or believed to be afflicted, especially as infants themselves rarely, if ever, exhibit any outward manifestations of the malady.' "Dr. Milroy says that the Vaccinator-General, Dr. Bakewell seemed to give countenance to the *popular belief* as to the transmissibility of leprosy by vaccination."

Dr. de Verteuil, of Trinidad, in replying to the views of Dr. Bakewell, says (p. 34) that "it is necessary to take certain precautions. The vaccinifer should be healthy, and born of parents free from any syphilitic or leprous taint, and, as hereditary syphilis generally manifests itself after the age of four or five months, it would be as well to choose as vaccinifers children of five or six months and above." The only comment I need make on the "defence" of Dr. de Verteuil's is to point out that it is well nigh impossible to take the necessary and certain precautions to know if the

vaccinifers are *leprosy*.

Dr. Bowerbank, of Jamaica, in pp. 34, 35, says:—"I have frequently heard of a case of leprosy occurring in a family, alleged to have been the result of vaccination. I know of two instances in one family (a Jewish one), in which the parents and friends are thoroughly convinced in their own minds that such was the case. In Barbados we find a strong prejudice against vaccination, for Dr Browne writes:—"It has been a general rule not to vaccinate from the *apparently unhealthy*, or those of leprosy taint, not so much from any opinion founded on fact of the possibility of conveying the disease, as *from respect to the general prejudice prevailing*. For the Leeward Islands, I refer you to a letter to the editor of the *St. Kitts Lazaretto*, 23rd August, 1890, by Dr. Freeland, Government Medical Officer of Antigua :—" In some of these islands, leprosy had no doubt spread from the want of precautions to separate the diseased from the healthy, from poverty, from overcrowding, or from decomposed food, and from, *I fear the system of arm-to-arm vaccination, which now so universally prevails.*"

Mr. Henry says that the only point on which medical men seem to be unanimous regarding leprosy is that, whether it is contagious or not, it is inoculable; and, after citing various medical testimonies, showing the connection between leprosy and vaccination, he observes :—" If ever a case was proved it is this one that there is a universal belief in the West Indies that leprosy is spread by means of vaccination. And I, for one, place far more reliance upon a popular belief of this kind, and especially upon this subject, than I place upon medical testimony, because the neighbours of a leper are far more likely to know when and how he contracted the disease: they know his pedigree, family history, and the whole condition of his life and its surroundings, whereas the medical officer simply pays a casual visit, and often does not hear or know of the leper till the disease manifests itself to such an extent that the leper becomes a burden and a danger to his relations and his neighbours.

"But what was the answer of the College of Physicians to the inquiry of the Chief Secretary of State for the Colonies, as to 'whether there was any ground for the belief that leprosy was spread by vaccination (in the West Indies)?' On page 86, same Report, in their answers and advice to Lord Kimberley:—" The College of Physicians feel they cannot press too strongly on your Lordship the importance of enforcing the practice of vaccination for the protection of those who are too ignorant to protect themselves.' As the people become a little wiser, they will be able to protect themselves from the prejudice of the College of Physicians."

#### SANDWICH ISLANDS.

Leprosy is a disease of relatively slow incubation. Children pronounced perfectly healthy, and represented as approved subjects both for vaccination and for vaccinifers, may, in a few months, exhibit the unmistakable signs of leprosy. In a report by Dr. Edward Arning, dated Honolulu, H.I., November 14, 1885, presented to the president and members of the Board of Health, p. 52, this distinguished observer says:—" The next point touches the vaccination question, with which I have dealt at length under the heading of experimental work. I would further urge that the medical examinations of school children, which have led to the elimination of quite a number of cases, should be kept up regularly and carefully. As an instance of their necessity, I may quote a case which has quite recently come under my observation. A little girl (native) belonging to one of our large schools passed my close examination a year and a half ago as healthy, but now presents initial symptoms of leprosy. We must not rely on general healthy appearance in these examinations, and

on a furtive glance at hands and arms. I have found unmistakable marks of leprosy on the back of a child that held a recent health certificate. Moreover, we shall have to extend our examinations even to the very young children, in spite of Dr. Fitch's assertion that leprosy does not make its appearance before the period of second dentition. I have seen a child with clear signs of leprosy at three and a half years of age, and -know of another boy who was a marked case at four years old."

This eminent bacteriologist, in a letter before me, dated September 6, 1889, says:—" During my stay on the Hawaiian Islands for the bacteriological study of leprosy, I was naturally drawn to a scrutiny of the question whether leprosy is transmissible, and had been there transmitted by vaccination; all the more so as there is a general opinion prevailing on these islands that the unusually rapid spread of the disease about thirty years ago may possibly be attributed to the great amount of indiscriminate vaccination carried on about that period. And there is no mistake about the actual synchronicity of the spread of vaccination and of leprosy in the Hawaiian Islands; but many a mistake is possible as to the real causal relation between the two.

"I could trace the first authenticated cases of leprosy back to about 1830, but the terrible spread all over the islands did not take place until very nearly thirty years later, at a time when an epidemic of small-pox had given rise to very general and very careless vaccinations throughout the group .....attach far more importance to an instance of an increase of leprosy soon after vaccination on a much smaller scale, and during a much more recent period than the above. I have it on good authority that a very remarkable new crop of leprosy cases sprang up at Lahaina, on the island of Maui, about a year after most careless vaccination had been practised there."

The impossibility of detecting leprosy in its early stages is a matter of common notoriety amongst physicians, so that many who believe in the prophylaxis of vaccination refuse to incur the terrible risks involved by its practice in leprosy countries.

Dr. E. Kaurin, in "Notes on the Etiology of Leprosy," in the *Lancet*, January 25th, 1890, observes :—" We must bear in mind that the duration of the disease is much longer than is generally supposed. The patients, as a rule, take no account of the long prodromal stage, marked by indefinite subjective phenomena and temporary affections of the skin. The physicians themselves often overlook the early symptoms of the disease; indeed, it is sometimes impossible to form a diagnosis in the early stages. The whole period of the disease, from the onset to the time when distinct signs are noticeable, amounts to at least from three to four years."

Mr. H. A. Acworth, writing to me from the Municipal Commissioner's Office, Bombay, July 29th, 1891, says:--"I have plenty of lepers in my hospital here who could not be identified as such, unless they were completely stripped and examined by a trained eye."

Dr. Mitra, in his Report on Leprosy in Kashmir, refers to the recorded statistics of lepers, and says that the enumerators "might have overlooked many cases in the incipient stages," whereupon the Lahore *Civil and Military Gazette* calls attention to the consequent dangers of communicating organic or other diseases by means of vaccination.

Dr. E. Arning says :-" When in Hawaii I attended a German boy, aged 12, who suffered from leprosy, from whom, when he was seven years old, several white families had been vaccinated."—*Journal of the Leprosy Investigation Committee, February, 1891, p. 131.*

In the report of Dr. Webb, medical inspector, on the condition of the schools, April 1st, 1886, are

recorded five-cases of incipient leprosy in the Royal School, and two in the Fort School, Honolulu.

Dr. F. B. Sutliff, of Sacramento, California, who has studied the disease as Government physician on the Island of Maui, says:—" I very seldom visited a school without excluding some (children), while the spots just beginning to show in others made it only too probable that they would not long be doubtful cases. It did not seem to me a difficult task to read the fate of Hawaii in the little dark faces that looked up from their books."— *Occidental Medical Times, April, 1889.*

In Dr. Arning's report, dated Honolulu, Nov. 14, 1885, p. 14, we read :—" Closely allied to inoculation is the subject of vaccination. You are doubtless aware of the very prevalent opinion among medical men that the unusually rapid spread of the disease may possibly be attributed to the great amount of indiscriminate vaccination which has been carried on in these islands. If my information is correct, unquestionably new centres of leprosy have developed after vaccination was practised and several old inhabitants have told me how they themselves used no precautions whatever in vaccinating during a small-pox scare.

"To bring some light on this moot point I vaccinated a number of lepers. The vaccination only took in three cases, one tubercular and two anaesthetic. Both the lymph and crust of the tubercular case contained the *bacillus leprae*; in the anaesthetic cases I could not detect it."

Dr. Arthur Mouritz, then Resident Physician and Medical Superintendent of the Leper Settlement, Mobkai, in his Report for 1886 to the Board of Health, after alluding to contagious and hereditary predisposition, says:—" The third cause to which I attach some importance, and which has undoubtedly spread the disease, is vaccination. I can bring forward no case personally, but I have reliable hearsay evidence that after the operation of vaccination had been performed on several white children, they manifested signs of leprosy, and finally developed the disease. Evidence on this same point is put forward by Sir Ranald Martin in India, and by Professor H. G. Piffard, of New York, both reliable authorities."

An Appendix to the "Report on Leprosy" addressed to the Legislative Assembly of Hawaii, in 1886, is an interesting account of Queen Kapiolani's visit to the Leper Settlement at Molokai, by the Princess (now Queen) Liliuokalani, in July, 1884. Amongst other incidents, the Princess refers to an interview with one, Kehikapau, in the presence of several persons. - Kehikapau called the Princess's attention to the circumstance of his having contracted the disease from vaccination. He also mentioned that, through the same agency, all his schoolmates had died of the disease, induced in this way.

According to the Report of Surgeon J. R. Tryon, of the United States Navy, leprosy has spread "from year to year in Hawaii, and has increased to a marked degree since the indiscriminate and careless vaccination practised during the severe epidemic of small-pox in 1853." — *Medical and Surgical Memoirs, 1887, vol. 2, ft. 1252, by Dr. Joseph Jones, President of the State Board of Health, Louisiana.*"

In a summary of reports furnished by foreign Governments to His Hawaiian Majesty's authorities as to the prevalence of leprosy in India and in other countries, and as to the measures adopted for the social and medical treatment of persons afflicted with the disease (Honolulu, 1886), I find the following extracts, p. 238 and 239, from the *New Orleans Medical and Surgical Journal, April, 1880.*

After referring to the relation of leprosy with syphilis in the Hawaiian Islands, the author says :—"Vaccination was also inquired into. Alarmed by an invasion of small-pox in 1853, a general vaccination of the whole population was ordered, and physicians being at that time very few on the islands, non-professionals aided in the work.

"It is charged by some that, as a natural result of the labours of the heterogeneous force so appointed, not only syphilis, but also leprosy, was greatly increased. In my last circuit trip in my district, I found very few adults who had never been vaccinated. This involves the question of inoculability—in my opinion the main, if not the only, means of propagation other than inheritance—that is, like syphilis, it depends for its propagation upon the direct introduction of virus into the blood."

The fact that an increase in the practice of vaccination in leprosy countries is often accompanied by an increase in the dissemination of leprosy is shown by the following evidence :— Mr. George C. Potter the Secretary to the Honolulu Board of Health, writing to me on behalf of the President of the Board of Health, Dr. J. H. Kimball, in a letter dated Honolulu, H.I., June 1st, 1890, says :—" It is an opinion among the laity and some of the profession that the extensive arm-to-arm vaccination that was practised in the years 1852 and 1868 during small-pox epidemics was a prolific cause of the spread of leprosy" In a report of the Board of Health to the Legislative Assembly of 1886, by the then president, Mr Walter M Gibson, I read, p 35, "There are two more causes which, in my judgment, have had a great effect in the propagation of leprosy, or diseases closely allied to it, although, medically, it be a disease *sui generis*. The first was the ignorance of some of the early and unqualified medical practitioners who were permitted to spread disease broadcast, and to do irretrievable injury before retribution overtook them; but the second and chief cause was the indiscriminate and, to my mind, careless vaccination that began about 1868

Dr H S Orme, President of the State Board of Health, California, in an able memoir on "Leprosy: its Extent and Control," says:—" There can be no doubt that the lowering of the vital stamina of the race by the great prevalence of syphilis (at Hawaii) prepared them for the inroads of any disease that might threaten. During this period small pox also scourged the people, and in 1868 there began a general vaccination, in which virus was taken indiscriminately from human subjects. This reckless practice doubtless contributed greatly to the spread of both syphilis and leprosy."

In an article on "Personal Observations of Leprosy in Mexico and the Sandwich Islands," in the *New York Medical Journal* for July 17, 1889, the author, Dr Prince A Morrow, M A, says —"Vaccination is believed by the natives, as well as by many intelligent physicians, to be a potent agent in the rapid diffusion of leprosy through the islands It must be remembered that until recently vaccination was performed by unskilful persons, human virus was used, and no distinction was made between a healthy person and a leper as a vaccinifer. The fact is incontestable that, after the general vaccination of the natives, numerous leprosy centres developed in various parts of the islands where the disease had previously been unknown. Arning demonstrated the plentiful presence of *bacilli* in the lymph and crusts of vaccine pustules in lepers."

In the *Archiv fur Dermatologie und Syphilidologie* for January, 1891, we read that at the Berlin Medical Congress of 1890 Dr. Arning read a paper on "The Transmission of Leprosy," wherein he scouts the idea of hereditary transmission. He proceeds to ask the question raised by the late Dr. Hillebrand, "Has leprosy been spread in the Hawaiian Islands by means of universal vaccination?"

And he declares:— "There can be no doubt as regards the synchronousness of the diffusion of leprosy and the introduction of vaccination into the Hawaiian Islands.

"I am able to state—having excellent authority for so doing, though, unfortunately, no statistics—that a very remarkable accumulation of fresh leprosy cases took place in 1871-72, in a place called Lahaina, on the Island of Maui. This happened about one year after a universal arm-to-arm -vaccination, which had been most carelessly performed. About fifty to sixty cases occurred suddenly in this locality, which up to that time had been comparatively free from the disease."

Dr. Arning concludes :—"Arm -to-arm vaccination should be prohibited in countries in which leprosy abounds."

When, during my visit to -Honolulu in October, 1890, it became known that I was seeking information concerning the spread of leprosy, in the interest of the public health, and not to support any medical theory or foregone conclusion, several gentlemen who had devoted much attention to these subjects called upon the, and others gave me introductions to those who were conversant with them. The President of the Board of Health, the Hon. David Dayton, and the Secretary, Mr. Potter, afforded me valuable assistance, and supplied me with copies of their various official reports relating to the introduction and dissemination of leprosy and the methods adopted for dealing with the scourge, which, with other European diseases, bids fair, unless arrested, to destroy the entire native race. They incidentally showed me copies, cut from the Press, of my own communications on the subject of leprosy and vaccination in the West Indies, thus illustrating their desire to inform themselves upon the subject by evidence from all quarters of the globe.

I have, in this monograph, made free use of the facts and testimonies contained in these important official documents, and I take this opportunity of expressing my thanks for the courtesy' and information furnished by the gentlemen connected with the Board of Health, resident physicians, the Executive Officers at Molokai and Kalihi, and members of both Houses of the Legislature.

According to all the evidence which I have been able to obtain, leprosy was unknown in the Sandwich Islands until many years after the advent of Europeans and Americans, who introduced vaccination ; and there is no aboriginal word in the Hawaiian language for this disease. Mr. Dayton, President of the Board of Health, says that the natives, having no words of their own, used the Chinese words *maipake* ?—" what is this disease?"

In Captain Cook's time (1770-79 ED) these islands were supposed to contain a population of 400;000 at the present time they do not number more than 40,000, and are rapidly diminishing. In all quarters, both native and European, lay and medical, among members of both Houses of the Legislature, I found the belief all but universal that leprosy was considered to be communicable, and that the propagation of the disease during the last twenty-three years was largely due to vaccination.

One medical authority told me that he had no doubt that the disease was inoculable and spread by vaccination, but he did not think it would be prudent to disclose the fact amongst the' natives, as he would not be responsible for what they would do. He expressed his own convictions freely on the subject, which are confirmed by Dr. Edward Arning's inoculation experiment on the condemned convict Keanu, of whom he gave me a photograph, showing the development of the tubercular form

of this disease. No other intelligent resident shared the fear of such an exposure, the incriminating facts having already been acknowledged both in the official reports and in various communications by medical practitioners to American medical journals. On the contrary, when it became known that I was there not to institute experiments but to collect facts in the interest of those afflicted people, I was urged by influential citizens, and particularly by members of the Legislature, to do what was possible to make known the evils under which they suffered, and to bring an enlightened public opinion to aid them in putting an end to a mistaken medical procedure, which had led to such disastrous results. One of the gentlemen who besought my intervention was Mr. J. Kalua Kahookano, a barrister-at-law, and representative of North Kahala, Island of-Hawaii (the largest in the Archipelago), who introduced a bill (July, 1890) in the Hawaiian Legislative Assembly to repeal the vaccination laws. This bill was supported by a petition from Mr. Kahookano's constituents, showing how leprosy, syphilis, and other diseases had been scattered broadcast in these islands by means of the vaccinator's lancet, and new centres of the diseases thus established. The truth of this fearful indictment is now admitted by several medical practitioners of high standing, who have visited the islands to study the cause of the rapid spread of this destructive malady.

Amongst other old residents who kindly volunteered information was Mr. H. G. Crabbe, a member of the Upper House of Legislature, who had resided in the islands for forty-three years, and had always taken an active interest in the public health. He said it was time that the true facts concerning the propagation of this disease in Hawaii were made known, as the people were being decimated by leprosy conveyed to the blood by vaccinators. Mr. Crabbe detailed various facts in proof of this serious charge, and expressed the utmost anxiety that the truth should be made manifest in countries where public opinion was a potent factor for the wellbeing of the community. He had met with many cases of leprosy clearly traceable to vaccination in the islands, and the facts were admitted by those who, like himself, had taken the trouble to investigate them; but the evil was being perpetuated by those who ought to know better, partly through apathy on the part of the authorities, and partly through the ignorance of the natives, who accepted whatever kind of vaccine virus was most handy when wanted for use. Mr. Crabbe was a believer in vaccination as a prophylactic against small-pox, but considered that, as at present administered, it was a most cruel and mischievous infliction upon a confiding population.

In a statement handed to me by Mr. Crabbe, dated Honolulu, Hawaii, Oct. 22, 1890, the writer says:—" In the year 1866 there was an indiscriminate vaccination of young and old amongst the natives; this vaccination was compulsory, but, thank heaven, I did not allow my children to be vaccinated with the common herd. From that time the leprosy cases became more frequent; many natives who had previously been healthy were afflicted with leprosy. The spread of the loathsome disease was more pronounced in the years following this indiscriminate vaccination. I can recall one case in particular of a native girl by the name of Kapeka, as healthy and as nice looking as 'tis possible for a native to be, who was forced to be vaccinated in the year 1866. In the year 1871 or 1872 Kapeka was sent up to the Molokai Leper Asylum by order of Dr. Robert M'Kibbin. In this particular case I have always contended that this girl was inoculated with the germs, not only of leprosy, but also of syphilis, from this fact. Long before she exhibited any signs of leprosy (some three years), if she hurt herself, so as to make an abrasion of the skin, the place would inflame and suppurate, and would take a long time in healing, presenting an appearance like a syphilitic sore. She died at the Leper Settlement."

The appropriation by the Government for the Molokai Lazaretto is £10,000 a year—a large sum for

a poor and comparatively thinly populated country. During the past twenty-five years, about a million and a quarter dollars have been expended by the Hawaiian Government in making provision to benefit these afflicted people. It is, however, melancholy to reflect that one source of the dissemination of the disease, viz.—vaccination, is still permitted, and, there is reason to believe, is encouraged both by the misguided Government and, notably, by certain official members of the medical profession. The latter have inherited such a deeply-rooted prejudice in favour of the merits of the Jennerian practice as to blind them to its destructive potency in countries where leprosy is endemic. The great majority of medical practitioners take their views from the medical journals, which most unfairly refuse to give their readers the adverse side of the Jennerian practice.

Notwithstanding the evidence of the disastrous results of vaccination in spreading and establishing new centres of leprosy, we are told in the "Biennial Report of the President of the Board of Health to the Hawaiian Legislature for 1888" (in which the depopulation of the islands, and the spread of leprosy, is frequently referred to) that "the work of vaccination has been pushed with vigour;" and, "The Board would recommend the passage of a more stringent law, imposing heavier penalties and giving the vaccination authorities all necessary authority."

In his remarkable work, "Traite Pratique et Theoretique de la Lèpre," p. 306, Professor Henri Leloir refers to the introduction and progressive increase of leprosy in the Sandwich Islands, and states that vaccination, compulsory and *en masse*, contributed to the spread of the disease.

Coincident with the activity with which vaccination has been extended in Hawaii, there have been several very severe outbreaks of small-pox. In the year 1881, according to official reports, 500 persons died of smallpox, a large majority of whom had been vaccinated. Each of these epidemics has been accompanied by a more stringent enforcement of vaccination, and has been followed by the development of new centres of leprosy and the more rapid spread of this destructive scourge.

#### BRITISH GUIANA.

In the pursuit of my inquiries in British Guiana in 1888-89, the public librarian, Mr. Rodway, expressed himself much interested in the subject of leprosy, which, considering the remarkable increase of the disease in that colony, has been neglected of late years. He called my attention to a work entitled "Leprosy in British Guiana," by a careful scientific observer, Dr. John D. Hillis, formerly Superintendent of the Leper Asylum in that country. Mr. Rodway said this was regarded as the standard work on the subject. From it I extract the following particulars of invaccinated cases

Case IV., p. 30.—*Confirmed Tubercular Lepra, supposed to have been contracted by Vaccination.*—Joseph Francis C—, a fair Portuguese, born in Demerara, now aged twenty years. His parents are alive and healthy. He has been suffering for the last ten years from tuberculated lepra. He has a sister, aged eighteen years, at present (1879) an inmate of the asylum, suffering from the same form of leprosy. They were both admitted on July 30th, 1877, from Murray Street, Georgetown. They have three sisters and one brother, who are alive and well. Our patient, J. F. C—, and his sister were vaccinated with lymph obtained from a member of a Portuguese family, ("It is within the knowledge of Dr. Manget, surgeon-general, and the author, that this family are at present afflicted with tuberculated lepra.") in whom leprosy was afterwards found to exist. They were the only members of the C— family vaccinated with this lymph.' Within 18 months of the performance of the operation by Dr. —, a reddish brown spot appeared on the inner side of the right thigh, preceded, it is stated, by some constitutional disturbance. This spot was raised and tender,

accompanied by profuse sweating all over the body, and remained for some time. Subsequently other spots made their appearance on the right buttock (which disappeared shortly after), between the shoulders, and on each cheek. They were all ushered in by more or less well-marked febrile symptoms. A red patch next appeared on the forehead, and epistaxis set in, periodically occurring to this day. Tubercles then made their appearance on the face, the other patches continuing to increase in thickness and roughness, and forming tubercular infiltration."

"The latter was removed by gurjun oil, under which treatment many of the symptoms were ameliorated." State and condition on November 30th, 1879 :— "He has a light brown irregular patch on the front of his chest; this had been larger, thicker, and mahogany-coloured, and has evidently undergone partial absorption. There is a patch of tubercular infiltration on the back of the arms, and at the back of the elbows. The fingers are swollen, shining, and dark-looking, a solitary tubercle forming on the back of the hand. The swollen condition of the fingers and hands is very characteristic. There are two tubercles on each cheek the size of marbles; the lobes of the ears are thickened, and a tubercle is forming on the upper lip.

"There is no appearance of hair growing on the face. There are reddish-brown discolourations on the front and back of the legs. There are a few small scattered tubercles on the dorsum of the feet, and the lower parts of the legs are swollen and hard to the touch. There are tubercles on the scrotum, an ulcer on the leg where a tubercle has ulcerated, and the larger tubercles are slightly anaesthetic. This young man is one of the carpenters of the Institution; he is in hopes the treatment now being adopted may arrest the disease, which is, however, making slow but sure progress."

On page 191 of Dr. Hillis's book, a passage is cited from the work of Dr. Vandyke Carter (p. 178), one of the greatest authorities on the disease, in which vaccination is instanced as one mode of communicating leprosy. On page 192, we read :—" The subject of leprosy was brought forward at the stated meeting of the New York Academy of Medicine, January 20, 1881, in a communication by Dr. H. G. Piffard, in which the author, who is not himself a believer in the contagiousness of leprosy, states :—' A review of the evidence bearing on the contagiousness of leprosy led the speaker to the conclusion that this disease, like syphilis, is not contagious by ordinary contact, *but it may be transmitted by tile blood and secretions. Vaccination may transmit it.*"

A case in the speaker's own experience was cited in proof of this."— *The Medical Record, February 19, 1881 p 212.*

Sir Ranald Martin states :—" The dangers to Europeans arise chiefly from vaccination and from wet-nursing. I felt that very early in my career in India and I took the precautions which are here recorded. I saw an English lady last year in a horrible condition (she said) from having been vaccinated from a leprous child." — *Leprosy in British Guiana, by Dr. Hillis, p 182.*

On page 208 we read :—" I have already given some cases in which there could be no reasonable doubt but that the disease was produced by vaccination with tainted lymph. Those of the brother and sister mentioned are conclusive on the point, and we have the testimony in favour of this mode of propagation from such men as Tilbury Fox and Erasmus Wilson. I will therefore conclude this chapter with a case from the work of a recent writer, Dr. Piffard, of New York " :—" Case III.—William T—, aged 25 years, was admitted into Bell Hospital in May, 1864. He was of English parentage, but was born and passed his early life in British Guiana. After vaccination, performed when young, his arm became greatly swollen and inflamed, and large sloughs separated.

Investigation revealed the fact that the vaccine virus had been taken from a negro whose mother was a leper. At the age of seven years some brownish spots appeared upon his back and arms; and at the age of eleven a blister formed on the palm of the right hand, followed by permanent contraction of the flexor tendons. A few months later he felt a tingling sensation around the nail of the right index finger, followed by a line of suppuration and loss of the nail. The finger soon healed, but the same morbid process separated itself in the other fingers of the same hand. After a few months, according to his statement, the skin of the distal phalanges split, and the flesh shrank away from the bones, leaving them exposed. The bones separated at the joints, and the stumps healed. These various processes occupied eighteen months or two years.

"The disease then affected the distal phalanges of the left hand in the same manner. After this it attacked the right foot, and a slough formed over the lower part of the instep. The great toe then became swollen, the skin split, and its distal bone separated; then, without much regularity, the remaining phalangeal bones of fingers and toes necrosed and came away."—*Diseases of the Skin*, p. 209.

"On examination," adds Dr. Hillis, "the patient was found to have *maculae* or other spots, and anaesthesia of the parts affected."

On the 31st March, 1890, I wrote Dr. Hillis, referring to the cases of invaccinated leprosy mentioned in his book, and asked if he could furnish me with any other facts, and whether he would be willing to give evidence before the Royal Commission. To this I received the following reply:--

134 Leinster Road, Dublin, 2nd April, 1890.

DEAR Sir,—Yours to hand. I have no further reliable evidence as to the transmission of leprosy by vaccination than that contained in my book. These cases, however, may be relied on. I got the particulars from the medical man who performed the vaccination in question, and the parents of the children. I enclose a reprint from *Timehiri*.—I am, Yours faithfully, -JOHN D. HILLIS.

Wm. Tebb, Esq

*The British Medical Journal* of November 5, 1887, contains a letter from Dr. Hillis, repeating his conviction as to the communicability of leprosy by means of vaccination. Dr. Hillis says he has had more than twenty years' experience of the disease (leprosy), and half of this time he was superintendent of the largest leper asylum in the West Indies. In this remarkable work, Dr. Hillis quotes Dr. George Hoggan, whose testimony I have adduced, as an authority on the subject of leprosy, and few persons have had greater opportunities of studying the pathology of this disease.

In a recently published work by the late Archdeacon Wright, entitled "Leprosy an Imperial Danger" (Churchill, 1889) the writer, p. 85, reluctantly admits the danger of leprosy vaccination. "Much, very much," he says, "seems to imply that leprosy can be communicated by inoculation, and is communicated by vaccination."

Dr. C. F. Castor, the Medical Superintendent of the Leper Asylum, Mahaica, British Guiana, in his report for the year 1887, p. 43, says :—"Another manner in which the disease (leprosy) may be produced in the healthy with no taint is vaccination. This seems a most probable means of

communicating the disease, nor can there be any doubt, I fancy, after reading the admirably recorded case by. Professor Gairdner, of Glasgow, in the *British Medical Journal* of the 11th June, 1887. Dr. Rake, of Trinidad, disputes the obvious conclusion of the professor, and marshals a number of facts that do not in any way, to my mind, overthrow the fact that in that case vaccination was the cause of introducing the disease in the child."

Again, in paragraph 86 of the same report, Dr. Castor says :—" I have noted these points because I consider they are important, and as needlessly obscuring a palpable fact which should be made known far and wide in countries where leprosy is endemic and widespread, as with us, that there is every certainty of inoculation through vaccination."\*

\*Since the above was written Dr. Castor has given evidence before the Royal Commission on Vaccination (December 2nd. 1895), and in some particulars modified this opinion as to the danger of communicating leprosy by means of vaccination. In an article in No. 4 of the "Journal," December, 1891, in reply to my evidence on this subject before the Royal Commission, p. 4, Dr. Castor observes:---The opinion expressed that vaccination from a tainted source will produce the disease is, I believe, a true one." Surgeon Brunt, R.N., testified, March 2nd, 1892, before the Royal Commission, to actual cases of invaccinated leprosy within his own experience. Positive evidence and a body of unimpeachable facts cannot be set aside by wavering and contradictory statements like those of Dr. Castor.

The dread of communicating leprosy at Georgetown by means of vaccination is very general, and, as a consequence, the vaccination laws are, to a large extent, inoperative. Dr. Robert Grieve, Surgeon-General for British Guiana, in his report for 1887, referring to vaccination, p. 7, says :—" In the beginning of the year vaccination, which had been carried on energetically in the latter part of 1886 in Georgetown, came practically to an end, owing to the unwillingness of the people to bring their children for the purpose."

On inquiry from both medical practitioners and intelligent residents, I found that this objection was mainly due to a wholesome dread of infection of leprosy, when the vaccination was performed with arm-to-arm virus, and of syphilis with various cutaneous eruptions, when imported lymph was used.

In the "Report on Leprosy and Yaws in the West Indies," by Dr. Gavin Milroy (House of Commons papers, C 729), the Surgeon-General of British Guiana says (p. 33) :—" As far as my own opinion goes, I am inclined to believe in the possibility of such communicability—i.e., of leprosy by means of vaccination. There is no objection in Guiana to vaccination, if the parties know the children from whom the lymph is to be taken." But against this there is the testimony of Drs. Hackett, Watkins, Stevenson, and Allison, who state that vaccination has hitherto been practised to a very limited extent among the lower classes in Guiana. Dr. Allison says that "this is principally, if not entirely, due to the difficulty of obtaining vaccine lymph ;" while Dr. Stevenson admits (p. 35) that "the prejudice of the lower classes against vaccination, on account of the supposed communicability of leprosy by it, was, until the recent epidemic of small-pox in Trinidad, insurmountable."

#### UNITED STATES.

The origin of various recent outbreaks of leprosy in the United States is veiled in obscurity, only because medical men do not know where to look for it; though they have admitted that, since the discovery of the *beth//us leprce*, vaccination appears to be the most probable cause. Reluctant to impugn the Jennerian practice, and with opportunities at command, they have preferred to extend their researches in other directions.

Dr. H. S. Orme, President, State Board of Health, California, considers the ordinary explanations given to account for the dissemination of this disease inadequate, and observes:—" Not heredity, nor syphilis, nor endemic conditions, could have given rise to the group of sixty cases in the village of Spain; to the outbreaks in New Brunswick and Cape Breton Island; to the sixteen cases at Charlestown between 1846 and 1876; to the forty-two now at New Orleans, or to the two at Galveston. It is often impossible to trace the source and mode of contagion, but the same is true with all the disorders whose contagiousness is disputed."---*Leprosy: its Extent and Control, p. 29.*

In the "Transactions of the Medical Society of the State of California" for 1890, vol. XX., Dr. Orme, referring to the general vaccination of the people of the Sandwich Islands in 1868 with human lymph, consequent upon an outbreak of small-pox, says:—" This reckless practice doubtless contributed greatly to the spread of both syphilis and leprosy."

"At a meeting of the New York Academy of Medicine, June 6, 1889, Dr. Prince A. Morrow gave an account of his personal observations on Leprosy. Referring to his visit to the Leper Asylum at Molokai, he said he considered it probable that a number of the cases which had arisen in the Sandwich Islands had been caused by impure vaccine."—*British Medical Journal, Aug. 31, 1889.*

Dr. T. B. Sutliff of Sacramento, California, has sent me the following narrative of a case of invaccinated leprosy, contracted in California :—" Boy, native of California; never been out of this State; no family history of any constitutional disease; was well until about eight years ago; was then vaccinated. The arm became very sore, and was swollen in its entire length. An abscess formed in the axilla, and subsequently broke, discharging pus freely. Recovery ensued, the arm becoming well again. Soon after it was noticed that there were numerous patches of 'ringworm' on the body. This condition continued for several months. Several persons, himself included, were vaccinated by the father directly from the boy. The father, and one other of the persons vaccinated, subsequently had 'ringworm.' The father has since had 'tetter' from time to time. One year after vaccination the boy's ears became slightly enlarged. The nose was noticed to have become broadened, and tubercles formed on it and on other parts of the face.

"The ears are markedly enlarged, the nose broadened, and the *alce* are thickened. The hands show the disease quite plainly, the fingers being clubbed. There are a few small ulcers. There is a sore on the shoulder. The feet are beginning to be affected."

In the report of Dr. H. W. Blanc, Professor of Dermatology and the Chief Sanitary Inspector for the city of New Orleans, November 27, 1889, addressed to the President of the Board of Health for the State of Louisiana, where leprosy has been provokingly prevalent, it is stated that leprosy, syphilis, and tuberculosis are transmitted by vaccination. Dr. Blanc says that, "in his two-fold capacity of Dermatologist to the Charity Hospital of the city and Chief Sanitary Inspector of the city, he has had unusual opportunities for the study of leprosy and vaccination. During the past eight years he had observed over sixty cases of *bona-fide* leprosy (anaesthetic and tubercular). The disease is slowly increasing, it is inoculable and communicable by vaccination, and humanised virus should be avoided. Most of the vaccinations are performed by me and my assistants, and I will not on any account allow humanised virus to be used."

*The Occidental Medical Times*, Sacramento, California, of September, 1890, publishes "An Interesting Case of Anaesthetic Leprosy apparently following Vaccination," by Sidney Bourne Swift, Resident Physician, Leper Settlement, Molokai, H.I., and D. W. Montgomery, Professor of

Pathology and Clinician for Diseases of the Skin in the Medical Department of the University of California. The writers say that "one of the most interesting points in this case is that Peke (the leper) had been vaccinated one year before developing symptoms of leprosy, and that the vaccination scar became anaesthetic. Might it not be that with the vaccine virus the virus of leprosy has also been inoculated?"

This question is answered by Dr. Chr. Uronwald, Chairman of the Sanitary Committee on Leprosy, Minnesota, Wisconsin, U.S., who says in the official report of the State Board of Health, "Vaccination has undoubtedly originated leprosy."

In a paper read before the California State Medical Society, in 1881, Dr. A. W. Saxe gives an instance of three children in Honolulu, born of American parents, who became lepers.

In consequence of the serious development of leprosy in Hawaii, there has arisen, during the past two or three years, a determined opposition to vaccination, to which the increase of leprosy is naturally attributed. The President of the Board of Health, the Hon. David Dayton, in the Report to the Board of Health, Honolulu, for 1892 (p. 27), says "that notices were inserted in the newspapers offering vaccination, but there were no applicants." In the same report (p. 67) Dr. R. B. Williams, Government Physician for Hilo and Puna, Hawaii, says:—" There is among natives great prejudice and opposition to vaccination. . . . Hence voluntary vaccination is almost impossible." The existing law renders vaccination obligatory upon all the inhabitants of these islands, and has heretofore been enforced with great rigour, particularly during outbreaks of small-pox. During the past two years it appears to have been relaxed, and objectors have been humanely suffered to escape the dreaded ordeal. It is interesting and instructive to note the result. On page 41, the President of the Board of Health, observes : —" On December 31st, 1890, there were 1213 lepers in the custody of the Board, that being the highest number ever reached; and on March 3 1st, 1892, there were only 1115, a decrease of 98 during the period." A recommendation is thrown out in the report, that the vaccination law should be amended, as the present laws are entirely unsuited to the times. In view of the evidence brought before the Royal Commission on Vaccination in London, showing the futility of vaccination as a preventive of small-pox, and its fertility in disseminating every inoculable disease, the only reasonable alteration in the vaccination laws that will be acceptable to an enlightened public opinion is their entire- and permanent abrogation.

Personally I have heard of many cases, which I have no doubt have been due to leprosy vaccination. There is, however, it is to be regretted, manifest reluctance on the part of the profession to look for causation in this direction; it is generally pooh-poohed as soon as mentioned; and when it appears to be the only way of accounting for a particular case, the attending physician prefers to hold his peace rather than discredit a practice which he has been educated to believe is the greatest discovery in the history of medicine. Professor Gairdner, of Glasgow, introduces his cases of invaccinated leprosy in the *British Medical Journal* with an apology and evident reluctance.

It is generally admitted that, given the right conditions as to environment, temperament, or idiosyncrasy, all bacterial diseases are transmissible from one human being to another; and as no single authority that I have met with, since the discovery of Hansen, pretends that leprosy does not belong to this category, the danger of vaccination is obvious. I am aware that this objection is attempted to be met by the introduction of animal lymph; but animal lymph is admitted to be too active, especially in tropical countries, to be used direct; and in general, therefore, it is available

only after one or two removes, when it carries with it diseases both animal and human, as has been shown in evidence before the Royal Commission on Vaccination.

### BRITISH INDIA.

An uneasy feeling is beginning to be exhibited in India on this momentous subject, owing to the accumulation of -evidence tending to show the sinister connection between the extension of the State-provided remedy against small-pox and leprosy. The synchronicity between the spread of leprosy and the extension of vaccination has given rise, in some districts, to such a dread of vaccination, that every device is resorted to by thoughtful parents to prevent their children being vaccinated. Attempts have been made to remove the dread of leprosy inoculation by the substitution of cow, calf, sheep, lamb, and donkey lymph; various compounds (one described by the medical purveyor as the Madras paste, and another as Lanoline) have been introduced; and some of the leading journals now energetically demand a safer and better system of vaccination. Dr.N. Boral, Chief of the Vaccine Department in the Jubbulpore district, has come to the rescue of the Jennerian *cultus* in the columns of the Allahabad *Morning Post*, but he sees clearly the weight of the incriminating testimony, and admits that to deny- the possibility of vaccinal syphilis or vaccinal leprosy would be tantamount to denying the value of human testimony altogether.

The authorities in India are well aware of the widespread repugnance to vaccination in that country, and of the cause of this repugnance, in the mischievous results known to every vaccinator; but all mention of these evils is carefully omitted in their official reports. Now, however, that the dangers attending the most carefully conducted vaccination have been so fully disclosed in the voluminous evidence taken before the Royal Commission on Vaccination, the culpability of such reticence is inexcusable. *The Statesman*, of Calcutta, August 22, 1891, commenting upon the "Resolution on the Statistical Returns of Vaccination in Bengal for 1890-1," in the *Calcutta Gazette*, August 21, 1891, observes:—"It has been stated that one of the greatest objections to vaccination among the natives of India, and other Oriental peoples, is that diseases such as leprosy, and other terrible blood diseases, have been inoculated with the vaccine virus. We think that some opinion should have been expressed under this head, and the omission of it is to be regretted in what is supposed to be a report given for the general edification of the Government as well as the public." And in a leading article, November 22, 1891, this same influential Indian journal, referring to leprosy vaccination, observes :—"There seems to be no possible room for doubting the reality of the very grave danger to which attention is drawn. . . . . It is notorious that inoculation, that is, the direct introduction of the virus into the blood, is the chief, if - not the sole, means by which leprosy is communicated. Throughout the greater part of Europe, at least, and in all the principal British Colonies and Dependencies, including India, vaccination is not merely the most common means of inoculation, but in most of the countries in question it is a means which, practically, is universally adopted, and enforced by legal penalties. It seems, then, to follow, almost of necessity, that, unless special precautions are taken to prevent so terrible a calamity, leprosy, wherever it prevails in these countries, must inevitably, in a certain proportion of cases, be communicated through the medium of vaccination. . . . . When vaccination from the human subject is practised, it is quite possible that, in a few generations, it might lead to an enormous multiplication of cases, and that without implying any want of ordinary care on the part of operators. For it should be remembered—and herein, it seems to us, lies the real gravity of the danger—the disease is not one that commonly shows itself in infancy. The child from whom the lymph was taken might, to all appearance, be perfectly healthy, and yet its blood might be infected with this fatal and loathsome poison, and the operation thus make it a focus

of contagion."

*The Calcutta Daily News*, August 7th, 1891, referring to the allegations that vaccination is responsible for the transmission of insanity, leprosy, and other diseases, observes :—" The question is an important one; and while it is a great gain to humanity to even modify such a scourge as small-pox, it is largely discounted by the consideration that immunity from it may be purchased at the price of other diseases as bad or worse than that affliction itself."

*The Bombay Guardian* of April 6th, 1889, commenting upon the spread of leprosy by vaccination, observes :—"If we have to choose - between the danger of leprosy and small-pox, let us by all means have the latter. The ghastly sights to be seen in every Indian public thoroughfare, of the scabious, handless arms, and footless legs of begging lepers, forbid any other alternative. Small-pox is bad, 'but leprosy is a hundred times worse.'"

\* *The Indian Spectator*, Bombay, December 27, 1891, in a leading article, calls attention to a strong reaction that has set in against vaccination, and points out that the opponents of the Jennerian method of preventing small-pox contend that vaccination is answerable for much of the spread of leprosy in recent times, and that this view, which has the support of men considered as high authorities on the subject, is of vital importance. The article concludes by observing that "The Leprosy Commission seem to have thrown away a fine opportunity in omitting to direct its researches into the alleged connection between vaccination and leprosy."

When similar charges have been made against vaccination in Europe, the usual course of the official propagandists is to ignore the terrible indictment as long as possible, and then, when questioned in Parliament, either to minimise its character and attribute the results to other causes, or to deny them altogether. Those who are concerned for the public well-being in India may study with profit the pages of the Third Report of the Royal Commission, to see what lengths the official supporters of vaccination are prepared to go in their advocacy of the Jennerian *cultus*. \*

\*On December 30, 1880, fifty-eight young recruits belonging to the 4th Regiment of Zouaves were vaccinated from a Spanish child at the Dey Hospital, Algiers. In a few weeks all the vaccinated developed syphilis, to which about one half subsequently succumbed. The Minister of War, General Farre, instituted an inquiry, but no report has been published. Five times questions were submitted in Parliament with a view of eliciting the facts. The President of the Local Government Board promised to institute inquiries through the Foreign Office, but, on receipt of a reply, excused himself from giving particulars by declaring that "the information was incomplete," and promised to make another application. Finally, on the 27th October, 1882, Mr. .C. H. Hopwood repeated his question, which was answered by Mr. Dodson (Lord Monk Bretton) by a categorical denial of the facts. At this time *the Local Government Board were in possession of full details of this vaccine tragedy (supplied by a Member of Parliament), including the names of the unfortunate sufferers, their grade, matriculation numbers, and nationality, as furnished by a medical witness, after a personal and painstaking investigation of the facts at the Hopital du Dey.*

A report of a " Scheme for obtaining a better knowledge of the Endemic Skin Diseases of India" has been prepared by Mr. Tilbury Fox, M.D., F.R.C.P., Fellow of University College, Physician of the Department for Diseases of the Skin at University College Hospital, London, etc., and Dr. F. Farquhar, Surgeon - Major, Bengal Medical Service. Under the title of Propagation these authors include inoculation and vaccination, and observe that there is by no means a slight body of facts which seem to show that the inoculation with matter from a leprosy sore—and this may occur in cohabitation and constant contact, and in vaccinations—may give rise to the disease. The authors propound a series of fifteen questions, with the view of elucidating the presence and cause of leprosy in different- districts and individuals. It is noticeable that, while they allow that vaccination is a cause of the propagation of leprosy, inquiry on this point is not demanded. The Secretary of the Leprosy Investigation Committee, in his address before the International Congress on Hygiene and

Demography, states that the cases of invaccinated leprosy are few in number. But, inasmuch as all the cases have cropped up accidentally and not as the result of research, it is impossible to estimate their number. An incalculable service to humanity will be performed when medical practitioners of high qualifications, not committed to any preconceived theory, will, in the interest of the public health, undertake this important investigation.

*The British Medical Journal*, Sept. 19th, 1891, reports an paper read at the meeting of the British Medical Association, on "Leprosy and Vaccination," by Dr. R. Pringle, surgeon-major, late of the Sanitary Department of the Bengal Army, who said "that of all charges which had been brought against vaccination, none approached in seriousness — especially as it related to India—the charge that the present admitted increase of leprosy in certain countries was due to the increase of vaccination, which was stated to be not infrequently in those countries little else than leprous inoculation." Dr. Pringle, in recording this statement, fully admitted that in the main it rested on the evidence of medical officers of the, highest rank and authority in the West Indies, and that one Indian medical officer (Surgeon-General C. R. Francis) distinctly admitted, in an important public document, that this was not only possible but probable. Surgeon-General Francis, in the *Journal of the Leprosy Investigation Committee*, No. 1, August, 1890, had written that leprosy may be propagated by inter – marriage and hereditary transmission is undoubted. I believe, too, in its propagation by vaccination or inoculation, but I am very sceptical as to mere contact being the cause. . . . I would advocate an investigation into the effects of vaccination, there being some who are still dubious on this point, though the statement made two or three years ago by Professor Gairdner on the subject would seem to be conclusive in favour of vaccination as a factor." The inoculation alluded to by Dr. Francis was stated by Dr. Pringle not to be inoculation by flies, as seen in ophthalmia—a fact which he remarked in passing was both recognised and dreaded by the Jews of old as one of the most certain and probable means of spreading leprosy—contact, as pointed out, being to them a Levitical uncleanness, and not, therefore, necessarily risking the consequences of contagion. The inoculation alluded to by Surgeon-General Francis was small-pox inoculation, as practised in the Himalayas as a preventive against spontaneous small-pox. Dr. Pringle severely criticised the circumstances attending vaccination in the case recorded by Professor Gairdner in the *British Medical Journal* June 11th, 1887. It was hardly to be expected that the opponents of vaccination would fail to take advantage to the full of such damaging statements regarding vaccination in India as recorded by Surgeon-General Francis; but Dr. Pringle stated that Surgeon-General - Francis' experience was entirely the reverse of his own. The main object of his paper was to point out the means available for subjecting these two conflicting experiences to the most searching investigation on the spot by the Leprosy Commission now in India."

Dr. Pringle proceeds to explain that for twenty years he had collected vaccine lymph in Tern, in the Himalayas, where leprosy was very gravely endemic, and used this lymph in districts where the population was 500 to the square mile. Over two millions of these vaccinations had been performed, and - he had never seen a case of leprosy traceable to vaccination. Dr. Pringle- omits to say whether he ever searched for such cases, or inspected the vaccinated subjects a year or two after the operation, or inquired whether those attacked with leprosy traced their affliction to vaccination. As Dr. Pringle urges upon the Leprosy Investigation Commission the importance of inquiry to test the validity of the charges now brought from all quarters, it would seem that he had not made this investigation himself.

Dr. Vandyke Carter, of Bombay, allowed to be one of the greatest authorities on the subject,

includes vaccination among the list of causations, of which he says he has found recorded a few affirmative examples, at least, of each one method or means.—*Report on Leprosy and Leper Asylums in Norway, with reference to India, p. 178.*

Mr. H. Brown, of Simla, writes to me Oct. 2, 1889:—"Experiments have proved - leprosy to be inoculable. There must necessarily be a dread of vaccination in India, since the subject from whom lymph is taken for the operation may be a leper. In India native village vaccinators are not over careful from whom they procure their lymph. In Malabar and various districts of the Madras Presidency, where I have lived hitherto, it has been no uncommon thing to see the lymph extracted from the arms of itchy native boys. Leprosy has increased- alarmingly since the introduction of vaccination. I know of some cases where perfectly healthy persons, whose parents also are healthy, and who have been accustomed to live in healthy localities, have been smitten with leprosy after vaccination. I can also quote cases similar where children have died, or have become very seriously ill, immediately after vaccination, from hideous eruptions and swellings. One lady, the wife of a respectable merchant in Cochin, assured me that *vaccination* and *nothing else* killed her baby. It was perfectly healthy until vaccination. The Surgeon-General, Dr. Brodie, in his report for last year on the 'Distribution of Diseases in the Presidency,' declared that syphilis was on the increase throughout. This increase is coincident with the introduction of compulsory vaccination in a large number of municipalities, and with the more energetic action on the part of vaccination officers in the Madras Presidency."

Dr Chunder Ghose, in medical charge of the Leper Asylum, Calcutta, in a communication to the Secretary of the District Charitable Society of Calcutta, dated August 2 1st, 1889, states his opinion that leprosy is increasing in India, that it is communicable by vaccination, and that there is a dread of the operation on this account.

Dr. Roger S. Chew, of Calcutta, who was for six years in the Medical Department of Her Majesty's Army in British India, and has devoted fourteen years to the study of leprosy in India and other countries, furnishes, in his pamphlet on leprosy, a table giving the results of his investigations into the causation of the 1034 cases which have come under his treatment. Of these, he says, insanitation is responsible for 105 cases, vaccination for 148, and 72 cases are due to other forms of inoculation. Dr. Chew has been kind enough to supply me with the following particulars from his case-book, in which, according to his diagnosis and careful inquiries, the disease is directly traceable to vaccination.

The cases here quoted are samples of a large number collected by Dr. Roger S. Chew, in which the connection between the onset of leprosy and a previous vaccination is well determined. With reference to this, I am advised by high medical authority that a secondary development of the results of an inoculation frequently coincides with a re-awakening of disturbance at the point of inoculation. *Also, that when a secondary and constitutional disease first indicates its existence at the scar of vaccination, it may be taken as conclusive evidence that it is consequential to that vaccination.* It will be noticed that, in almost all of these cases, the place of inoculation is first attacked, and in all of them it is affected.

Another point in the evidence adduced should be noted, namely, that it does not seem to matter whether the vaccination "took" or not for the secondary effects to be manifested in due course. The probability is that, if a vaccination is immediately "successful," a portion of the poison is

discharged, and the rest retained. If there is no immediate result, the poison may still lie dormant for a variable period, concerning which practically nothing is known.

*Extracts from Memoranda in case book by Dr. Roger S. Chew, Calcutta, showing connection between vaccination and the commencement of leprosy*

1.—"Jahoorie, aged twenty - eight. Married; no children. Duration of leprosy, twenty years.

"There is no history of syphilis, either with himself or his relatives. - When he was about seven years old, he was vaccinated on his right arm. About six months after he- noticed a white patch over vaccine site; a similar patch appeared on his right buttock, and he soon after lost sensation in his left foot. The marks gradually faded away, broke out afresh in - other portions of his body, and again disappeared to reappear, *et seq.*; but wherever these marks appeared, they were accompanied by loss of sensation, which remained permanent throughout. About sixteen years ago he suffered from enlarged spleen, for which he was fired (*i.e.*, burned with hot iron). Ten years ago the fingers of both hands began to be flexed on themselves.

"Present state :—Perpendicular of ankylosed fingers is 1/8 inch on right hand, and 7/8inch on left. Fingers and thumbs of both hands much ankylosed, discoloured, and anaesthetic. Dry ulcer at inner flexion of right thumb. Open and entirely painless ulcer on tip of nose, extending 1 1/4-inch inwards. Amesthetic discoloured patches all over chest and abdomen. Two large (burn) scars over splenic region. Right foot has three large open sinuses, freely discharging a viscous, stinking, purulent fluid. On inserting little finger into the largest of these three sinuses, free vent was obtained, and the finger, striking against the astragalus, not only caused the patient a great deal of pain, but also brought away a quantity of foetid caseous-looking matter, due to caries of the bone. There are three discharging sinuses — the largest one inch in diameter at the opening—in the left foot also. Raw, ulcerated, and entirely painless stump, marking where middle toe of left foot has recently fallen off. Second toe of same foot has also dropped off, and on outer side of little toe of same foot is a peculiar blistered surface. Both shins largely covered with scaly and desquamating cuticle, with absolute loss of sensation. Hacking cough, and great pain in left thorax, with frequent and bloody *sputa*, beginning some two years ago, but aggravated during the last month. Caseous degeneration at extreme apex of right lobe of left lung.

2.—"Daidas, a male, aged forty-three; a native palki bearer. Duration of leprosy, twenty years.

"There is no history whatever of syphilis or syphilitic or leprous hereditation, nor are any of his relatives similarly afflicted. He was forcibly vaccinated about twenty-one years ago. The operation was not successful, but a year afterwards the vaccine pock grew rough, lost sensation, and gave place to a small crop of *papillae*, which spread, grew larger, and became entirely anaesthetic. He never had fever of spleen. About four years ago he used to get peculiar cramping sensations all along the course of the right ulnar (nerve) accompanied by extremes of cold and heat in fourth and little fingers. Contractions began to supervene, and these two fingers, entirely losing sensation and their power of grip, became permanently flexed on themselves. At this time his brows began to protrude and his upper lip to get thick.

"Present condition :—Permanent and rigid ankylosis of fourth and little fingers of right hand, with total anaesthesia. Tumoid, discoloured, anaesthetic patches and papules all over hand and arm from finger tips to clavicular articulation. Large tumoid and anaesthetic patch, 5 X 4 in., on anterior

aspect of right shoulder; another, 3 x 1 in., over vaccination site; and a third, 3 X 2 1/2 in., on elbow of same side. Upper lips very tumoid with paralysis of left side and partial anaesthesia of right. Uvula elongated and anaemic; fauces very anaemic. Sense of smell and taste are unimpaired. Left inguinal glands are indurated and slightly enlarged. Scrotum and prepuce elephantoid and anaesthetic. Posterior portion of scrotum is ulcerated. There are a few white spots over buttocks, whitish mark over left second toe, with loss of feeling. Ears are rather swollen. Features leonine, the supraorbital ridges being very tumoid and perfectly anaesthetic.

3.—" 1. Chundar Ghoral, a male, aged forty-two; a- Brahmin, and farmer by occupation. Duration of leprosy, twelve years.

"There is no history whatever of heredity, syphilis, impure living, or irregular habits. He was vaccinated seventeen years ago (the operation did not take), and five years afterwards a small rash broke out on that portion of his right arm where he had been punctured. This rash spread, ulcerated, healed, and left behind a thick warty lump, 3 1/2 in. long and 1 3/4 in. broad, which was utterly devoid of feeling. Similar excrescences appeared on various parts of his body, and about seven years ago he noticed some peculiar white patches appear.

"Present condition ;—Open sinuses under ball of both great toes. Nodes all along course of lymphatics. Anaesthetic patches over several parts of body. Excoriation on left elbow. Leucoderma in patches of rather large areas in different parts of back and thorax. Features leonine and feet slightly swollen and oedematous. Knees swollen and marked with tubercular ridges. Complete loss of power and sensation in the fingers of both hands, but no ankylosis.

4.—" Rohim Bux, a male Mahomedan, aged twenty-five, a hackney carriage driver, stated on the 18th August, 1889, that, a fortnight after vaccination, which did not 'take,' eighteen years ago, his parents noticed whitish patches occupying the site where the vaccine pits should have appeared, and remaining persistent for two years, after which they increased in size, coalesced, and steadily kept increasing to their present extent . . . On his forehead, half of right arm and hand, and on his right shin, are pinkish-white patches that do not itch; leprosy ulcers on his right foot, implicating the great toe, the nail of which has sloughed off. A painless ulcer, 2 1/2 inches by 1 3/4 inches, occupies the surface of right hip joint. These ulcers are all perfectly anaesthetic. The ulcer on his hip joint is nearly three years old, scabbing, and breaking out afresh at irregular intervals.

5.—" Meer Mahomed, a Mahomedan male, aged thirty-four years, married, with eight children; a clerk by profession. His parents were quite healthy, and so are his wife and six of his children, but two daughters are lepers. On the 23rd August he showed bright silvery lines on the palmar surfaces of both hands, while on the dorsal surfaces were several small annular patches, together with three large crusted patches, the largest 1 in. by 3/4 in. First joint of left fourth finger had sloughed off, leaving a very angry stump. Running ulcers in right leg and thigh. Angles of mouth tough and thickened. Both ears nodular and tumoid (thickness, 1 1/4 in.). On chest and left arm were white patches, three of which formed a peculiar triangle which covered the vaccine pits, *in which the disease first appeared*. The lymph for the operation was taken from the arm of an apparently healthy native child. Patient has never had syphilis, nor does he know of any member of his family being afflicted with any blood disorder.

6.—" Bundaban Mullick, a Hindu male child of seven years, exhibited on the 27th August, 1889, several leprosy ulcers on left wrist and at the angle of his mouth. On left arm was an oblong

whitish-pink patch that entirely obliterated the vaccine pits. The boy's father, who is perfectly healthy, says that two and a half years ago the boy was vaccinated, and about four months after the operation he noticed the puncture sites occupied by three small white patches, which in the course of one year extended and coalesced to form the single patch now seen. The ulcers appeared about a year ago, and refused to heal up.

7.—" A Hindu male, Bhaleshur, aged ten years. Six months after vaccination, three and a half years ago, a white patch appeared over his left clavicle and on vaccine site. Half of the patch on clavicle ulcerated, and the ulcer, finch broad and  $\frac{3}{4}$  inch long, refused to yield to either arsenic or mercury, both of which he had taken for two years. The clavicle is denuded of flesh, and plainly visible to the naked eye, while the ulcer itself is of a leprosy type.

8.—" A Hindu female, Gowrah, aged nineteen, stated that she was vaccinated in her seventh year (as far as she remembers). The operation did not 'take,' and, five months after, three whitish spots appeared on her right arm, where the vaccine pits should have been. These spots extended, coalesced, and, spreading downwards, disfigured her arm as far as the wrist. Her lips thickened, menses became irregular, and obstinate sores, which are still open, broke out on her feet.

9.—" Vincent D'C., an East Indian clerk, aged thirty. A year after vaccination (six years ago) he felt a peculiar constant itching in the vaccine pits, and, a short time after, noticed on this left arm a curious rash, which subsequently gave place to obstinate ulcers, for which he was unsuccessfully treated by three different doctors. On his left arm are three irregular-margined annular patches, averaging  $1\frac{1}{2}$  inches in diameter.

10.—" Da Singh, a Hindu schoolboy, aged twelve, told me (Dr. Chew) on the 11th December, 1889, that he had been vaccinated in his seventh year. About eight months after the operation, the vaccine pits ulcerated, and the ulcers spread and coalesced, to form a large annular patch which has obstinately remained open. On same arm (right), a little above the elbow joint, appeared a long pinkish white patch, which gradually enlarged, and now occupies a space,  $9\frac{1}{2} \times 3\frac{1}{4}$  inches wide, running over flexor aspect of portions of both arm and forearm. .

11.—" Francis G—, an East Indian male child, aged three; admitted on 21st December, 1889, has eczema of the scalp of three months' duration. He was vaccinated when only eleven months old. The operation did not 'take,' and a month afterwards the whole of that left arm became perfectly anaesthetic. An annular patch of the size of a rupee occupies the left angle of his mouth, and close by this annular patch are two small anaesthetic tumoid ridges.

12.—" Ameer Hoosein, a Mahommedan lad, aged fifteen, was vaccinated in his seventh year. The operation 'took,' but in his eighth year the vaccine pits turned into little ulcers, which enlarged, scabbed, cleared, and finally coalesced to form one large annular patch on his left arm. Smaller annular patches exist on left shoulder, right hand, and right foot.

13.—" Doorie, a male, aged 18, is a leper, and attributes his disease, from which he has suffered for the past nine years, to impure vaccination. The vaccine pits are badly ulcerated, and he has an anaesthetic patch covering the entire elbow joint of the same arm. Both lungs are implicated.

14.—" Kasmini Bibi, a married Mahommedan female, the mother of two healthy children, deposed, on the 29th December, 1889, that she was vaccinated on her right arm in her thirteenth year. The operation 'took,' but five years afterwards the pits ulcerated, and these ulcers remained obstinately

open. At this time crops of *paapillae* accompanied by total anaesthesia, began to show themselves on her chin, right breast, right thigh, and right knee. About one and a half years ago a tiny white spot appeared in the centre of her forehead, and this spot has now increased to a circular patch the size of a shilling piece.

15.—" Goolburee, a married Mahomedan female, aged forty-seven, with pemphigus (five blotches on right foot) of one and a half years' and leprosy of thirteen years' standing. The latter disease she attributes to improper vaccination. She has been five times vaccinated—the last occasion when thirty years of age. Four years after this the leprosy manifested itself. There are nodosities in both ears, in her nose, on her left arm, and along the left sternocleido-mastoid; one ulcer, 1 1/2 x 1 1/4 inches, on right ankle, and another twice this size covers last vaccine site on right arm.

16.—" Mabel P—, a Scotch lassie, aged seventeen, and a leper for the last eight years, was brought by her mother, who stated that she was vaccinated when she was seven and a half years old. About six months after the operation, which was successful, symptoms of leprosy began to develop, and she flew here and there to every medical practitioner that money could procure to save her child, but to no avail, as the disease kept increasing. The girl's present condition is :—Ears tumefied, and 2 1/2 inches thick. Face marked with ridges like cooled lava (volcanic). Sores on hands and feet and angles of mouth. Eyesight impaired. . . Tonsils indurated. Uvula ulcerated.

Ankylosis of little and fourth, fingers of both hands. Ulcer in left nostril, the right being entirely blocked, arid external nares flattened out. Lips protruding, thick, and hardened. Slight contraction of right knee, and anaesthesia well marked everywhere.

17.—" M. T—, a Eurasian female, aged fifteen, whose father stated that three years ago—at the time of the great scare caused by an expected epidemic of small-pox—he had his daughter vaccinated. The operation "took," but a year after the pits ulcerated and refused to yield to treatment. 'At the same time a few white spots appeared on her back, her sides, the nape of her neck, and over her face.' Those on her face grew larger, till, impinging on each other, they finally coalesced to form one large blotch of pinky-white, which, contrasting against her olive brown complexion, terribly disfigured her.

18.—" A. A—n, a Chinese carpenter, aged forty-three, married, and the father of four healthy children, deposed on the 22nd December, 1890, that four months after vaccination, eleven years ago, the vaccine pits broke down into ulcers, which are still open. His ears are tumoid (1 1/4 inches) and perfectly anaesthetic. Tubercular deposit, and. welt marked anaesthesia in patches all over body.

19.—" Imrato J. Ghose, a Hindu male, aged twenty-eight years, stated, on 14th Feb., 1891, that he had been three times vaccinated, in infancy, at six years, and at twenty-one years of age, at each of which times the operation was very successful. Fifteen months after the last vaccination his leprosy showed itself. His body is covered with hypertrophied anaesthetic patches of various sizes and contiguous to each other. Mercurial foetor of breath. Ears tumoid., *Alae nasi* partially affected, and anaesthetic. Brows very slightly leonine; pains in loins in rising, and drawing up the legs; ulcer on ball of great toe of left foot, freely discharging serum. Vaccine pits are badly implicated in the hypertrophies on left arm.

20.—" Sibhoo, a Hindu male, aged forty, and a widower, stated on the 14th March, 1891, that he was vaccinated when thirty-six years old. A year afterwards the vaccine pits ulcerated (ulcers still open). He has never had syphilis in any stage; his people are healthy; his body is well nourished, with patches of discoloured (whitish) hypertrophied and anaesthetic cuticle—the smallest 4 x 5 inches—scattered all over. Black anaesthetic patch over surface of lower half of left "tensor vaginm femoris." Little toe of left foot has dropped off. Both ankles are much swollen and inflamed; there is entire loss of sensation in fingers, feet, and ulcers. Under the balls of both great toes are running ulcers.

"21.—William J. C—, an East Indian male, aged twenty-one, admitted on 31st August, 1891, was vaccinated three years ago, and a year afterwards noticed some pimples break out in vicinity of the pits, on back of hands, and on his back. These at first itched a great deal, but, breaking down into pustules, became devoid of feeling, and extended to various portions of his body. The left, fourth, and little fingers are also anaesthetic.

22.—" Khyroo, a Mahomedan male, aged fifty, applied for treatment on the 20th October, 1891. Has been married twenty years, and has four male and two female children, all healthy. Leprosy showed itself nearly a year after he was vaccinated. Prior to this he was always hale and hearty. Had small-pox eight years ago (*i.e.*, four years after he was a leper). Present condition :—Ears are slightly tubercular, their hypertrophy measuring about 1/32 inch, while their long and short diameters are normal, without sore or abrasion, and with slight anaesthesia. Face marked with small-pox pits, hypertrophy over malar ridges, angles of mouth and bridge of nose, the *aloe* of which are thickened, and tubercular anaesthesia is well marked. Arms covered with patches of tubercular deposit and vesicles, with well-marked anaesthesia.

"Hands—Thumb, ring and little finger of right hand permanently flexed; burn on thumb and forefinger, proving anaesthesia; nails deformed and splitting up; tubercular infiltration. Left forefinger much swollen, and a small ulcer on back of first joint, which is bent. Little finger also swollen and flexed on itself; fourth finger slightly flexed. Anaesthesia well marked in all the fingers, and in the palms and wrists. Small patches of tubercular growth all over wrists and dorsal surface of hands.

"Body, legs, and feet all show well-marked developments of tubercular leprosy, with anaesthesia.

23.—" G. D'R—, an East Indian of thirty years, admitted 3rd January, 1892, stated that one year after vaccination his disease appeared. Present condition :—Ears wrinkled and elongated, with irregular nodes. Features leonine. Brows tumoid and tubercular, malar ridges hypertrophied and anaesthetic. Tubercular deposit at angles of mouth; nose flattened out, anaesthetic, and depressed at bridge. Tubercular deposit and anaesthetic patches along the entire length of both arms. Fingers contracted, ulcerated, and anaesthetic. Body also affected. Right leg elephantoid; the left anaesthetic. Feet well marked with the disease, being ulcerated and mutilated.

24.—" R. B. M—, a Brahmin of thirty-eight years of age, stated that three years subsequent to vaccination the pits ulcerated and became anaesthetic. Features leonine, angles of mouth hypertrophied and anaesthetic. Arms ulcerated, with hypertrophied cuticle: ankylosis of elbow joint of left arm. Fingers of both hands badly ankylosed. A few patches of leucoderma on his back, and one on thorax. Large anaesthetic sinus under ball of great toe, of both feet.

25.—" Ishar Ghosal, a male Hindu, forty years of age, admitted 3rd January, 1892, deposed that he was vaccinated when twenty years of age, and five years afterwards the pits ulcerated. The ulcers healed, their site entirely lost feeling, and the anaesthesia spread till it implicated the entire length of right arm. Present condition :—Features slightly leonine; face shows scars of old sores; hypertrophy and anaesthesia of malar ridges and angles of mouth. Besides the anaesthesia of right arm, there is a large whitish patch (5 x 2 1/4 inches), just above elbow. Ankylosis of fourth and little finger of both hands. Large patches of leucoderma on back, and one large white patch covers the entire thorax. The interspaces are hypertrophied and anaesthetic. Feet badly ulcerated, the ulcers being anaesthetic and discharging freely."

Dr. A., Mitra, Chief Medical Officer, Kashmir, says:— "I have on three occasions searched for bacilli. In one instance I found them in lymph from a vaccinated leper."—*American Journal of Medical Sciences, July, 1891.*

In the year 1888 the Government of India adopted and issued a series of resolutions on the subject of leprosy, admitting the increase of the disease, and acknowledging the impossibility of dealing with it in any effective manner. No word of warning was then, or has been since, uttered as to the inoculability of the disease, now so generally admitted by medical authorities, and the consequent dangers of its dissemination at the hand of the public vaccinator, nor is it likely that this source of infection will be officially condemned until the people in India, as in many parts of England, stand upon their parental rights, and refuse at all costs to imperil the health and lives of their offspring by this irrational and disease-engendering rite.

Some medical authorities, while admitting that leprosy is inoculable, and disseminated by vaccination, insist, for the credit of the Jennerian practice, that such cases are very rare, and are due entirely to the carelessness of the operator, and that, therefore, it is unreasonable to throw discredit on so beneficent a discovery on this account. This mode of reasoning may satisfy, the unreflecting; but if it be once allowed that leprosy is transmissible by vaccination, who can estimate the extent of the resulting mischief? Vaccination is practised in all the colonies and dependencies of our empire, and in all countries -where leprosy prevails. The disease is usually of slow incubation, and, until external indications of the malady are exhibited, a child may be, and often is, used as a vaccinifer without inquiry. Here, then, in leprous countries, are all the conditions necessary for inoculating the germs of leprosy into the blood of present and future generations. The late Dr. George Hoggan, of Beaulieu, France, who devoted many years to the study of leprosy, has examined many lepers in Europe, and he attributes the disease in nearly all cases to vaccination.

The following letter explains Dr. Hoggan's view on this part of the subject :— .

Beaulieu, Alps Maritimes,  
December 29th, 1889

DEAR MR. TEBB—Upon the connection between vaccination and leprosy I hold a very strong opinion. Apart from the opportunities which I have had in Egypt, Palestine, and elsewhere of studying leprosy in the mass, I think that my extensive researches into the minute pathology of the disease, as evidenced by the papers published in the "Pathological Transactions" for 1879 and "Archives de Physiologie" for 1882, warrant me fully in expressing a firm conviction on the subject. At pages 88 and 90 of the latter work I refer to the relations between vaccination and leprous infection, only, however, to show the difficulty of connecting the two in the history of the case.

Taking all the factors into consideration, I hold that, in the cases of leprosy I was then investigating, the disease was conveyed through vaccination. I further believe that, in the majority of cases of leprosy developing in children, the leprosy infection is transmitted along with the vaccine virus. In adults, on the contrary, I have had evidence that leprosy is often conveyed along with syphilis; and this, taken in connection with vaccinal infection in the young, had led me to suggest the following explanation of infection in leprosy :—Hitherto all untainted evidence has shown that leprosy cannot be inoculated *per se* into a healthy body. \*

\*Dr. Hoggan, no doubt, refers to the negative results mentioned by Leloir in "De La Lépre," p. 237, where a doctor inoculated twenty healthy persons with leprosy pus, blood, and tubercle, and to Profeta's inoculations (p. 238) of twelve persons, including himself, with blood and pus from leprosy ulcers in wounds made by scarification and surfaces laid bare by blisters, and to his subcutaneous injections of matter from leprosy tubercle. He overlooks, however, the numerous- recorded cases of accidental leprosy inoculations. Failures in intentional inoculations in countries free from leprosy cannot be set against cases of inoculation through abrasions of the skin or when the leprosy poison is introduced into the blood by means of the vaccinators lancet.

Combined, however, with the virus of small-pox, syphilis, or other diseases, it seems to be easily transmissible into the system, and it is in this direction that future investigations should be pursued.—I am, dear sir, yours faithfully, GEORGE HOGGAN, M.B.

In page 74 of the "Report of the Royal College of Physicians on Leprosy," dated 1867, is the following important suggestion:—

"The question alluded to in the communications from Dr. Erasmus Wilson and Sir R. Martin (*vide* Appendix to Report) as to the transmission of leprosy disease by vaccination and wet-nursing, is one of special interest to Europeans resident in India and other tropical countries, and calls for searching examination."

The cases referred to are—Case 1, p. 235—*Elephantiasis tuberculosa*; duration of latent period, two years; total duration, five years; no pains; febrile attack, simulating rubeola; vaccinated from a native child:—

"A young gentleman, age 16, with fair hair and complexion, and somewhat more youthful in appearance than might be expected of his age, has been afflicted with the tubercular form of leprosy about five years. He was born in Ceylon, is the son of European parents, and one of six children, all of whom are healthy. His father and mother have always enjoyed good health, the father having resided in Ceylon for twenty years, the mother since her marriage. He was nursed by his mother, but vaccinated from a native child."—*College of Physicians' Report*.

Page 239, Case 9—*Elephantiasis anaesthetica* following vaccination (given in Dr. Erasmus Wilson's work, 1867, pp. 620-2):—

"A lady, aged 26, the wife of an officer in the Indian army, became affected with elephantiasis in 1861. She was born in Calcutta of European parents, and brought to England when two years old. She returned to India in 1853; was married in 1855; has been eight years married, and has now (1863) revisited England for medical treatment. In 1861, then being in Oudh, she, was vaccinated from a native child, and shortly after vaccination "a slight spot came on her cheek, and increased in size to the diameter of a shilling." It was hard to the touch, a little raised above the level of the surrounding skin, and of a dull red colour, without pain or tenderness. The swelling was painted with iodine, and afterwards blistered several times, and the blister kept open; but although

somewhat reduced in size, the prominence was not removed. About six months later dull red flat spots appeared, dispersed over the greater part of her body. Her hands and feet became swollen, and she had pains of some severity in her joints and feet."

The same author gives the following on p. 650 (p. 86 of the Leprosy Committee Report):--

"Dr. Bolton, of Mauritius, mentions the case of a boy of fourteen, afflicted with leprosy from the age of seven, the son of British parents, whose father ascribed the origin of the disease to vaccination. . . . Several medical men, who have had the opportunity of watching the disease closely, expressed their belief that leprosy may be conveyed to sound persons through the medium of the discharges of ulcers."

Referring to the series of papers which he reports, Dr. Erasmus Wilson says ("Royal College of Physicians' Report," 1867, p. 234) :—"Our cases also favour the suppositions of the existence of other modes of transmission (transmission by generation—supra), namely, by lactation, by vaccine inoculation, and by syphilitic inoculation. The first of these methods of contagion lies beyond the reach of remedy; the others are preventible."

In the December number of the *Nineteenth Century* for 1889, p. 929, Sir Morell Mackenzie, in an article entitled "The Dreadful Revival of Leprosy," says :—"There is, or was quite lately, a boy in a large public school, in whom there are the strongest grounds for suspecting the existence of leprosy in the early stage; the disease is supposed to have been communicated by vaccination in the West Indies. It is beyond question also that there are many other cases in this country at the present moment, which are carefully concealed from the knowledge of every one but the medical adviser. Nearly every skin specialist must be able to attest this fact."

Dr. Suzor, of Mauritius, stated in the *Progrès Medical*, No. 14, that "in one instance two children of healthy parents became lepers, apparently as the result of having been vaccinated with lymph taken from a child belonging to a leprous family," and he thought the cases furnished conclusive proof of the communicability of the disease by vaccination.

In the *British Medical Journal* for Nov. 29, 1890, there is given a tolerably full report of the discussion on "Vaccination Eruptions" at the annual meeting of the British Medical Association held in Birmingham.

The discussion was opened by Mr. Malcolm Morris, M.R.C.S. (Edin.), who presented a formidable classification of vaccinal eruptions, including constitutional diseases of the most serious character, amongst which he included leprosy.

Dr. A. M. Brown observes in his pamphlet on "Leprosy in its Contagio-Syphilitic and Vaccinal Aspects," 1888, pp. 12, 16, 17: "When we come to note a recent medical disclosure bearing on this point (inoculation of leprosy by vaccine virus) and which has been allowed to pass unheeded for the reason, I presume, that it tells against the Jennerian and Pasteurian theory and practice, the necessity for strictest caution will be obvious. Hypothesis and specific *bacilli* apart, the observations of Arning, and alas, of too many who do not care to confess it, prove that vaccination is capable of actually transmitting *lepra* from the leprous to the non-leprous. The fact is unmistakable, and our duty is to make mankind and the medical profession dearly comprehend what this implies. . . . The unanimity and persistency with which vaccination in markedly leprous countries is charged with propagating and disseminating the malady, the well confirmed coincidence of leprous centres with

vaccination centres, and the discovery of the specific *bacilli* in those leprously vaccinated, ought to satisfy all who are capable of weighing evidence, or of rational reflection, that controversy on the question must, and will, ere long, be silenced."

In a communication which I received from Dr. Brown, June, 1891, he refers to the communicability of leprosy by vaccination, and the attitude of the medical profession as a body towards the ever-increasing weight of evidence. "The fact of leprosy being communicable by inoculation is clearly shown by evidence to be beyond cavil or question. Medical men, seriously interested in their profession, who fail to see this are unfortunate, and their position must be charitably attributed to indifference to the whole question of leprosy, or a dread of the overthrow of some pathological doctrine to which they are practically pledged. The evidence of the fact that leprosy is communicable through vaccination is rapidly accumulating, and the force of its importance on the medical mind, as exhibited in its special journals, is anything but welcome. The fact of the exclusion of numerous well-known cases of invaccinated leprosy from the published papers of the Leprosy Investigation Committee, though most regrettable, is not surprising; the still ignoring of experimental data by inoculating bacillo grafters is quite as little so. It is certainly amazing to find that probably the chief factor in the dissemination of leprosy in the present day—Jennerian vaccination—should have been practically set aside by the Indian Commissioners. Considering the amount of conclusive evidence now before us, many, like myself, must have felt appalled to find that this was so. Still, we may feel perfectly assured that such a performance can no more score than the proverbial Hamlet-play where the leading role has been left out."

The *Hospital Gazette*, London, Oct. 1, 1890, contains the following, under the heading, "Leprosy and Vaccination":—"We know now that it is possible to transmit leprosy by inoculation, and it therefore behoves those who practise in countries where the disease is endemic to be very careful whence they take their vaccine. Leprosy is about as frightful a disease as any that poor man is exposed to, and beside it syphilis—the vaccinator's bugbear—sinks into comparative insignificance. A contemporary recalls the case of a native of the Sandwich Islands, who developed leprosy a year after vaccination, and seems disposed to raise the question as to whether the vaccination might not have been the means of conveying the infection."

Dr. Bechtinger, of Vienna, who has devoted thirty years to the study of leprosy in many countries, says:—"No scientific man will deny that leprosy, like all bacterial diseases, is inoculable;" and he attributes the present increase of leprosy to the vaccinator's lancet.

Dr. W. Munro says:—"I am decidedly of opinion that by careless vaccination, bloody matter being taken with the vaccine lymph, leprosy can and most certainly would be propagated. .... I decidedly consider that leprosy can be inoculated."—*Leprosy an Imperial Danger*, by Archdeacon Wright p. 72.

Referring to an alleged case of infection by means of vaccination, the *British Medical Journal*, October 25, 1890, says:—"Remembering Arning's important observations of leprosy bacilli in vaccine lymph taken from a leper, it is not to be denied that such inoculation may be occasionally possible." Perhaps this admission from the editor of a journal which has defended vaccination against all attacks and organised a powerful medical opposition against any modification of a most stringent and cruel law goes as far as could be expected. Mr. Ernest Hart has not thought it expedient, however, to submit the extraordinary statements in his "Truth Concerning Vaccination"

to the test of cross-examination before the Royal Commission.

"Chambers' Encyclopedia," 1891, vol. 6, page 585, says :—" Evidence has recently been adduced which seems to show that it (leprosy) may be communicated by vaccination from a leprosy child."

In the appendix to his work on "Leprosy," p. 274, Dr. George Thin has the following :—"In the 'Monats. f. Prakt. Derm.,' Vol. XIII., No. 1, the report of a case is extracted from the *Occidental Medical Times*, of a leper who was vaccinated in 1878, who a year afterwards became leprosy, and who at present has a large anaesthetic scar at the point of vaccination. This man had healthy parents, and of two brothers and three sisters, one had died of tubercular leprosy. He is twenty-five years of age, and has mixed with lepers all his life."

In his work of 280 pages on "Leprosy" (Percival & Co., .1891), Dr. Thin devotes four pages to "Vaccination in Relation to Leprosy," and refers to Dr. Gairdner's cases. "The presumption," says Dr. Thin, 'that the disease was conveyed to the second and third child in the vaccine lymph is strong, but the case is by no means proved.' Amongst others, Dr. Thin, p. 194, quotes the following from Dr. Daubler "Monats. f. Prakt. Derm.," Vol. VIII., p. 123), who 'relates two cases of leprosy at Robben Island, in South Africa, in which he believes it to be proven that the disease was conveyed by vaccination' :—

"The first case is that of a woman, H., thirty-six years old, married, and the mother of a healthy child of twelve. There was no leprosy in the family. Several years previously, on account of an epidemic of small-pox, she was re-vaccinated, the first vaccination having been effected when she was two years old. In the course of the two months following the re-vaccination, she experienced attacks of shivering and fever three to five times weekly, was frequently thirsty, but passed less urine than usual, and whilst the points of vaccination swelled and became brown, she grew dull and weak. She had been vaccinated on both arms over the insertion of the deltoid. No pustules formed, and when she saw the medical man two months after the vaccination, the parts were swollen. The swelling had begun three days after the insertion of the lymph, and reached its greatest extent eight days afterwards. At this time the parts became yellowish, and within fourteen days of the vaccination on each point there was a raised, discoloured skin, of a yellowish brown colour, and as large as a two-shilling piece. These swellings gradually increased, and, ten weeks after the vaccination, her physician found the skin of the arms and upper third of the forearm brown in colour and uneven. The brown spots extended lower down, when, after three more weeks, in which she was feverish and ill, the spots became swollen and smaller, but the skin did not resume its normal colour. In the fourteenth week after vaccination she had a violent rigor, repeated twice within the following week. Subsequent attacks of fever were at longer intervals, and not so severe. At and shortly after the severe rickors, brownish spots developed on the cheeks and forehead. Eighteen weeks after the vaccination leprosy tubercles developed on the brow and on the cheeks. Two years later the woman was sent to the leper asylum at Robben Island, where she was seen and photographed by Dr. Daubler, tubercular leprosy being fully developed.

"The other case was that of a girl, fifteen years old, who was re-vaccinated at the same time and by the same medical man who vaccinated the woman H. The same local appearances followed on the arms as those described in the woman.

"After two months there were maculae on the forehead and cheeks, and after three months more, leprosy tubercles on the forehead. When seen and photographed by Dr. Daubler, the disease had lasted three and a-half years. Inquiries made at the homes of both patients, and from the medical

man who vaccinated them, showed that the person from whom the lymph was taken had died of tubercular leprosy several months before, other members of the family being leprosy, . . . facts of which the practitioner was ignorant when he took the lymph with which he vaccinated the patients."

These cases have been carefully investigated, and their description in the "Monats. f. Prakt. Derm." is accompanied by photographs. On my visit to Robben Island, February 10th, 1892, I met Dr. P. Travers Stubbs, who is much interested in the leprosy question, and believes that the disease is inoculable and spread by vaccination. Dr. Stubbs was at that time acting as *locum tenens* for one of the medical officers at the Leper Settlement, and has since been kind enough to furnish me with the following further details concerning these remarkable cases of invaccinated leprosy :—

NOTES OF THE TWO CASES OF LEPROSY ON ROBBEN ISLAND,  
AS REPORTED BY DR. DAUBLER.

—————  
*Elizabeth Hart, aged 39.*

European. Born at Cape Town.

Date of admission—26th April, 1887.

Race—English. Came from Wynberg (*i.e.*, eight miles from Cape Town).

Disease—Tubercular leprosy.

When contracted—When small-pox was prevalent at the Cape in 1885.

Where—

Hereditary—No.

Complications—

*Particulars as taken from the Case-book, Medical Department, Robben Island.*

The patient says :—"I was quite healthy until vaccinated at Wynberg by Dr. Silke in 1885. I was living with my husband in good circumstances, and had never come in contact with leprosy. About a year after vaccination a large livid patch began to appear round the vaccination mark. A few months later a creeping sensation on both sides of the face, worse on the left. Soon after this the face gradually began to, swell."

*Present Condition, May 3rd, 1890.*

Tubercular condition of both sides of face and ears—the left more so; loss of eyebrows; some loss of hair. Tongue a little affected in front. Both hands rather swelled and tender. Infiltration of forearms and upper arms up to shoulders. Legs same as arms. Ulceration about both ankles. There is no marked anaesthesia. No special indication at seat of vaccination on left arm, which, patient says, ran its usual course.

Has been under treatment about six months. First, iodides; gurjun about four months. The appearance of patient has much improved; also general health.

*February 10, 1891.*

Elizabeth Hart, aged 39, married 16 years. Occupation, housewife. One son born one year after marriage. No miscarriages. Menstruation irregular. Last unwell three years ago. Her husband is still living; also the son; both at work. Her father died—the result of an accident. Mother died of phthisis, aged 40. No sisters. Three brothers—one living, healthy; two dead—one of dropsy, other found dead.

She states she was healthy until one year after vaccination, when her attention was drawn to a peculiar lividness of her left arm around the vaccination scar, which is still visible, and skin around quite healthy. There is no infiltration around the scar, which is of ordinary size and clearly visible. She consulted a doctor about this lividness, and then she went to the new Somerset Hospital, and attended for some six months, taking medicine all the time. She had

pains in her legs at this time. She had no rash over her body. No sore throat, tongue, etc. Her nose, fingers, and hands became affected two years ago, 1888. Her hair began to fall out before she went to the hospital; eyelashes before she was admitted to the Robben Island Leper Asylum.

At present she has very little hair—no eyelashes and eyebrows. Her nose is very much disfigured by old ulceration. Tongue— nothing abnormal seen. No affection of her shoulder or elbow joints. Both her wrist joints are swollen, painful, and infiltrated.

There are small ulcerated spots about the size of a threepenny—piece, which are beginning to discharge; are not deep, nor are the edges undermined. The palms of both hands were sound. The last phalanges of all the fingers ‘and thumbs were destroyed, and the finger nails are cracked and shrivelled. No anaesthesia of fingers. Her legs from her knees downwards were in a similar condition. No periostitis of tibia. No, enlargement of glands (occipital).

In my opinion, this woman has leprosy, plus evidences of syphilis, but I am unable to find out when the latter was contracted or how.

P.B. TRAVERS STUBBS.

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*Ellen Wangell, 16 years.*

English.

Admitted November 1, 1889, from Old Somerset Hospital.

Disease—Tuberculated leprosy.

Has lived in Cape Town and Clairmont all her life.

Contracted about 1885 at Clairmont.

Parents and brother healthy.

Tertiary rupial sores.

Patient says :—" I was quite healthy till re-vaccinated at Clairmont in 1885 by Dr. Murray. I was living with my mother. We were in pretty comfortable circumstances. We were living by, ourselves. I had never seen anyone with leprosy to my knowledge. I first noticed my nose begin to swell, and afterwards the rest of my face. I was taken to New Somerset Hospital in July, 1889, for what, Dr. Eaton said, was leprosy in my legs. Afterwards to the Old Somerset Hospital ; then brought here." ‘

*Present Condition, 9th May, 1890.*

Symmetrical enlargement of face; right ear more than left; left cheek, large scar of ulceration, which broke out soon after admission, but soon healed; some infiltration and thickening of tongue; fingers of right hand numb, another contracted; left hand comparatively free; some remains of infiltration in forearms, but this has much diminished; some infiltration about the ankles, which are at present suppurating. Infiltration extends nearly as far as knees. Body free; no special indication at seat of vaccination. Has been under treatment since admission. First, iodide and oil gurgun from date of admission, then gurgun alone. General health much improved. Condition of arms and legs much improved.

*As copied from case-book.*

P.B. TRAVERS STUBBS.

Dr. S. P. Impey, Medical Superintendent, Leper Settlement, Robben Island, South Africa, says :—" I wish to draw your attention to one very serious matter in respect to the spread of leprosy. It is contagious, and can be communicated from one patient to another by inoculation. In South Africa the reprehensible practice of arm-to-arm vaccination is carried on to an enormous extent. I have always held very strong opinions on this subject, and consider that many loathsome diseases are spread by means of the vaccinator's lancet. No medical man would take lymph from a patient in whom the disease is visible; ‘but in how many of these cases is it not latent? For years I have not

vaccinated except with animal lymph, and, think that some means should be adopted to stop the dangerous practice of vaccinating with humanised lymph; rather allow the patients to have small-pox, where there is a chance of recovery, than force leprosy upon them. It is a noteworthy fact that, since the introduction of the art of vaccination, leprosy is spreading with rapidity. I am a firm believer in the efficacy of vaccine, but consider the arm-to-arm vaccination is a most dangerous practice and one which has led to untold misery."—*Extract from Special Report on Leprosy, from Robben Island, for 1891, in Reports presented to both Houses of Parliament by command of His Excellency the Governor of the Cape of Good Hope, Capetown.*

Dr. Alexander Abercromby, of Cape Colony, writing from Capetown, April 20th, 1892, says that, if a drop of blood gets mixed with the vaccine lymph in the operation of vaccination, then the disease (leprosy) may be transmitted in this way, but he is of opinion that, without the blood, there is no danger. So far as the transference of syphilis and other deadly diseases is concerned, we know that this can be done with lymph of unimpeachable quality and without admixture of blood. In the January (1890) number of the "Archives of Surgery" Mr. Jonathan Hutchinson records several fatal cases, and another fatal case in July, 1890 (p. 23), all following vaccination. Mr. Hutchinson observes :— " There is not the least reason to suspect any want of care in the vaccination or defect in the lymph." On July 6th, 1881, Dr. Robert Cory, Superintendent of the Calf Lymph Department, London, succeeded experimentally in transferring syphilis to himself with lymph free from admixture of blood.

Rev. Canon Baker, formerly. Chaplain at the Leper Colony, Robben Island, writes to me, June 1st, 1892:—"I have not met with any medical man who has been any considerable time in this Colony who affirmed that vaccination, from arm to arm especially, was not attended with danger in the direction of your inquiry."

Dr. P. Hellat, the leader of the movement for stamping out leprosy in the Baltic Provinces, Russia, writes to me from St. Petersburg, May 1st, 1892, that at the time when he published the result of his investigations into the spread of leprosy, he had omitted to take into account "what might be ascribed to the spread of vaccination." The matter "was of great importance, and one that cannot be considered an open question." Dr. Hellat says that in Russia no one is admitted to school without the marks of vaccination. Re-vaccination is resorted to on the occurrence of serious small - pox epidemics.

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## CHAPTER 5: LEPROSY AND RE-VACCINATION

THOSE who have studied the literature relating to the remarkable recrudescence of leprosy in tropical countries, or made personal inquiries where the disease is prevalent, must have been struck with the number of cases of persons whose family history has been shown to have been entirely free from all taint of this disease. In some instances the afflicted persons state they have never seen or come in contact with a leper. It is usual amongst the well-to-do classes to keep the malady a profound secret as long as possible; but a time comes when the disease discloses itself to the family physician or casual observer, and the friends are then led to inquire as to how the disease originated. Close inquiries reveal the fact that with them it is not hereditary, and the afflicted member is free from sore or abrasion of the skin. How, then, could the dreadful leprosy poison have been contracted? The doctor then suggests the vague and much misunderstood word "contagion," or malaria, or diet, all of which theories are now rejected by leading leprosy authorities. The unfortunate patient remembers that during a smallpox scare by the advice of his doctor he was re-vaccinated. Inquiries are made as to the vaccinator, and it is not seldom discovered that the vaccine virus was taken from a subject in which the leprosy taint—then not discernible—has since fully disclosed the ulcerations of unmistakable tubercular leprosy. It will be said that this is a hypothetical case. From much conversation with intelligent observers in many countries where this disease prevails, including both English and native medical practitioners, public vaccinators, and army surgeons, I am convinced that this is by no means an uncommon experience. So strong is the belief in the existence of this danger, that soldiers in our tropical colonies, when subjected to vaccination, often resort to the practice of squeezing out the virus, if they can do so without observation, and use carbonate of soda, borax, and other disinfectants in order to neutralise the effects of the poison. This dread of vaccination is due to the knowledge amongst our troops, often born of bitter experience, that vaccination is not seldom the factor of disgusting and intractable diseases, the fatal cases of which are invariably registered under secondary causes, without disclosing the originating source of the malady. The leprosy taint is more common in the army than is generally supposed. In my various inquiries I have heard of several soldiers being so affected. In his work on "Leprosy" (p. 71), Dr. Munro refers to the case reported by Dr. Liveing of a private soldier, a leper, in British India, who had several brothers and sisters all older than himself and all healthy. The same authority cites "the case of an officer mentioned in the Report of the College of Physicians, p. 241. Landre speaks of Dutch private soldiers being affected, while ladies never are, they never being exposed to contagion" (p. 45). If Dr. Munro had explained that ladies are not exposed to compulsory re-vaccination, he would have touched the solution of one source of infection. Dr. Sutherland, of Patna, says :—" When serving with the native army, I found repeatedly that men who had in early life the character which I regard as a proof of the existence of a leprosy taint, which I have already described, frequently had to be invalided in after years for leprosy, and subsequent observation and inquiry have led me to the conclusion that the opinion I have formed regarding what I have named a leprosy taint was correct, and that this condition precedes the appearance of the disease in its aggravated form; and I think I am warranted in concluding, from the data given above, that this leprosy taint exists in one out of every ten of the adult rural population of this district. In stating this, I am aware that my views will probably astonish persons who have not given the subject the attention I have."—*Royal College of Physicians Report, p. 188.*

In a note, entitled, "Leprosy in Livonia," the *British Medical Journal* of August 20, 1887, p. 423, says:—" The disease (leprosy) was introduced by a discharged soldier from Southern Russia." The

same journal, in its issue of October 22, 1887, in a note on "The Spread of Leprosy," quotes M. Besnier, a member of the French Academy of Medicine, to the effect that, since the extension of the French Colonial possessions, soldiers, sailors, and missionaries, have fallen victims to leprosy in large numbers. The *British Medical Journal*, January 12, 1889, p. 93, in an article entitled "Transmission of Leprosy," mentions several cases of leprosy, including two young soldiers who became lepers. And the number for March 23, 1889, pp. 668-9, publishes the details of a case of mixed leprosy—tubercular and macular—reported by Dr. O. Carroll to the Royal Academy of Medicine in Ireland. The patient was an army pensioner, who had served in India and the Cape, "but he had not been, so far as he is aware, in contact with any leprosy person." Again, on April 13, 1889, the same journal publishes a letter on "Leprosy in the United Kingdom," in which the writer says :—"T. H., after a service of twenty-two years in India under the East India Company, returned home, and soon became a victim to tubercular leprosy." Another case of a soldier, formerly in India, who is now a leper in the wards of a large general hospital, is mentioned by Mr. C. S. Loch in the *British Medical Journal*, July 13, 1889. And in its issue of December 21, 1889, the same journal gives the fatal experience of this re-vaccinated part of the population, observing, on the authority of Dr. Olavide, of Madrid, that in the (leprosy) infected provinces of Spain—Jaen, Cordova, and Guadalura—"most of the sufferers are missionaries or soldiers."

Madhub Chunder Ghose, Medical Officer in charge of the Leper Asylum, Calcutta, in a communication to the Hon. H. Beverley, dated Calcutta, 27th August, 1889, says :—" It is well known that a distinguished officer of the Indian Medical Service became affected by leprosy during his residence in India."

These cases are too numerous to be explained by the theory of coincidence, and similar instances can be heard of by inquiry in every country where leprosy is endemic. In none of the foregoing instances does it appear that any inquiries were made as to re-vaccination being a possible source of the infection. No doubt the medical practitioners had their private opinions as to the causation of the cases examined, which, however, they have carefully withheld. In one of the cases a press reporter remarked on the reticence of the doctor, who, he said, "absolutely refused to give me any details beyond those which may be said to be available to any member of the public." He admitted, however, that the case was undoubtedly one of leprosy.

Soldiers, it should be observed, are picked men, living amidst healthy surroundings under superior hygienic conditions. They do not associate with lepers, but, on the contrary, carefully shun them. Nor can the disease in the instances I have cited be due to heredity. Re-vaccinated soldiers appear to be more liable to the disease than the European residents in countries where the disease prevails. However much opinions may differ as to other sources of causation, all authorities admit that leprosy is an inoculable disease and communicable by vaccination. Is it not probable, therefore, that the cases I have quoted are due to contamination at the point of the lancet in re-vaccination? Since the terrible disaster at Algiers in December, 1880, when 58 soldiers of the 4th Regiment of Zouaves were syphilitised by re-vaccination from a Spanish child "of remarkably healthy appearance," I have made it a practice in all tropical countries which I have visited to interview soldiers and question them on the results of vaccination in the army. I could fill a long chapter of this book with details of disastrous consequences where soldiers; have been invalided at hospital with tumours, abscesses, and sometimes intractable maladies directly due to vaccination. Some have had their arms amputated and been discharged from the service, and others have sustained lifelong injuries. It must be noted that soldiers, when quartered in tropical countries where leprosy and syphilis prevail, are

often obliged to submit to several re-vaccinations. In Capetown, a soldier belonging to the North Stafford Regiment, on duty near Government House, informed me (February 9th, 1892) that since he joined the army he had been vaccinated thirteen times. He was badly pitted with small-pox.

In an article on "Leprosy in the Baltic Provinces," by Dr. P. Hellat, dated St. Petersburg, in the *Journal of the Leprosy Investigation Committee*, December, 1891, the writer cites the following case which he considers speaks "very strongly for infection":—"A young man coming from a leprosy-free district is called for military service, through which he comes to the South of the Empire to a leprosy village, gets ill after two years with *lepra tuberosa*, returns home, lives with his mother, who after two years is attacked with *lepra anaesthetica*." Dr. Hellat omits here to note that the first danger to which the recruit is subjected on joining the army is that of being inoculated with contaminated virus in the process of vaccination. All other risks, unless he has sores or wounds on his body (very improbable in a recruit who has recently undergone medical examination), are comparatively infinitesimal. For the serious risks incurred by re-vaccination our troops receive no compensating advantage in the way of immunity from small-pox, either of a sporadic or epidemic nature. According to the army medical reports, we find that among troops in Egypt in 1889 there were 42 cases and 6 deaths from small-pox. In the Bengal army in 1889 there were 71 cases and 8 deaths. In the Bombay contingent there were 49 cases and 3 deaths; and among the troops in Madras 32 cases and 6 deaths. In all, there were, in 1889, among this picked body of healthy re-vaccinated men, 202 cases and 23 deaths. How many cases of erysipelas, eczema syphilis, tuberculosis, and leprosy were due to re-vaccination is not stated, but we know that after every general vaccination order, a number of soldiers are disabled for a time, some more or less seriously. I produced evidence before the Royal Commission on Vaccination (Vol. III., p. 116) that in 1882 the Federal Government of Switzerland, owing to re-vaccination disasters, rescinded the regulation in the army, and in 1883 M. Weitzel, the Minister, of War for Holland, for similar reasons, issued an order to the effect that re-vaccination was no longer obligatory in the army of that country.

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## CHAPTER 6: OTHER ALLEGED CAUSES OF LEPROSY

I CAN only refer very briefly to causes of leprosy other than those detailed in previous chapters. Next in importance to that of contagion is the question of heredity. The theory of heredity, as a factor in the propagation of leprosy, is rejected by leading authorities such as Hansen, Hjort, and Arning, and by many writers it is not even mentioned. Dr. Arning, while failing to discover evidence that the disease is congenital, is of opinion that a certain weakness to resist its attacks may be transmitted.

Dr. G. Armour Hansen, who discovered the *bacillus leproe* in 1873, has devoted much attention and research to the question of heredity, and failed to find a decided and indisputable proof of its influence in the United States, though hundreds of thousands of immigrants had leprous parents in Norway. — *Minnesota State Board of Health Report, 1889-90, p. 43.*

Dr. W. Munro says :—" I do not deny that leprosy may be occasionally hereditary, but only say that it has never been proved to be so."

Dealing with the subject of the alarming increase of leprosy in Hawaii, the victims amongst a clean nation multiplying faster as the years roll on, until it has invaded nearly every district in the Archipelago, Dr. W. Hillebrand observes :—" And, mark well, in all this, hereditary taint, from the nature of the case, has no share, or, if any, only a most subordinate one."—*Leprosy a Communicable Disease, by Dr. Macnamara, p. 59.*

The *Lancet*, March 3 1st, 1883, p. 555, observes "Morehead, as well as Lewis and Cunningham at Almora, came to the conclusion that heredity could not be a great factor in the increase of leprosy in a district, inasmuch as lepers have comparatively small families, who suffer a high rate of mortality, and therefore the survivors are only just numerous enough to replace their defunct progenitors."

Dr. George L. Fitch, in his report addressed to the president and members of the Board of Health, Honolulu, in 1884, says:—"Heredity plays but little figure in the spread of the disease, because we find that, after sending more than 2800 lepers, during a period of eighteen years, to Kalawao Leper Settlement, there are only twenty-six children alive, and only two of these children are lepers."—*Appendix to Report on Leprosy in Hawaii, 1886, p. 31.*

In a note to the Secretary of the State Board of Health,, Minnesota, U.S., December, 1888, Dr. Christian Gronvold observes:—" Our experience in the North-West has made it probable that the disease is not hereditary. Not a single case has been discovered, after forty years of immigration, where a child, born in these States of leprous parents, has inherited the disease."

The same authority concludes an article on "Leprosy in Minnesota" as follows:—" I cannot here relate all my observations in detail. I will only tell what I have found in regard to the occurrence, or rather the disappearance, of *lepra* in America (N.W. States). Of about 160 lepers who have immigrated into the three States named (Wisconsin, Iowa, Minnesota), thirteen are alive, whom I have seen myself, and perhaps three or four more. All the others are dead. Of all the descendants of lepers (and that includes the great-grandchildren of some of them), not a single one has become leprous. This is, in short, the result of my investigations."—*Lancet, March 26, 1892.*

*Report of the Select Committee on the Spread of Leprosy, Cape of Good Hope, July 15, 1889. Minutes of Evidence:--*

The Hon. Dr. Atherstone, M.L.C., who has practised in the Colony fifty years, chiefly in Graham's Town, where he was District Surgeon for twenty-six years, and who has always taken a great interest in the subject, said, in answer to Q. 352 concerning heredity, that "it is the constitutional diathesis, or cachexia, which, I consider, is inherited; not the dormant germs rendering the individual less able to resist its attacks and subsequent reproduction."

In an article on the "Cause of Leprosy," by Sir William Moore, K.C.I.E., Hon. Physician to the Queen, late Surgeon-General with the Government of Bombay, the author says :—"We are told that leprosy is caused by eating fish, and, therefore, cannot possibly be syphilis. Now, I lived and worked many years among the inhabitants of the semi-desert districts of Western India, who never see fish. The sea is hundreds of miles away, and there are no lakes or rivers. Even dried fish did not penetrate into those remote districts. Fish was practically unknown as an article of diet. Yet there is a considerable amount of leprosy in those countries. At recent meetings of the Medical and Physical Society of Bombay, the subject of leprosy was exhaustively discussed, and the members were unanimous in discrediting fish as a cause of leprosy. The members, being both native and European practitioners, private and in the public services, who are constantly seeing leprosy, are perhaps better qualified than any body of men to give an opinion on this matter. In the districts of Western India above referred to, salt is made from the earth at most villages. The people have as much salt as they want. Yet leprosy has been attributed to an absence of salt. It has always been ascribed to a vegetable diet, to new rice, and to diseased grain. But the kind of food does not appear to influence the disease further than, like insanitary conditions, insufficient food, and food deficient in required elements, that it induces a state of constitution rendering the subject more liable to almost any malady. Again, it has been advanced that leprosy is not, like syphilis, contagious. But the communication of leprosy has certainly been proved. Direct proof seems to have been afforded by the experiment on the criminal at Honolulu. In the case of Keanu, *bacilli* were found to have multiplied at the seat of inoculation.....Leprosy very frequently commences on the extremities. Natives in India do not generally wear shoes and stockings; their feet are thus very liable to become abraded or wounded; a leper's slippers may easily be taken by mistake, and conveyance of discharge is, I believe, thus frequently accomplished."

In an article in the Fourth Annual Report of the State Board of Health for Massachusetts, U.S., by Dr. Samuel W. Abbott, reprinted in the Hawaiian "Report on Leprosy in Foreign Countries," 1886, is the following, under the title of "Leprosy in its Relation to Public Health ":—"The questions which render leprosy a matter of special interest, as affecting public health, are those of etiology, modes of propagation, and the question of contagion.

"The causes of leprosy have been sought for in the peculiarities of climate, soil, diet, and habits of life. As regards climate and soil, the wide geographical distribution of the disease would seem to preclude them as elements or factors of causation. Opinions differ much as to the question of diet. The eating of tainted fish has been strongly urged as a cause. Leprosy is found in a most aggravated form among fish-eating people, as in Norway and Crete, and, on the other hand, it also prevails in inland districts where fish is but little used.

"Doubtless an improper diet and bad hygienic surroundings aggravate the disease.

"All these causes acting together for centuries did not produce the disease in the Hawaiian Islands, nor was it known until some time after the islands were open to foreign trade and commerce with

other nations."

Mr. Jonathan Hutchinson says :—" The suspicion that vaccination has been the means of spreading the disease in the case of the Sandwich Islands has been entertained." The spread of leprosy, according to this distinguished surgeon, is due to eating fish, a theory which finds very few supporters amongst those who have studied the disease in leprosy countries. The Parsees are great consumers of fish, and leprosy amongst them is of rare occurrence. With regard to the fish theory, which has obtained currency owing to the eminence of its author, I may observe that in my travels in leprosy countries I have hardly met with a single advocate of it, and those most practically conversant with the disease at leper institutions consider it both far-fetched and irrational. In an article on "Leprosy in Kashmir," by Dr. A. Mitra, Chief Medical Officer in that country, in the *American Journal of Medical Sciences*, Philadelphia, pp. 22 and 23, the author says :—"As to Hutchinson's fish theory, the Goojurs do not get fish. Since this theory first came to my notice in the pages of the *Lancet* I have always asked lepers if they have been fish-eating, and in the large majority of instances the reply was in the negative. The theory is untenable in India, where we do not find the disease more prevalent among fish-eating people than among abstainers from such food, as *vaisnabs*. The Kashmiris, among whom leprosy is rare, eat fish, fresh, dried, and salted. In India European sportsmen, planters, etc., use largely preserved fish, but there are no facts to show that fish-eating ever produced leprosy, among them. High-class Hindu widows are strictly prohibited from taking fish, but I have seen several cases of leprosy among them. But the fact that the leprosy is common among Goojurs completely disproves the fish theory." In "Notes on Leprosy in Norway," Dr. Hercules MacDonnell observes :—" Nowhere did I perceive that any credence was attached to the fish-origin theory. Dr. Kaurin's writings on this special subject are widely known abroad."—*Lancet*, August 31, 1889.

Dr. C. N. Macnamara says:—"Among the Norwegians putrid and dried fish are said to give rise to leprosy; others fancy that rice prepared in a particular way is at the root of the evil. We may be sure that the theory of bad and salted food being a cause of leprosy does not apply to many parts of India, for the natives, as a rule, do not eat salted food, and certainly are not in the habit of consuming putrid fish."— *Leprosy a Communicable Disease*, p. 48.

In a paper read before the New Brunswick Medical Society, July, 1889, by Dr. Murray MacLaren, M.R.C.S., on "Leprosy in New Brunswick," Mr. Jonathan Hutchinson's Fish and Food theory is dealt with. After quoting Mr. Hutchinson, the writer says:—" This view is not at all borne out by what can be observed, in our own affected district, which is only 45 miles in length, and of the 82 cases already mentioned, 58 have arisen in the parish of Tracadie alone, which has been the headquarters of the disease, while the remainder come from the other parishes: Niguac, 3; Pokemonde, 9; Shippegan, 6; Caraquette, 6. It does not seem possible that this district, and especially Tracadie, should have food in any way different from a large part of the extensive northern and eastern coast, which is quite similar to the leprosy district in soil, climate, food, including fish, and inhabited by a similar race of people' with the same manners of life. Besides this, the fact that no case is known to have occurred among the Indians dwelling within the affected area helps to disprove this theory."— *Maritime Medical News*, July, 1890, p. 50.

Dr. Julius Goldschmidt, in a communication on "The Madeira Leprosy," says :—" Those districts where mostly fish is consumed, and sometimes in an unhealthy state (coast villages), are freer from the disease than in other parts of the island."—*Journal of the Leprosy Investigation Committee*, No.

4, December 1891.

Dr. Max Sandreczki, Director of the Children's Hospital, Jerusalem, says :—"Leprosy in Palestine is developed by insanitary conditions, of which I will enumerate the chief: impure air; the tainted exhalations which prevail in the villages and unhealthy habitations of the fellaheen; the water supply, often stagnant and deteriorated; the oil and fat (used for food), rancid, or salted beyond measure; olives and cheese in a state of decomposition; meat rotten, or coming from animals diseased, or worse still. Add to all this extreme uncleanliness, the utter absence of skin action, and then one 'may easily explain derangements in the tissues of the skin, in the lymphatic and ganglionic systems, and, in a word, complete disorder of all the nutritive functions.'"— *The Lancet*, August 31st, 1889. -

The Hon., David Dayton, President of the Board of Health, Honolulu, says :—" I am not of the opinion that leprosy 'is always hereditary, so many cases proving to the contrary. By referring to tables in Mr. C. B. Reynolds' reports, it will be seen that a large proportion of the girls in the Kapeolani Home were children of leprous parents without becoming diseased themselves.'"—*Report, Board of Health, Honolulu, 1892, p. 42*

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**CHAPTER 7: INADEQUACY OF MEDICAL THEORIES OF CAUSATION.**

IN conversation with lepra specialists in countries where leprosy is endemic, nothing is more common than the admission that the alleged exciting causes of the disease, such as contagion, heredity, or malaria, are quite inadequate to account for the rapid progress of leprosy over a wide area in recent years. Dr. Alzevedo Lima, chief medical officer of the hospital, Rio de Janeiro, observes:—" Even at the present time, in spite of the progress in sanitation, and the more favourable conditions of life among the Brazilians, there are still centres of contagion, whence we receive patients for the hospital in larger numbers than from other places. Throughout the whole country, in fact, this terrible disease is still rife. This being so, if we consider the differences in climate, the food, the habits of life, the sanitary conditions, etc., of the various regions of this vast country, it is difficult to believe that the etiological factors still given as determining causes of the disease can be in themselves a sufficient explanation. At the most, they can only act as favouring conditions, and explain the greater or less frequency of the malady, its predilection for certain places or for certain classes of the people."—*Journal of the Leprosy Investigation Committee, December 1891, p24*

Alluding to this subject, Dr. Alzevedo Lima, writing to me from Rio de Janeiro, May 20th, 1892, says :—"None of the ordinary etiological factors explains satisfactorily the spread of leprosy in this country, where one finds focuses in places altogether different in the climate-telluric conditions, and where, besides the sick people who live in bad conditions of feeding, etc., there are many others who live in luxury and belong and dwell amongst the best society. The inheritance also does not account for it in a very large scale. About this last point I always take very great care to inquire of the sick people who are taken to the Hospital dos Lazaros, where we have had 242 patients during these fourteen years past that it has been under my direction. . . ." Referring to the inoculation of leprosy by means of vaccine virus, Dr. Lima says :—" I believe in the possibility of the fact, not seldom, and I suspect this may have been. the cause of the spread of the disease amongst our people, specially in the country, where, with the absence of a doctor, the vaccination is done by someone not professional, and therefore incapable of distinguishing whether they are using the vaccine taken from a pure source or not. Moreover, to those who know how long it takes for the incubation of leprosy, and how difficult it is to diagnose it in its initial stages and in several of its forms and varieties, it is easy to know that even the professional man may have given rise to the spread of the disease in that way.

"Amongst 62 persons affected with this disease now in treatment in the Hospital dos Lazaros, in this city, 26 were vaccinated, being 8 in Rio de Janeiro, 8 in the State of St. Paul, 6 in the State of Minas, and 2 in Portugal; the remaining 36 have never been vaccinated. Abstracting the 10 of Rio de Janeiro, where the vaccination is gone through with every care and the vaccine taken directly from the cow, we have 8 come from St. Paul, either from the. country or from small villages where the vaccination is performed, as a rule, by people not competent, and with the lymph taken at random from any person amongst their own people, where leprosy prevails endemically. In any of these States, in the absence of a physician, any clever man undertakes the duty of vaccinating amongst the people, and this may very likely be one way of propagating the leprosy."

Dr. Alexander Abercromby, of Cape Colony, referring to the causation of leprosy, says :—"It is evidently dependent on some vitiated state of the blood, and that acquired in many instances, as has been clearly ascertained, by hereditary predisposition. In many cases, however, it occurs where no such predisposition can be traced, and in persons whose parents were perfectly healthy, and who

evinced during their lives no trace of the disease whatever. In these cases we are led, therefore, to seek for other causes to account for it."— *Thesis on Tubercular Leprosy*, p. 15.

In the Report on the Annual Returns of the Civic Hospitals and Dispensaries in Madras for 1888, p. 14, under the head of Vizagapatam, Surgeon-Major Sturmer says that leprosy is on the increase in the district, and observes :—" This year I have seen many fresh cases of leprosy in adults as well as in children, in whom no hereditary taint could be traced. They evidently had contracted the disease from some outside source, for in each case it was ascertained that no other member of the family was affected."

The "Report on Leprosy in New South Wales," May 13th, 1891, forcibly exhibits the unsatisfactory condition of modern inquiry into the etiology of the disease. No mention is made as to the chief factor of causation.

The Secretary of the Board of Health in New South Wales, Mr. Henry Sager, observes :—" The detailed history of the cases given in Appendix C., though of very considerable interest, does not furnish any grounds for definite conclusions as to the causation and spread of the disease. There are no data on which to advance a view of spontaneous, climatic, dietetic, mal-hygienic, or hereditary origin of the malady, and nothing of scientific accuracy to be adduced as to contagion, though the evidence in several cases points more or less strongly in this direction."—*Journal of the Leprosy Investigation Committee, No.4, December, 1891, p.50.*

The Report of the Inspector of Asylums for 1890, presented to both Houses of Parliament, Cape of Good Hope, under the head of "Female Leper Wards," p. 32, says :—" The fact which stands out most prominently in making these records is the absence of any history of direct contagion, or even with contact of a known source of the disease in almost all of the cases which have been investigated."

When, about a year later, Dr. S. P. Impey, the present medical superintendent of the asylum, Robben Island, unable to account for the spread of leprosy by popular medical theories, began a more careful and exhaustive investigation than his predecessors had ventured upon, and included vaccination, hitherto ignored, as one of the possible factors, he had no difficulty in tracing a number of cases directly to this source. Dr. Impey felt it his duty to warn the Government of this danger.

In concluding a second paper on "Notes on Acquired leprosy as observed in England," by Mr. Jonathan Hutchinson, in the *British Medical Journal*, July 6, 1889, this distinguished pathologist observes :—

"The twelve cases which I have quoted do not, I believe, comprise by any means all the examples of leprosy beginning in patients of British birth and descent which have come under my observation. They are all, however, of which I am able at present to find record in my note-books. One and the same criticism may be said to apply to all. They are the examples of the acquisition of a specific disease by healthy persons who had no inherited predisposition. In no single instance had the person so acquiring it been exposed to any degree of hardship, or deviated in any definite manner from the ordinary conditions of a cleanly and well-regulated life. In every case the acquisition of the disease had occurred in some country where it was known to be prevalent, the East and the West Indies being the chief localities. I submit—as, indeed, I have already suggested—that there are only two suppositions open to us by which to explain the *de novo* acquisition of such a disease in cases such

as these. The patients must either have received the specific contagion of leprosy on some part of the skin or mucous membrane, or they must have swallowed it in connection with food. Both these suppositions are possible. I may confess, however, that to my own mind one of them seems far more probable than the other. In no single instance had there been any known exposure to contagion. In no case had the patient associated with anyone suffering from leprosy, and in most instances the statement given was that they had but rarely seen lepers, and had certainly never come near them."

Amongst the possible sources of leprous contamination, Mr. Hutchinson, while inclining to what is known as "the fish theory," mentions "the perils of vaccination."

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**CHAPTER 8: LEPROSY AND VACCINATION AT THE INTERNATIONAL HYGIENIC CONGRESS.**

IN the month of June, 1890, I presented before the Royal Commission on Vaccination certain facts tending to show the increase of leprosy in various countries which I had visited, and that this, increase was largely due to vaccination. In the following autumn I extended my inquiries to other countries, and discovered the same sinister results; and in the following April I published my conclusions in a pamphlet entitled "Leprosy and Vaccination," which has been widely circulated in the countries where the alleged cases of leprosy have occurred. But no attempt was made to reply to the allegations until August, 1891, when Dr. Phineas S. Abraham, the Secretary of the Leprosy Investigation Committee, read a paper on the subject before the International Congress of Hygiene and Demography in London. The following is the report of his address, from the *Lancet* of August 22, 1891 :—

*"On the Alleged Connection of Vaccination with Leprosy.*— Phineas S. Abraham, M.D., read a paper on this subject. Accepting the bacillary theory of leprosy, and believing that instances have occasionally been reasonably demonstrated of its communication from one infected person to another previously healthy, Dr. Abraham has sought for evidence as to every possible means of inoculation, vaccination included. In this paper he gave a short account of the principal inquiries bearing upon the subject, and discussed the facts which have been alleged to connect leprosy with vaccination. The statements, or supposed cases, of the following observers were among others alluded to :—Sir Erasmus Wilson, Sir R. Martin, Dr. Bakewell, Dr. Tilbury Fox, Dr. Castor, Dr. Ebdon, Mr. Malcolm Morris, Dr. Bemiss, Dr. Hildebrandt, Dr. Arning, Dr. Mouritz, Dr. Rake, Archdeacon Wright, Professor Gairdner, Dr. Black, Drs. Swift and Montgomery, Surgeon Brunt Dr. Piffard, Mr. Hillis, and Professor Leloir. It was pointed out that the question had been in the minds of inquirers for many years past, and that the supposed instances brought forward were comparatively few. Even the most suspicious cases, such as those adduced by Professor Gairdner, Mr. Hillis, and others, were open to the objection that there was nothing to show that the subjects had never been exposed to any other possible means of inoculation or contagion, had never been in contact with lepers, or had never had to do with food or anything else which might have become contaminated by lepers; in short, we could not be sure that, having been born, or having lived for some time in a leper land, they had not been exposed to other pathogenic conditions of the disease. Dr. Arning's and some of the other observations were quoted in full because they had been much twisted, and false deductions have been drawn from them. The evidence from Scandinavia was significant; vaccination had been compulsory in Norway for many years, and largely practised from arm to arm in the leprosy districts, and, as Dr. Hansen stated, no case of transferring leprosy therefrom had been hitherto known. Leprosy, indeed, was there steadily decreasing. In China, according to Dr. Manson, leprosy was common in the district where vaccination had been practised for the last sixty or seventy years; but, on the other hand, it was more common in districts where vaccination had only been recently introduced, and was practised to a very limited extent only. Some fresh facts and definite information on the subject were hoped for from Mr. William Tebb's late evidence before the Vaccination Commission. A great deal was, of course, made of the observations of Professor Gairdner, Dr. Arning, Dr. Castor, Mr. Hillis, and of some of the others alluded to above. One of them held the view that the spread of leprosy might be due to *syphilitic* vaccine lymph, and another had written a pamphlet on the subject which was full of inaccuracies. In point of fact, although *a priori* the possibility of an occasional accidental inoculation of the disease

by vaccination might be admitted, up to the present time no absolutely clear and incontrovertible evidence connecting vaccination with leprosy had been forthcoming; and, in Dr. Abraham's opinion, anyone who said that vaccination was to any extent responsible for the spread of leprosy talked arrant nonsense. Nevertheless, from what was known concerning the introduction of bacillary diseases in man and animals, it certainly behoved medical men to be extremely careful in the selection of their lymph for vaccination; and in a country where leprosy was rife it seemed to him that it would be advisable to exercise particular caution, and, if possible, avoid, as was now being done in Hawaii, an indiscriminate arm-to-arm vaccination among the natives. The question of the possibility of transmitting leprosy bacilli by vaccine is receiving attention on the part of the Indian Leprosy Commission, and a paper on the subject by Drs. Bevan Rake and Buckmaster will appear in the next number of the *Leprosy Journal*"

In answer to this statement I sent the following to the *Lancet*:—

### LEPROSY AND VACCINATION.

(To the Editor of the *Lancet*.)

SIR,—Dr. P. Abraham's address before the recent International Congress of Hygiene and Demography on the alleged connection of vaccination with leprosy, reported in the *Lancet* of 22nd August, is hardly calculated to allay public anxiety in our tropical colonies where the disease is endemic. As he has referred to the evidence which I gave on this subject before the Royal Commission, I shall be glad if you will kindly allow me a short space for explanation. Dr. Abraham has furnished a tolerably large list of authorities who have either pointed out this particular danger or supplied particulars of cases where leprosy has in their opinion been invaccinated, but he adds that these cases are comparatively few. Allow me to observe that Dr. Abraham has omitted to mention that, of the distinguished medical witnesses, some have adduced several cases of invaccinated leprosy, and others refer to a "prolific," "serious," "alarming" increase of leprosy due to vaccination. Some of the cases are introduced with reluctance by practitioners, who know the damaging effect of these allegations upon a prescription lauded as "the greatest discovery in the history of medicine." Dr. Abraham quotes Dr. Hansen as stating that in Norway no case had been hitherto known of the communication of leprosy by vaccination. Permit me to say that this well-known pathologist has given his emphatic opinion, which I quoted before the Royal Vaccination Commission, that the chief means of disseminating leprosy is by inoculation, and that in Norway the greatest possible care is observed to prevent lymph being taken from leprosy subjects. Dr. Abraham advises medical men to be "extremely careful" in the selection of their lymph, especially in countries where leprosy is rife, and to avoid arm-to-arm vaccination, "as is now being done in Hawaii." I beg to state that less than a year ago, as I know from personal inquiry, the bulk of the vaccinations in Hawaii were performed with humanised virus, it having been found that animal lymph produced excessive inflammation and many terrible cases of ulceration. In Ceylon, where leprosy is endemic, and, according to Dr. Kynsey, the Surgeon-General, increasing from some occult cause, arm-to-arm vaccination is principally in vogue, as it is also in the West Indies. If leprosy is spread chiefly by inoculation (and this source of infection is more generally accepted amongst dermatologists than any other), there is no mode of inoculation so widely prevalent as vaccination; and, having investigated the subject in all quarters of the globe, I attribute largely to this cause the alarming recrudescence of the disease which has taken place during the last thirty years in our colonies and most other leprosy countries., WILLIAM TEBB., Devonshire Club, St.

James's, London, 5th September, 1891

*This letter was refused insertion*

It is clear by Dr. Abraham's mode of argument that leprous vaccination, as an important factor in the increase of the disease, is the last thing he will admit. All other possible sources of dissemination must be excluded before a theory so fatal to medical prestige can be tolerated. Any other of the numerous theories promulgated to account for new centres of leprous contamination the doctor is ready to consider, but vaccination (to use a classic phrase) "must be preserved from reproach," and the reputations of its distinguished advocates maintained. His opinions, however, do not seem to meet universal approbation, even amongst the medical profession. Commenting upon Dr. Abraham's address, the *Hospital Gazette*, London, of August 22nd, 1891, observes :—" Dr. Abraham has gone to a great deal of trouble to prove, or attempt to prove, that, though leprosy is probably as susceptible of being conveyed by vaccination as is syphilis, there is no well authenticated case of the kind on record. It is admitted that quite a number of suspicious instances have been reported by competent observers, but Dr. Abraham rules them all out of court on the ground that other possible sources of infection have not been eliminated. This seems to be asking too much. Leprous vaccine is obviously only obtainable in countries where lepers are common, so that, theoretically, the victims must necessarily have been exposed to the special pathogenic influences. It has, we believe, been scientifically demonstrated that the disease can be conveyed by inoculation, and we shall require something more than this specious special pleading of Dr. Abraham before acquiescing in his conclusions."

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**CHAPTER 9: VACCINATION IGNORED IN OFFICIAL LEPROSY REPORTS.**

Now that evidence is accumulating in all directions regarding vaccine virus as a propagator of leprosy, attempts are made to minimise the effects of this evidence on public opinion, by alleging that the instances of such infection are few in number, and of no account when put in the scales against the enormous benefits arising out of the application of Jenner's great discovery. This is not the place to enter into the *pros* and *cons* of this much-vexed question, but those who wish to study the facts may do so advantageously in the reports of the Royal Commission on vaccination; in the article on vaccination by Dr. Charles Creighton in the ninth edition of the "Encyclopedia Britannica"; in the able monograph, "Jenner and Vaccination," by the same author, and in Professor Crookshank's instructive treatise, "The History and Pathology of Vaccination." My own views on this subject—the results of a lengthened experience—may be found in the *Westminster Review* for December, 1888, and January, 1889. While I do not admit with Dr. P. Abraham, Dr. George Thin, Dr. Beavan Rake, and others, that the cases of leprosy due to vaccination are few in number, it should be borne in mind that the subject has never been submitted to searching and impartial investigation. In 1862, by request of the Government, a Committee of the College of Physicians prepared a series of seventeen interrogatories which were sent to lepra specialists in all parts of the world, but all reference to vaccination as a possible or probable factor was strictly excluded.

In consequence of the rumours of the spread of leprosy, by means of vaccination, in the Island of Trinidad, Governor J. R. Longden felt it his duty to call the attention of the English Government to the subject, and on the 4th March, 1871, he addressed a dispatch to the Right Hon. the Earl of Kimberley, then Secretary of State to the Colonies. In confirmation of this serious charge against vaccination Governor Longden referred to the report of Dr. Bakewell, the Vaccinator-General of Trinidad, and to certain cases of invaccinated leprosy, and to Sir Ranald Martin and other eminent physicians as authorities for his statements, and added, "This part of Dr. Bakewell's report appears to me to be deserving of your Lordship's attention in connection with the increase of leprosy, which I fear must be admitted to have taken place in the last few years." In paragraph 13 of the dispatch Governor Longden says: "The danger of introducing disease into the system of a previously healthy child by vaccination is possibly a real one, and it is very important, as regards tropical colonies at least, that it should receive the attention of the medical profession." In paragraph 14, Governor Longden pertinently observes that the special danger of spreading broadcast the seeds of leprosy would be worse than the perpetuation of small-pox. Governor Longden's dispatch was referred by the Colonial Department to the Royal College of Physicians, who were anxious to get rid of the most damaging indictment yet preferred against vaccination. This they, sought to accomplish, as far as possible, by ignoring it altogether.

That learned body nominated, Dr. Gavin Milroy, F.R.C.S., who arrived at Georgetown, British Guiana, on the 22nd July, 1871, and prosecuted inquiries mainly as to the contagiousness of leprosy in that Colony, and on the 17th October, 1871, he submitted to the Earl of Kimberley a report confirming the conclusion of the College of Physicians, as given in p. xix. of their report as follows :—" The all but unanimous conclusion of the most experienced observers in different parts of the world is 'quite opposed to the belief that leprosy is contagious or communicable by proximity or contact with the diseased.'" Dr. Milroy adds :—" My personal observations and inquiries in the Colony all tend in the strongest manner to the same result" No question as to vaccination was submitted for consideration. On the 25th October, 1871, Dr. Milroy reached Barbados, and from thence proceeded to Antigua, and later on visited Trinidad, Dominica, and Jamaica. On reaching

Trinidad in November, 1871, he discovered that Dr. R. H. Bake-well in his report had given "countenance to the popular belief as to the transmissibility of leprosy by vaccination," and, with the consent of Governor Longden, inserted an additional question to the Interrogatories for circulation in that' Colony. This question, then submitted for the first time, elicited answers abundantly confirming Dr. Bakewell's contention. These answers will be found cited in the communication from Mr. Alexander Henry, and elsewhere, in this volume.

Dr. Milroy's report on this part of the subject is mainly directed to answer and, if possible, disprove Dr. Bakewell's allegation, which, if unanswered, might prejudice the continuance of vaccination. Dr. Milroy says, "What is contended for is, that pure, genuine, vaccine virus, unmixed with blood, cannot be the medium of any contagion but cow-pox:" conditions, as every public vaccinator knows, impossible of fulfilment. At this period the transference of syphilis by means of vaccination was publicly acknowledged, but Dr. de Verteuil of Trinidad, in his reply to Dr. Bakewell, observes: "It is an illogical deduction that, because syphilis is inoculable, leprosy is, or might be, inoculable, the diseases being essentially different." Dr. Browne of Barbados, one of the witnesses, has misgivings on the point, and writes to Governor Rawson, November 8th, 1871, as follows:

"It has been a general rule not to vaccinate from the apparently unhealthy, or those of leprosy taint, not so much from any opinion founded on fact of the possibility of conveying disease, as from a respect for the general prejudices prevailing." Public opinion, as shown by Dr. Bakewell's evidence, was even at that time in advance of medical opinion regarding the danger attending vaccination. Dr. Reade, the Colonial Surgeon of Singapore, cautiously observes (Dr. Gavin Milroy's report, p. 36):

"There is a possibility that the disease (leprosy) may be transmitted from children hereditarily tainted with leprosy, and I strongly advise the continuance of importing lymph from England by every mail, and carefully selecting only healthy children as vaccinifers."

The testimonies elicited by this inquiry as to the communicability of leprosy and syphilis seem to have had no practical effect on the College of Physicians. In a letter from that body on "Vaccination and Leprosy," dated London, August 17, 1871, and addressed to the Earl of Kimberley, it is stated that, while it is admitted that in a few instances syphilis has been transmitted by vaccination, "yet with reference to leprosy it must be observed that there is no evidence adduced beyond the merest presumption that this disease has ever been transmitted by vaccination." And so far from cautioning the public against this fearful danger, and petitioning Parliament to repeal a law which had been productive of so much mischief, the College of Physicians reaffirmed their belief in the benign character of vaccination, and declared "that they cannot press too strongly on your lordship the importance of enforcing the practice of vaccination for the protection of those who are too ignorant to protect themselves, and it would be a grievous wrong to forego so great a public benefit on the mere speculative grounds advanced by Dr. Bakewell."—*Report on Leprosy and Yaws*, p. 86.

The next inquiry emanated from the India office, and is entitled "Scheme for obtaining a better knowledge of the endemic skin diseases of India," prepared by Tilbury Fox, M.D., F.R.C.P., and T. Farquhar, M.D., 1872. Two chapters in the report of this inquiry are devoted to leprosy. The authors here furnish a list of twelve questions for elucidation in regard to the presence and cause of leprosy in different districts, and three questions for leprosy in individuals. In none of these is either inoculation or vaccination specified.

The alarming increase of leprosy in Hawaii, which took place after the introduction of vaccination by the missionaries, once more called public attention to the subject, not only in that group of islands, but throughout the civilised world. In 1885 the Department of Foreign Affairs in Honolulu instituted the most extensive inquiry made up to that time into the causation of leprosy, and the means of its treatment and prevention. The deplorable position of affairs is briefly stated in the introduction to the official report, entitled, "Leprosy in Foreign Countries: Summary of Reports furnished by Foreign Governments to His Hawaiian Majesty's Authorities, as to the prevalence of Leprosy in India and other Countries, and the measures adopted for the social and medical treatment of persons afflicted with the disease." . . . "It is about thirty years since leprosy first attracted any serious attention in the Hawaiian Islands. In the year 1866 the dread disease had gained such a deadly hold upon the native race, that the Hawaiian Government began to attempt to stamp out the scourge by segregation, for it had become a contest for the preservation or destruction of the aboriginal race. To judge by the number of cases in proportion to the population, the disease appears to be more virulent and malignant in the Hawaiian Archipelago than elsewhere on the face of the globe. What has been attempted and accomplished in this twenty years struggle with a great national calamity appears elsewhere."

"His Hawaiian Majesty's Government being anxious to provide every possible means for the treatment and understanding of the fearful malady, His Excellency Walter M. Gibson, His Majesty's Minister of Foreign Affairs and President of the Board of Health, addressed letters of inquiry to the Secretary of Legation at Ceylon and to the diplomatic and consular representatives of the Hawaiian kingdom in various parts of the world where leprosy was known to exist, making inquiry in respect to the character and treatment of the disease." It is stated that the response to these inquiries has been most generous, more especially from governments of dependencies of Her Majesty Queen Victoria. This interesting document gives reports from every section of the vast Empire of India and its dependencies, from Ceylon, Hong Kong, Siam, the Netherlands and their colonies, the Canary Islands, Norway, Spain, Mexico, Chili, and Guatemala, and an extremely interesting and valuable report from the famous Leper Institution of Tracadie, New Brunswick, Canada. The report from the Secretary to the Government of India being so comprehensive and voluminous, it has been considered expedient to separate it from the other reports.

"In grateful recognition of the sympathy of other afflicted nations, this collection of reports, together with the sad history of its own affliction, is presented to the world by the Hawaiian Government in the devout hope that the Almighty, in his great mercy, may ere long permit suffering humanity to find the means of mitigating the terrible scourge."

From this little known compilation I have made extracts on various matters dealt with in this volume.

In this important inquiry, although at that time the facts had become known throughout the Hawaiian Archipelago as to the spread of leprosy by vaccination, yet such was the reluctance to bring so grave a charge against a practice proclaimed far and wide as "the greatest discovery in the history of medicine," that it was thought expedient to make no mention of vaccination in the interrogatories, and to specify only those points drawn up by the Committee of the College of Physicians in 1862.

Owing to the increase of leprosy in South Africa, inquiries by Select Committees of the Legislative

Assembly were instituted in 1883 and 1889, but the interrogatories relate chiefly to the spread of the disease, and to its contagious or non - contagious character. The questions were submitted *viva voce*, and vaccination as a possible factor in the dissemination of leprosy is carefully ignored.

An important report by Dr. S. P. Impey, Medical Superintendent of the Leper Settlement, Robben Island, on the dangers of spreading leprosy by means of vaccination, was in June, 1891, sent to the Colonial Office, Capetown. Of this report I have attempted, by repeated personal applications at the Colonial Office, Capetown, and at the Stationery Department of the colony, to obtain a copy, but without success.\* (\*An extract from this report, through the intervention of a correspondent in South Africa, has since been obtained).

In the "Report of the Leprosy Inquiry Commission" for the Colony of Mauritius, published 26th October, 1888, I find the following request in the circular of instructions sent to medical practitioners :—"We would be glad to obtain any facts bearing upon the question of its heredity or contagiousness, upon the conditions favouring its diffusion, upon its treatment, and, finally, upon the best means of preventing its spread in the community.—T. LOVELL, Chief Medical Officer," etc.

Nothing is said as to the inoculability of the disease, nor is there any inquiry suggested as to vaccination, which has been the means of spreading leprosy in this colony.

The Royal College of Physicians published another report on leprosy in 1889, concerning which the *Lancet*, April 20th, 1889, says :—" A report from the Leprosy Committee was read. It stated that the documents forwarded by the Government on the subject of leprosy since 1887 did not contain much, if any, new information. In view of the fact that there is increasing evidence respecting the communicability of leprosy, the committee repeated 'with greater urgency' the recommendation made in 1887, that the Government should institute a full and careful scientific investigation, which would entail expense and require considerable time. The adoption of the report was moved by Dr. Symes Thompson, who said that the disease was spreading very much among communities in South Africa, and was seconded by Dr. Handfield Jones, who thought that the College should express more definitely its opinion of the contagiousness of the disease and the need for compulsory segregation. This view was not accepted by other speakers, but all concurred in the urgency for a thorough scientific investigation, and it was referred to the committee to draw up a statement respecting the scope of such inquiry, for submission to the Government."

This report was, founded upon official and other documents collected up to that date and forwarded by the Government to the College of Physicians. Of these documents I have been unable to obtain copies or even permission to inspect them. The report is signed, "James Risdon Bennett, Chairman," and is dated April 5th, 1889. It was then four years since the disastrous effects of vaccination in Hawaii had been published by Dr. Edward Arning, and two years since Professor Gairdner's remarkable cases of invaccinated leprosy had been made known in the *British Medical Journal*. These and other facts showing the danger of invaccinating leprosy had been laid before the Dermatological Congress of Europe by eminent specialists. And soon after the publication of Dr. Gairdner's cases, Sir William Robinson, Governor of Trinidad, issued a confidential circular to about 30 medical practitioners of that island, containing the question as to whether leprosy is communicable by vaccination, "lymph from healthy vesicles alone being used." Dr. A. S. Black, a well known practitioner, gave particulars of several cases in his own experience, and stated that leprosy was increasing in the island. In his report to the Surgeon General for 1890, p. 34, Dr.

Beavan Rake says :—" Some thirty or more Trinidad doctors to whom the same circular was addressed returned negative replies." Dr. Rake omits to state that those who doubt or deny the risk qualify their answers by remarks such as that there is no danger "if pure lymph only is used, and precautions taken in the selection of the vaccinifer and the examination of the pustule," "if there be no admixture of blood" and "healthy lymph is used," "provided the lymph is clear" and "the vaccinifer is free from hereditary taint," "if bovine virus is selected," "with perfect cleanliness of the lancet," etc. Dr. Woodlock mentions that he takes the precautions of constantly importing fresh certified lymph from England. Dr. D. de Montbrun "dreads vaccination on the ground that syphilis and other cutaneous diseases have been transmitted by it." He also states that nearly all the families in Trinidad strongly object to vaccination with lymph taken from the children of the island, from fear that leprosy may be thereby communicated. Dr. Chitterton says :—" Vaccination is performed in Trinidad in a very unsatisfactory way." It is obvious that the value of the answers is seriously vitiated by the form in which the question is worded. The use of clean lancets and healthy vaccinifers without hereditary taint, however much insisted upon, cannot be made compulsory; and the people are obliged under severe penalties to submit to whatever vaccination is offered, which is chiefly of the leprosy and syphilitic variety, collected from miscellaneous native vaccinifers by perfunctory public vaccinators. Indeed, as I have found by personal inquiries in the West Indies, South Africa, and Hawaii, all the precautions admitted to be indispensable for the safe performance of the official rite are habitually disregarded.

The latest inquiry is due to the extraordinary amount of public interest awakened by the published reports of the labours, devotion, and death of the late Father Damien in the Sandwich Islands, and to the accumulation of evidence from many English and French Colonies showing conclusively the increase of this frightful malady. The first meeting was held at Marlborough House, June 17th, 1889, under the presidency of H.R.H. The Prince of Wales; and a dinner in aid of the National Leprosy Fund was held at the Hotel Metropole, London, on the 13th January, 1890, at which also the Prince of Wales presided. A highly influential Committee was subsequently appointed, with Dr. Phineas S. Abraham as secretary. The following letter, with a view of eliciting suggestions, was published in the *Lancet* of the 31st May, 1890, also in the *British Medical Journal* and in the first number of the *Journal of the Leprosy Investigation Committee*:—

SIR,—With the object of eliciting by correspondence as much information as possible on the subject of leprosy, it is proposed as a preliminary investigation to address a series of questions to the officers of the various leper asylums and to others who may be able to throw some light upon the matter. I am requested to ask you to allow me to invite the co-operation in this inquiry of those of your readers who, from their knowledge of the disease, may be in a position to offer suggestions as to matters of, inquiry and as to points of elucidation. Any observations with which the Committee may be favoured will be gladly received and incorporated in the "Journal of the Leprosy Investigation Committee," of which the first number will be shortly published.—I am, sir, yours faithfully, P. S. ABRAHAM, Med. Sec. May 26th, 1890.

Dr. Abraham further explains that "although all information bearing on leprosy will be deemed of interest, it will be desirable for observers to direct particular attention to questions relating to the cause or causes and propagation of the disease, as well as to those referring to remedial measures." "It is to be noted that this 'Journal' is published for the purpose of obtaining reliable scientific information on the subject of leprosy, and that it will not be carried on in the interest of any one particular theory. Views from all sides will be admitted; and that the truth may be arrived at, full

and free discussion is invited."

Nothing could be fairer, more explicit, or more promising for establishing public confidence and support than these announcements. Realising the importance of the subject and the limitations laid down by Dr. Abraham, I addressed to him, as Secretary of this Inquiry, the following brief communication on the principal point referred to—the causation of leprosy :—

Rede Hall, Burstow, near Honey, Surrey,  
June 10th, 1890

SIR,—Observing your note in the *Lancet* of the 31st ult., requesting suggestions as to methods of inquiry, and as to points of elucidation, with regard to the remarkable spread of leprosy, I beg to point out that amongst the questions which it is proposed by your committee to issue to the superintendents of Leper Hospitals, dermatologists, and others, that of the connection of the disease with vaccination should be included. That there is a connection is now admitted by some of the most eminent authorities of the day, including Professor W. T. Gairdner, Dr. Liveing, Sir Morell Mackenzie, Dr. John D. Hillis, Dr. Edward Arning, Dr. Armaur Hansen, and others. Some of these writers admit that not only is leprosy communicable with the vaccine virus, but that new centres of contagion of this hideous disease have been created by vaccination, with most disastrous and far-reaching consequences. Trusting that this important feature of the question will not be overlooked by your committee, and awaiting the favour of a reply, I am, sir, yours faithfully,  
WILLIAM TEBB.

Dr. Phineas Abraham, National Leprosy Fund, Adam Street, W.C.

To this letter the following reply was received :—

2 Henrietta Street, Cavendish Square, W. July 2nd, 1890.

DEAR SIR,—I must apologise for not answering your letter before this. With regard to the alleged connection with leprosy, this question will certainly be one of the points to which special attention will be directed on the part of the committee, and an attempt will be made to sift the evidence in an impartial manner.—I am, dear sir, yours faithfully,  
PHIN. S. ABRAHAM, M.D.

W. Tebb, Esq.

This correspondence, implicating vaccination, and pointing out a much-neglected source of danger, is absolutely ignored in the *Journal of the Leprosy Investigation Committee*; while communications from all parts of the world, in which the most diverse and conflicting theories are advanced by persons whose opportunities for observation and inquiry have necessarily been of a very meagre description, have found insertion in its pages.

In a notice of a recent able work, "Leprosy," by G. Thin, M.D. (London: Percival & Co.), in No. 4 of the *Journal of the Leprosy Investigation Committee*, p. 71, no mention is made of the cases of invaccinated leprosy introduced by the author, which occupy several pages of the work. On the other hand, three articles against the theory that leprosy is spread by vaccination are inserted. It is also to be observed that, while numerous communications, pointing out the dangers of vaccination in countries where leprosy is prevalent, have, since the Leprosy Commission was appointed,

appeared both in the home and colonial press (some of the writers citing cases of the disease disseminated in this way, and others furnishing the results of their painstaking investigations), no notice of such communications has been taken in the *Journal of the Leprosy Investigation Committee*. Three pamphlets dealing with the subject—two of them by medical writers—have been treated in a similar fashion. What amount of confidence the public, who have subscribed largely to the National Leprosy Fund, will place on an inquiry so manifestly one-sided, remains to be seen. It is certain that those who have looked for the impartial treatment of this serious phase of the question at the hands of the Leprosy Investigation committee will be grievously disappointed. Counsel holding a brief for the perpetuation of the Jennerian *cultus* could hardly have exhibited a less judicial attitude than disclosed by the official documents relating to this latest leprosy inquiry.

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**CHAPTER 10: OFFICIAL STATISTICS.**

## THE LEPER CENSUS IN INDIA, 1881, 1891.

MR. J. A. BAINES, Census Commissioner, India Office, has been kind enough to furnish me with the following Table showing the results of the Census in relation to Leprosy in the decades 1881 and 1891.

PROVINCE	Males 1881	Females 1881	Males 1891	Female 1891
1. Ajmir	23	6	20	7
2. Assam,	2,409	906	5,128	1,599
3. Bengal,	40,484	13,490	32,957	11,029
4. Berar	2,971	777	2,886	1,624
5. Bombay	7,259	2,559	7,558	2,419
6. Sindh	166	111	125	84
7. Aden	0	0	1	0
8. Upper Burmah	0	0	2,262	1,242
9. Lower Burmah	2,009	580	2,281	679
10. Central Provinces	4,430	2,013	3,575	1,780
11. Coorg	25	18	12	11
12. Madras and Small Feudatories	10,329	3,846	9,455	3,182
13. N. O. Prov. and Oudh	14,453	3,369	14,114	2,957
14. Punjaub	5,333	1,547	3,322	1,029
15. Quettah	0	0	2	0
16. Andaman	30	0	1	0
17. Hyderabad	2,117	872	2,261	716
18. Baroda	450	174	397	172
19. Mysore	340	193	536	266
20. Rájputána	0	0	1,314	394
21. Cent. Ind. Regs., etc.	7	6	59	21
22. Bombay States	1,681	606	1,907	641
23. Cawnpur State	0	0	4	2
24. Cochin & Perderkottal	143	0	313	138
25. Travancore	0	0	684	284
26. Central Prov. States	0	0	799	460

27. Bengal States	1,799	750	1,471	577
28. N.-W. Prov. States	339	94	312	67
29. Punjab States	2,241	613	1,462	458
	99,038	32,622	95,218	31,838
TOTAL	131,660		127,056	

*The general reader may perhaps be assisted in understanding the foregoing Tables by the following Analysis.*

PROVINCE	MALES		FEMALES	
	Increase	Decrease	Increase	Decrease
1. AjmIr	...	3	1	....
2. Assam	2,719	....	693	.....
3. Bengal	.....	7,527	.....	2,461
4. Berar	.....	85	847	....
5. Bombay	299	....	.....	140
6. Sindh	....	41	....	27
7. Aden	1	....	....	....
8. Upper Burmah	2,262	.....	1,242	...
9. Lower Burmah	272	.....	99	....
10. Central Provinces ~	.....	855	....	233
11. Coorg	....	13	....	7
12. Madras and Small Feudatories	....	874	....	644
13. N. O. Prov. and Oudh	....	339	....	412
14. Punjab	....	2,011	....	518
15. Quettah	2	....	....	...
16. Andaman	....	29	....	...
17. Hyderabad	144	...	....	156
18. Baroda	...	53	....	2
19. Mysore	196	.....	73	...
20. Rájputána	1,314	....	394	...
21. Cent. Ind. Regs., etc.,	52	.....	15	...

22. Bombay States	226	.....	35	...
23. Cawnpur State	4	....	2	...
24. Cochin and Pardukta	170	....	46	...
25. Travancore	684	.....	284	....
26. Central Prov. States,.	799	.....	460	...
27. Bengal States	...	328	...	173
28. N.-W. Prov. States	....	27	...	27
29. Punjab States	...	779	...	155
	9,144	12,964	4,191	4,975
Deduct increase		9,144		4,191
Net decrease		3,820		784
	1891.....	95,218	1891.....	31,838
	1881.....	99,038	1881.....	32,622
Places	15	14	13	13
Add increase		15		13
Unchanged*				3
	Total.....	29	Total.....	29

\* Nos. 7, 15, and 16.

From the foregoing analysis, it appears that the number of male lepers has during the decade increased in fifteen places and decreased in fourteen. The number of female lepers has increased in thirteen places and decreased in thirteen: while in three places they are *in statu quo*. In seven places no returns are given for 1881.

The total number of lepers returned are as follows:--In the census for 1881, 131,660; in the census for 1891, 127,056.

It will be remembered that at a meeting held at Marlborough House on the 17th of June, 1889, His Royal Highness the Prince of Wales declared that there were 250,000 lepers in India, an estimate nearly double that which is indicated by the figures derived from the censuses of 1881 and 1891. That the estimate given by His Royal Highness is far nearer the mark than are the figures derived from the census, will appear probable from the following facts and considerations.

On the perusal of the census forms issued by the Indian Government, we find in Rule 14 that "white leprosy" is to be excluded from the infirmities to be returned by the enumerators. That rule is as follows:— "If any person be blind of both eyes, or deaf and dumb from birth, or insane, or suffering from corrosive leprosy, enter the name of the infirmity in this column. Do not enter those blind of one eye only, or who have become deaf and dumb after birth, or who are suffering from white leprosy only."

Mr. J. A. Baines, Census Commissioner, writing 21st June, 1892, says that in the recent census, "the instructions were clearer (as to leucoderma, or white leprosy), and the exclusion far more strict."

The census form also contains the following direction:

"You are to make all the entries as the person himself or his guardian, states, and not to dispute his statement."

Coupling this direction with the fact that now, for the first time within thirty years, the report has been widely circulated, that all lepers at large were to be segregated, that is, to be separated from their friends and from all they hold dear, we should infer that a large

number of cases of leprosy would be suppressed, and not returned to the census enumerators, who are much more in sympathy with the afflicted members of their own race than with their official chiefs, and would be slow to aid in the perpetual incarceration of their friends; and among the respectable classes no one will admit that he is a leper, as an admission of this kind would involve loss of caste and social ostracism.

Moreover, leprosy is an insidious disease, and in its early stages cannot be diagnosed and detected save by experienced medical practitioners accustomed to treat this particular malady. Of the enumerators, not one in a hundred could detect a case of leprosy if he saw it, except when presented in its most aggravated and repulsive form.

Mr. H. A. Ackworth, Municipal Commissioner, Bom— bay, in a communication to me, dated 29th July, 1891, says :—" I have plenty of lepers in my hospital here who could not be identified as such unless they were completely stripped and examined by a trained eye." And a correspondent of the *Calcutta Daily News*, October 20th, 1891, writes:—" To my personal knowledge there are at least twenty-three lepers in this town who are not entered as such in the census papers. And it is quite probable that there are many more who have not been numbered."

A medical correspondent connected with the Army Medical Department writes to me, January 27th, 1892, "that the census form used in the census of 1891 is an enigma that the enumerators could not properly explain; and the remuneration offered was so small that it failed to tempt any of the better educated classes to volunteer for the census work. Consequently the papers were handed over to men who, for the most part, were too devoid of understanding to enable them to ascertain facts or comprehend the nature of the information required for filling in the returns." My correspondent adds that the wide-spread belief in India, that leprosy is a disease of venereal origin, induces all but the lowest classes to carefully guard against it becoming known, either to officials or to others, that any member of the family is a leper, and "even the threat of prosecution would not frighten them into publishing their terrible secret for census information." For these and other reasons there can be no doubt that a considerable portion of the leper population in India has been omitted from these returns.

Without endorsing the accuracy of the leper census in India, which is clearly misleading, it may be incidentally remarked that the proportion of vaccinations to population in India, as a whole, is less than in any of our crown colonies and dependencies, but is increasing every year, and, unless arrested, will soon produce the calamitous consequences exhibited in tropical countries where vaccination is general.\*

\* The births in India in 1899-1 were officially estimated at 40 per cent. of the population, or 8,244,101, and the number of children under one year returned as vaccinated in 1890-1 was 2,268,922, being about 27 per cent. on the total number of births.

#### THE LEPER CENSUS IN THE LEEWARD ISLANDS, WEST INDIES, 1891.

A census has recently been taken for the Leeward Islands, which also minimises the number of lepers in a similar fashion. Referring to this, the St. Kitts *Lazaretto* of February 22nd, 1892, says:—"The census return for the Colony is at length out, and a copy may be seen at the Public Library. It is openly said all over the Colony that this particular census is utterly unreliable; indeed, Mr. Fred Evans, the Colonial Secretary, says as much of the returns from Dominica. A glance at the tables which pretend to show the number of lepers in the Colony satisfies us that, in this particular, the returns are worthless.

"Some time ago, the doctors here were called upon to send in returns of the lepers in their districts. They did so, and sent in a list of 51 lepers. That this list was necessarily incomplete we fully demonstrated at the time. Since then, we have heard of several other lepers of whose existence no one here knew, and a few have been committed to the Leper Asylum. But in the face of the reports from the doctors, the compiler of these precious returns sets down the number of lepers at large in St. Kitts as thirteen and in Nevis as five!! How could Mr. Fred Evans or his clerk have got these figures? The census forms that had to be filled in by each householder contained no space in which the number of lepers could be entered. Therefore, we are forced to the conclusion that the opportunity of misrepresenting the leprous condition of this Colony was seized by those who were on the look-out for such a chance, the doctors' reports disregarded, and that some one invented these figures. . .

"We guarantee to produce fully 50 (and perhaps 60) lepers who are now at large in this little island (St. Kitts).

"There are considerably more than 13 in Basseterre alone. As regards Nevis, the inaccuracy of the Colonial Secretary's figures is equally striking.

"We can give off-hand the names of a half-dozen lepers living there, and we have heard of many more, of whose existence we are assured by gentlemen who are above, lying, and who have no motive for suppressing the truth.

"The figures for the other islands are also palpably incorrect and misleading. In Antigua 34 lepers are said to be under restraint. This is not true as regards the restraint, for according to Dr. Freeland they cannot legally be restrained, and as a fact they go and come from the so-called Lazaretto as they please. Only last month we saw several of them promenading the streets of St. John's. Then to set down 11 lepers only as being at large is a gross misstatement, as every one in Antigua knows. We were up there quite recently, and satisfied ourselves that there are probably in all over a hundred lepers in that island.

"We accept the return of 3 lepers to about 500 people in Barbuda, but we confidently challenge the assertion that there are only 9 lepers in Montserrat and 3 in the Virgin Islands. .

"Anguilla, the Government says, contains 8 lepers. Will Mr. Fred Evans be surprised to hear that he has made the trifling error of only eighty per cent? We happen to know that if he had guessed 40 (for the whole thing is evidently pure guess work) he would have been pretty near the mark.

"The total for the Leeward Islands is, according to this eccentric statistician, 172. That for St. Kitts and Nevis is 98. We declare, speaking with a knowledge of the subject which is infinite compared to that possessed by Mr. Fred Evans, that there are at least 200 lepers in St. Kitts and Nevis; and that Sir William Haynes Smith knows. Taking St. Kitts, Nevis, and Anguilla, we would not be surprised if 250 free lepers could be ferretted out. Of Dominica and Montserrat we cannot speak so confidently, but we have interviewed many gentlemen from them, and the sum of our inquiries is that no one knows how many lepers there are in any one of them. It has been no one's business to find out, and therefore no one has given the least attention to the subject."

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**CHAPTER 11: LEPROSY AND THE ABORIGINAL RACES.**

IN 1889, during a visit up the river Essequibo, in British Guiana, the British Commissioner and resident Magistrate, Mr. Michael M'Turk, of Kalacoon, informed me that he had not the slightest doubt that leprosy was disseminated with the vaccine virus. He was intimately acquainted with a healthy family, in which one of the children was affected with leprosy by means of lymph taken from a child afterwards proved to be tainted with leprosy. The unfortunate victim of the state-enforced operation was isolated in a small building at the end of the garden at the parents' house, and ultimately succumbed to the disease. As an explorer, Mr. M'Turk has been much among the Indians, all his servants and boatman belonging to that race, and he had never known or heard of a case of leprosy amongst them. The truth of this statement is confirmed by a communication to me from Mr. Herman Klein, Acting Assistant Medical Officer, H. M. P. 5., Potosi, British Guiana, dated June, 1891—" I have been about eleven years up the Essequibo, river, and have never seen an Indian afflicted with leprosy." I received similar testimony at Bartica Grove from Mr. John Bracey, an Indian trader of twenty-nine years' experience among the Macousi and Wapisiana tribes. Dr. John D. Hillis, F.R.C.S., formerly the Superintendent General of the Leper Asylum, Mahaica, in his work, entitled "Leprosy in British Guiana" (1881), says, p. 148:—"With regard to this country one important fact is the immunity from leprosy enjoyed by the aboriginal tribes of British Guiana." This immunity from the disease is attributed to the circumstance that no Indian will allow himself or his children to be vaccinated. Dr. T. C. Taché, Titulary Professor to the Laval University, writing from Ottawa, Canada, in reply to questions submitted by the Hawaiian Government, June, 1885, says:—"There never was any case of leprosy among the Indians, although one of their principal villages is located in the endemic section, being contiguous to the parish of Nigavrick." Professor T. C. White says that in Tracadie, New Brunswick, more than two lepers were received at the hospital between 1849 and 1882; nearly all the cases were of French descent, and no Indian had fallen a victim.

Dr. J. E. Graham, in a report from the Government of Hawaii as to leprosy in New Brunswick (1886, pp. 114 and 140), observes :—" That the Indians have been the only race, of those inhabiting these localities in any number, which have remained so far exempt from leprosy. . . . The places in which the Indians dwell bear precisely the same character as those inhabited by their neighbours among whom the ailment has exercised its ravages."

Dr. Miguel Valladores, physician to the Lazaretto, Guatemala, says, in his report to the Hawaiian Government, 1886, p. 174, "that it is almost an unheard of thing for an Indian to be afflicted with leprosy."

Drs. Vlagthoes and Mayrinck state that, previous to the discovery of Brazil, leprosy was unknown among the Indians.

Dr. Alzevedo Lima, in a letter on "The Leper Hospital of Rio de Janeiro," dated June 1st, 1891, Rio de Janeiro, says :—" On consulting all the documents and books written by travellers and missionaries in Brazil, we find no mention, either direct or indirect, of any prevalent complaint among the Indians which might be attributed to leprosy. Even nowadays those who live a savage life away from all contact with civilised society are not attacked by this disease, while those who have left their woods for peopled centres, together with their descendants, are, according to observations, occasional victims."— *Journal of the Leprosy Investigation Committee, December,*

*1891, p22.*

In a communication to me, dated Rio de Janeiro, May 20th, 1892, Dr. Lima says :—" Now, about the Indian races, those who live away altogether, without any interference or intercourse with civilisation, their freedom from leprosy can be explained not only by the absence of the Jennerian vaccination, but also by the non-intercourse with people capable of being the conductors of the germs of the disease." I have personally met with races of Indians in South America, amongst whom, though living amongst lepers up to this date, no cases of leprosy have occurred. This immunity is attributed by old residents, one a physician, to the circumstance that they will not allow themselves or their families to be vaccinated.

Dr. J. Z. Currie, secretary of the Provincial Board of Health, Fredericton, New Brunswick, in reply to a communication from me, dated January 2, 1892, as to the vaccination of Indians in New Brunswick, Canada, says :—" There has been no outbreak of small-pox among the Indians for some time. However, in almost all instances they object to vaccination. Four cases of small-pox occurred in this Province during the past year among white people."

The main object of this evidence is to show that in countries where leprosy is endemic, the Indian tribes who reject vaccination escape the plague. In New Brunswick it would appear that they also escaped smallpox, while vaccinated white persons have been attacked with the disease.

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**CHAPTER 12: VACCINAL DISEASES IN SOUTH AFRICA.**

VACCINATION was made compulsory in Cape colony by Act of the Legislature in 1882. Very soon the deleterious effects of the virus were exhibited. The London *Daily News*, March 5, 1884, says that owing to impure lymph there had been many cases of illness from vaccination; but, later on, the natives were vaccinated on an extensive scale. The Public Health Act, No. 4, Cape of Good Hope, dated September 6, 1883, contains the provisions of a vaccination law of a stringent and despotic character. Section 60 states—“No person who has not been vaccinated shall be appointed, or, if appointed prior to the taking effect of this Act, promoted to any office in the public service.” Section 60 provides that “Every child, admitted to any school which shall be maintained or aided by any grant from the public funds, shall be vaccinated by the District Surgeon or by a vaccinator specially appointed, unless such child shall have been previously vaccinated.” The penalty for non-vaccination is £2. The law contains other oppressive clauses, thus incorporating in one act the worst features of the English, American, and Continental vaccination enactments.

All this time, while the vaccine poison was being forced into the blood of the defenceless natives, laying the foundation for the disorders which speedily followed, nothing was said or done to remove the causes which developed the outbreaks of small-pox, the fearfully insanitary condition of the town in which the pestilence abounded, the fruit of long-continued filth and neglect, scarcity of water, foul, unkempt streets, seas of mud in the winter and hurricanes of dust in summer, and, worst of all, a population ignorant of the commonest instincts of decency.

The *Cape Times* reported that Cape Town was buying its experience at a heavy price. Within a short time of the introduction of compulsory vaccination, spreading with accelerated industry this tainted virus distilled from the bodies of a filthy population, we read of the spread of leprosy, and of the alarm created in the Colony among those who had observed its destructive progress. A not uncommon experience is to hear of cases of leprosy in families where there is no taint of the disease, and where the afflicted member has never come into contact with lepers. The late American Consul, Mr. James W. Siler, of Cape Town, in his official report to his Government, No. 79, June, 1887, records a case of this description; and, as vaccination is obligatory, the obvious causation is that the disease has been transferred in the vaccine virus. Mr. Suer says :—“ A case with which I am well acquainted will illustrate its seemingly mysterious power of propagation. In one of the oldest and wealthiest Dutch families in this Colony the mother is a confirmed leper, of the type described as ‘tubercular’ by Dr. Atherstone, before alluded to. The father and a large family of strong, healthy, grown-up sons and daughters show not the slightest taint. I have several times enjoyed the hospitality of this family, and availed myself of the opportunity thus afforded of inquiring into this melancholy case, with the view of a possible solution. I am assured that neither on the side of the father nor mother a case of leprosy had ever occurred in their families, and they are able to trace their genealogy back at least one hundred years.”\*

\*“The *British Medical Journal*, July 5, 1890, under the head of “Reports — Liverpool Workhouse Hospital,” communicated by Dr. Cunningham, Senior Medical Officer, gives particulars, with copy of photograph, of an “interesting case.” C — L —, aged 46, who has a husband and six children, all of whom are healthy, and, until she became affected with leprosy, had never suffered from any disease. “*She has never known or seen anybody with the same or similar disease.*” The italics are mine.

The conclusions of the Select Committee regarding the increase of leprosy in South Africa\* (\*Chap. I.; pp. 68 and 69 of this report.) derive confirmation from the individual reports of missionaries, clergy

travellers, and district surgeons in South Africa, and this increase is specially observable where vaccination has been extensively practised: Referring to the reports of district surgeons, published at the Colonial Office, Cape Town, and presented to both Houses of Parliament, I find the following relating to leprosy and to syphilis, a. disease, according to various authorities, pathologically allied to leprosy:—

The medical officer for *Herbert* (Report, 1885), says:—"During the year, small-pox, syphilis of a particular type, and leprosy, have been the prevailing epidemics. The two last named are still prevailing to an alarming extent." It would appear that vaccination, as usual, was resorted to on account of the smallpox, but the medical officer reports that "the difficulties in carrying out arm—to--arm vaccination seem insurmountable."

*Cala.*—The District Surgeon (Report, 1885), says:—"About two. years since, there were many cases of swollen arms, and some deaths after vaccination," and observes: "There is also the danger of inoculating syphilis."

*Aliwal North* (Report, 1885 ).—"Vaccination has been extensively performed amongst both Europeans and natives." In the following year (Report, 1886), the same officer remarks that "small-pox has raged," of which he has treated about 450 cases, and adds that "syphilis has made vast strides." Two years later (Report, 1888), we read :—" Syphilis is still very prevalent. I have frequently drawn the earnest attention of the Government to the sad havoc this disease is dealing amongst the inhabitants."

While showing the utter failure of the extensive vaccination practised in 1884 to prevent the serious epidemic of small-pox which occurred the following year, these three official reports show how the most loathsome of diseases are disseminated by the vaccinator's lancet. The District Surgeon urges the Government to appoint a Commission of Inquiry.

*Alexandria* (Report, 1887).—" Leprosy is certainly spreading rapidly." In 1890, the District Surgeon reports that the state of leprosy demands urgent attention.

*Port Elizabeth.*—The medical officer says (1887):—"There is a growing aversion to it (vaccination), partly due to an underlying current of belief in the possibility of obnoxious disease being propagated by it." The Report for 1891 states that during the year the presence of leprosy was gone into, and six cases reported to the Government.

*Caledon.*—The District Surgeon reports (1888) that he has vaccinated close upon 800. There are about twelve cases of leprosy in the district, and it appears that syphilis is so increasingly prevalent that an hospital is needed for syphilitic patients.

*Cape-Wynberg.*—(*Reports*, 1887-8). The medical officer says:—"Of the great increase of leprosy there can be no doubt; it is obvious to the casual observer that Europeans as well as natives are afflicted with it. . . . The number of cases vaccinated has been about 100." The following year (1889), the District Surgeon says :—" Leprosy is becoming far more frequent in the neighbourhood" . . and adds :—" The question of leprosy is one of the most serious the Government have to deal with. . . . Vaccination has been thoroughly carried out throughout the district."

*Malmesbury* (Report, 1888).—" Leprosy is slowly but surely gaining ground." This officer reports that he does not think it advisable to vaccinate in the district.

*Cradock* (Report, 1887).—" Fifteen cases of leprosy have occurred, all in an early stage."

*Paarl* (Report, 1887).—" Leprosy is on the increase." Report, 1890.—" Leprosy is spreading."

*Glen Grey* (Report, 1889).—The District Surgeon says:—" I have incidentally about a dozen cases of leprosy, some of these of quite recent origin." . . . "A centrally situated leper hospital is imperatively required."

*Kokstad* (Report, 1886).—" Vaccination during the past year has been in several districts well carried out." Two years later (Report, 1888).—The Medical Officer for this district writes as follows :—" Leprosy is still very much on the increase. There are at least fifty cases in Kokstad itself." . . . "It is deplorable to see these wretched victims dependent on the public charity for a bite, whilst the Government will do nothing for their alleviation."

*Stellenbosch*.—The District Surgeon (Report, 1889) remarks that he has just vaccinated two hundred children. He reports 20 cases of syphilis and six cases of leprosy. In 1890 the same officer returns nine cases of leprosy, and adds "but no doubt there are a few more unknown to me."

*Stockenstrom*.—Referring to leprosy (Report, 1890) "I have seen persons without hands paying their quit rents, holding the money on the stumps of their arms."

*Somerset East* (Report, 1890).—" We have a good few lepers here, as already reported."

One experienced district surgeon told me that he had, again and again, year after year, called the attention of the Board of Health to proofs of this terrible havoc wrought by arm-to-arm vaccination, and had advocated its suppression in the interests of public health. A careful examination of the official documents would show that the facts incriminating vaccination have not been allowed to appear.

When making inquiries regarding etiology and spread of leprosy in South Africa, I was generally referred to the Rev. Canon Baker, of Kalk Bay, Cape Colony, as a high authority on the subject, and one who had probably devoted more attention to it than any other resident in the Colony. Canon Baker had in 1883 given evidence before the Select Committee of the House of Assembly, Cape Town, and presented a statement of his views, which appeared in Appendix A, pp. 1-9. Since then he has continued his investigations and accumulated a considerable body of facts bearing on the subject. Vaccination, he says, is carried out in the Colonies in a most careless and perfunctory manner. He has seen the operator pass his lancet from one arm to another without the smallest attempt to disinfect the instrument or discriminate between the diseased and the healthy, in districts where both leprosy and syphilis are endemic. From other reliable sources I am satisfied that this is the rule rather than the exception. Canon Baker believes that leprosy is chiefly communicated by means of inoculation, and that arm-to-arm vaccination is a prolific cause of the spread of this fearful plague in South Africa.

The Colony of Natal passed Vaccination Law No. 3 in 1882, and Law No. 10 in 1885. Penalties for non-vaccination £5. In a communication from Archdeacon Colley, dated Natal, August 25, 1885, I learn that hundreds of summonses were issued in vain upon the colonists, but the natives were vaccinated by thousands; one operator would get through two hundred a day.

While the vaccination laws for several years have not been enforced against the white population in

Natal, all the natives are vaccinated either under persuasion or threats, the operation being carried out in the usual careless manner, with arm-to-arm virus taken from native children without previous examination, and not the slightest attempt is made to clean or disinfect the lancets after each operation. Hundreds of natives, as I am informed on unimpeachable authority, have died of blood-poisoning and of inoculated diseases.

A member of the Legislative Council, Sir John Bisset, reported in Parliament that many were "blood poisoned, presenting a horrible sight, and dying masses of corruption." In January, 1891, leprosy disseminated in this way was discovered in fifty kraals in one electoral division alone. The natives in their simplicity submit to vaccination, being told that it was the "Incosi" (King) that ordered it, and this was the way the white man secured himself against the plague of small-pox.

As the Government of Natal does not publish reports from the District Surgeons, and appears to be indifferent as to the suffering and mischief caused by the vaccinators, I found it difficult to obtain further details.

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**CHAPTER 13: A VISIT TO THE LAZARETTO, ROBBEN ISLAND, SOUTH AFRICA**

ON the 9th of February, 1892, after obtaining a permit from the Colonial Office, I took passage in the small but stoutly-built little tri-weekly steamer "Tiger," from Dock Basin, Cape Town, for Robben Island. Amongst our fellow-passengers were visitors, merchants, a clergyman, a singing lunatic in the custody of a warder, and officials connected with the island. Our cargo consisted of fruit, poultry, beef, and other stores for a population of about 700 persons. In less than an hour after starting, we cast anchor opposite the island; and, there being no landing-stage or jetty, we found small-boats, managed by convicts clad and numbered in penal costume, awaiting our arrival.

These singular-looking boatmen rowed us near the shore, and then carried the male passengers on their backs and the women in chairs through the surf on to *terra firma*. The convicts on the island, about one hundred in number, are said to be chiefly murderers and diamond stealers. There is a strong current between the island and the mainland. Only one attempt has ever been made by a convict to escape by swimming, and the attempt cost him his life.

The first building I entered for the purpose of making inquiries proved to be the female ward of the lunatic asylum. Here I was referred by the attendant to the office of the medical superintendent for another permit, which was granted. Dr. S. P. Impey has medical charge of the convicts, lunatics, lepers, and attendants, comprising the entire population of the island. I found him busily occupied with one caller after another, examining and signing papers from different departments; and, instead of engaging his attention at the moment, I expressed a hope that, as I was interested in what is popularly known as the leprosy question, he would be able to see me later in the day. He readily agreed to see me for this purpose at two o'clock.

On my way to the leper wards I looked in at the little church, a rather pretty edifice, adorned with scripture mottoes disposed in large letters around the galleries, where the Rev. W. W. Watkins, the successor to the late Mr. Wiltshire, ministers to his singular congregation. I then proceeded to the male leper wards, meeting with convicts and lunatics on my way. The sun was scorchingly hot, but there was a good breeze blowing, and the ozonised air from the ocean was gratefully invigorating. I should think that the island, although only a sandbank of about 1200 acres in extent arid almost devoid of vegetation during the hot season, would be very salubrious if the conditions for health were observed. The water supply is excellent.

The first lazaretto building I entered—one of the old wards devoted to male lepers—was by no means an inviting structure. It was a large shed with low-studded walls containing a double row of beds, upon which the lepers were reclining in every variety of posture. The air was close and noisome with the evil effluvia of decaying living bodies—death in life—supplemented by the odour of influenza, which at this time was raging throughout the island. Of one hundred male lepers, no fewer than eighty, on the day of my visit, were down with this distressing disease. It has been said that a leper hospital, with its handless, footless, ulcerated, feature-swollen, and distorted patients, is as horrible a sight as a field of battle; and to the misery inseparable from a repulsive and incurable disease were now added the effects of a depressing epidemic—a most heart-breaking spectacle surely. Investigation as to the causation of leprosy under such circumstances was not a promising outlook. The majority of the inmates belong to the poorer classes of the native or mixed races, and are unable to speak English. In some cases the destructive disease had invaded the larynx, and they could only converse in a whisper. It was as painful to hear as to look at them. I must add that a new

and much more spacious and suitable hospital, substantially built of stone, has been erected and is now used for the accommodation of fifty patients. Here I found a better state of things. Another building of like character is in course of erection; so it is evident that the authorities, while apathetic as to the causation of leprosy, have begun to realise the importance of doing what they can to render the condition of these helpless patients as tolerable as possible.

I shall make no attempt to describe the state of the sufferers. I have seen more repulsive cases in lazarettos in other countries, and have seen them both under more favourable and under less favourable conditions. I am of opinion that the lepers and lunatics should be removed to separate quarters, and this barren island should be used exclusively for convicts. Leprosy and lunacy are not criminal, though the former is often caused by the criminal conduct of those responsible for vaccination and for insanitary neglect, and the latter by the temptations of the dram shops, where the vilest and most health - destroying liquors are regularly dispensed. The sufferings of these unfortunate people are sufficiently severe without their being compelled to associate and spend their unhappy lives with convicts. Notwithstanding these difficulties, I was able to hold a brief converse with about fourteen of the inmates who were well enough, amidst their complicated maladies, to understand and reply to a few simple questions. One of the three leper cooks of the establishment kindly acted as my conductor, and pointed out to me those who could speak English. Several were at work as shoemakers and tailors, but the rest had no employment—and, I was informed, did not want any—to relieve the terrible monotony of their painful existence. Some of the inmates were suffering acutely, and needed tender nursing and such devotion as the Moravian Brothers and Dominican Sisters bestow upon lepers in other hospitals. Several of the patients make pets of a harmless snake, a variety of python common to the island, which they keep in cages near their beds.

After I had been introduced by my conductor, and had exchanged salutations with a few words of inquiry, my interrogatories were as follows :—Where were you born? How long have you been a leper? When did you come to Robben Island? Have you had the smallpox? Have you been vaccinated? How long after vaccination did the leprosy appear?

The cook, Christian Choutsee, a native of Cape Town, said he had been a leper four years, and the leprosy broke out "two years after the doctor stuck me in the arms." The answers to the last question were "two years," "three years," "a few years," "two or three years," "after the second vaccination." "Was vaccinated in 1879; leprosy appeared in 1883." "Vaccinated three times, last vaccination during small-pox epidemic in 1878; leprosy attacked me in 1887." "Vaccinated twice, first when twenty years of age. Leprosy appeared between first and second vaccination." "Vaccinated during small-pox epidemic of 1878. Leprosy broke out on me about a year after." "Vaccinated when a boy of between eight and nine years of age; have been a leper fourteen years; present age, twenty-six."

After going through the several male wards, I took an opportunity of making calls upon several persons, including the clergyman, the superintendent of the male wards, and other officials. No one seemed to doubt that leprosy was spread by vaccination. The superintendent of the dispensary, who requested me not to publish his name, gave me particulars of the case of Augustus Lewis, of Cape Colony, who died of leprosy at Robben Island, the disease having been induced by vaccination. I had now been pursuing my inquiries several hours, and as the female leper ward was about a mile distant, and approached only by a rough, stony track, I was obliged, in order to keep my appointment with Dr. Impey, to forego my intended inspection of this department.

Dr. Impey is deeply interested in the pathological side of the leprosy question, and his position as superintendent of the largest leper institution in Africa affords him ample opportunity of pursuing his investigations. He has practised twelve years in South Africa as a District surgeon and Physician, and apart from his clinical experience gained through observations, and the medical care of the population of the island, he has found time to study the literature of the subject. He regards Dr. John D. Hillis's "Leprosy in British Guiana" as the most valuable and important work he has read. I called his attention to the cases of invaccinated leprosy cited by Dr. Hillis in the volume referred to, and he expressed no surprise at this, having come to a similar conclusion through his own personal researches in different parts of the Colony. Dr. Impey informed me that after careful investigation he had clearly traced to vaccination four out of twenty-eight cases of leprosy, which he had examined in the female ward. One of these still shows leprosy discolourations at the point of vaccine inoculation, the disease having exhibited itself two years after vaccination. Dr. Impey will continue his investigations as to the causation of leprosy amongst the remainder of the patients; a procedure, let me observe, almost unknown at similar institutions. It is needless to say that the report of these investigations will be awaited with much interest. Although a believer in the protective value of vaccination as a mitigator of small-pox, Dr. Impey has met with so many cases of invaccinated syphilis and leprosy that he has felt it his duty in his reports, extending over a period of eleven years, to point out the mischief already perpetrated by this mistaken procedure; and he has called upon the Government to legislate for the immediate and total suppression of arm-to-arm vaccination. Dr. Impey considers that leprosy is contagious by actual inoculation, cases of which had occurred at Robben Island, and that to a certain limited extent it is hereditary.

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**CHAPTER 14: THE SEGREGATION OF LEPERS.**

So far, I have said nothing concerning the growing demand for compulsory segregation of lepers. It is admitted on all sides that the forcible deportation and confinement of well-to-do lepers would be impracticable, and already there are too many laws which are cruel and oppressive to the poor, but which, by the wealthy, are easily evaded. So far as the well-to-do are concerned, the law of enforcing segregation of lepers at Molokai, as I have already shown, is an admitted failure, and the act of separation of the poor from their friends is the most heart-rending and painful experience which, in a tolerably long life, I have ever witnessed.

In the "Report on Leprosy by the Royal College of Physicians, 1862," I find the following:—"The Committee, having carefully considered the replies already received, are of the opinion that the weight and value of the evidence they furnish is very greatly in favour of the non-contagiousness of leprosy. The Committee can only repeat the statement made in their former report to the College, that the replies already received contained no evidence which, in their opinion, justified any measure for the compulsory segregation of lepers." Acting on this opinion, the Duke of Newcastle issued a circular to the Governors of the Colonies, stating "that any laws affecting the personal liberty of lepers ought to be repealed, and any action of the Executive Government in enforcement of them, which is merely authorised and not enjoined by the law, ought to cease."

Dr. George L. Fitch, formerly Medical Superintendent, Leper Settlement, Molokai, Hawaii, says :—"Segregation began in 1866 in Hawaii, and since that time has been followed out with a really brutal severity. At no time since the inauguration of the system has the proportion of cases segregated fallen as low as one-half, so far as I could find out, and I had the fullest opportunity to know of any one. The white population there are terribly in earnest, and, as they control the policy of the country, they have exercised every ingenuity in this matter, so that it may be considered certain that an average of two-thirds, at least, have been for the entire period under a restraint much more pronounced than is the case in Norway. Yet there is not the slightest evidence that the disease has decreased; at least, I know of no such evidence. From all I hear from there, the proportion of lepers continues as great, if not greater, than it has been for years. That the disease does not manifest as severe symptoms as formerly is certain, but I know of no reason to believe that the percentage of those afflicted has lessened at all. On the contrary, both the total number, and the proportionate number of cases, would seem to have steadily increased. . . . Of late years, so bitter a feeling has grown up among them in opposition to segregation, that in quite a number of instances the lepers and their friends have risen in arms to resist the officers sent to apprehend them. . . . Bring these three facts together. In India, up to 1815, lepers were buried alive to get rid of them; and still the disease persists. In Norway the disease is disappearing without segregation, for putting two cases out of five into hospitals, where they are allowed to carry on their handicrafts, and selling the products to those outside, cannot be called segregation. In Hawaii, where as thorough segregation as the Government, aided by public opinion, can enforce, is carried out, the disease steadily increases." — *New York Medical Record, September 10, 1892. Art., "Etiology of Leprosy," p. 301.*

Dr. George Thin, in his recent work on "Leprosy," though an advocate for the seclusion of lepers, shows himself alive to the difficulties of compulsion. In pp. 257-8 he says :—"A law enforcing the compulsory isolation of lepers can only be effective in any country where leprosy is common, if it is strongly supported by public opinion. Those who have little practical experience of lepers and leprosy must not forget that for a considerable time, and often for years, the stricken member of a

family suffers comparatively little, requires little attention, is not specially repulsive in appearance, is as full of love for his parents and brothers and sisters, and in return is as much loved by them, as if he were not afflicted by the disease. To realise what compulsory isolation in an asylum of all the lepers in a country would mean, when such cases are considered, it is only necessary to apply in imagination the same law to consumptives when their disease runs a slow insidious course. What would the consequences be in England if a law were passed that every husband, or wife, or child, who developed a slight cough, attended with weakness, and in whom slight physical changes were detected in the apex of one lung, should, on the strength of what his probable fate would be several years afterwards, be immediately and forcibly conveyed from his family with no, or scarcely any, hope of ever again rejoining them? Imagine the evasion, concealment, and subterfuge that would be practised, and the difficulty, if not impossibility, of passing a law which would be effective! As a matter of fact, already, and with no compulsory isolation, in all but the very poor, leprosy is in most countries concealed as long as it is possible."

A medical practitioner who has resided several years at Honolulu and Molokai informed me that he personally knew of a number of well-to-do lepers, some occupying prominent positions, including several Europeans, who from political and other influences with officials of the Government were allowed to be at large, and it was not intended to disturb them. Nor is it considered possible to amend this partial method of dealing with the difficulty, especially as the natives do not believe in contagion. At the Leper Asylum in Ceylon, as also in the West Indies, I found that only the poor were segregated in the lazarettos, and in every country I have visited, the compulsory segregation of *all* lepers is considered impracticable. Moreover, the experience in Hawaii has been the reverse of encouraging. Mr. R. W. Meyer, agent of the Board of Health at the Leper Settlement, Molokai, in his report dated April, 1886, observes that segregation has now been practised for twenty years, and the result is that there are as many lepers as ever; more than at the commencement.

In an article in *The Lancet*, August 26, 1882, p. 318, commenting on a report on leprosy in Hawaii, and referring to the segregation of lepers, the writer says: "Nothing can, we think, call for action such as is described in certain parts of the report, and which has also called forth a protest by the Assistant Attorney-General of the kingdom. This gentleman describes how people supposed to have leprosy have been taken summarily from their houses by the police authorities, and have, without a moment's preparation, been ordered into boats, and conveyed across to one of the island settlements, where, as he says, they, are practically doomed to death."

That compulsory segregation cannot be carried out save by setting aside every humane feeling is admitted by those who are familiar with its operation. Thus, in his official report to the Board of Health, Honolulu, Mr. R. W. Meyer observes: "After the most careful consideration, I find that this is a question which involves a great principle, and which duty to oneself and his fellow-men alone should decide; a question which demands the absolute setting aside of every influence resulting from a feeling of sympathy with the unfortunate sufferers."

In the "Report of the Select Committee on the Spread of Leprosy in South Africa" I find the following:--

Q. 52. "Do you believe there will be much difficulty in compulsorily removing these people?"—"Yes, there will be great difficulty They will do what they can to conceal cases. They will steadily deny that any one in the house is affected by the disease I have found the most undoubted

and notorious cases denied. They have a great aversion to remove. Most of them are married, and, in addition to the natural repugnance at parting from their wives, their sexual passions are particularly strong—in fact, they become, both mentally and physically, a lower type."— *Witness*, Dr. H. C. Wright, June 27th, 1889, District Surgeon at Wynberg.

Q. 92. "Take the case of a respectable man, educated and intelligent, would you separate him from his wife and family and remove him from his home?"—" I am afraid there is no help for it."— *Witness*, Dr. Simons, District Surgeon of Malmesbury, July 4th, 1889.

Q. 192. "I think that husband and wife should be separated, and that is a hard case, but necessary."— *Witness*, Dr. Beck, of Roudebosch, July 4th, 1889.

### LEPROSY REPRESSION ACT.

Under this heading, the *Cape Times* of April 22, 1892, gives the following :—

#### ACT OF 1884 TO BE ENFORCED.

The Government have decided to promulgate the Leprosy Repression Act of 1884, and as at present decided the enforcement of the provisions of the Act will take place during the ensuing month. This action has doubtless been suggested by the disclosures of the census of a year ago, when the number of lepers in the Colony and the Transkei was shown to be 625—at least double the number casually reported from the various districts of the Colony. Since the taking of the census the number of known lepers has been increased to 664, and the promulgation of the Act will therefore necessitate the immediate provision of accommodation for the large number of sufferers who are still at large. The following will show the distribution of lepers in and out of hospital at the date of the census, in April, 1891 :—

#### IN HOSPITAL.

The Colony proper, as constituted in 1875: European or white, 21 —14 males and 7 females; other than European, 97 ;—77 males and 20 females.

#### OUT OF HOSPITAL.

The Colony, as constituted in 1875: Europeans, 30 ;—15 males and 15 females; other than Europeans, 256 ;—130 males and 126 females. Province of Griqualand West: Europeans, nil; other than Europeans, 17 ;—males, 12; females, 5. Transkeian Territories: Europeans, nil; other than Europeans, 204 ;—118 males and 86 females.

#### ROBBEN ISLAND.

A special report upon the lepers and accommodation for such upon Robben Island shows that, excluding the 54 coloured sufferers recently received from the Orange Free State, the number now on the Island is 162, of whom 16 are Europeans and 146 coloured persons. There are therefore over 500 lepers in the Colony, Griqualand West, and the Transkei still to be provided for. It is interesting in this connection to note that during the past year no fewer than 139 persons have voluntarily sought refuge within the leper wards of Robben Island Hospital. Of these 85 were males, 6 being European and 79 coloured persons. The European females admitted number 3 and the coloured females 51. During the same period 1 coloured male and 1 coloured female have been discharged from the island, whilst there have been 29 deaths, viz. Five European males and 16 coloured males, and 8 females, 1 white and 7 coloured. In view of the demand for accommodation, which will arise upon the promulgation of the Leprosy Repression Act, the wards at Robben Island are being largely extended, and we are informed that by the end of May the leper hospital will be completed and provision made for all the lepers known to exist in the Colony and the Province of Griqualand West. The Transkeian lepers, all of whom are coloured, will be centred at Engoobo, where a large asylum is now in course of construction.

The Leprosy Repression Act has since been promulgated in Cape Colony, and a systematic hunt for lepers has been carried on with the usual distressing concomitants—separation of parents from

children, husbands from wives, friend from friend. A considerable number of lepers are in close concealment, carefully hidden by their friends. The well - to - do lepers have not been molested.

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## CHAPTER 15: SELF-DEVOTION TO LEPERS

HEROISM and self-sacrifice in the interest of humanity, like that displayed by the brave Father Damien, are, happily for the human race, by no means of unusual occurrence, as is shown by the devotion of the Dominican Sisters at the Leper Hospital, Port of Spain, Trinidad; that of the Franciscan Sisters, from Syracuse, United States, at Molokai, Hawaii; and the Sisters from Montreal, who tend the lepers at Tracadie, New Brunswick.

Dr. M'Laren, Nova Scotia, in a paper on "Leprosy in New Brunswick," read before the Medical Society of that Province, says:—" In 1868 a community of nuns from the Hotel Dieu, Montreal, most unselfishly took charge of the nursing of the sick, and the work is done faithfully and cheerfully under the Sister-Superior Mother, Saint Jean, and the lepers are much better attended to 'than formerly. The patients have plenty of freedom with grounds of eleven acres to garden, fish, etc." —*Maritime Medical News, Halifax, Nova Scotia, July, 1890.*

Of another hero, the *St. James's Gazette*, London, September 30, 1891, says :—" The last mail from Japan brings news of the death of Father Testevuide, a Japanese Father Damien. He was a member of one of the French congregations, and was sent to work in the Japan mission field. In 1886, during his labours in the interior, he came across a case of leprosy, which so aroused his feelings that he determined to give himself up to the task of ameliorating the condition of Japanese lepers. A woman of about thirty years of age, having developed leprosy, was abandoned by her husband, and, as the disease advanced rapidly, she was placed in solitude in a loft over a rice mill. In course of time the ravages of the disease rapidly increased, and she lost her sight. In this condition she was found by Father Testevuide, who was working in the district. He visited her constantly and by reading and conversation sought to alleviate her misery; but he soon came to the conclusion that in her then condition she could receive but little relief unless she were placed in a hospital. There was no leper hospital in Japan, and the ordinary hospitals were naturally, for the most part, closed to such cases. From that time he devoted all his energies to the establishment and organisation of a leper hospital. Having succeeded in awakening public sympathy in the country, he collected sufficient money to build on the lower slopes of Mount Fujii a hospital which has for some years past been in full working order. His example was followed by some native philanthropists, and there are now three leper hospitals in the country. Father Testevuide's labours had undermined his health, which a visit to Hong Kong failed to restore, and he died there on the 3rd of August"

The Moravian Brothers have been sending missionaries of both sexes to live with and work among the lepers in the West Indies, in South Africa, and in Syria, devoting themselves sedulously but unostentatiously to this noble service during the past half-century. They were the pioneers in the effort to ameliorate the condition of these unfortunate sufferers. The Moravians have a leper asylum in Jerusalem, founded, managed, and largely supported by themselves.

The *Yorkshire Post* (Leeds), January 7, 1892, briefly refers to the death of an Anglo-Indian Father Damien reported from India. The victim was the Rev. W. D. Dalrymple, a Presbyterian missionary, who, having gone on a mission to lepers, contracted the disease some two years ago, and died last month at Rampur Beaulah, Bengal. Although his sufferings were indescribably great, he is said to have borne them with fortitude and resignation, and never once turned from the task he had set himself. Truly the age of martyrs is not past.

In the description of a visit to the Leper Hospital at Maracaibo, Venezuela, Consul Plumacher, of

the American Legation, in a recent report to his Government, says :—"It was truly a sad sight to see deformed, mutilated trunks, with scarcely vestiges of extremities, seated before the camera; and there was something pathetic in the almost universal request to be supplied with pictures of themselves, which could only be constant reminders of their hopeless afflictions. In addition to the individual photographs, various large groups were taken, with an effect both sad and grotesque. There is one bright spot, however, in the dark picture of misery; this being the devotion and self-abnegation displayed by the near relatives of many of the sufferers, who, although enjoying themselves the blessings of health and strength, cheerfully submit to perpetual imprisonment, in order to minister to the wants of their husbands, mothers, and other relatives, thus alleviating their woes by their companionship and care. Many examples of this are seen to-day on the lazaretto island, and it speaks well for human affection that, even when the loved one has become a loathsome mass, conjugal ties and the claims of blood rise superior to the fear of contagion and the repulsive surroundings."

Miss Kate Marsden's labours among the Maories in New Zealand, and her extraordinary journeys through Russia, and among the wild tribes in remote parts of Siberia, with a view of learning the condition of the outcast lepers in districts where the disease is prevalent, are well known through the reports in the *Times* and *Pall Mall Gazette*, which have been extensively copied in English and colonial journals. Miss Marsden's object is to learn by personal observation the condition of the lepers; to discover, if possible, methods of mitigating their sufferings, and to collect funds for the establishment of leper hospitals. Some time ago, Miss Marsden consulted M. Pasteur to see whether inoculation as a cure of the disease might not be resorted to. M. Pasteur held out no hopes of amelioration in that direction, nor did he suggest any other. It does not appear that Miss Marsden has made any inquiries regarding the effect of vaccine inoculation in disseminating the scourge, although, in districts like Dorpat in the Baltic provinces, the lepers are reported to be rapidly increasing, and already form as large a portion of the population as 17 per thousand. The growth of the disease has been co-incident with the development of the Jennerian practice. Miss Marsden's knowledge of the Russian language, and her earnest desire to get at the root of the evil, would enable her to break through official apathy, so obstructive of truthful research, should she be induced to undertake such a mission. It is surely as laudable to arrest one admitted source of the mischief as to prosecute an almost hopeless search for remedies.

Another lady, Mrs. Alice Hayes, has also done much to direct public attention to the neglected condition of the lepers in India, particularly the Europeans and Eurasians of Calcutta, who hide themselves and their sufferings from the public in the large cities, and refuse to consort with native inmates of existing institutions.

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**CHAPTER 16: THE LEPROSY INVESTIGATION COMMITTEE.**

By reason of the reports of the serious increase of leprosy in various countries, and the public interest excited by the self-sacrificing labours and death of Father Damien, an influential committee was convened for the purpose of investigating the causes of this recrudescence.

The first meeting was held on the 17th June, 1889, at Marlborough House, under the presidency of the Prince of Wales. On the 13th January, 1890, a subscription dinner was held at the Hotel Metropole, London, at which more than a hundred persons interested in the project sat down, and subscriptions amounting to over £2500 were announced.

This fund ultimately reached about £7000. The following resolutions were adopted at a meeting of the General Committee held at Marlborough House on the 30th June, 1889:—

- (1) That a sum of £500 be appropriated to a memorial to be erected to Father Damien in some public place in the Hawaiian Islands.
- (2) (a) That a fund be formed, the interest of which shall be devoted to the medical treatment and care of indigent British lepers in the United Kingdom. (b) And that a sum of money be set apart and placed under the control of trustees for the endowment of two student-ships, one student to make the United Kingdom and the remainder of Europe his field of investigation, and the other to go abroad and study the disease in China, the Colonies, and elsewhere. The studentships to be held for a period of three years, to be renewed by the trustees if thought desirable.
- (3) That a Commission be appointed, for not less than one year, consisting of three members, one to be named by the Royal College of Physicians, one by the Royal College of Surgeons, and one by the General Committee of the National Leprosy Fund, to go out to India for the purpose of investigating the disease of leprosy there, and that the Indian Auxiliary Committee be requested to add two members to this Commission.

The following Commissioners were appointed :— *Nominated by the Royal College of Physicians*—

BEAVEN NEAVE RAKE, Esq., M.D. (London), M.R.C.S. (England), L.R.C.P. (London), Government Medical Officer and Medical Superintendent of the Trinidad Leper Asylum.

*Nominated by the Executive Committee of the National Leprosy Fund*— GEORGE ALFRED BUCKMASTER, Esq., M.A., B.Ch., M.D. (Oxford), D.P.H. (Diploma of Public Health, Oxford), M.R.C.S., L.R.C.P. (London), formerly Radcliffe Fellow Magdalen College, Oxford, Lecturer on Physiology, St. George's Hospital, London.

*Nominated by the Royal College of Surgeons*— ALFRED ANTUNES KANTHACK, Esq., B.A., B.Sc., M.B., B. S. (London), F. R. C. S. (England), and L. R. C. P. (London), late Clinical Assistant Royal Ophthalmic Hospital, London, and Midwifery Assistant, St. Bartholomew's Hospital, London.

*Appointed by the Viceroy of India*—

(The late) Surgeon-Major BARCLAY, Secretary to the Surgeon-General to the Government of India. Surgeon-Major S. J. THOMSON, Deputy Sanitary Commissioner of the Second Circle in the North - West Provinces and Oudh.

The following order appeared in the *Indian Government Gazette* of the 21st November, 1890:—  
EXTRACT from the Proceedings of the Government of India in the Home Department (Medical), under date, Calcutta, the 21st November, 1890.

## RESOLUTION.

The Executive Committee of the National Leprosy Fund having determined to appoint a Commission for the purpose of investigating the disease of leprosy in India, it is notified for general information that Dr. Beaven Rake, Mr. Kanthack, and Dr. Buckmaster (their full titles and qualifications are set out in the resolution) have been appointed

Commissioners. These gentlemen have now arrived at Bombay, and have been joined there by Surgeon-Major A. Barclay, M.D., Secretary to the Surgeon-General with the Government of India, and Surgeon-Major S.J. Thompson, Deputy Sanitary Commissioner, North-Western Provinces and Oudh, who have been appointed by the Government of India to co-operate with them. The Governor-General in Council will feel obliged if public bodies and individuals desirous of producing evidence before the Commissioners will address the Local Government of the Province to which they may belong, in order that arrangements may be made for the presentation of such evidence before the Commissioners. Each Local Government has already been requested to depute an officer to assist the Commission in collecting and arranging the evidence that may be procurable in the territories under its control, and instructions should be given to all the civil and medical officers to give to the Commissioners any aid which they may ask for in the course of their inquiries. The Government of India will, on learning from the Commissioners the programme which they intend to follow, notify it for public information.

#### ORDER

Ordered, that a copy of this resolution be forwarded to Local-Governments and Administrations, in continuation of the communication from this office, No. 11 Medical, 596-605, dated 15th September, 1890, to the Surgeon-General with the Government of India, and to the Members of the Leprosy Commission for information. It will be convenient if the Commissioners will address the Surgeon-General with the Government of India on any point on which they may desire to receive further assistance or information.

Also, that the resolution be published in the supplement to the "Gazette of India." (True Extract). (Signed) C. J. YALL, *Officiating Secretary to the Government of India.*

The Leprosy Commissioners, who left England for India on the 23rd October, 1890, completed their inquiries in the autumn of 1891, and prepared their report; but its publication has been delayed, ostensibly on the ground that the Committee of the National Leprosy Fund were waiting the issue of the Indian census returns as regards leprosy. It appears, however, from the facts disclosed in the following circular, issued in June, 1892, that several of the most important conclusions arrived at by the Commission are strongly objected to.

#### NATIONAL LEPROSY FUND.

##### *Memorandum on the Report of the Leprosy Commissioners.*

Your Committee, having been instructed to consider and report to you upon the publication of the Report of the Leprosy Commissioners in India, in 1890-91, beg to submit the following considerations :—

- I. They desire to place on record their sense of the ability with which the Commissioners conducted their investigations while in India, and of the comprehensive and valuable nature of their Report.
- II. The conclusions at which the Commissioners arrived have been summarised by them at the end of their report as follows—the evidence upon which these conclusions rest being displayed at length in the earlier pages of the Report :—

(1) "Leprosy is a disease *sui generis*; it is not a form of syphilis or tuberculosis, but has striking aetiological analogies with the latter."

(2) "Leprosy is not diffused by hereditary transmission ; and for this reason, and the established amount of sterility among lepers, the disease has a natural tendency to die out."

(3) "Though, in a scientific classification of diseases, leprosy must be regarded as contagious, and also inoculable, yet the extent to which it is propagated by these means is exceedingly small."

(4) Leprosy is not directly originated by the use of any particular article of food, nor by any climatic or telluric conditions, nor by insanitary surroundings; neither does it-peculiarly affect any race or caste."

(5) "Leprosy is indirectly influenced by insanitary surroundings, such as poverty, bad food, or deficient drainage or ventilation; for these, by causing a predisposition, increase the susceptibility of the individual to the disease."

(6) "Leprosy, in the great majority of cases, originates *de novo*, that is, from a sequence or concurrence of causes and conditions, dealt with in the report, and which are related to each other in ways at present imperfectly known."

III. Thirdly, the Commissioners having been instructed to report upon the practical measures to be taken for the control or restriction of the disease in India, have suggested the regulation of lepers and leprosy by means of bye-laws framed by the various municipalities, which point they write as follows :—

(a) "The Commission are of opinion that the sale of articles of food and drink by lepers should be prohibited, and that they should be prevented from practising prostitution, and from following such occupations as those of barber and washerman, which concern the food, drink, and clothing of the people generally, quite apart from the dread a possible infection."

(b) "The Commission consider that the best policy in dealing with the concentration of lepers in towns and cities is to discourage it, and to this end would suggest that municipal authorities be empowered to pass bye-laws preventing vagrants suffering from leprosy from begging on or frequenting places of public resort, or using public conveyances."

(c) "The large presidency towns and the capitals of provinces in many cases already possess leper asylums, which might be enlarged by municipal funds or private subscriptions. Asylums should be built near towns where they do not already exist, and the authorities should have of ordering lepers infringing the regulations either return to their homes or to enter an asylum."

(d) "Competent medical authority should always be consulted before action is taken under such bye-laws."

IV. Upon the afore-mentioned conclusions of Commissioners, numbered 1, 2, 3, 4, 5, and 6, your Committee offer the following remarks :—

They desire to express their disagreement with the concluding words of No. 3—

"That the extent to which leprosy is propagated by contagion and inoculation is exceedingly small"—  
not being satisfied with the evidence offered by the Commissioners for this opinion.

They cannot concur in the views expressed in No. 6,— namely, that

\* "Leprosy, in the majority of cases, originates *de novo*, that is, from a sequence or concurrence of causes and conditions, dealt with in the report, and which are related to each other in ways at present imperfectly known,"

[\\* See page 304](#)

being of opinion that the evidence adduced does not justify such conclusions.

V. The Commissioners, in the section of their Report entitled "Practical Suggestions," pp. 45 2-7, as also in other parts of the Report, have expressed opinions strongly adverse to compulsory segregation, either complete or partial. For instance, they say on p. 258—

"No legislation is called for on the lines either of segregation or of interdiction of marriages with lepers."

And on p. 453— "For India, complete compulsory segregation of lepers may be considered to be absolutely impracticable. Neither do the conclusions given before as to the nature of the disease

justify any recommendation for absolute segregation."

And on p. 454— "It is impossible, for the same reasons, to advise compulsory partial isolation. Voluntary isolation is therefore the only measure left for consideration."

And on p. 456—

"In no case would the Commissioners suggest an Imperial Act especially directed against lepers as such."

And again on p. 456—

\*\* "In conclusion, the Commissioners believe, from the considerations and arguments adduced in the foregoing report, neither compulsory nor voluntary segregation would at pro effectually stamp out the disease, or even markedly diminish leper population, under the existing conditions of life in India."

[\\* \\*see page 304](#)

Your Committee, having already expressed inability to accept the reasoning upon which Commissioners have based the above conclusions, equally unable to accept the corollary that in any case of leprosy in India is either impracticable or undesirable. They entertain a precisely opposite opinion, and would be sorry if the Government of India encouraged by the report of the Commissioners to from taking the necessary steps in the direction of such segregation of lepers as may be found possible. opinions upon segregation are in accord with expressed in the following extract from a by Dr. Vandyke Carter :—

#### MODES OF SEGREGATION.

I. "By erecting plain asylums at certain centres, each of which would be a refuge common to several districts, and a place detention, tinder due management and supervision."

II. "By founding leper colonies, or village communities of the affected, who, while allowed more liberty of movement, should yet be prevented from mingling with the peasantry around: hence still the need of strict supervision. Many spots would serve—such as deserted forts, decayed villages, and places waste, yet not far from other sources of supply, or not without resources easily resuscitated."

III. "By requiring the strict isolation of leprous subjects retained in their homes at express wish of friends. Suitable separate lodgment would be indispensable; unsuitable shelter is even now sometimes supplied. Joining of such home-isolation with more public measures should not be overlooked, for to it experience in Norway seems to point as a means essential to complete success within a moderate period of time; and in India it would have to be still more largely resorted to."

IV. "For carrying out the above, in addition to funds, legislative authority is needed to take up the vagrant sick, to remove the sorely diseased who is insufficiently guarded at home, and at times to enforce continued isolation of the infected until medical sanction of liberty be granted."

VI. Reserving their opinions as expressed in the foregoing paragraph and extract, your Committee give a general approval to the minor recommendations of the Commissioners, numbered above as (a) (b) (c) (d), for the regulation of lepers and leprosy in India, which they consider might with advantage be carried out; though they do not concur in the opinion that municipalities will be necessarily or universally the best means of effecting that object.

*Nominated by the Executive Committee of the National Leprosy Fund—*  
GEORGE N. CUEZON (Under-Secretary for India), *Chairman.*  
EDWARD CLIFFORD.

*Nominated by the Royal College of Physicians—*

DYCE DUCKWORTH, M.D., LL.D.

G. A. HERON, M.D., F.R.C.P.

*Nominated by the Royal College of Surgeons—*

JONATHAN HUTCHINSON, LL.D., F.R.S. (*With the exceptions noted below.*)

N.C. MACNAMARA, F.R.C.S.

\* Upon this paragraph Mr. Hutchinson appends a dissentient opinion, as follows :—

"I understand the Commissioners to mean by the expression '*de novo*' in reference to the origin of leprosy, that they believe that the disease may begin independently of personal contagion and in connection with climatic and dietetic causes. In that belief I entirely share. I also agree in the main with the rest of the statements in the Commissioners' Report to which exception has been taken in our Committee. I feel convinced that if leprosy be contagious at all, it depends but to an almost infinitesimal extent upon contagion for its spread." JONATHAN HUTCHINSON, LL.D., F.R.S.

\*\* Upon this paragraph of the Report, Sir Dyce Duckworth and Mr. Hutchinson append independent or dissentient opinions, as follows :—

"I am in agreement generally with the recommendations of the Commission respecting *voluntary isolation*, and the issue of *Municipal Bye-Laws* regulating the habits of lepers. I know of no trustworthy evidence to prove that a leper in any community is a source of greater danger than is a consumptive patient, and I know that a person suffering from syphilis is a real and very positive source of danger anywhere. It would therefore be absurd on the face of it to adopt stringent laws for the leper and to let the syphilitic person go free.

"The intelligent layman now imagines that because bacilli are an essential feature of leprosy, therefore the disease *must* be readily contagious. This is simply quite contrary to fact. The same thing holds good exactly for consumption.

"I think a well-empowered and vigorously-supported Government Medical Executive Officer should be appointed in every large town, and in certain districts, to supervise the leprous populations and report regularly upon them. It should be his business to see that the local regulations are fully carried out, and on his requisition only should any action be taken when necessary.

"Suitable asylums should be provided, and those now existing be sufficiently enlarged to meet the needs that will arise under suitable bye-laws.

"The project of leper-farms is, I think, a good one. More than this is, I believe, not within any practical scheme for amending the condition of lepers, and for diminishing the spread of the malady." DYCE DUCKWORTH, M.D., LL.D.

"I am strongly in favour of the maintenance (by Government or otherwise) of voluntary homes for lepers, but do not believe that segregation would effect anything in diminishing the prevalence of the disease. Compulsory segregation would I think involve injustice and entail much social misery. I believe that our Commissioners Report well expresses not alone the opinions of those who have signed it, but, in a general way, those of the educated classes of the present day throughout India." JONATHAN HUTCHINSON, LL.D., F.R.S.

#### ADDITIONAL REPORT.

"Your Committee having also been instructed to report upon the disposal of the balance of £800 still remaining to the account of the Executive Committee, recommend that a sum of £250 should be set apart for the prosecution of further investigations and the continued half-yearly publication of the journal for a period of five years, or until such time as this sum is exhausted; and that the remaining £550 should be devoted to the encouragement of local research in countries where there is reasonable evidence for believing that leprosy has recently originated, or where it exists under very exceptional circumstances—with the view of tracing the disease to its alleged origin."

It may be observed that for the Commissioners to have allowed that leprosy is easily inoculable (as is shown in this volume upon the evidence of accepted authorities in all parts of the world) would

have been equivalent to the admission of the danger in all leprosy countries of the invaccination of leprosy. Such an avowal would have been inconsistent with the course adopted by the Commissioners and by the Committee of the National Leprosy Fund during the whole of this important inquiry, both of whom have practically ignored the evidence bearing upon the subject. When visiting Calcutta, for example, nothing would have been easier than for the Commissioners to have investigated the cases circumstantially reported by Dr. Roger S. Chew, which will be found in another chapter of this book. Having ignored these cases, one of the Commissioners, Dr. Beaven Rake, immediately on his return from India, gave evidence before the Royal Commission on Vaccination to show that leprosy was not communicable by vaccination, or, if so, only to so slight a degree that the danger might be disregarded. How far Dr. Rake's testimony has stood the test of cross-examination will be gathered by reference to the evidence in the Blue Book which had not been issued at the time of this writing.

On the subject of inoculation, the Commissioners conclude :—" The extent to which leprosy is propagated by contagion and inoculation is exceedingly small." It is a pity that the Commission should have bundled these two dissimilar sources of alleged causation together, as they cannot consistently be so treated. Nor have they defined the word "contagion," which many authorities, as I have shown, habitually use to cover inoculation. The dissemination of leprosy by *contagion*, using the word in its proper sense—i.e., by simple contact—has been disproved by eminent authorities, including superintendents of leper asylums of wide experience in all countries, as will be seen by reference to the chapter in this book entitled "Is Leprosy Contagious?" On the other hand it is conclusively established by a similar weight of evidence that leprosy is inoculable, and like other transmissible diseases can be propagated through a cut, sore, wound, or abraded surface, or be inoculated by flies and mosquitos, or spread by vaccination. Another point in which the Committee dissent from the views of the Commissioners is that of compulsory segregation or compulsory isolation, which they consider uncalled for by the evidence collected during their tours of investigation, or by the nature of the disease, and are of opinion that it would be impossible to stamp out the disease by either voluntary or compulsory segregation. The Committee of the National Leprosy Fund do not accept either the reasoning or conclusions upon which these recommendations of the Commissioners are founded. On the contrary, they are of the opinion that the segregation of lepers should be encouraged as far as possible in the interest both of the lepers and of the public. The Committee conclude by declaring that they can give only "a general 'approval to the minor recommendations of the Commissioners" on this point. Both the Committee and the Commissioners accept the important fact that leprosy is not diffused by hereditary transmission.

Setting aside the alleged leading causes of leprosy, such as heredity, contagion, and inoculation, as contributing little or nothing to the spread of this disease, the Commissioners resort to a theory which, up to the present time, has received but little countenance from the medical profession, that "leprosy in the great majority of cases originates *de novo*, that is from a sequence or concurrence of causes and conditions, dealt with in the Report." The present writer considers it highly probable that leprosy as well as other diseases may in numerous instances be accounted for in this way, but it must be observed that the factors, which are various forms of insanitation, have been in operation time out of mind, and do not in any way account for the remarkable recrudescence of the disease shown in this volume. On the contrary the danger from malaria, overcrowding, impure water, unwholesome food, filthy deposits, has, under the instructive teachings of the late Dr. Southwood

Smith, Sir Edwin Chadwick, and their followers, been gradually and sensibly diminishing, and it is triumphantly claimed that various diseases due to these causes have been decreasing also. It is obvious, therefore, that some other factor or factors, peculiar to this century and previously unknown, are at work. This factor, as high authorities now reluctantly avow, has been omitted by the Commission from the list of causations in their summary of conclusions—the latest and most daring official effort, to use a classic phrase, "to preserve vaccination from reproach."

Amidst this divergence of opinion between the conclusions of the Leprosy Commissioners and those of the Committee, the public will want to know what useful object has been realised by the large expenditure of time and money in promoting this lengthened inquiry. Will the authorities accept the conclusions of the Leprosy Commission, when they affirm that "the extent to which leprosy is propagated by contagion and inoculation is exceedingly small ;" or the opposite views entertained by the eminent members of the Committee of the National Leprosy Fund, who declare their disagreement with these amongst others of their conclusions?

The Leprosy Commissioners (all ardent supporters of the Jennerian practice) have searched far and wide for a rational theory that will account for the recent spread of leprosy in certain countries, but have utterly failed to discover one, and are almost driven to the conclusion that touches closely upon the facts collected in this volume. Under the head of "Transmission through an Intermediary Host," one of their number, Dr. Beaven Rake, says :—" There is at present no direct evidence to support this hypothesis, but it seems that some such theory might explain the alleged rapid increase of leprosy in Hawaii and New Caledonia."—*Journal of the Leprosy Investigation Committee*,. No. 1, Aug., 1890, pp. 50,51.

To the present writer, vaccination seems to be the only intermediary host that passes direct into the blood (except in rare instances of accidental inoculation), and which covers all the facts of the case.

It appears that of the £7000 collected £800 remains, part of which it is suggested should be devoted to further investigation. It is to be hoped, if this is adopted, that less prejudiced and more competent inquirers will be appointed, and that in the future numbers of the *Journal* the accumulation of evidence, so shamefully ignored, showing how leprosy has been spread at the point of the vaccinator's lancet will find a place.

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**CHAPTER 17: LEPROSY INCURABLE—HYGIENE THE ONLY PALLIATIVE.**

LEPROSY has been regarded in every age and in every country as an incurable disease.

In the *Encyclopedia Britannica*, leprosy is described as an incurable constitutional disease, marked externally by discoloured patches and nodules on the skin, and deeply implicating the structure and function of the peripheral nervous system.

How improbable was all hope of cure of leprosy may be inferred from ancient customs in various countries, notably in France.

Dr. Macnamara in his work on "Leprosy," p. 36, cites authorities to show that the leper was expelled from society, and looked upon as dead.

He observes :—" The leper was not looked upon in the eye of the law alone as defunct, for the Church also took the same view, and performed the solemn ceremonials of the burial of the dead over him on the day on which he was separated from his fellow-creatures and consigned to a lazar-house. He was from that moment regarded as a man dead amongst the living, and legally buried, though still breathing and alive. The ritual of the French Church retained till a late period the various forms and ceremonies to which the leper was subjected on the day of his living funeral. Ogee and Ploucquet have both described them.

"A priest robed with surplice and stole went with the cross to the house of the doomed leper. The minister of the church began the necessary ceremonies by exhorting him to suffer, with a patient and penitent spirit, the incurable plague with which God had stricken him. He then sprinkled the unfortunate leper with holy water, and afterwards conducted him to the church, the usual burial verses being sung during their march thither. In the church the ordinary habiliments of the leper were removed; he was clothed in a funeral pall; and while placed before the altar between two trestles, the *Libera* was sung, and the mass for the dead celebrated over him. After this service he was again sprinkled with holy water, and led from the church, to the house or hospital destined for his future abode. A pair of clappers, a barrel, a stick, cowl, and dress, etc., etc., were given to him. Before leaving the leper, the priest solemnly interdicted him from appearing in public without his leper's garb; from entering inns, churches, mills, and bake-houses; from touching children, or giving them aught he had touched; from washing his hands, or anything pertaining to him, in the common fountains and streams; from touching in the markets the goods he wished to buy with anything except his stick; from eating or drinking with others than lepers; and he especially forbade him from walking in narrow paths, or from answering those who spoke to him in the roads and streets unless in a whisper, that they might not be annoyed with his pestilent breath, and with the infectious odour which exhaled from his body; and last of all, before taking his departure and leaving the leper for ever to the seclusion of the lazar-house, the official of the church terminated the ceremony of his separation from his living fellow-creatures, by throwing upon the body of the poor outcast a shovelful of earth, in imitation of the closure of the grave."

Referring to more recent events, I find that in the report of the Special Sanitary Committee on the state of the Leper Settlement at Kalawao, Hawaii, 1878, addressed to the Hon. G. Rhodes, President of the Legislative Assembly, so little expectation of cure was there, "that lepers have to pay for their own coffins, and have formed a coffin association in order to provide a common fund for their proper interment, and these sad creatures get up, as shown by the register of the Hospital, 'Coffin

Feasts,' on which occasion money is contributed to provide for a decent termination of their woes."

Alluding to the disappearance of leprosy in England, Gilbert White observes in a letter to Mr. Barrington

"This happy change perhaps may have originated and been continued from the much smaller quantity of salt meat and fish now eaten in these kingdoms; from the use of linen next the skin; from the plenty of better bread; and from the profusion of fruits, roots, legumes, and greens, so common in every family." It may also be added that, at the time when leprosy disappeared from this country, the practice of inoculation and vaccination was unknown, otherwise there is little doubt that leprosy would have been perpetuated in England by the empoisoned lancet, as it is now in the West Indies, British Guiana, India, New Caledonia, the United States of Colombia, Venezuela, and Hawaii.

Commenting upon the Royal College of Physicians' Report, Drs. Tilbury Fox and Farquhar observe that:

"The cause of leprosy is as obscure as ever, and upon this particular matter the leprosy report gives us very little satisfactory explanation, beyond illustrations of the general statement that leprosy disappears *pan passu* with an improvement in the hygienic condition and diet of a people, and the cultivation of land in districts where it has abounded."—*India Office Report, London, 1872, p. 28.*

Sir Erasmus Wilson, in his article on "Leprosy" in Quain's "Dictionary of Medicine," refers to the various drugs which are recommended and used by one physician or another—quinine, strychnine, phosphates, nitric acid, acetic and carbolic acid, iodine, arsenic, perchloride of mercury, *asclepias gigantea*, *hydrocotyle asiatica*, *veronica quinquefolia*, *plumbago rosea*, acid nitrate of mercury, *potassa fusa*, acrid irritating oil of the shell of the cashew nut, chloride of zinc, etc. In no case is it mentioned that a cure is effected, or even to be expected, but rather the other way. "Hope," he says, "will gleam in the mind of the physician and patient; but cure, alas! is as distant as ever."

Dr. P. Abraham, the Secretary of the Leprosy Investigation Committee, who is familiar with all medical literature on the subject, gave his opinion at a discussion "On the Cure of Leprosy" before the Royal Medical and Chirurgical Society, May 27, 1890, that "the disease was probably not curable; though it might abort and die out."—(*British Medical Journal* May 31st, 1890.) And on another occasion he observed that therapeutic agents had proved failures and that there was no specific for the disease.

In a report of the Paris Congress of Dermatology, 1889, printed in the *Journal d Hygiène*, October 23rd, 1890, the subject of leprosy was discussed.

M. Cornil observed: "We must not confound a passing amelioration, a diminution or attenuation of the malady, more or less prolonged, with cure properly so called."

Consul-General Abbott, in a letter dated June 8th, 1891, Rio de Janeiro, says: "I do not think any radical cure for leprosy has yet been discovered."—*Journal of the Leprosy Investigation Committee, No. 4., December 1891i, p. 18.*

## HAWAII.

The health authorities in Hawaii, as well as the most experienced medical residents elsewhere, consider leprosy as practically incurable, though they acknowledge that life may be prolonged by

good food, pure water, healthy habitations, and other favourable sanitary conditions. On one occasion, referring to the reports of certain medical practitioners as to their alleged and officially reported cures, I was told by one of the responsible officials that the cures were mythical, the particular cases cited having since exhibited further development of the disease.,

It is alleged that the external manifestations of leprosy, like those of some other maladies, disappear for a time, either with or without treatment, and cures are noised abroad; but the disease invariably reappears, and shows itself when least expected.

In the year 1866, the disease had begun to assume alarming proportions in the Sandwich Islands, and the people strongly suspected that the increase was partly, if not largely, due to vaccination. I am unable, however, to find any medical admission of the fact, until some years later. A law was passed in 1868, declaring the disease to be contagious, and requiring all lepers to be removed to the Island of Molokai, where the Government had set aside a piece of land on the northern side for a leper settlement. The preparations for the reception of these unfortunate people were, at first, of the rudest description. The patients were lodged in the cottages of the few Kamaainas, or freeholders on the estate, and were without any appropriate nursing or attendance; and, according to the evidence of Mr. Ambrose Hutchinson, who in 1884 was Under-Superintendent, as the disease was considered incurable, it was the custom to send along with each patient, by the same conveyance, the coffin he was soon to occupy.

The report of the Honolulu Board of Health to the Minister of the Interior for 1876 states (page 77) that the Legislature of 1874 made an appropriation of six thousand dollars towards the expenses (for curing leprosy) of Drs. Powell and Akana, who were offered every facility to try their skill. Six patients were experimented upon with various drugs. Dr. Akana claimed to have cured one, who was subsequently examined by a number of physicians and sent to Kalawao as a confirmed leper. The Board reported that all attempts to cure any patient afflicted with leprosy had failed.

In an address delivered by Mr. Dole on the subject of "Leprosy in the Hawaiian Islands," which the *Boston Medical and Surgical Journal* of May 15, 1884, commends to the attention of the National Board of Health, United States, is the following description of this malady :— "Leprosy is the worst known disease of the present and historic times. It has successfully defied medical skill. Physicians have not been able to say whence it comes, or to explain its laws. It has always and every where been found to be incurable. It attacks all races and all classes; no rank in life is safe—adults and children are alike exposed to its ravages. Medical skill can , make no limit; no assurance can be given from the lessons of experience against this most terrible, most loathsome, and most hopeless of all human diseases."

Dr. A. W. Saxe, in a card published in the *Hawaiian Gazette* of May 23, 1883, says that for leprosy there is no known cure.

In a paper on "Leprosy in Hawaii," published in the *Occidental Medical Times*, April, 1889, Dr. F. B. Sutliff, the writer, sums up the results of his experience in the Island of Maui, Hawaii. "Treatment," he observes, 'of any kind had, so far, proved useless. Improvement which has been noted in many cases is only temporary;" and again, p. 208, "The disease is hopelessly incurable, and certainly fatal."

In the biennial period ending 1881, the report of the Board of Health states that an appropriation of

\$20,000 was made by the Legislature of Honolulu for the cure of lepers, or \$200 each; but no cures were effected, though numberless experiments on these unfortunates were tried, causing much suffering, and in one case the suicide of the victim experimented upon.

In his report to the Board of Health, dated November 14, 1885, and addressed to His Excellency W. M. Gibson, Dr. Edward Arning observes :—" There is scarcely a drug in the pharmacopoeia, at least scarcely a class of drugs, that has not been most systematically tried in the treatment of leprosy. Over and over again men of sanguine temperament have found what they called, a specific cure, but in every instance calm and unbiased judgment has afterwards pronounced a verdict of uselessness."

This distinguished authority also observes :—" I am fully satisfied that Dr. Unna has as yet not succeeded in perfecting a cure of leprosy in a single case. He himself has told me that one of the published cases of complete cure has since suffered a relapse."—*Biennial Report, Board of Health, Honolulu, 1892, p. 5.*

Leprosy is not confined, as many suppose, to native Hawaiians. Dr. E. Arning says :—" Among the white population, numbering 17,935, I knew of thirty-five leprosy cases."

Dr. N. B. Emerson, a lepra specialist of Hawaii, says:—" In spite of a number of claims to the contrary, we believe it safe to say. that no one has been able to prove, to the satisfaction of the medical profession, that a single case of this disease has been definitely cured."

In a volume entitled "Leprosy in Hawaii," published by the Hawaiian Government at Honolulu, 1886, p. 73, it is said :—" Experiments are carried on constantly on patients at Kalihi, and on very incipient, or rather doubtful cases, at their own homes. Though some patients have certainly improved a .great deal under careful treatment, we cannot, for the present, state one case of cure."

Dr. Prince A. Morrow, of New York, in "Personal Observations of Leprosy in Mexico and the Sandwich Islands," says, p.5:—" We know that leprosy has a prolonged, but somewhat indefinite, period of incubation, a slow and irregular course of development, a characteristic and well-defined symptomatology rendering its diagnosis easy, and that its prognostic significance' is most grave. It progresses almost invariably to a fatal termination."

Dr. Hoffman, of Honolulu, alluding to the Leper Hospital at Kalihi, of which he had charge for some years, reports that generally fifty cases were under treatment from time to time, these being 'equally divided between the tubercular and the anaesthetic. He says :—"I found no permanent benefit from treatment; better food and cleanliness, medicine suited to improve the general health of the leper, ameliorated the disease temporarily."—*Report on Leprosy, Honolulu, 1886 p 75.*

Dr. Arthur Mounitz, Resident Physician and Medical Superintendent of the Leper Settlement, Molokai, in his Report, dated Molokai, February, 1886, says of the Kalawao Hospital, where the worst cases are supposed to be accommodated :—"Of course, there are no cases of cure, and those who enter its portals remain until death releases them ;" and under the head of "Treatment," says:

"This is the briefest question of any to deal, with, but the most disheartening to a physician; for, so far, no remedy has been found beneficial." Dr. E. Cook Webb physician to a branch hospital at Kakaoko, in his report, dated March 1st, 1886, says:—" As regards the treatment of leprosy, I have but little to say. Notwithstanding any treatment which I have used, or seen used,. 'I cannot see any change in any single case.' I am fully convinced, after considerable study and experience, that

personal cleanliness, good nourishing food, and regular habits have done more towards the relief of these unfortunates than all the medicines that have ever been prescribed for them in the past. In all the cases of leprosy. I have seen, the disease has steadily progressed to a fatal termination, notwithstanding all treatment. I am aware that I am taking strong ground against the many so-called 'cures' that have been devised, but in so doing I am not basing my opinion on my own study and experience alone, but on the medical opinions of those who for years have been in daily contact with the disease, and have made it a special study, and they 'have come to the conclusion that it is a disease *sui generis*, and incurable."

In the report of the President of the Board of Health, addressed to the Legislative Assembly, Honolulu, 1886, p. 49, in reply to the question, "Is Leprosy Curable?" Mr. F. W. Hutchinson says :—" To this question we are constrained to answer 'No!' At least not under any' known treatment."

Dr. Sidney Bourne Swift, late Resident Physician of the Leper Settlement, Kalawao, Molokai, Hawaii, in his report to the President of the Board of Health, refers to the failure of medical treatment and the numerous alleged cures reported by experimental bacteriologists. "What has become of the cases cured by Fitch, by Arning, by Goto, and by Lutz? Come to the Settlement and you will see them in their graves."—*Biennial Report of the President of the Board of Health to the Legislature of the Hawaiian Kingdom, Honolulu, 1892, p. 87.*

#### THE WEST INDIES AND BRITISH GUIANA.

Dr. Gavin Milroy, in the "Report on Leprosy and Yaws in the West Indies," published in 1873, p. 43, observes:—" We have already seen that in the Barbados Asylum several of the patients had been benefited when no medicinal remedies whatever had been used, the good results being attributed solely to the more regular mode of life, better supply of food, and better housing since their admission, and to their withdrawal from all occasions of intemperance on the one hand, and of destitution on the other. Like effects have been 'observed in the asylums of other Colonies."

On pages 99 and 100, Dr. Milroy says :—" There is a unanimous accord of opinion that the greatest benefit is derived from the adoption of hygienic measures, and that by improving the general conditions, physical and moral, of the leprosy poor, very much may be done to retard or arrest the malady in its early stages, and also to mitigate its severity when more fully developed. Medicinal treatment is universally admitted to be, of no avail, unless combined with the regular use of a nutritive, unstimulating diet, suitable clothing, protection against the vicissitudes of weather, personal cleanliness, and exercise in the open air. There. is certainly no medicinal substance, vegetable or mineral, which exerts anything like a direct or specific effect on the malady.....

"The evidence is all but unanimous that leprosy very rarely, if ever, manifests any tendency to a spontaneous cure. When fully developed, a complete recovery is not to be looked for. It is quite apparent, however, that the progress of the disease may often experience a marked retardation of arrest when the patient is maintained in a favourable hygienic condition."

Dr. J. F. Donovan, Superintendent, Leper Home, Jamaica, in his annual report for 1891, says :—" For curative purposes, I think most authorities will acknowledge that we must look for some other method besides. the administration of medicinal remedies, as drugs have been tried extensively and persistently, and have so far signally failed of effecting a cure of this formidable pest." — *Supplement to Jamaica Gazette, 18th June, 1891.*

In the same report, Dr. Donovan makes the following' statement as to the condition of patient No. 5, afflicted with tubercular leprosy :—" After medical treatment, the scaly eruption about the flexor aspect of joints has. disappeared, the plagues of tubercle on face, forehead, etc., and the enlarged inguinal glands are in *statu quo* after a month's steady use of the inunction and mixture. Symptoms of pulmonary phthisis set in when the gurjun oil was discontinued, as it caused nausea, and subsequently diarrhoea ensued, which the patient attributed to the medicine. A variety of drugs were used to combat the hyper-pyrexia, but without effect."— *Supplement to the Jamaica Gazette, June 18th, 1891, page 81.*

Under the head of "Cure," Dr. J. F. Donovan observes in the same report :—" In some cases the tubercles decrease for a time; in a few years, it may however' be mentioned, that the tubercles have been known to subside spontaneously in some patients for a time, who. have been taking no medicines; so too the tubercles may enlarge and increase in numbers during the administration of the drug, as was evidenced in three of our most prominent cases at the 'Home."

"There are few diseases which are less amenable to treatment than leprosy; the entire armoury of known drugs has been tried," says this medical superintendent, and found ineffective."

I may here observe that Dr. Koch's much vaunted tuberculin has been tried in almost every leprosy country on the globe, and found worse than useless. Much suffering has been caused by its use. The *Madras Times*, October 28, 1891, reports the visit of His Excellency Lord Wenlock to the leper hospital in this city, when his lordship had pointed out to him several patients upon whom Dr. Koch's lymph treatment had been tried. One of the patients complained that the experiment had subjected him to excruciating pain.

Dr. W. V. M. Koch, Acting Medical Superintendent, Leper Asylum, Trinidad, says :—" During the past year there has been scarcely any advance made in the treatment of this disease (leprosy) and it continues to baffle 'the most skilful physician. Various new remedies have been tried, but without success."

"No drug has yet been used which exerts a specific action on leprosy."—*Appendix to Report on Leprosy and the Trinidad Leper Asylum, 1891, pp. 72, 73.*

In the appendix to Dr. Beaven Rake's report on Leprosy and the Trinidad Leper Asylum," dated Maraval, February 4th, 1890, it is admitted that the inoculation of animals has proved a failure, and human beings are required as clinical material for experimental purposes. Dr. Rake, p. 36, says :—" If the Home 'Government could see its way to sanction the inoculation with leprosy of two or three condemned criminals in Trinidad, and the commutation of their capital sentences to imprisonment for life, important additions could be made to our present knowledge of the pathology and proper treatment (by segregation or otherwise) of the disease. I can safely predict that many criminals would gladly accede to such an alternative, on having the case clearly stated to them."

Dr. Beaven Rake, himself a great experimenter, says:—"Campana inoculated lepers with erysipelas, with the result that nearly all the patients in the ward got erysipelas, and the ward had to be closed. No effect was produced on the progress of the leprosy."—*Report on Leprosy in Trinidad for 1890, p. 37.*

Dr. John D. Hillis, of Demerara, observes in his work, *Leprosy in British Guiana*," p. 209 :—" The

treatment of leprosy has hitherto been attended with such very poor results that the disease is now regarded as incurable. Drug after drug—so-called specifics—have been tried, only to be laid aside as useless, the disease after a time returning with greater violence than ever." The writer 'then proceeds to describe some of the experiments to which the unfortunate lepers have been subjected. Out of seventy cases treated by Dr. Danielssen at the Lungeguard's Hospital, Bergen, only one was reported cured.

It appeared to me, however," says Dr. Danielssen (page 210), "if I could infect the leprosy patients with constitutional syphilis, it might follow that the syphilitic poison might prove superior to that of leprosy, and that thus the system might be brought to that of a person labouring under constitutional syphilis, and might so become subject to the ordinary process of syphilisation." "This ingenious theory, however," remarks Dr. Hillis, "failed in practice, the leprosy remaining unchanged, whilst the syphilitic process went on."

Under the head of " Palliative Treatment," p. 215, Dr. Hillis says:—" Improving the sanitary condition of the leper, it is well known, has great influence in mitigating the disease; and the satisfactory results which have been realised in this direction at the General Leper Asylum may be seen in the following figures, taken from my official report for 1878, when the percentage of deaths to strength for the past four years was stated to be :—

1875.	1876.	1877.	1878.
17.36 per cent.	16.33 per cent.	11.49 per cent.	9.19 per cent.

In the appendix to the report of the Medical Officer of the Leper Asylum, Mahaica, British Guiana, for 1880, printed by order of the Court of Policy, Dr. Oscar D. Honiball, Acting Medical Officer to the Leper Asylum, after alluding to the prominent physiological action of gurgun oil, which are purging and vomiting, considers it would be a fatal mistake to administer it in advanced cases. Dr. Honiball records with considerable regret and disappointment his failure to discern its alleged beneficial results. He has also made careful inquiries of the inmates, and the answer as to the beneficial results have been either of a negative nature or strongly adverse. Some say, 'I am not worse than when I came in.' On the other hand, very many bitterly complain of the deleterious qualities, attributing to its administration a rapid and violent increase of the disease. It is so nauseous, and the results following so very often serious, and at all times disagreeable and inconvenient, that the assumption of its curative properties should be based upon a surer basis than hypothesis."

Dr. Castor, Medical Director, Leper Hospital, Demerara (who acknowledges that vaccination is a certain mode of spreading leprosy) says that no therapeutic agent is of any avail as a cure.

Referring to Dr. Castor's report to the Surgeon-General, British Guiana, for 1888, the *Lancet*, March 8, 1890, p. 566, observes :—"Although every remedy reported successful elsewhere has been tried, no beneficial result has been obtained. Dr. Castor holds the opinion that the most that can be done in the way either of cure or prevention is 'by proper diet, dwellings, and sanitary surroundings to ameliorate the symptoms, and often thereby control them.'"

#### AMERICA AND CANADA.

In a chemical lecture on "Anaesthetic Leprosy," by Professor James Nevins Hyde, in the *American*

*Practitioner*, February, 1879, the author says :—" Needless to say that mercury, iodine, quinia, arsenic, and a long list of other remedies, have utterly failed to eradicate the disease. A careful study of the results said to have been obtained by the use of gurjun oil, employed in the Beauperthuy method by Dougal, and of the cashew-nut by De Valence, will lead ,to the conviction that the benefit was largely due to the improved hygienic condition of the patients submitted to experiment. ' Where we are ignorant it is best to admit the fact; for we thus show that we have at least learned the alphabet of wisdom."

Dr. J. E. Graham, of Toronto, in reply to a communication from the Hawaiian Government regarding leprosy in New Brunswick says, that he has experienced ." no good results from medical treatment. Much may be done by attending to the general health of the patients." *Leprosy in Foreign Countries, Honolulu, 1886, p. 158.*

Dr. H. S. Orme, President of the State Board of Health, California, in his valuable papers on "Leprosy, its extent and control," says :—"The general testimony is to the effect that any mode of treatment is disappointing. Arrest of progress is only temporary, being usually followed by suspension of treatment. Indeed it is not certain that long perseverance would be 'attended by permanent relief. At the Tracadie Hospital, patients have been discharged apparently cured, but they generally returned to die. The results are even less encouraging than the treatment of pulmonary consumption. The Health Authorities of the Hawaiian Islands consider leprosy practically incurable, though they acknowledge that life may be prolonged by certain medical treatment, by good food, and by favourable sanitary conditions."

Dr. James H. Dunn, Professor of Dermatology, Mineapolis, in a chemical lecture reported in the *North- Western Lancet*, March 1, 1888, says :—" The treatment of leprosy is accordingly largely palliative. Of course, cures— popular, medical, and secret—have not been wanting; but their unreliability has been repeatedly demonstrated. Of prime importance, if possible, is the removal of the patient to a country or part of the country in which the disease is not endemic, preferably a healthy mountainous district with good air, nourishing food, and every hygienic appointment, and the use of baths and electricity in proper cases."

In reply to a communication addressed by me to the Superintendent of the Lazaretto, Tracadie, New Brunswick, Mr. J. A. Babineau, November 12, 1889, writes :—" Leprosy is considered incurable here, as elsewhere, for all attempts to cure the disease have failed."

Dr. J. C. Tache, Visiting Physician to the Tracadie Lazaretto, in p. 150, "Leprosy in Foreign Countries," says :—" The various and multiplied attempts made at different times in New Brunswick by medical men, or under medical guidance, to cure the disease have all failed."

Dr. A. C. Smith, writing from New Brunswick to the Hawaiian Government, says :—" I have never observed more than a temporary amelioration from any medical treatment, and only such as might be attributed to the effect of mind over body. My predecessor used coloured water, accompanied by strong assurances of benefit therefrom, and in every instance found a temporary improvement equal in degree to any apparent benefit to be found from the use of medicinal agents." "Leprosy in Foreign Countries," p. 156.

United States Consul James W. Siler, of Cape Town, South Africa, in the report to his Government, after referring to various so-called remedies,, observes :—" After all, these and other remedies only

tend to prolong the disease; for, once affected with the leprous taint, the victim is doomed to slowly but surely rot away, until mercifully released by death."— *United States Consular Report for 1887*, p. 565.

Owing to the remarkable spread of leprosy in Venezuela, the United States Consul, Mr. E. H. Plumacher, has paid much attention to the treatment of that disease; and he reports to his Government (No. 119, for 1890, pp. 695-6) as follows :—"Various methods of treatment have been tested at the Maracaibo Lazaretto, especially the administration of the oil of chaulmoogra, which apparently gives encouraging results at first, but produces no lasting benefit. Its use is also attended with grave physical inconvenience, such as a morbid state of the liver; intestinal irritations, accompanied with a slimy and waxy diarrhoea; wandering pains in various parts of the body; eruptions upon the skin, principally attacking the hands, and various other unpleasant attendant symptoms, making the use of chaulmoogra at times intolerable." . . . This treatment has always been entirely voluntary, but no one has been able to persevere in its use. The iodides and mercurial preparations have also been tested, as well as the tincture of cantharides; but all of these remedies produced more or less identical effects— that of a temporary amelioration of the condition of the patient, but without well-founded hopes of anything approaching a genuine cure. . . . As already stated, temporary alleviation has frequently been obtained by various methods, as, in a disease like leprosy, any remedy which tends to improve the state of the blood and the general health will, no doubt, have its temporary ameliorating effect upon the malady itself. So many years of careful study, and of patient and conscientious application of all methods of treatment, have, in my opinion, satisfactorily demonstrated the incurability of the disease; and the most that can be done is to alleviate, as far as possible, the physical suffering and mental distress."

Miguel Valladores, Physician of the Lazaretto, Guatemala, says :—" I have observed that mercurial treatment aggravates the disease of leprosy in a patient."—*Leprosy in Foreign Countries: Honolulu, 1886*, p. 174.

### INDIA AND OTHER COUNTRIES.

In a report to His Hawaiian Majesty, dated August 12, 1885, by Surgeon-General W. J. Moore, of Bombay, the author says:—" If leprosy is not what I hold it to be, we have still sufficient evidence that the great prophylaxis is sanitation. In sanitation I include the prevention as much as possible of whatever entails a state of human system below par, such as the cheapening of salt (an article of the greatest importance in the human economy), plentiful food, good clothing, suitable and, above all, dry lodging, drainage, conservancy—in short, everything tending to improve the condition of the population of a country. Leper asylums are good and charitable, but will not cure, eradicate, or prevent leprosy. There is no known cure for leprosy when once contracted. Lepers taken into an asylum and well cared for often apparently recover; but the apparent recovery is this: The cachectic debilitated leper becomes temporarily a robust leper, but he remains a leper still, and the disease eventually breaks out again. Apart from charitable motives, therefore, I would not recommend the Government spending large sums on leper asylums—such, for instance, as would be entailed by a 'State Leper Asylum,' as mentioned in Government Resolution No. 2009, dated 11th June, 1883. A more certain, albeit slow, progress will result from sanitation in the broadest sense of the term, which comprises the moral and amelioration of the condition of the people" And in a letter to the *British Medical Journal*, December 14, 1889, p. 1371, Sir William J. Moore observes :—" I feel most confidence in the diminution of leprosy in India, and in the prevention of leprosy in this

country, from the influence and progress of sanitation in the most extended sense of the term, in which I include the cleansing generally of villages and towns, drainage, ventilation, good water supply, the cheapening of salt, the prevention of scarcity, opposition to imprudent marriages, and measures for the prevention of specific disease."

Mr. W. Walker, Inspector-General of Civil Hospitals, North-West Province of Oudh, in his report of June 26, 1885, to the Government, observes :—" I may say that medical treatment, in the sense of attempting a cure of the disease, has been abandoned, not only in these provinces, but all over India. Extensive experiments were made in 1875, 1876, and 1887, with regard to the efficacy of certain systems of treatment, and were found to be equally unsatisfactory. If the Government will refer to proceedings in the Medical Department, Nos. 20 and 23, dated March 10, 1887, there will be found the result of a fair trial given to gurjun oil, once a vaunted cure for leprosy. The results of this experiment may be taken as a fair example of the conclusions which have been forced on all trustworthy observers—namely, that good nourishing diet, cleanliness, and friction of the skin with any oil, are the only satisfactory means of retarding the progress of the disease. No other specific treatment is now attempted in any of our asylums. The patients are regarded as incurable, and are only subjected to medical treatment when attacked by complications which may be hopefully dealt with."

J. Fairweather, Brigade-Surgeon, Inspector-General of Civil Hospitals, Punjaub, says :—" All attempts at specific treatment have been abandoned for some years as useless."

Dr. W. R. Kynsey, Chief of the Medical Department, Colombo, Ceylon, in reply to a communication from His Hawaiian Majesty's authorities as to leprosy in India, writes :—" No treatment has yet been found of any permanent benefit. The best results have been obtained from hygienic and dietetic treatment alone." "Lepers," he says, "are chiefly found among the poorer natives, whose dwellings are small thatched huts, crowded, ill-ventilated, filthy, and strewn with mouldy and rotten vegetables and excremental deposits.— *Leprosy in Foreign Countries, Honolulu, 1886, p. 164.*

Mr. H. A. Acworth, Municipal Commissioner, Bombay, says :—" Who ever heard of a case of cure?"

Dr. R. J. Wright, Civil Surgeon, Jessore, India, says:—" Six hundred and nineteen lepers are reported in the Jessore district. The sex is not distinguished; but it appears that only fifty-four inherited leprosy, while six hundred and sixty-five have no idea of its cause. They believe the disease incurable, so it is difficult to persuade them to submit to treatment, and twenty who were treated with gurjun oil derived no benefit."—*Leprosy in Foreign Countries, Honolulu, 1886, p. 34.*

Dr. H. V. Carter, of Bombay, in a communication to the Hawaiian Government, relative to leprosy in India and Norway, dated 1884, says:—" *In limine*, I should state that the cure of leprosy by purely medical treatment has not practically contributed anything towards the obliterating of the disease. To rely, therefore, for a general amendment, upon any of the varied remedial measures often confidently put forward, would be to indulge in fallacies, hurtful as well as deceptive, and to encourage a kind of anticipation hitherto shown by experience to be futile."

Again, the same writer, in part II. of the same paper, observes :—" Nor has purely medical treatment ever proved curative; and, so far from leprosy in Norway showing a natural tendency to

subside, there is ample evidence of a present activity, equal to that displayed by the disease twenty - five years ago." — *Leprosy in Foreign Countries*, p. 96, Honolulu, 1886.

In a summary of his work for 1890, in the Leper Asylum at Dehra Dun, India, Dr. M'Laren, the Medical Superintendent, gives the result of the treatment with resorcin ichthyol and gurgun oil, which were used a short time ago, but are now, apparently, abandoned. He says :—" There is not the least appearance of permanent benefit, or of any amelioration of the actual disease."— *Calcutta Englishman*, March 7, 1891.

In his "Remarks on Leprosy," the same authority observes:—"It may not be out of place here to mention that, since 1875, I have given the most careful attention to the treatment of leprosy; tried most conscientiously all the various drugs that have from time to time been recommended, and used unsparingly, and for prolonged periods, all outward applications that have been brought to notice, and must frankly admit that I have not witnessed the least *permanent* benefit from any one of these. . . . Once a leper, always a leper, is the sad outcome of my many years' close observation, let the treatment be what it may."—*My Leper Friends*, by Mrs. Hayes, London, 1891. pp. 125-6.

Under the head of "Treatment," the chief medical officer of Kashmir, Dr. A. Mitra, after alluding to the use of arsenic, chaulmoogra oil, and gurgun oil, observes that they have little or no power in arresting the progress .of the disease. And as regards nerve-stretching, which, in the early stages of the anaesthetic variety, produces very satisfactory results in a large majority of cases, he remarks "the result is not lasting."—*The American Journal of Medical Sciences*, July, 1891.

*The Bombay Gazette*, 17th July, 1891, reports the opening of the New Leper Asylum at Sehore, Bhopal, towards which Her Highness the Begum of Bhopal has contributed munificently, and has promised an annual grant of 4500 Rs. for the expenses of maintenance. The building will accommodate about 160 lepers. In his address, Surgeon-Major Dane frankly said, "We do not expect to cure these unfortunate people, as, notwithstanding the praises which are repeatedly being bestowed on some vaunted 'certain cures' there is no doubt that a cure for leprosy has still to be discovered." This benevolent lady, the Begum of Bhopal, Nawab Shahjeham, has been persuaded to extend vaccinations in her province, upon which she spends 5000 rupees yearly, employing 35 vaccinators, who performed 38,000 vaccinations last year, thus unwittingly spreading the fell disease at the point of the lancet, and helping to fill the wards of the hospital which her benevolence has established.

Babu Prosurmo Coomar Sein, Gurbetta, India, in reply to questions from the Hawaiian Government, reports as follows :—" After taking charge of this dispensary, I have treated twenty lepers. To some of them this disease was hereditary, to some it was owing to the contagion, and to others it was the effect of using mercurial medicines."

Surgeon W. D. Stewart, Civil Surgeon of Cuttack,. says :—" There is a belief that excessive use of mercury tends to develop the disease, by causing a deteriorated state of the blood and tissues."

Babu Jaggo Mohoun Roy, Orissa, reports :—" In the generality of the cases, especially among the Hindus,. venereal diseases, and perhaps administrations of mercury for their cure, have, I believe, been the cause of leprosy.'—*Leprosy in Foreign Countries*, Honolulu, 1886, pp. 33,.37,39.

Surgeon-Major Geoffry C. Hall, Allahabad, in a communication to the *Indian Medical Record*, says :—" Is there any cure for leprosy? I reply, No. Can leprosy be mitigated? I say decidedly, Yes. But

the fact remains, 'once a leper, always a leper.' .

With regard to the vexed question of contagion, I am of opinion that leprosy is inoculable. . . . There is the fact that leprosy sores do heal in a great many cases without any treatment whatever. . . . But these sores healing do not, as so many people imagine, mean that the leprosy is cured, but merely that a local manifestation has been cured; the leper remains a leper, and sores will certainly occur at some future period.

All the remedies seemed to be equally inefficient. Nerve remedies had, I presume, altered nerve tissue to deal with, therefore they could not act in their usual way. The much bepraised resorcin and ichthyolin were as useless as all the others, and the conclusions I have come to are :—(1) Lepers should be well fed; (2) kept scrupulously clean; (3) have some inunction to keep the skin soft; (4) have their sores treated on rational principles. Then their lives are made less burdensome to them, and they are comparatively happy. The remedies used were strychnine, phosphorus, arsenic, mercury, potassium iodide, chaulmoogra oil, resorcin and ichthyolin, gurjun oil, neem oil, and strychnia, and sweet oil with chaulmoogra oil and gurjun oil internally. I made sketches of some of the patients I treated, with remarks made during the course of treatment. I treated in all fifty patients, with in no case any marked benefit as regards the cure of the disease."—*Calcutta Daily News*,. November 3, 1891.

In an article on "Leprosy in Kashmir," by Ernest F. Neve, M.D., F.R.C.S., Ed., I find that, "as treatment, iodoform, iodide of potassium, mercury, arsenic, quinine, phosphate of soda, and mudar root, have been tried internally; while balsam of Peru and gurjun oil have been rubbed on externally. Carbolic acid and iodine has been used for wounds. Nerve stretching has been adopted for anaesthesia and trophic ulcers. None of these is a specific."—*Lancet*, 16th November, 1889, p. 1000.

The *British Medical Journal*, August 10, 1889, contains an article, entitled, "Clinical Notes on Leprosy," by James J. L. Donnet, M.D., Inspector-General of Hospitals and Fleets, Honorary-Surgeon to the Queen. Under the head of "Treatment" is the following (p. 304):—"In the treatment of this disease the hygienic, the dietetic, and the palliative had more influence than the therapeutic. Where the cleansing of the skin by baths could be effected; where soothing or stimulating applications were made to ulcerated surfaces and to skin, to delay the distressing symptom of prurigo; where good and abundant food was given, fresh air obtained, and exercise without fatigue, taken, with attention to full ventilation of inhabited rooms; where measures were adopted to afford recreation and gentle excitement, and thus divert the mind from the disease itself, a marked difference and a decided improvement, were the consequence. Under these influences the disease made little advance. But it is one that follows a determined course, rapid in some, more dilatory and seemingly stationary in others, but never retrogressing, always advancing."

"Where drugs are administered internally, I remarked that only those possessed of dietetic properties—as, for example, cod-liver oil—were of any value. Mercury, arsenic, iodide of potassium, assacil (obtained by incisions into the bark of the *hura braziliensis*), ammonia, and other preparations, each acted on the system, *modo suo*, but not in the measure or way hoped for."

Dr. Max Sandreczki, in an article entitled "A Study on Leprosy," in the *Lancet*, August 31, 1889, p. 424, says:—"As to the possibility of cure, one may say without fear of contradiction that among adults it is excluded." . . .

"The discovery of the bacillus has not hitherto advanced the curing of leprosy. Neither the transmissibility nor the mode of propagation has been demonstrated. Unfortunately, we are not permitted here to make dissections, and it is almost impossible to procure objects for the microscope. In conclusion, I would remark that if the bacilli cause leprosy, and propagate it from one person to another, how can we explain the long latent period—the repose of the bacillus for years? Is it not probable that the human body, more and more degenerated by years of misery and by every sort of hurtful influence, becomes the soil favourable for the development and culture of the bacillus?"

In a discussion at the Royal Medical and Chirurgical Society on the cure of leprosy, Mr. Macnamara, the author of "Leprosy a 'Communicable Disease,'" observed that "he had never seen a case which he could regard as being even relieved by treatment." — *The Lancet*, May 31, 1890.

Dr. Thin, under the head of "Treatment," p. 203 *et seq.*, observes that iodide of potassium has been experimented with by Danielssen on a large scale. It always produces a more or less violent eruption of nodules with feverish symptoms. Dr. Thin adds: "It affects patients both as a powerful poison and as a means of cure." After devoting several pages to recording experiments in drug medications by Dr. Unna, which must have caused much suffering to the hapless patients, Dr. Thin observes :—"Alas, that strenuous exertions directed with such intelligence and experience, should after all have turned out fruitless! The bacillus, however, remains apparently uninjured; and, although the treatment does not save the patient from his inevitable fate, Dr.. Unna has done good service in making such an exhaustive experiment with strong drugs that had not been sufficiently tested previously."—*Leprosy*, by Dr. George Thin, 1891, p214.

Dr. Andres Navarro Torrens, Physician-in-Charge of the Provincial Hospital, Las Palmas, Canary Islands, writes to me, 1889:—" I have not up to this day seen any positive and evident cure by medicinal treatment."

A communication from the Superior Council of Health, Mexico, says :—" In the medicinal treatment there have been employed, successively and without result, mercurials, hydrocotila sciatica, guano, yodadurados, arsenic, sarsaparilla, and tarantula, as diaphoretic measures."

"The therapeutic as well as the dipterocarpic methods of treating the disease have been hitherto ineffectual."— *Leprosy in Foreign Countries*, 1886, Honolulu, p. 186.

Dr. K. Yamamoto, surgeon on board His Imperial Japanese Majesty's ship "Rinjio," in a communication to the Honolulu *Press*, June 19, 1883, describes leprosy as an incurable disease.

A communication to the Hawaiian Government from the Faculty," Barcelona, Spain, in reply to an inquiry as to the results of medical treatment, says :—" A great number of medicines have been tried to combat this disease, but, in almost all cases, without result."—*Leprosy in Foreign Countries*, Honolulu, 1886, p. 194.

Dr. Kaurin, Medical Superintendent, Leper Asylum, Molde, Norway, says that "hitherto no specific remedy for leprosy has been found. At an early stage the disease may be cured by good 'diet and regimen; by careful nursing of the skin, baths, and symptomatic 'treatment.'"—*Journal of the Leprosy Investigation Committee*, January, 1891.

After much careful reading, and inquiring into alleged cures in various countries, including those of Dr. Beauperthuy, of Venezuela; the remarkable results, reported by Colonel Chrystie and Father Muller in the Indian journals, \*

\*The latest communication I have seen from Father Aug-Muller, St Joseph's Leper Asylum, Mangalore, S.C., where the Mattel treatment has been tried, appears in the *Calcutta Daily News*, October 30, 1891, and the writer only claims "amelioration in the health of the inmates," but no case of cure. This is no more than the natural result of hygiene without medicine at all.

of Count Mattei's treatment the cures officially reported by certain foreign medical experts in recent Government reports of Hawaii; Dr. Koch's tubercular inoculation; and the nerve stretching and ulcer perforation at the Mucurapo Asylum, Trinidad, I find no evidence to warrant the belief in their ability to cure this disease. In every case the alleged benefit is only transitory, the tubercles and abscesses reappearing, often with increased malignity.

### TUBERCULIN IN LEPROSY.

Dr. P. Ferrari, in an article on "Koch's Tuberculin in Leprosy," says :—" Dr. Ferrari gives the conclusions of several observers who have experimented with the tuberculin in leprosy. Dr. Danielssen considers (1) that tuberculin in leprosy gives general and local reactions, the former generally coming on four to six hours after the first injection, but sometimes in twelve hours, and rarely in two to three days—the local reaction is more tardy; (2) that unfavourable consequences ensue to the patient, the disease being aggravated, and that the reactions have some similarity to those produced by the preparations of iodine in lepers; (3) that the lymph does not kill the bacilli, but seems instead to give them nutriment and favours their reproduction and circulation in the blood; (4) that when immunity to the remedy is established the disease is in no way arrested, nor the bacilli destroyed. Dr. Ferrari has himself come to the conclusion, from the consideration of the above cases and of those of other observers, that tuberculin exhibits no direct useful action on the leper. As in tuberculosis, it may act on the torpid condition of the tissue, not so much by any specific effect as on account of the small resistance of the diseased tissue. He remarks particularly on the outburst of new tubercles during the paroxysms of fever."—*Journal of the Leprosy Investigation Committee, No. 4, December, 1891, pp. 46-47.*

Dr. J. L. Bidentkap, Physician to the Department for Skin Diseases, Rig's Hospital, and Lecturer on Dermatology at the University of Christiania, Norway, says, under the title of "Curative Treatment:"—" There has been searched in vain for remedies which have a direct favourable influence on the disease, or specifics. Mercurial preparations have, of course, been tried to a considerable extent. They have, however, but little or no influence on the disease, and often do harm. The reported few favourable results, or even recoveries, of the employment of these agents have possibly been due to accident, or in some cases to an erroneous diagnosis, the disease having been confounded with syphilis. The same is also the case with iodine preparations, which, according to the experience of Danielssen, are liable to evoke acute outbreaks, and on the whole are hardly advantageous, any more than bromine combinations. Antimonial preparations, and particularly tartar emetic, have, among others, been tried by Danielssen in increasing doses for long periods, but, it seems, without notable effect. Arsenic seems to have little or no influence, and this applies to most remedies of the same class. Of vegetable drugs there are a great many which have been vaunted as specifics at the places where the people understood to gather and to use them. In the European hospitals, however, these remedies have proved more or less inert. I have used salicylic

acid for long periods of time; but, contrary to the experience of others, I have seen more harm than benefit from the use of it."

"Of therapeutic remedies it is mainly baths, tepid tub and steam baths, which seem to act favourably, and the general health of the patients often improves greatly by their methodic employment."—*Abstract of Lectures on Leprosy, 1886, pp. 65-67.*

In a Report on Leprosy in New South Wales, Mr. Edmund Sager, the Secretary to the Board of Health, Sydney, says :—" In adopting the system of segregating cases of leprosy, the Board has had before it the fact that the disease is, so far as at present known, incurable, and that its efforts must be directed to prevent its reproduction or spread."

The Report of the Inspector of Asylums, Cape of Good Hope, presented to both Houses of Parliament, 1891, referring to leprosy, p. 30, says :—" There is no reason to believe that specific treatment has in any case effected a cure. Gurjun oil, arsenic, potassium iodide, and ichthyol have been tried without any result beyond what would be expected of healthy surroundings and good diet."

In the Report of the Select Committee on the Spread of Leprosy, Cape of Good Hope, under the head of "Minutes of Evidence," July 1889, I find the following:--

Dr. W. H. Ross, Police Surgeon at Cape Town for twenty-two years, under examination—

Q. 323. "During your stay at Robben Island has it ever been seriously attempted to treat leprosy as a disease in the same way, as any other disease would be treated at a public hospital or asylum?"—"We endeavour to alleviate their sufferings, but very little can be done, except to treat symptoms and complications as they arise in this incurable and hopeless malady."

Dr. H. C. Wright testified—

Q. 21. "Leprosy is a disease for which as yet we have found no cure."

Q. 33. " Have you had any experience of the remedies tried for the cure of leprosy? "—"I do not know of any cure."

Q. 36. "You are, however, of opinion that leprosy is incurable ? "—" I do not think that we have found any specific for it. I think all authorities are agreed as to that."

Dr. Beck testified—

Q. 176. "Leprosy cannot be cured, the disease must run its course, and the patient dies."

Dr. J. H. Cox testified—

Q 227. "I believe that it (leprosy) is not curable."

The Report (page ix.) says :—" In the anaesthetic form of the disease there is not much actual physical pain, but in that as well as in the tubercular form the patient undergoes a gradual physical and often moral decay which renders him an object peculiarly deserving of the compassionate care of the State."—*Cape of Good Hope, Report of the Select Committee on the Spread of Leprosy, July, 1889.*

As to therapeutic means, Dr. Alexander Abercromby observes :—" The animal, the mineral, and the vegetable kingdoms may be said to have been ransacked. By some the chloride of mercury and the bichloride, in combination with sarsaparilla, have been highly extolled; whilst others, relying more upon antimony as a curative means, have given it as their opinion that mercury is positively injurious. In large doses all seem to agree that it aggravates the disease."—*Thesis on Tubercular Leprosy, p. 20.*

The same authority, writing April 20, 1892, from Cape Town, in a letter to myself, says :—" After more than thirty years experience as regards the treatment of the disease 'medicine makes no impression upon it even in the earlier stages.'" "

In a Special Report on Leprosy from Robben Island for 1891, Dr. S. P. Impey, Medical Superintendent, says :—" A good deal is said and done when small-pox threatens our country, but how much more dreadful is leprosy than small-pox. Small-pox may kill hundreds in a few days, but all who suffer do not die. Leprosy is fatal in all cases, and all who once catch it, after lingering for a few years a life worse than death, shunned by all, they become outcasts, with no hope of cure before them, and die objects of abhorrence and pity."—*Reports presented to both Houses of Parliament by Command of His Excellency the Governor of the Cape of Good Hope, Cape Town.*

The *Lancet*, of April 16, 1892, has a leading article on the results of this mode of treatment of leprosy Referring to the experiments of Dr. Danielssen (of Norway), it says :—

"The injections were made daily, unless the reactions were severe, when an interval of several days was allowed. In some of the cases the treatment had to be stopped even when only small doses had been reached, because the eruptions in the tuberculated and in the anaesthetic cases became so intense that the disease was evidently aggravated." . . . Drs. Babes and Kalindero, of Bucharest, treated seven patients with inoculations of the same material. Upon these the *Lancet* observes: "Unfortunately the conclusion drawn was that tuberculin aggravated the disease considerably, and, by setting free the bacilli, started fresh *foci* of the disease, and made the whole process more active.

As in lupus and phthisis, the patients became tolerant of the tuberculin after a time; but the disease progressed all the same, and fresh symptoms were frequently excited, lesions became red and sensitive In the anaesthetic form the patches enlarged, became redder and more sensitive, and new patches appeared" Dr Colcott Fox's patient, treated by Mr Cheyne at King's College Hospital, seems to have fared no better. The Injections (of tuberculin) "were followed by severe pains in the ulnar nerves, and in the calves and knees, with a temperature of 103° F. After the fourth injection extreme dangerous collapse followed the reaction, the eruption more prominent and large blebs formed on both feet, and t were other unpleasant symptoms. . a purely non-tuberculated case of long standing which was almost quiescent, obscure pains at intervals being the only symptoms left; the injections therefore had obviously excited a neuritis and revived the typical macular eruption which had faded away." . . . In one case (treated by Dr. Goldschmidt, of Madeira), "intense and prolonged reaction ensued, followed by blebs and new swellings of skin and mucous membrane, while on the lower limbs absorption of the leprous infiltration was produced." . . ., "Mr. Cantlie, of Hong Kong, used it (tuberculin) in seven cases, and he also found bacilli in the blood after injection, there having been none there before." . . . "In Dr. Radcliffe Crocker's case a single injection of two milligrammes excited an attack of leprous fever, which lasted three weeks. Scores of new tubercles came out all over the body, but under gurjun oil inunctions they all disappeared again, and there was a little less

infiltration in some parts. The patient, a tuberculated leper, had previously improved considerably with large doses of chaulmoogra oil, and had had no febrile exacerbation for two years prior to the injection. As an ultimate result he was not really any worse; but three weeks' fever was a long price to pay for a single injection, and he did not care to have it repeated."

"The above cases do not exhaust the list of experiments, but they are sufficient to show that tuberculin is very uncertain in its immediate effects on leprosy; that while in some it produces no reaction or effect at all, in others, even with small doses, considerable and prolonged reaction may ensue; and that therefore not more than one milligramme should be given at first, and cautiously increased according to the patient's toleration of the fluid. Secondly, that it revives the activity of cases which have been quiescent for a long time, producing neuritis, bringing fading rashes into prominence, exciting bullae, and setting free the bacilli; these may get into the circulation and produce fresh cutaneous and other lesions. In the ultimate effect, while some patients have shown improvement that has not been proved to be permanent, and in some was certainly only temporary, on the whole the position may be summed up by stating that, as far as the results hitherto obtained are concerned, the improvement which may result is too uncertain, too limited in character and time, and purchased at too great a risk of aggravation of the disease by the dissemination of new foci, for it to be recommended as a treatment for leprosy; and although some of Dr. Hunter's or similar modifications of tuberculin might lessen the immediate disagreeable effects, the fact of its action being to set free bacilli rather than to destroy them should make us seek in another direction for remedial agents for the relief of victims of this much-dreaded disease."

It is admitted that lepers suffer acutely from neuralgic pains, which Dr. Sidney Bourne Swift says "are common amongst lepers of all types;" and the wretchedness of their condition is intensified by the drastic treatment adopted at many of the hospitals and lazarettos. The application of Koch's tuberculin is often attended with excruciating pains.

Under the head of "Cantharidin Treatment in Leprosy," the *British Medical Journal*, September 5, 1891, says:—"The injections caused severe pain, but no local reaction; they were, however, always followed by a rise of temperature in the leprosy cases."

The writer, when visiting a leper hospital a short time ago, was witness of the fashionable inoculative experimental treatment. The poor creatures were brought into the surgery one after another, some brave and others with a timid, appealing look in their eyes. To enable them to bear the pain of the hypodermic syringe, thrust by the operating physician deep into the flesh, they had a handkerchief between the teeth while held by the hospital nurse or attendant. The puncture of the instrument is usually the least painful part of the experimental process. The treatment, which is often continued for months, produces sickness, acute headaches, and fever.

The rage for experimental research has long since passed the bounds of decent humanity, and many who have investigated the facts are of opinion that legislation ought to be specially invoked in the interest of these, the most hapless members of the human family. It is a common experience for lepers in hospitals to attribute the aggravation of their maladies to therapeutic treatment in the hospitals, and this is confirmed by high medical authority.

In the report on "Leprosy and Yaws in the West Indies," by Dr. Gavin Milroy, London, 1873 (c. 729), the author observes:—"It struck me forcibly, on observing the persistency of the an-mic condition of so many patients at Kaow Island (the Leper Settlement of British Guiana), and still

more of Dr. Beauperthuy's three private patients at Bartica, that this symptom was in part due to the prolonged use of a medicine, which is found to be notably injurious in like conditions of the system in European practice." From the foregoing testimonials (and others which I have not space to adduce), confirmed by my own observations and inquiries, it appears to be the general experience that leprosy attacks most readily those whose vitality is reduced by malarial fever, syphilis or insanitary conditions—i.e., unwholesome food, and impure water, and is most speedily fatal to those unfortunates at the hospitals who have been selected as subjects for inoculation experiments, mercurial treatment, and other drug medication. Whatever benefit patients have obtained is admitted, by the highest authorities in all the countries I have visited, to have been due solely to improved sanitary conditions and hygienic treatment. One thing is certain, the unfortunate patients dread the experimental treatment to which they are subjected by lepra experts, often escaping from lazarettos and secreting themselves in the gullies and fastnesses of the hilly regions and in the jungle to avoid the terrible ordeal to which they would probably be subjected.\*

\*Dr. George L. Fitch, formerly Medical Superintendent, Leper Settlement, Kalawao, Hawaii, says:—"On November 14, 1883, I inoculated six lepers with the virus of syphilis, by taking ivory vaccine points, and scraping off the surface of a mucous patch on the inner side of the lower lip of a native woman. The points were then allowed to dry, and three hours afterwards I transferred the virus to the arms of six leper girls under twelve years of age. December 14 following I repeated the experiment, taking the virus from a hard chancre on a Portuguese who came to my office. I saw this man in March, 1884, three months later, in the office of a brother physician, and found he was suffering from secondary syphilis. The last time I used fourteen points and inoculated fourteen lepers therefrom, but no result followed in any of the twenty experiments."—*New York Medical Record*, September 10, 1892, p. 297.

It is acknowledged that there is no specific for leprosy, nor is there any drug which has permanently ameliorated the condition of the patient. Where gurjun, chaulmoogra, or other oils have been used externally there is a temporary alleviation, probably due to the massage or friction employed, but the disease, when it once has taken hold of the system, is absolutely unamenable to therapeutic treatment. On the other hand, there appears to be a consensus of opinion that, in the majority of cases, the condition of the lepers may be improved, and life rendered more tolerable, by their removal to a salubrious locality, with wholesome food, cleanly and orderly habits, cheerful recreation and employment for body and mind, and that under these conditions the disease may in rare instances die out. The worst picture of concentrated and hopeless misery I have ever seen was in 1884 in the Lazaretto of Damascus, where all these essentials were wanting. In view of these experiences, which can be multiplied to any extent, and on the ground of humanity, is it not time to put a stop to the torture to which the incurable sick lepers are subjected by drug medication and inoculation, and let these miserable creatures be made as comfortable as tender nursing, varied occupations, and amusements will allow, and permit them to die in peace? Not a few of them are the victims of the Jennerian system, and these are the smallest compensations we can make for the irreparable injury done to them.

Above all, we can cease to propagate this fell disease. We can discontinue the enforcement of a medical practice which experience has shown to be a potent factor in its dissemination. This is the most terrible count in the long indictment against vaccination; but, as I have shown, it is amply sustained by the testimony, often unwilling testimony, of unimpeachable witnesses of the highest credit and authority. It may perhaps be thought that what I have quoted is only *ex parte* evidence, that possibly an equal array of high authorities may be cited on the other side. This, however, is not the case. There is here no conflict of testimony, so far at least as inoculation is concerned, and vaccination is one and the chief means by which inoculation is effected. If there are authorities of

equal weight to be thrown into the opposite scale, in my careful personal inquiries and patient investigation into the subject I have not discovered them.

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## SUMMARY.

The results arrived at in this volume may be briefly summarised as follows :— (1) That leprosy has greatly increased during the last half century, and that it is prevalent in many places where it was formerly unknown.

(2.) That whilst the opinion of medical authorities and experts varies considerably on the subject of the contagiousness of leprosy, the preponderance of authority is in favour of the theory that it is not contagious in the ordinary sense of the term, but is communicable by means of a cut, sore, or abraded surface; and this view is confirmed by my own personal investigations.

(3.) That other alleged factors such as malaria, a fish diet, syphilitic cachexia, heredity, and insanitation are admittedly unequal to explain the rapid growth of the disease in certain of our crown colonies and dependencies, as well as in other countries.

(4.) That on one point there is much agreement and hardly any dissent, namely, the inoculability of leprosy; and that the view of leprosy as an inoculable disease, while it is most clear to those who take the malady to be due to a bacillus, is older than the bacteriological evidence, and is not dependent thereon.

(5) That the most frequent opportunities of inoculating the virus of leprosy are afforded in the practice of inoculating vaccine, which is the only inoculation that is habitual and imposed by law; and that the evidence here adduced is calculated to show that vaccination is a true cause of the diffusion of leprosy.

(6.) That the official information, collected by interrogatores and otherwise, has not been hitherto of a kind to show how far vaccination has determined the amount of leprosy in recent times; and that any interrogatories that may be sent out in future should not be limited to ascertaining the effects, as regards leprosy, of hypothetically "pure" lymph. When on very rare occasions interrogatories have been submitted, they have been framed to ascertain the results of a purely hypothetical system of vaccination which is not anywhere discoverable in practice, and alleged to be unattainable (*i.e.*, with pure lymph, and free from hereditary taints, and the replies are therefore futile and misleading.

(7.) That with the exception of two groups of cases— those adduced by Dr. Roger S. Chew, of Calcutta, and Dr. S. P. Impey, of Robben Island—those reported in this volume have not been the result of special investigation, but have cropped up accidentally in the course of medical practice, and in some instances have been published by practitioners with apologies to the profession for presenting such unwelcome disclosures.

(8.) That the increase of leprosy in the Sandwich Islands, the West Indies, the United States of Colombia, British Guiana, South Africa, and New Caledonia, has followed *pari passu* with the introduction and extension of vaccination, which in nearly all these places, without previous inquiry or demand from the inhabitants, has been made compulsory.

(9.) That as leprosy is a disease of slow incubation, often taking years to declare itself, and in its incipient stages can be detected only by practitioners of large experience, it follows that, in countries where leprosy exists, there is great danger of extending the disease by arm-to-arm

vaccination.

(10) Leprosy being one of the most loathsome diseases to which the human race is subject, and being practically incurable, it behoves all interested in the public well-being to do their best to *prevent* its diffusion, and, as a means thereto, to discourage the practice of vaccination on that ground, if on no other.

**APPENDIX** (to [LEPROSY AND VACCINATION](#) by [WILLIAM TEBB](#))

THE following items relate only incidentally to the main object of this volume, but may be useful to the reader as illustrating the methods by which vaccination has been fostered and made obligatory in some of our possessions.

These appendices refer briefly to the mischievous consequences of vaccination, and demonstrate its failure from its inception either to mitigate or to prevent smallpox, with facts showing the growing opposition to this form of State medicine, and the necessity of substituting sanitary amelioration.

Some particulars are also furnished of a medical vaccination census carried out in the year 1883 by a committee of vaccine experts, with the object of reinstating in public favour a practice which had been discredited by numerous vaccination fatalities, and notably by the Misterton, Sudbury, and Norwich vaccine disasters. Particulars of the more recent disastrous results of vaccination will be found in the third report of the Royal Commission on Vaccination. London: Eyre & Spottiswoode, 1890 (c. 6192).

[VACCINATION FRAUDS](#)[COMPULSORY VACCINATION IN BOMBAY---THE DANGER OF TUBERCULOSIS.](#)[THE REVOLT AGAINST COMPULSORY VACCINATION IN INDIA.](#)[VACCINATION IN THE WEST INDIES.](#)[VACCINATION A FAILURE AND A DANGER TO HEALTH FROM ITS INCEPTION.](#)[VACCINATION FAILURES IN 1817.](#)[ARM-TO-ARM \*versus\* CALF-LYMPH VACCINATION.](#)[DR. R. H. BAKEWELL ON THE RISKS OF VACCINATION.](#)[SIR JAMES PAGET ON SURGICAL PATHOLOGY.](#)[DR. M. D. MAKUNA'S MEDICAL VACCINATION CENSUS.](#)[MEDICAL DENIALS AND ADMISSIONS.](#)[HOW LEICESTER DEALS WITH VARIOLOUS OUTBREAKS.](#)[COW-POX AND VACCINAL SYPHILIS.](#)[THE AUTHOR'S PERSONAL STATEMENT OF THE RESULTS OF VACCINATION](#)[Index](#)

## VACCINATION FRAUDS.

(APPENDIX to [LEPROSY AND VACCINATION](#) by [WILLIAM TEBB](#))

The following is taken from the "Life of Jenner," by Baron, a warm partisan of vaccination, published in 1827, vol. i., pp.

557-559 :— "On the introduction of vaccine inoculation into India, it was found that the practice was much opposed by the natives. In order to overcome their prejudices, the late Mr. Ellis, of Madras, who was well versed in Sanscrit literature, actually composed a short poem in that language on the subject of vaccination. This poem was inscribed on old paper, and said to have been *found*, that the impression of its antiquity might assist the effect intended to be produced on the minds of the Brahmins while tracing the preventive to their sacred cow. The late Dr. Anderson, of Madras, adopted the very same expedient in order to deceive the Hindoos into a belief that vaccination was an ancient practice of their own.

"Shortly after the introduction of vaccination into Bengal, similar attempts were made to prove that the practice was previously known there also. . . A native physician of Bareilly put into the hands of Mr. Gillman, who was surgeon at that station, some leaves purporting to contain an extract of a Sanscrit work on medicine. This work is said to be entitled Sud'ha Sangreha, written by a physician named Mahadeva, under the patronage of Raja Rájusin'ha. It contained a chapter on Masurica or Chicken-pock. Towards the close, the author appears to have introduced other topics; and immediately after directing leeches to be applied to relieve bad sores he proceeds thus: 'Taking the matter of pustules, which are naturally produced on the teats of cows, carefully preserve it, and, before the breaking out of small-pox, make with a fine instrument a small puncture (like that made by a gnat) in a child's limb, and introduce into the blood as much of that matter as is measured by a quarter of a ratti. Thus the wise physician renders the child secure from the eruption of the small-pox.' This communication was shown to Mr. Colebrooke and Mr. Blaquiere, both eminent Sanscrit scholars, and they both suspected that it was an interpolation. . . . . I believe I may further add that Mr. Colebrooke made inquiries whilst in India, which fully satisfied him that no original work of the kind ever had existence. Sir John Malcolm has also been kind enough to ascertain that no such book is to be found in the library of the East India Company. From these statements it must be apparent, that the wellmeant devices of those who attempted to propagate vaccination in India have led to the belief that the practice was known to the Hindoos in earlier times."

It may be added that Dr. Anderson, above referred to, is congratulated by Jenner's biographer on his "unceasing exertions at Fort St. George."

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**COMPULSORY VACCINATION IN BOMBAY----THE DANGER OF TUBERCULOSIS.**(APPENDIX to [LEPROSY AND VACCINATION](#) by [WILLIAM TEBB](#))

Notwithstanding the proofs laid before the Royal Commission on Vaccination regarding the futility of the practice as a prophylactic against small-pox, its injurious consequences in spreading inoculable diseases, and the cruelty and injustice attending its enforcement, there are not wanting those who are continually plotting to extend the system, by means of coercive legislation, amongst populations who are known to entertain a widespread repugnance to vaccination, but who are without representative institutions. At a meeting of the Bombay Legislative Council (reported in the *Times of India*, February 24, 1892) held for the purpose of hearing the second reading of the bill to prohibit the practice of inoculation, and to make vaccination compulsory in certain districts of the Bombay Presidency, the Honourable Mr. Javerilal U. Yajnick moved certain amendments to the law. In the course of his argument, in which he points out the danger of transmitting leprosy and syphilis by means of arm to arm vaccination, he quotes the opinion of "an able and experienced medical gentleman," Dr. Bahadurjee, who in reply to an inquiry writes :—

"In answer to your letter in which you ask me my personal opinion on the arm-to-arm vaccination method which is intended to be enforced by the new Vaccination Bill, I have no hesitation in saying that, besides its being not suited to the peculiar conditions which obtain in this country, on professional grounds the method is objectionable, and for these reasons :—

1. Arm-to-arm vaccination obviously acts as a channel for the transference of some skin diseases, and affords a ready means for propagating such inherited constitutional taints as those of syphilis and leprosy. No doubt, special rules, with full details, will be framed for the guidance of the operators in their selection of proper subjects, with a view to avoid these mishaps; but, having regard to the class of men from whom the supply of district vaccinators is to be obtained, the detailed rules will be of as much use to them as the paper on which they are printed.
2. Syphilitic taint does not necessarily show itself in ill-health at the early age at which vaccination is practised and demanded by law. A child may be in fair health, and yet have inherited syphilis. Moreover, syphilis does not stamp itself on the face and arms, so much as on the back and legs—parts not generally examined by the vaccinator, and thus apt to be overlooked. Only yesterday I was asked to see a case of skin disease in a child. On stripping the child bare, I found him fairly healthy to look at, and could see no skin blemish on his person. But closer examination of the hidden parts revealed the presence of unmistakable condylomata (syphilitic). These condylomata unnoticed, I should have passed the child as a very fair specimen of average health, and a fit subject to take the lymph from. Syphilis, as betrayed in obtrusive signs, is not difficult to recognise, but when concealed, as is more often the case, it is by no means easy to detect it.
3. In the case of leprosy it is still worse. There is no such thing as a leper child or infant. The leper heir does not put on its inherited exterior till youth is reached. And it is by no means possible by any close observation or examination of a child to say that it is free from the leprous taint. Surely arm-to-arm vaccination will not help to stamp out leprosy. On the contrary, it has been asserted, and not without good reasons, that it has favoured the propagation of the hideous disease.
4. It is acknowledged that extreme care is required in taking out lymph from the vesicles to avoid drawing any blood, for blood contains the germs of disease. Extreme care means great delicacy of

manipulation, and delicacy of manipulation with children is not an easy task, and requires some experience and training. Is this to be expected from the class of men who are going to act as public vaccinators in the districts? Supposing a district vaccinator to acquire it to some extent after considerable practice, what about the delicacy of manipulation of one newly put on?

5 Puncturing a vesicle with such delicacy as not to wound its floor and draw blood is one great difficulty. But the selection of a 'proper' vesicle is another as great if not a greater difficulty. Products of inflammation are charged with the germs of disease, the contagion or contamination media, as much as the blood itself is. And the contents of an inflamed vesicle are quite as contaminating as the blood itself of a subject who, though charged with the poison of (inherited) syphilis or leprosy, has none of the obtrusive signs of the taint for identification. And out here inflamed, *i.e.*, angry-looking vesicles are not the exception but the rule, as can be easily told by personal observation and experience, and equally easily surmised if the habits of our poor be duly considered. Thus, even if no blood be drawn, the danger of transferring constitutional taints by the arm-to-arm method is by no means small; remembering that leprosy which claims India, and not England, for one of its homes, does not admit of any detection on the person of a subject from whose arm lymph may be taken, and that syphilis is more often difficult to detect than otherwise, and remembering, also, that both these are often met with largely in some districts."

With regard to tuberculosis, the most deadly of all diseases in Europe, the following extracts from the translation of an article in the *Gazette Hebdomadaire des Sciences Medicales*, by Dr. Perron, *Officier de la Legion d'Honneur*, which appeared in the *Vaccination Inquirer and Health Review* of December, 1890, may arrest the attention of the reflective reader. Dr. Perron says

"The possibility of conveying tuberculosis to man in the act of vaccination was long ago pointed out. Tuberculosis has, in fact, a special predilection for the bovine race which yields us our vaccine. There are few of these animals that escape its attacks; the calf, the heifer sometimes bear traces of it but a few weeks after their birth. It would then appear quite natural to suppose that the vaccine, taken from a bovine animal and inoculated by the skin, might thus convey tuberculosis to the vaccinated subject. It is by no means so, however; for it is demonstrated that the inoculation of tuberculosis by way of the skin is extremely difficult in itself, and that there is not the slightest fear of doing so by way of the vaccinal punctures. The direct conveyance of the tuberculosis contagion in this manner need not, then, be taken into account. If vaccination renders man more prone to contract tuberculosis, it is, in our opinion, by a method altogether different.

"We hold that we must, in this case, arrange our facts in accordance with the new theories of which we have spoken above; that we must, that is to say, consider, with respect to vaccination and the possibility of a tuberculous contagion due to it, the part which can be played in the organism by nocivity, or receptivity, in relation to micro-organisms.

"The cow, as we have said, is the tuberculous animal *par excellence*. She is often the bearer of specific granulations, sometimes even along with the appearance of ordinary health. She is, therefore, a soil eminently favourable, and therefore very receptive, for the bacillus of Koch. But along with tuberculosis there is another acute malady specially attaching to bovines, for it possesses the property of arising spontaneously among them, namely, the vaccinal disease, which, as we all know, shows itself locally by the appearance, on the teats and on the udder, of pustules, whereof we avail ourselves for human vaccination. Thus, then, two acute diseases, tuberculosis and vaccinia,

find always in the cow the soil most favourable for their evolution; and that clearly because the medium of cultivation is propitious both to the bacillus of Koch and to the micrococcus of vaccine.

"If, as announced by Professor Bouchard, the medium created by a vaccination can be destructive to one or several microbic species, we may add that, by the law of reciprocity, a medium of cultivation may at the same time be favourable to one or several microbes. That is exactly what happens with the cow in respect of tuberculosis and vaccinia, diseases between which the soil of cultivation establishes, as we see, a striking connection.

"This is the time to examine what happens when we inoculate a human subject with cow-vaccine. By that act we bring the human organism into a state of immunity, which is certainly bactericidal as against the microbe of variola; that is the benefit we seek, and which constitutes the vaccinal immunity. But here is the important point; at the very time when we have created in the man the vaccinal soil, we run the risk of having, *ipso facto*, established that humoral state (*terrain humoral*) which is favourable to the tuberculous genesis, that is, the medium of culture which is receptive for the bacillus of Koch.

"The first and the most grave result which follows from this interpretation is, then, that vaccination, besides the advantages which it offers us in our contest with variola, presents the danger of opening the way for the invasion of tubercle.

"If we now turn back and examine the events of the last century or so, we can show a constant increase of tuberculosis, a fact never hitherto satisfactorily explained. There was a time when this malady existed only as an exceptional thing; now, actually, in spite of the incessant progress in public and private hygiene, in spite of all the material improvements that have been made, it tends more and more to rise to the rank of a pestilence. It should be remarked that it strikes by preference at the young lives, that is, those who are, nevertheless, at the age when the physical resistance to morbid causes is the strongest. Now, a malady which originates in exhaustion, in vital poverty, should display its power in the inverse order, and should fall most heavily on the old. We are, then, compelled to believe that young folk offer, for some quite special reason, an exceptionally favourable soil for the implanting of Koch's bacillus.

"Side by side with this growing extension of tuberculosis, we see developing, *pan passu*, and in the same period of time, that is to say, since the beginning of the century, the practice of vaccination. We may ask ourselves whether in this double simultaneous evolution there is not a hidden oneness? If tuberculosis, in spite of all sanitary precautions, has multiplied its attacks during the last hundred years, it is, we submit, because vaccination has come to create for it a propitious soil. That would explain, not only its advancing growth in all civilised countries, but also its special influence over the young subjects who are always more or less recently vaccinated, and consequently more receptive than the others in the presence of the bacillus.

"In all European armies, vaccination is the order of the day. On their arrival with their corps, the young soldiers are forthwith carefully revaccinated. Now, the military statistics of all countries show an enormous proportion of various forms of tuberculosis among soldiers, especially during the first and second year after their enlistment. Divers causes have been invoked for the explanation of the facts. First, the moral decline produced amongst young soldiers by their separation from their families. That might have been possible formerly, but it is not probable in our day when facility of communications generally permits the young soldier to remain in touch with his native country.

Besides, in the army afloat, which is less favoured in this respect, we find no more cases of phthisis than in the army ashore. Nor can a bad hygiene be any longer pleaded, nor an inferior dietary, for the European States take the greatest pains to secure for their soldiers the best of material conditions, and succeed in doing so to a very satisfactory extent. Nor can over-work be alleged, for in time of peace the routine of the service requires, save under very exceptional circumstances, just as much exercise as goes to make up a healthy amount of daily exercise. To sum up, the young soldiers find with their corps material conditions of life, which, for a very large number, are superior to those of their native surroundings. Their life in the great towns, though evidently having an injurious effect, cannot by itself explain the numerous cases of tuberculosis of which we are speaking, for the barracks are in general well situated and looked after in accordance with the rules of health. Whence then can come these attacks of tuberculosis, so sudden, so numerous, upon subjects that, but a few months before, the council of revision rightly declared to be fit for service. Tuberculosis of the lungs, of the organs, of the joints, of the bones, etc., all these fatal evils show themselves in the garrisons of all countries with a frequency before which one might well despair. We believe that we must simply seek the reason for these facts in the revaccination which awaits the recruits upon their arrival at their corps, and which transforms them forthwith into a medium which is receptive towards those germs of tubercle which swarm in centres of population. This revaccination immediately upon enlistment is all the more regrettable and inopportune since just at that moment the young man, separated from his-family, his country, his familiar conditions of life, undergoes, without any period of transition, total and radical changes in his manner of life, and thereby finds himself less well equipped for resistance."

Referring to the efforts made by the Indian health authorities to escape the dangers of inoculated diseases by the introduction of animal lymph, the *Calcutta Daily News* of 9th February, 1892, says :—" In trying to avoid the Scylla of leprosy, syphilis, and kindred evils, they fall into the Charybdis of tuberculosis and other equally fatal maladies. When doctors disagree, patients usually have the reverse of a comfortable time, and in the present situation the public may well look around in alarm, and cry to be saved from the dangers with which the whole subject of vaccination seems to be beset."

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**THE REVOLT AGAINST COMPULSORY VACCINATION IN INDIA.**(APPENDIX to [LEPROSY AND VACCINATION](#) by [WILLIAM TEBB](#))

The first triennial report of the working of the vaccination department in Bengal has been recently published, and the Commissioner says that the Acts in the rural districts are practically a dead letter; vaccination is rejected by all the higher class of Hindus—the Brahmins, Marwaries, Rajputs, and Burmahs—while, among the Mahommedans, the Ferazis display the utmost repugnance to the Jennerian rite. In nearly every village, reports the Commissioner, there are families who persistently refuse vaccination, and secrete their offspring to escape the vaccinators. The *Madras Mail* of July 2nd, 1890, says that vaccination is very unpopular with many classes; and the *Madras Times*, April 16th, 1891, reports that summonses were issued against fifty-two recalcitrants for nonvaccination. At Midnapur, Bengal, where the vaccinations formerly averaged three thousand annually, the number fell to nine hundred last year.

The *Allahabad Pioneer*, September 23rd, 1891, says:—

"The Civil Surgeon of Coconada, in his report on vaccination in that town, says that it is a common occurrence for parents to wash out the vaccine virus immediately after vaccination; and the vaccinators further assured him that the natives are in the habit of rubbing in chalk, chunam, or flour, with a view, if possible, of preventing the vesicles rising on their children's arms."

The *Times of India*, July 14th, 1892, says :—

"The prejudice against vaccination in Burmah seems to be growing to quite a remarkable extent. The report for 1891-92 shows that in Lower Burmah the number of cases was only 129,509, or 10,812 less than in the previous year. In one district alone, Henzada, there has been a fall in two years from 10,134 to 5180, while in the Toungoo district the figures have declined from 8905 to 3069. The Prome, Thongwa, and Thayetmyo districts are also among those which exhibit a considerable decrease, and in most cases no explanation of the decline seems to be forthcoming; while such explanations as are offered the officiating Chief Commissioner 'cannot regard with any satisfaction.' In Upper Burmah there was an increase of some 20,000 cases, but this seems mainly due to the extension of the Act. In Upper Chindwin there was a great and unexplained decrease, and five other districts also show a decline, while in some of these and a number of other districts the people put every possible obstacle in the way of vaccination. *At Katha, Mohayon, and Mobin so strong is the prejudice against arm-to-arm vaccination that the vaccinators appear to have, narrowly escaped violence at the hands of the villagers, who organised an open resistance to the system.*"

The *Civil and Military Gazette*, Lahore, August 8th, 1892, says :— "It appears that the natives of Lahore are opposed to compulsory vaccination. The inhabitants of several *mohallas* in the city have drawn up memorials to the local Government asking that the resolution of the Municipal Committee for the introduction of compulsory vaccination in Lahore be cancelled."

The *Allahabad Pioneer Mail*, 6th October, 1892, under the head of Vaccination in Bengal, says :— "There has been a falling off of nearly two hundred thousand, or about 11 per cent, in the number of vaccination operations performed during the past year in Bengal, as compared with the record for 1890-91. The number of operators has meanwhile increased by nearly one hundred; and an analysis shows an average decrease of about 107 cases per operator."

And in a leading article the editor observes:---

"If anti-vaccinationists can be numbered in their thousands in England, it is small wonder that they can be numbered in their millions in India."

Those familiar with the social condition of India are aware that every effort has been made to remove this dread of the operation which exists more or less all over the country. New lancets and scarifiers have been introduced, and various viruses have been experimented with, one after another—cow, calf, sheep, goat, lamb, buffalo, and donkey lymph — the last, the discovery of Surgeon O'Hara, having been specially urged upon the attention of District Boards and municipalities by the Government. Surgeon-Major W. G. King writes to the Indian *Medical Record* that he is using *vesicle pulp* or "lanoline vaccine," which is applied by stretching the scarifications and "alternately dabbing and rubbing in the paste." Buffaloes, he observes, appear likely to yield very much more vesicle pulp than calves, but they exhale an "abominable odour," which renders the work of collecting the pulp most repulsive. The Commissioners state that only the lowest and most ignorant classes readily submit. The law enforcing vaccination in British India, which are unparalleled for their severity, were passed without the consent and against the wishes of the people, whose objection to vaccination arises from a knowledge often gained by sad and bitter experience. They know that the fearful spread of leprosy in India and other countries is coincident with and, as they believe, due to the extension of vaccination, and they prefer to face the severities of the law, with its ruinous judicial penalties, or even to risk the dangers of the jungle, where they are sometimes compelled to seek refuge for their little ones, to the risks of this hideous and destructive scourge. That leprosy, confessed to be incurable, is inoculated by vaccination (a fact once vehemently denied) is now reluctantly admitted by the leading dermatologists of all countries, and by the most experienced chiefs of the leper asylums and public health departments in the West Indies, in South America, South Africa, and in the Sandwich Islands

The *Madras Times*, May 18th, 1892, says :—

"Every effort is probably made to obtain pure and healthy lymph, but if the causation of leprosy has not yet been satisfactorily traced, no guarantee can be provided against the presence of the germs of the disease in the lymph used for purposes of vaccination."

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## VACCINATION IN THE WEST INDIES.

(APPENDIX to [LEPROSY AND VACCINATION](#) by [WILLIAM TEBB](#))

### BARBADOS.

There is no compulsory vaccination in this island. The editor of one of the leading journals writes, 2nd May, 1890, that the feeling in the island is so strong against vaccination, that the advocates of vaccination are afraid to move in the matter, and any attempt to enforce it would probably create a riot.

In conversation with all classes and conditions of men (from December to February, 1888-9), from the Chief Justice, Sir Conrad Reeves, to the poorest boatman or sugar plantation labourer, from one end of the island to the other, I failed to discover a single advocate of compulsion. "Let those have it who want it, but don't force it upon me and mine," was the general reply. The police and postmen also get along admirably without re-vaccination. Epidemics are considered less frequent than in other well vaccinated districts, notably Jamaica, Martinique, Guadaloupe, and Hayti.

The natives are, a proud, independent, and more intelligent coloured population than any I met with in the West Indies, and rather look down upon other islanders who are without political representation, and are subject to enforced vaccination. The population in April, 1891, was 182,206, or 1096 to the square mile---one of the densest in the world.

### GRENADA.

In marked contrast to the parental freedom enjoyed by the inhabitants of Barbados, with its popular constitution and representative government, is the position of Grenada. I copy the following from the *Grenada People*, June 9th, 1892,-concerning the oppressive legislation in one of the most beautiful islands in our West Indian possessions, administered as a Crown Colony :— "During this week, upwards of thirty or forty of the peasants have been hauled before the police magistrate of the Southern District for alleged violation of the Vaccination Act. In nearly every case fines of half-a-crown' have been imposed, representing almost half of the week's wages which these unfortunates, if they are employed, can hope to earn. In face of the Royal Commission on Vaccination, we do not see why the law making vaccination compulsory should be still enforced. At most, it is of doubtful benefit; and doctors differ as to the positive good or injury which it does. The advocates of Jenner's specific can quote very few cases, if any, in its support; whilst its opponents point with force and truth to the positive injury it has inflicted. Here, in Grenada, pure lymph is seldom employed. As a consequence, many of the children submitted to the process of vaccination contract therefrom fatal diseases. The lymph, in many cases, is collected from children inheriting a taint of the scrofulous disease which prevails amongst the peasantry; and many an otherwise healthy child, after the process of vaccination, presents the appearance of a disgustingly yawsey patient.<sup>1</sup> As eminent medical men differ as to the value and utility of vaccination, we think it ought not to be made an offence punishable by fine or imprisonment if parents refuse to vaccinate their children; but that the law should be amended in the direction suggested by the Royal Commission in their recent report, *i.e.* it should be optional with the parent whether the child should be vaccinated or not."

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**VACCINATION A FAILURE AND A DANGER TO HEALTH FROM ITS INCEPTION.**(APPENDIX to [LEPROSY AND VACCINATION](#) by [WILLIAM TEBB](#))

Early in the century, when cases of injury were first charged to vaccination by either the suffering victims or their relatives, they were met by emphatic denials on the part of the supporters of Jenner. Proofs of the failures and mischievous results of vaccination, as shown by Dr. Creighton in his remarkable historical work, "Jenner and Vaccination," accumulated from all quarters, but still the vaccinators held on to their creed, Jenner having supplied them with a theory broad enough to meet any contingency. He says there were some varieties of spontaneous eruption, all of which produced sores on the milkers, but only one of these was the *true* cow-pox, all the others being spurious and exerting no specific protective power over the constitution.

On the 18th June, 1890, evidence was adduced by me before the Royal Commission concerning the early failures of vaccinators and the mischievous effects of vaccination (See Third Report of the Royal Commission on Vaccination, pp. 150-151.) In the year 1806 the College of Surgeons instituted an inquiry into the results of vaccination. The results of this inquiry have been overlooked by all the advocates of compulsory vaccination, and notably omitted from Sir John Simon's remarkable "Papers relating to the History and Practice of Vaccination, presented to both Houses of Parliament," London, 1857. (The report of the Royal College of Physicians, which was favourable to vaccination, was included by Sir John Simon in these 'Papers.' The corresponding report of the College of Surgeons, which appeared in the same publication, but was adverse to vaccination, was ignored — an important historical omission.)

This report states that on the 15th December, 1806, a circular was drafted and referred to the Board of Curators, and, having received their approval, was despatched to 1100 members of the College in the United Kingdom, submitting the following questions

"1st. How many persons have you vaccinated?"

".2nd. Have any of your patients had small-pox after vaccination?"

"3rd. Have any bad effects occurred in your experience in consequence of vaccination? and, if so, what were they?"

"4th. Is the practice of vaccination increasing or decreasing in your neighbourhood? if increasing, to what cause do you impute it?"

To the 1100 circulars only 426 replies were received. Why nearly two-thirds of the members kept silent, when at the outset they were converted in multitude to vaccination, was left unexplained. The replies were thus summarised by the Board on, 17th March, 1807— "The number of persons stated in such letters to have been vaccinated is 164,381.

"The number of cases in which small-pox had followed vaccination is 56.

"The Board think it proper to remark under this head that, in the enumeration of cases in which small-pox has succeeded vaccination, they have included none but those in which the subject was vaccinated by the surgeon reporting the facts.

"The bad consequences which have arisen from vaccination are— 66 cases of eruption of the skin, 24 of inflammation of the arm, whereof

3 proved fatal."

A copy of the original report containing these remarkable admissions was produced by me before the Royal Commission and examined by the president and each member of the Commission then present.

I have before me a copy of Volume VIII. of the *Medical Observer*,. an ably conducted Metropolitan journal published in 1810 (produced also before the Royal Vaccination Commission), and on pp. 183 to 197 I find recorded (with chapter and verse for reference to the authorities) the particulars of 535 cases of persons having small-pox after vaccination ; also similar details of 97 fatal cases of small-pox after vaccination and of 150 cases of injury, together with the addresses of ten medical men, including two professors of anatomy, who had suffered in their own families from vaccination.

Concerning these remarkable evidences a leading physician, Dr. Maclean, observes :— -

"Although numerous, they are nothing to what might be produced. It will be thought incumbent on the vaccinators to come forward and dispute the numerous facts decisive against vaccination here stated on unimpeachable authorities, or make the *amende honorable* by a manly recantation. But experience forbids us to expect any such fair and magnanimous proceeding, and we may be assured that under no circumstances will they abandon so lucrative a practice until the practice abandons them."

We commend these prophetic words, uttered years ago, to those who look for the impartial treatment of this question at the hands of professional propagandists at the present day.

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**VACCINATION FAILURES IN 1817.**

(APPENDIX to [LEPROSY AND VACCINATION by WILLIAM TEBB](#))

"However painful the duty, we feel ourselves called upon to notice the numerous and accumulating failures of cow-pox in preventing small-pox, whether in the natural way or by inoculation. Our communications on the subject have been numerous, and some of the cases do not appear to have been modified by the previous disease. It is not easy to account for these distressing occurrences, but were we to hazard a conjecture, we would venture to suggest that it is possible the virus may have become so modified by being confined altogether to the human subject that its powers of producing the necessary affection of the constitution, which only can be regarded as the test of security, may be so nearly worn out as to be no longer a certain preventive. Hence the necessity of frequently renewing the efficacy of vaccination by procuring the virus directly from its original source.

"Variola continues and spreads a devastating contagion. However painful, yet it is a duty we owe to the public and the profession to apprise them that the number of all ranks suffering under small-pox, who have previously undergone vaccination by the most skilful practitioners, is at present alarmingly great."-*London Medical Repository*, pp 57 and 95. Edited by George Burrows, M.D., F.L.S., etc, etc., and Anthony Todd Thompson, F.L.S., M.R.C.S., etc. -

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**ARM-TO-ARM versus CALF-LYMPH VACCINATION.**(APPENDIX to [LEPROSY AND VACCINATION](#) by [WILLIAM TEBB](#))

As the relative merits and demerits of animal and arm-to-arm vaccination are being discussed in the Indian press, I would here call attention to a few facts which appear to have escaped the attention of those who are urging the adoption of new compulsory laws in various districts. It is generally admitted that there is a growing discontent with vaccination in all quarters. In England household censuses have been made in nearly one hundred towns and districts, with the result that eighty-seven per cent. of the signatories are opposed to compulsory vaccination and sixty-eight per cent. certify that they do not believe in vaccination at all. In about ninety towns and poor-law unions the acts are a dead letter; and, owing to the sinister results of the practice, in many of our Colonies the authorities have ceased prosecuting vaccine recusants. In India, Sir John Gorst (*Times*, 17th July, 1891) informed Parliament that compulsory vaccination exists in four districts in Bengal and in 183 municipal cities and towns in different provinces. But the results cannot be considered encouraging even by the most ardent vaccine optimist. The Blue-Books of "Sanitary Measures in India" state the total vaccinations during the years 1886-89 inclusive as follows

1886-87,	5,265,024
1887-88,	5,552,710
1888-89,	6,099,733
1889-90,	6,161,407

The statistical abstract relating to British India gives the smallpox mortality during the same period, viz. :—

1886,	51,112
1887,	65,757
1888,	138,509
1889,	125,453

This increase of small-pox, co-incident with the rapid extension of vaccination, shows that it is a disease governed by causes entirely outside and independent of vaccination. And this opinion is confirmed by the highest authorities. Thus, in a memorandum of the "Army Sanitary Commission," published in the *Bombay Government Gazette*, Dec. 17th, 1885, the Commissioners say

"The first disease in the list—namely, small-pox, which yielded an increase of 1369 deaths, or nearly sixteen-fold that of the previous year's death-rate—had assumed an epidemic state in nearly all the districts of the city; yet Bombay has an effective vaccination service, with the use of calf-lymph." In vol. xviii. of "Sanitary Measures in India," page 203, in reference to the smallpox epidemic of 1884, it is stated :—" We are thus brought face to face with the fact that, notwithstanding the existence of an active vaccination service, small-pox swept over the provinces just as if there had been none." In the same volume, referring to Madras, the Commissioners -say:—" No less than seventy-four per cent. of the small-pox deaths in Madras town occurred among children under three years of age." In Punjab, "the Compulsory Act was in force in the Amritsar municipality, but here the deaths from small-pox were far more numerous than in any other town of the province." In vol. xix., page 113, is the following candid admission :—" Ten years' statistics afford no evidence that vaccination affects the usual epidemic course of the disease,

and hence-this fact, in the face of the extensive vaccination work of the present and past years, appears to lead to the conclusion that in its epidemic form small-pox must be met by improving the sanitary condition of the people."

On page 10 of the Report on the Annual Returns of the Civil Hospitals and Dispensaries in Madras for 1888, under the head of Canara, South, I find that while vaccination is making satisfactory progress, the number of vaccinations having increased by 8053 cases, yet "small-pox was more prevalent than usual in the district, and was epidemic in the town of Mangalore." On pp. 9 and 10, under the head of Arcot, North, it is stated that small-pox was prevalent, and that vaccination "was performed in a careless and perfunctory manner." This careless performance of the Jennerian rite is the rule in our Crown Colonies where leprosy is prevalent, as I have found by personal investigation.

According to Sir Edwin Chadwick, Dr. B. W. Richardson, and all other sanitarians of repute, small-pox is a disease due to insanitary conditions, impure water, bad drainage, dirty living, and particularly to overcrowding; and, instead of removing these conditions, the Governments of India during the past thirty years have been spending their energies, and large sums of money, in extending vaccination. Now that the arm-to-arm system has been thoroughly discredited and shown to be futile as a preventive of small-pox and fertile as a disseminator of eczema, syphilis, and leprosy, the cry of the official vaccinator is not the sensible one of "do away with vaccination," but, let us change front and resort to the calf, sheep, buffalo, donkey, or to lanoline lymph—or anything, rather than confess that the Jennerian system is a humiliating failure. It is well known that animal lymph has been a fruitful cause of the spread of disease in Europe. On June 17, 1885, an official re-vaccination with "re-generated" lymph at the Island of Rügen, North Germany, caused an infection of a loathsome eruptive skin disease (*Impetigo Contagiosa*) of 320 children and adults. The details of this sinister affair, from Dr. Koehler, of the Imperial Medical Department, are in my possession, and have been brought before the Royal Commission on Vaccination now sitting. This disaster was due to the use of virus obtained from the Government calf-lymph establishment, Stettin. In December, 1891, when in Launceston, Tasmania, I learnt that from 200 to 300 children and adults had been afflicted with ulcerative swellings and acute *septicæmia*, caused through animal vaccination in 1887, and that the law in that colony had been suspended. Animal vaccination has no claim to public attention by reason either of its safety or of its novelty. Mr. Farn, the Government Inspector of vaccine lymph, has declared before the Royal Vaccination Commission that he cannot tell by microscopic examination whether lymph is pure or not; and Dr. Robert Cory says that the admixture of lymph with blood, which occurs in the majority of cases, does not prevent its being used.

Perhaps the most remarkable official pronouncement on this subject ever made in England is that of the late President of the Local Government Board, during the debate in Parliament on Supply, July 22nd, 1887, at which the writer was present. The object of the declaration was to allay public anxiety as to the safety of the lymph supplied by the Government. Mr. Ritchie, in the course of his speech, said:—"The honourable member for East Donegal (Mr. Arthur O'Connor) said something about lymph. He said, I think, that it was the virus of modified small-pox. I cannot agree with the honourable member in his definition as to that point. I am informed that no lymph which is used for vaccination of any kind has ever, within the memory of man, passed through the human body. Dr. Jenner's first lymph was derived from an animal source; and the lymph which is now sent out is calf-lymph. None of the lymph, I say—at all events in historic times—has passed through the

human body; therefore I cannot think that the honourable gentleman is in any way justified in calling the lymph modified small-pox."

Mr. Arthur O'Connor :—" What is it, then?"

Mr. Ritchie :—" I am afraid I am not qualified to give the honourable gentleman a medical opinion of what lymph is. I have told him whence it is derived, and he will see there is no ground for calling it modified small-pox."—*Hansard's Debates, 3rd Series, vol. 317, p. 1803. July 22nd, 1887.*

The chief of the Public Health Department was clearly not aware that until a comparatively recent period arm-to-arm vaccination was practically the *only method in vogue*; and at the time Mr. Ritchie's declaration was made, to the effect that none of the lymph in use had passed through the human body, at least three-fourths of the lymph in use in the United Kingdom was the variety known as arm-to-arm vaccination virus.

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**DR. R. H. BAKEWELL ON THE RISKS OF VACCINATION.**(APPENDIX to [LEPROSY AND VACCINATION](#) by [WILLIAM TEBB](#))

In a paper read before the Auckland (New Zealand) Institute, 20th July, 1891, and printed in vol. xxix. of the "Transactions of the New Zealand Institute," Dr. R. Hall Bakewell, formerly Vaccinator-General and Medical Officer of Health for the Colony of Trinidad; author of the "Pathology and Treatment of Smallpox;" Fellow of the Royal Medical and Chirurgical Society of London, etc., says :—" The permanent change in the blood is quite another matter. I commenced, but have never completed, some microscopical investigations into the conditions of the infant's blood before, during, and after vaccination. It is evident that a fertile field for inquiry is open here; and without a series of well-conducted examinations, extending over children of different races, and in different climates, no positive conclusions could be arrived at. But of one thing we are quite certain, as it does not need the aid of a microscope; there is a large destruction of the red corpuscles during the febrile stage of vaccinia, followed by an anaemic condition. How long this anaemic condition lasts we have no trustworthy observations to tell us; and how far it extends—that is, what is the actual loss of red corpuscles—is, as far as I know, in the same state of uncertainty. Of course, we often find parents complaining that children who were perfectly healthy before vaccination have lost colour, strength, and flesh after it, and have never recovered their previous good health. But these complaints, tinged as they evidently are by a strong prejudice against compulsory vaccination, must be received with caution. Still, there is such a mass of evidence of this kind that it ought to be allowed some weight.

So much for the inevitable results of vaccination. The accidents of vaccination may be roughly classified under the following heads:--

1. Inflammatory: including erysipelas and other septicaemic diseases; glandular swellings; phagedaena, sloughing, or mortification at the points vaccinated.
2. Eruptive diseases, mostly of a pustular character, occurring with or immediately after the vaccine eruption; eczema, herpetic eruptions, ecthyma, and impetigo.
3. The inoculation of constitutional diseases—syphilis, leprosy, tubercle.

Now, as regards the inflammatory diseases, there are some vaccinators of large experience who assert that they have never seen any ill-results of this kind arising from vaccination. Well, some people are very lucky, but they have no right to argue from their limited experience that such accidents never occur. I have been very fortunate in my midwifery cases; I have never lost a case in my own practice for thirty-five years; but for all that I do not deny that women die in childbirth. I have seen erysipelas more than once or twice, or a dozen times. In the West Indies it used to be common. The inflammation that followed the vaccination of coloured children was very intense, and the number of insects attacking the unfortunate children no doubt contributed to carry the germs of erysipelas to them. Glandular swellings, particularly in scrofulous children, are not rare. I had myself a case in which each vaccine vesicle was followed by mortification of the skin beneath it, and a phagedaenic ulceration which required very vigorous measures to stop it. This was in a young woman during the epidemic period in Trinidad. I am not sure whether it was a primary vaccination or a re-vaccination. The latter, as is well known, causes very severe inflammation, pain, glandular irritation, and erysipelas in the majority of adults, besides severe and most oppressive febrile

disturbance; at least, this is the case at the time of epidemics, when re-vaccination is most practised.

*Post vaccinal eruptions* are so very common amongst the children of the poorer classes in England that they form one of the stock arguments against vaccination.

*The inoculation of constitutional diseases* used to be laughed to scorn in my younger days. It was said in my hearing by Sir John Simon, K.C.B., then Mr. Simon, the Medical Officer of the Privy Council, that no such inoculation could take place without gross carelessness or unskilfulness on the part of the vaccinator. I used to be of the same opinion ; but a case I saw some sixteen or seventeen years ago convinced me that an infant might look perfectly healthy, and yet be the subject of unmistakable hereditary syphilis. The evidence that syphilis has been communicated by vaccination is simply overwhelming. I may refer to the report of the Committee of the House of Commons on compulsory vaccination; the third report of the Royal Commission on vaccination now sitting in London; the work of Mr. Jonathan Hutchinson, F.R.S., late President of the Royal College of Surgeons of England, on syphilis, in which he devotes a chapter to the description of vaccinal syphilis; and my own experience in this colony and elsewhere. I have seen three cases in this colony alone.

"On my return to Trinidad I had to encounter an epidemic of small-pox which spurred us on to vaccinate right and left, and to revaccinate all who would submit to the operation. But so firmly fixed was the belief of the people that vaccination from a child of a leprous family would be a possible cause of the vaccinated persons becoming leprous, that not even the fear of such a terrible epidemic of small-pox as was then going on would induce them to allow themselves or their children to be vaccinated from any vaccinifer in whose family any member was a leper. And then, to my astonishment and dismay, I found that there was hardly a Creole family in the island—white, coloured, or black—free from the taint of leprosy."

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**SIR JAMES PAGET ON SURGICAL PATHOLOGY.**(APPENDIX to [LEPROSY AND VACCINATION](#) by [WILLIAM TEBB](#))

"After the vaccine and other infectious or inoculable diseases, it is, most probably, not the tissues alone, but the blood as much as or more than they, in which the altered state is maintained; and in many cases it would seem that, whatever materials are added to the blood, the stamp once impressed by one of these specific diseases is retained; the blood, by its own formative power, exactly assimilating to itself, its altered self, the materials derived from the food.

"And this, surely, must be the explanation of many of the most inveterate diseases; that they persist because of the assimilative formation of the blood. Syphilis, lepra, eczema, gout, and many more, seem thus to be perpetuated: in some form or other and in varying quantity, whether it manifests itself externally or not, the material they depend on is still in the blood; because the blood constantly makes it afresh out of the materials that are added to it, let those materials be almost what they may. The tissues affected may (and often do) in these cases recover; they may have gained their right or perfect composition; but the blood, by assimilation, still retains its taint, though it may have in it not one of the particles on which the taint first passed; and hence, after many years of seeming health, the disease may break out again from the blood, and affect a part which was never before diseased."—*Lectures on Surgical Pathology, 4th ed.*, pg. 39. 1876.

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**DR. M. D. MAKUNA'S MEDICAL VACCINATION CENSUS.**(APPENDIX to [LEPROSY AND VACCINATION](#) by [WILLIAM TEBB](#))

Prior to the appointment of the Royal Commission on Vaccination in 1889, the latest professional examination of the vaccination question was in the form of a medical inquiry, initiated by Dr. Montague Makuna, late superintendent of the Fulham Small-pox Hospital. Its object was to remove, if possible, the widespread feeling of mistrust prevalent, in various parts of the United Kingdom, as to the benefits and safety of vaccination, which had been discredited in public estimation by reason of the failures and mischiefs of the operation, with details of which the press was flooded. The inquiry was made by a committee of thirty medical gentlemen, most of whom were vaccine specialists. The meetings were held in the Council Chamber of Exeter Hall, London, under the presidency of Dr. C. R. Drysdale, senior physician of the Metropolitan Free Hospital, a gentleman who has devoted much time to this important question. Dr. Drysdale promised the Committee to read a paper on the results of the inquiry. The proceedings were reported in the *Midland Medical Miscellany* and in the *Medical Press and Circular*. A circular letter, with copy of the report of the first meeting of the Committee, was sent to members of both Houses of Parliament.

At the first meeting of the Committee, held on 15th February, 1883, Dr. Makuna, in explaining the objects of the proposed inquiry, referred to the opposition to vaccination; an opposition which has become intensified since vaccination has been made compulsory. A medical inquiry was, therefore, considered indispensable, and it was anticipated that the evidence disclosed in favour of vaccination would be so unanimous and conclusive, as to effectually restore public confidence in the practice, and to put an end to all opposition. The chairman, Dr. Drysdale, said he considered the proposed inquiry would be of great value to the profession and to the public, and expressed a desire that the Local Government Board and other authorities should be requested to co-operate.

The attention of the Local Government Board, the British Medical Association, the Epidemiological Society, the Medical Officers of Health, the Royal College of Physicians, as well as ambassadors, consuls, etc., was specially called to the inquiry, and they were requested to contribute facts and information from all parts of the world.

A circular was drawn up and approved by the Council, and sent to 4000 medical practitioners, a considerable portion of whom were public vaccinators, medical officers of health, and vaccine specialists. The circular elicited 384 answers, and the results were published in a pamphlet entitled "Transactions of the Vaccination Inquiry."

An analysis of the answers (made by Mr. Thomas Baker, Barrister-at-Law) shows that the seven questions submitted have been answered by 384 medical men, of whom 102 are public vaccinators, vaccine specialists, medical officers of health, or officials.

The following is the third, and one of the most important, submitted to this medical inquisition, viz. :— *What diseases have you in your experience known to be conveyed or occasioned or intensified by vaccination* . To this question 13 give no answer, and 139 answer "None,"\*

\* No. 17 says: "Two deaths from erysipelas occurred after vaccination in my practice, both commencing on the ninth day." Therefore, that so many answer, "None," may be accounted for by the fact that public vaccinators commonly do not see the vaccinated child after the eighth day.

but many qualify this reply by the words, "in my own practice," "direct," "not serious," "personal," etc. On the other hand, the list of mischiefs (many fatal) includes the following, as recorded by 232 medical witnesses. (This enumeration has been checked by the Rev. Isaac Doxsey, F.S.S., and Mr. J. H. Lynn :—)

	Witnesses		Witnesses.
Abdominal phthisis	1	Boils	8

Abscesses	11	Bronchitis	1
Angeioleucitis	2	Bullae	1
Arm disease needing amputation	1	Cancer	1
Axillary Bubo	1	Cellulitis	5
Axillary gland, enlargement of	1	Convulsions	4
Blindness	1	Diarrhoea	4
Blood poisoning (fatal)	1	"Died"	1
Diseased Bones	1	Phagedsenic action	1
Diseased Joints	1	Phlegmon	2
Dyscrasia	1	Pityriasis	1
Ecthyma	1	Pneumonia	1
Eczema	60	Prurigo	3
Eruptions	5	Psoriasis	1
Erysipelas	120	Pynmia	7
Erythema	22	Pyrexia	1
Gangrenosa	3	Ricketts	1
General Debility	1	Scald head	1
Herpes	3	Scarlatina	3
Impetigo	7	Scrofula	9
Inflammation	10	Septicimea	1
Latent diseases developed	2	Skin disease	21
Lichen	2	Struma intensified	4
Marasmus	1	Syphilis	43
Meningitis	2	Tuberculosis	1
Mesenteric disease	1	Ulceration	6
OEdema	2	Varioloid	1
Paralysis	1		

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The following *qualified* admissions are also made, viz.

Eczema	4	Nettle rash	1
Esysipelas	6	Syphilis	10

On the 19th of April, 1886, the results of this medical census were laid before the Right Hon. James Stansfeld, then President of the Local Government Board, and in May a copy of the analysis was sent to him at his request. And on the 25th June, and on the 2nd July, 1890, I called the attention of the Royal Commission on Vaccination to this important inquiry, and presented an analysis of the results for its, consideration. The facts ought, in the interest of the public safety, to be widely disseminated through the press, and made known to magistrates, boards of guardians, and others concerned with the enforcement of the Vaccination Acts.

It has, I think, been clearly proved on the evidence of medical specialists, that to the long catalogue of diseases conveyed at the point of the lancet in vaccination must now be added that of leprosy. This terrible indictment has been denied again and again by those who have not taken the trouble to investigate the facts for themselves, and have shut their eyes to the facts revealed by others. Is it reasonable to suppose that negative statements, however confidently made, can destroy the positive testimony of careful investigators such as Dr. John D. Hillis, Professor W. T. Gairdner, Dr. Edward Arning, and Dr. S. P. Impey? The fact that syphilis is communicable by vaccination was emphatically repudiated by a President of the Local Government Board not long ago, and the terrible Algiers vaccine disaster in 1880 was officially proclaimed an impossible occurrence. The fact that leprosy may be communicated by vaccination is now reluctantly admitted even by those who are most anxious to clear the rite from this reproach. In concluding a defence of vaccination from the charge referred to in No. 4 of the *Journal of The Leprosy investigation Committee*, Dr. Beaven Rake says: "It is evident that the risk of transmission of leprosy by vaccination is so small that, for all practical purposes, it may be disregarded." Dr. P. Abraham says: "The possibility of an occasional accidental inoculation of the disease by vaccination might be admitted;" and Dr. C. F. Castor, in a paper defending vaccination from this stigma, observes: "The opinion expressed that vaccination from a tainted source will produce the disease (leprosy) is, I believe, a true one."

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**MEDICAL DENIALS AND ADMISSIONS.**

(APPENDIX to [LEPROSY AND VACCINATION](#) by [WILLIAM TEBB](#))

The four numbers of the *Journal* issued by the Leprosy Investigation Committee contain a large amount of testimony from authorities in every part of the globe. A conspicuous feature, and one which has been commented upon in the press, is the confusion and contradiction of medical opinion, and this confusion is not restricted to theorists who have never visited countries where leprosy prevails, but is exhibited amongst superintendents of leper hospitals, well-known dermatologists, and eminent general practitioners. Most of the theorists are able to cite facts in support of their several beliefs, and maintain their conflicting opinions with equal confidence. Some of the most prominent of these views have been dealt with, but it would be beside the scope of this work to refer to them all. Beyond the general admission of the alarming increase of the disease, there is but one point upon which there is any approach to a consensus of opinion, and that is, that leprosy is a disease communicable by inoculation. Conversing with directors of leper institutions, experienced practitioners, and careful observers in countries where leprosy prevails, whatever their particular theories about it, I have found no one who denies that it is inoculable. In some instances, when pressing the logical issue of these answers I have said, "Then the disease is also communicable by vaccination," this has often been admitted, though sometimes with hesitation and reserve, and generally accompanied with the proviso that leprosy cannot be invaccinated if pure lymph only is employed and the operation be skilfully performed. Even if this were true, how pure lymph can be selected in tropical countries where the disease is generally of slow incubation, and does not manifest itself for years, and where the vaccinifer is never properly examined, is a mystery not explained. Moreover, while the State can enforce vaccination, it cannot compel the use of healthy vaccinifers, nor enforce careful operation. In nearly all leprosy countries arm-to-arm vaccination still furnishes the chief sources of supply. The perennial cry of public vaccinators is that the lymph is "unsatisfactory." Animal lymph is often attended with excessive inflammation, and the practitioner is obliged to dilute it with glycerine, lanoline, and other substances, and its use is much more expensive. Moreover, a good deal of the so-called animal lymph in vogue is really only arm-to-arm vaccine, inoculated into calves, buffaloes, sheep, and donkeys, and partakes of the diseases both of man and of animals. Of the many cases of ulcerative and of fatal vaccination which have come under my notice during the past twenty years not a few have been due to the use of carefully-selected animal vaccine.

Dr. Robert Cory, Medical Director of the Government Calf Lymph Establishment, London, testified before the Royal Commission, November 17, 1889 (Q. 4390), that out of 32,000 cases there were 260 returned with sore arms, and 38 with eruptions. Then there were 16 cases of erysipelas, and nine of axillary abscesses, and (Q. 4392) eight deaths were reported to the Station of children who had been vaccinated with animal lymph. The same witness testified (Q. 4369) that lymph taken from the cow leads to greater inflammation, and has a greater tendency to produce ulceration, than lymph which has been humanised.

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**HOW LEICESTER DEALS WITH VARIOLOUS OUTBREAKS.**(APPENDIX to [LEPROSY AND VACCINATION](#) by [WILLIAM TEBB](#))

The success of what is known as the "Leicester Experiment" has created considerable public interest both at home and abroad, and, in response to repeated inquiries, I am able to furnish the following particulars from the pen of Mr. Councillor Biggs, of Leicester. Mr. Biggs was for several years a member of the Board of Guardians, and is now a member of both the Sanitary and SmallPox Hospital Committees. He has had much to do with the substitution of sanitary amelioration and isolation for the now discarded system (so far as Leicester is concerned) of vaccination.

Our procedure in the notification of a case of small-pox may (he says) be described in the words of our Chief Sanitary Inspector, Mr. F. Braley : —"When a case is reported, I at once go to the infected house, and try to ascertain where the disease was contracted, where the patient has been working, where he has been visiting, and his movements generally for the last ten or twelve days. I also make a point of seeing all persons who have visited the infected house during the time stated; in addition, I visit all factories and workshops where other members of the family have been employed; and by this-means have been able to get cases removed when the first symptoms of the disease appeared.

"Immediately on the removal of the patient, I superintend the fumigation of the house with sulphur; liquid disinfectants are used freely in the drains and about the yard, and the ashpit is emptied and disinfected; the next day the bedding is taken to the disinfecting chamber and subjected to the hot-air process.

"Up to the present time I have succeeded in getting almost every person connected with the infected houses into quarantine. In a very few cases I have experienced opposition.

"The above represents practically all we do of a special character beyond the ordinary treatment in cases of supposed infection. Those who are prevailed upon to go into quarantine usually remain for fourteen days, the period within which small-pox is supposed to incubate after infection. So far from the authorities having to resort to harsh measures to enforce quarantine, this period of rest is made to be of so pleasant and agreeable a character that, at its expiration, many have been reluctant to leave the hospital.

**VACCINATION OPTIONAL.**

"This fact disposes of an accusation which is constantly being hurled at Leicester, namely, that we not only forcibly seize those who have been in contact with small-pox cases, and compulsorily detain them in quarantine, but that, whilst they are there, we compel them to submit to vaccination or re-vaccination.

"Let us examine as to how far this favourite theory of our opponents has any foundation in fact.

"Of fifty-five persons who voluntarily went into quarantine during the three years 1886-88, only twelve were vaccinated or re-vaccinated whilst in quarantine. If to these twelve we add three others who underwent the operation immediately before entering the hospital, there remain forty persons, or, 72.7 per cent, of the above fifty-five, who were neither vaccinated nor re-vaccinated during the quarantine period.

"Applying the same percentage to the 128 persons quarantined before a 1886, we find a further number of thirty-five persons who voluntarily submitted to the operation, who, when added to the other fifteen, make only fifty for the extended period. Thus, out of a total number of 183 persons who have passed through the quarantine wards .since the introduction of this system in 1877, no fewer than 133 were neither vaccinated nor re-vaccinated whilst in the hospital.

"During this period from fifteen to twenty persons absolutely refused to go into quarantine at all, and we had no power to compel them.

"Nearly all those who were quarantined belonged to the poorest classes, and to these a fortnight's holiday with free board and good, if not comparatively luxurious, living, would prove to be no mean attraction. Those who had good homes remained there in preference to going to the hospital. Thus no infringement whatever of personal liberty has taken place against those who have put themselves for a time under the 'Leicester Method' of treatment; unless indeed, the gastronomic allurements above referred to might have proved an inducement to some to voluntarily yield up their personal liberty for a time.

### SUCCESS OF THE LEICESTER METHOD

"After the subsidence of the great small-pox epidemic of 1871-73, which caused 360 small-pox deaths, when the town was thoroughly well vaccinated, up to the year 1889, which was the last year for which I could prepare statistics for the Royal Commission on Vaccination—that is, during the sixteen years from 1874 to 1889, inclusive—no fewer than thirty-three importations—mostly from well-vaccinated districts—and a large number of successive outbreaks of small-pox, were successfully stamped out. The town was thus saved from the further spread of the disease, with its possible ravages, by the 'Leicester Method' of treatment, *without recourse to vaccination*, and also without the slightest approach to arbitrariness on the part of the authorities, or any infringement of personal liberty.

### ECONOMY OF THE "LEICESTER METHOD."

"It is sometimes assumed that this 'Leicester Method' of isolation, quarantine, disinfection, and sanitation is so expensive as to be practically prohibitive.

"On the contrary, our 'Leicester Method' is extremely economical as well as effective. Besides, it is now well-known that, however thoroughly a community is vaccinated, so little reliance is placed upon this supposed safeguard, that on the outbreak of small-pox recourse is at once had to the very measures which have been so persistently decried when used to the salvation of unvaccinated Leicester.

"From 1874 to 1889 the cost of public and private vaccination at Leicester was not far short of £10,000 (being about £9,818 2s. 11d.). During the same period the cost of quarantine, including compensation for destruction of infected clothes, bedding, disinfectants, etc., was under the modest sum of £500 (or about £488 11s. 2d.). This represents a saving in favour of our Leicester method, as against vaccination, of over £9000 in the course of sixteen years. This £9000 was completely thrown away, to say nothing of the impaired vitality and spread of disease which vaccination necessarily implies. The £500 cost of quarantine, etc., did all the effectual work of saving the town from the ravages of small-pox threatened by the thirty-three importations, and absolutely averted the real danger implied by the occurrence of 116 small-pox cases in the midst of our crowded

population.

### JUSTIFIED BY RESULTS.

"Perhaps it will not now be out of place to briefly enumerate the substantial reasons which justify the Leicester people in the course they have pursued in respect to vaccination, and in adopting sanitation as their defence in the conflict with zymotic disease.

"Taking the groups of years dealt with by me before the Royal Commission on Vaccination, our average annual small-pox death-rate during 1853-57, with a moderate amount of vaccination, was only 91 per million population. But when vaccination had been continually and largely practised for a quarter of a century, and had reached over 90 per cent. to the annual births, and when, of course, its assumed protective power should have been greatest, our small-pox death-rate had progressively risen to an annual average of 773 per million population in 1868-72. Since that time vaccination has rapidly declined in the Borough, now being only about 2 per cent. Of the births, and small-pox mortality has disappeared from our midst.

### SAVING OF LIFE IN LEICESTER.

"Our death-rate from the seven principal zymotic diseases, namely, small-pox, measles, scarlet fever, diphtheria, whooping-cough, common fevers (typhus, typhoid, and continued fever), and diarrhea, averaged annually for the five years 1868-72 no fewer than 6852 per million living, with over 90 per cent, of primary vaccinations to births. This is the highest vaccination rate and zymotic death-rate we have ever had recorded for Leicester. In 1888-89, when primary vaccinations were only about 5 per cent, of the births, the zymotic death-rate had fallen to only 2304 per million. On our Leicester population alone this would mean a saving of nearly 680 lives each year.

"Without going into unnecessary details, I may observe that the improvement in our general death-rate amongst children shows equally remarkable results. With over 90 per cent, of primary vaccinations to births in 1868-72, our death-rate from all causes, of children under five years of age, was 107; under ten years, was 61 ; and under fifteen years was 45 per 1000 living under each of those ages respectively. While in 1888-89, with only about 5 per cent. of primary vaccinations to births, each of these death-rates had fallen enormously. The death-rate under five years had declined to 63, that under ten years to 35, and that under fifteen years to 25 per 1000 living at each of the given ages respectively.

"This would represent a saving of about 880 lives under five years, of about 988 lives under ten years, and of about 1080 lives under fifteen years of age, inclusive and respectively for each year in Leicester.

"When it is remembered that the claim put forward for vaccination is its preservation of the younger lives, especially those under five years of age, the life-saving result of the 'Leicester method,' as shown above, is particularly striking. And it proves, unmistakably, that our watchword, 'Sanitation,' carries with it far more potency to deal with zymotic disease and with small-pox than the now discredited cry of 'Vaccination.'

### THE GENERAL HEALTH OF LEICESTER.

"Once more our general death-rate, that is, our death-rate from *all causes* and at *all ages*, gives

results no less important. In 1868-72, when vaccination had reached its climax in Leicester, our death-rate was about 27 per 1000 of the living population, being nearly 5 per 1000 above the general death-rate for all England and Wales. In 1888-89, when vaccination had virtually ceased to be practised in the town, notwithstanding our disadvantageous geological and geographical position, in a valley, with one of the most sluggish rivers in England and a clayey and impervious water-logged subsoil, our incomplete, and therefore inadequate, drainage, our death-rate had fallen so rapidly, with declining vaccination, that it had actually fallen below the general death-rate of England and Wales. The death-rate for England and Wales was 17.9 for 1888-89, and that for Leicester 17.5, or 5.1 gain in favour of Leicester in less than twenty years.

These figures as compared with times of high vaccination mean an additional saving of about 1400 lives each year in Leicester alone, above the normal rate of saving in England and Wales. If this extra gain could be similarly achieved by the cessation of vaccination in the population of the whole country, other things being equal, it would mean an enormous saving of life beyond that which has actually been effected. The population of the United Kingdom for 1888-89 was estimated by the Registrar-General to be over 37,000,000. On this population an annual saving of about 189,000 lives would be effected. Even allowing an ample margin for possible errors in the calculations of the Registrar-General, these figures are sufficiently momentous to claim serious consideration.

"When it is borne in mind that England and Wales include all the rural districts, where the death-rate is very low, and that here our people are chiefly an artizan and manufacturing population whose circumstances are ever inimical to the health of the younger lives, Leicester's progress from being one of the unhealthiest of towns to its present proud position must be acknowledged to be marvellous.

"With such remarkable results before us, the Leicester people can calmly await the verdict of thoughtful minds, assured that their course of action in rejecting vaccination, and their reliance upon sanitation, will in the long run break down existing prejudice, and that it will ultimately receive general approval and adoption."

It need only be added that a full report of the Leicester system has been presented by Mr. Biggs before the Royal Commission on Vaccination, which will be found in the fourth report of the evidence.

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## COW-POX AND VACCINAL SYPHILIS.

(APPENDIX to [LEPROSY AND VACCINATION](#) by [WILLIAM TEBB](#))

The following extracts from Dr. [Creighton](#)'s "Natural History of Cowpox and Vaccinal Syphilis" (London, 1887) express the conclusions of his historical inquiry—namely, that cow-pox is a disease resembling small-pox only in name, but resembling the great pox both in name and in reality, and that so-called vaccinal syphilis is only cow-pox in its original form, as the milkers used to experience it:---

"The real affinity of cow-pox is not to the small-pox but to the great pox. The vaccinal roseola is not only very like the syphilitic roseola, but it means the same sort of thing. The vaccinal ulcer of every-day practice is, to all intents and purposes, a chancre. It is apt to be an indurated sore when excavated under the scab; when the scab does not adhere, it often shows an unmistakable tendency to phagedaena. There are doubtless many cases of it where constitutional symptoms are either in abeyance or too slight to attract notice. But in other instances, to judge from the groups of cases to which inquiry has been mostly directed, the degeneration of the vesicle to an indurated or phagedaenic sore (all in its day's work) has been followed by roseola, or by scaly and even pemphigoid eruptions, by iritis, by raised patches or sores on the tonsils and other parts of the mouth or throat, and by condylomata (mucous tubercles) elsewhere." (Page 155)

"The first duty of everyone is once for all to disabuse his mind of Jenner's invention of the name *variolae vaccinae* for cow-pox. The affection of the cow's udder was long recognised by common folk as a pox in the original and classical English sense of the word the name of it in Norfolk was pap pox. No one had dreamt of discovering any resemblance in it to the pustules of the foreign contagious skin disease which came to be called the small pox until Jenner by a masterstroke of boldness and cunning, placed the Latin name *variolae vaccinae* first on his title page as if he were merely expressing in scientific form the universally accepted meaning of the colloquial name. There was no candid or overt attempt in the body of his essay to justify that daring innovation; most of his readers from that time to this have hardly realised that it was an innovation at all, for the reason that Jenner adroitly left his title page to justify itself. His trumped-up name somehow passed without challenge, except for a grammatical objection on the part of Pearson, and a general criticism by Moseley; and although the want of likeness, still more in circumstances than in form, between the pustules of small-pox and even the modified kind of inoculated cow-pox vesicle, has been pointed out in elaborate detail by several writers, and ought, indeed, to be so obvious to any one as not to need pointing out at all, yet the Jennerian fable of *variolae vaccinae* continues to be the creed of the medical profession." (Page 157.)

"The rational theory of the Morbihan disaster (of vaccinal syphilis in 1866) is that ulceration, followed by induration and (or) phagedaena, is part of the natural history of cow pox infection that it is nearly always latent or kept in check; that in some circumstances it may be brought reverted to; that these circumstances, in the particular epidemic, date and number of the vesicles raised on the vaccinifer, and the draining of their lymph to the last drop, so as to vaccinate an enormous number; and lastly, that a continuous reproduction of lymph from that stock tended to confirm and even to intensify the reawakened powers of the cow-pox matter, as evidenced by the more decided 'syphilitic' character of the secondaries (mucous patches on the tonsils) in two cases of the last group." (Page 140.)

"The origin of vaccinal syphilis remains, as Bohn says, 'shrouded in mystery.' Readers who have followed my argument hitherto will not be surprised if now I claim the phenomena of so-called vaccinal 'syphilis' as in no respect of venereal origin, but as due to the inherent, although mostly dormant *natural history characters of cow-pox itself.*" (Page 124)

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**THE AUTHOR'S PERSONAL STATEMENT OF THE RESULTS OF VACCINATION**(APPENDIX to [LEPROSY AND VACCINATION](#) by [WILLIAM TEBB](#))

During the past twenty-two years it has been my experience to travel in all parts of the United Kingdom, from Land's End to the Shetland Islands, and in almost every state in Europe, from the Mediterranean to the North Cape, in countries intervening between the Tagus in the west, and the Volga, Danube, and Bosphorus, in the east; also in Morocco, Algeria, Upper and Lower Egypt, Asia Minor, Upper and Lower Canada, Nova Scotia, and most of the states and territories of North America; also in Venezuela and British Guiana, South America, in the Windward and Leeward Islands, the French and Danish West Indies, in the archipelagoes of Greece and Hawaii, the Island of Ceylon, in Tasmania, New Zealand, the colonies of Australia, and in South Africa.

In nearly all these countries I have made it my business to inquire into the methods and results of vaccination, procuring information from public officials and from intelligent private individuals, and I have hardly ever inquired without hearing of injuries, fatalities, and sometimes wholesale disasters, to people in every position in life, and these have occurred from the use of every variety of vaccine virus in use. My informants have included governors, chief magistrates, consuls, professors of medicine and surgery in Continental universities, members of legislative assemblies, superintendents of leper asylums, editors of medical and hygienic journals, chiefs of military and general hospitals, presidents and medical officers of state and colonial health departments, superintendents of small-pox hospitals, clergymen of all denominations, missionaries, heads of educational establishments, and the best informed amongst old residents in the places visited.

In one country it was my privilege to be furnished with a general letter of introduction from a minister of State (since Prime Minister), which gave me access to all the official and medical authorities. Often the fatality described to me has befallen the infant of a poor mother, who with dread forebodings in her mind has tried to shield her offspring from the vaccinator's lancet as long as she could, and, like a fugitive slave, only surrendered to the minister of the law when overtaken in pursuit or her place of refuge discovered, or, like that of a distinguished Moslem (Suffey Bey Adem), my travelling companion in 1884 from Damascus to Beyrout, who had lost a daughter, a nephew, and a niece (vaccinated together about a year before our interview), all of whom died of the operation, after the most acute suffering. At other times I have seen stalwart soldiers and post office officials seriously injured, and in more than one instance crippled and ruined for life, by compulsory revaccination. I have personally investigated vaccine disasters at two military hospitals, one in Europe and the other in Africa, where, in one case, three, and in another case thirty soldiers ultimately died of the operation, and more than twice this number were seriously, and, in most cases, permanently injured. In Australasia I have personally inquired into a case of wholesale disaster— of acute septicemia, exhibited by terrible ulcerations following vaccination with calf lymph—to several hundred persons, and have seen the sad consequences in permanently ruined health. I have received several thousand written statements from parents, who allege that their children have been seriously or fatally injured by vaccination. I have proved beyond doubt, by personal inquiries in various countries where leprosy is increasing, that the increase is due to vaccination, and have furnished the testimonies of numerous medical authorities, and of official reports (all mention of which has been omitted from our leading medical journals), in support of these incriminating allegations. These facts have been detailed by me in the *Times*, *Nonconformist*, *Echo*, *Leeds Mercury*, *Manchester Guardian* and *Examiner and Times*, *Leicester Post*, *Newcastle*

*Leader, Scottish Leader, Cardiff Daily News, Gloucester Citizen, Hospital Gazette, The Tocsin, Journal d' Hygiene (Paris), Birmingham Gazette, The Vaccination Inquirer,* and other influential and well-known English, American, and Colonial journals; and some of them were quoted by me, with chapter and verse, before the Royal Commission on Vaccination, now taking evidence in London, and will be found in the third official report of the proceedings.

I may also mention that numerous facts of a sinister character were contributed by many of the delegates representing the leading European States at the International Anti-Vaccination Congresses held in Paris, Cologne, Berne, and Charleroi, the reports of which have been published and presented to the chiefs of Governments, and of Public Health Departments in all countries. Not only have the facts been submitted to Continental Ministers of State, and to successive Presidents of the Local Government Board in England, but in December, 1890, I laid them before Mr. Langridge, Chief Secretary to the Government of Victoria, Australia, and before leading officials in other Colonies. It seems to me, therefore, that, in view of these experiences, and in the presence of such unimpeachable facts, the opposition which has arisen, and is growing daily in nearly all countries, is a commendable and patriotic struggle, which should be encouraged in every possible way. The laws (often cruelly enforced), which compel the parents of this and other countries to put the health and lives of their offspring into the hands of irresponsible State officials, with the alternative of severe and not seldom ignominious punishments, are a grave national blunder, and constitute a species of tyranny wholly indefensible; and it behoves every good citizen to endeavour, by every constitutional means, in the interests alike of justice, of individual and parental rights, and in defence of the public health, and of our helpless children, to get these laws completely and permanently extinguished.

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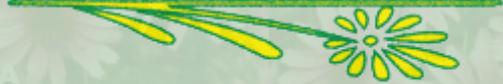
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At an early age John Raymond Christopher knew he wanted to be a doctor. His goal, however, was to heal people without surgery, "the natural way." What started as a childhood dream became his life's work and passion.

By overcoming many health problems as a young child, Christopher learned to help others by first helping himself. Through crippling arthritis, chronic pain, and severe allergies, he fought his way to health by eating raw fruits, grains, vegetables, nuts, and seeds. He lectured for a time, teaching others about his path to wellness until he was drafted as a soldier in World War II.

At 35 years of age, Christopher enlisted in the United States Army as a conscientious objector. He served at Fort Lewis and became the only practicing herbalist in the service during the war. One of the proudest moments in his military career was with a young recruit that all the doctors had given up on. The soldier's head was literally covered with severe impetigo infection. They decided to let Private Christopher try his herbal formulas on the case. After a few days of soaking the area in a preparation of black walnut hulls, the impetigo cleared up without a sign of infection. Upon seeing this "miracle" senior officers allowed him to carry on a regular practice of herbal healing.

Besides using black walnut tincture to cure everything from impetigo to jungle rot, he created many herbal formulas that did wonders for the soldiers who were stationed in Fort Lewis. These same formulas are still widely used today. As stories spread among the soldiers, the lines in front of Private Christopher's office became longer and longer. Something was different about the way he treated patients- many of his prescriptions directed his patients to the mess sergeant instead of the pharmacy. The same kind of diet that helped him through his crippling arthritis was used by many soldiers with great success. His unconventional treatment of disease made sense. It was simple and it worked.

After the war John Christopher's talent became legendary. He studied herbology in Canada with the hopes of opening a clinic of his own in the United States. He started his first practice in Wyoming and then shortly thereafter moved to Utah and opened another practice. His clinic was the only one of its kind in the country. People came from virtually every state to be treated by him and his staff. He specialized in treating so called "incurable diseases" that the regular medical doctors had given up on. After many years of healing and practicing herbal medicine, legislation was passed barring Dr. Christopher from prescribing or seeing patients.

Over his long career as a natural healer, Dr. Christopher saw one thing in common with almost every sick person that came into his office, in most cases the person's own body was capable of healing itself. He would recommend nutritious herbs and food be taken, and soon the patient would be on the road to recovery. Dr. Christopher said, "There are no incurable diseases only incurable patients." In other words, he believed that everyone had the ability to bounce back to health after a sickness or injury. With this philosophy in mind he developed a full line of herbal products that are still manufactured in Springville, Utah, and founded The School of Natural Healing also in Springville. The school has carried on Dr. Christopher's tradition by teaching the same healing methods he used so successfully in his practice to students around the world.

Dr. Christopher used herbs to heal in thousands of cases. In one case a young girl had cut her foot on the jagged edge of a shell while clam hunting at the beach. Oblivious to the pain or the wound, she had continued to run in the sand for the rest of the afternoon, wading with friends in the shallow pools that lingered as the tide ebbed out to sea. By morning, the foot and leg were swollen and feverish, and an angry red streak crept up her leg. When her anxious mother phoned Dr. Christopher, he told her about the healing powers of a common weed called Plantain. He explained how to prepare a poultice of the herb to draw out infection. The next day, the child skipped into his office as if nothing had ever happened.

Dr. Christopher's specialty was using common weeds and plants that everyone had in their yards to effect incredible healings. He used Parsley tea to help a young boy who had not urinated for days finally feel relief. He gathered Black Walnut hulls to treat skin infections and Dandelion to use for liver problems. Dr. Christopher developed herbal formulas for his patients for a variety of different ailments including heart disease, diabetes, and arthritis. He used whole herbs for his remedies, and looked for the cause of disease rather than treating the symptoms in each case that came to him.

This is a sharp contrast to today's medicine where chemical drugs are given to hide pain and strong antibiotics are given before the body has a chance to heal itself. Dr. Christopher, through a years of clinical experience, came to realize that standard medical techniques were often dangerous and

unnecessary and that herbs and natural therapies could treat the same health problems without side effects.

After the legislation was passed barring Dr. Christopher from prescribing or seeing patients, Dr. Christopher found a new way of imparting his unique philosophy of natural healing. He used his years of experience and knowledge to instruct students all over the world. In one of his busiest years he taught in more than 120 cities! This is when Dr. Christopher founded The School of Natural Healing to teach people about the healing power of nature.

In 1972 he founded The School and made the lofty goal of putting an herbalist in every home. He continued lecturing and running the school until his death. In 1983 he slipped on a patch of ice in front of his home damaging his head in what became a fatal accident. He was 73 years old when he died, and healthier than he had been in his 20s. In his life he had authored 9 books and hundreds of papers, newsletters and developed numerous herbal formulas that are still popular today. In his life's work he helped thousands of people find their way to wellness through natural medicine.

Dr. Christopher's son David has continued in his father's footsteps. David Christopher directs The School of Natural Healing today with the same enthusiasm and commitment as his father. Students learn by correspondence from many well known experts in the herbal field.

"We are very excited about the next few years." Said David Christopher in a recent interview. "The School is becoming more visible and our message is being heard by a lot of people that need to hear it. We want to continue with Dr. Christopher's goal by teaching an Herbalist in every home and a Master Herbalist in every community. With diseases on the rise, people are becoming disenchanted with modern medicine and turning toward a more traditional form of health care. I think that is where our school comes in. We teach about herbs and nutrition- none of the therapies we talk about have any of the terrible side effects that drugs do. That is the kind of medicine that people want, that's the kind of medicine people want to learn about."

Dr. Christopher's daughter, Ruth, and her husband, Norman Bacalla, continue to manufacture the complete line of Dr. Christopher's original formulas in Springville, Utah, plus many newer combination formulas developed by David Christopher, M.H., And a complete line of single herbs.

Dr. Christopher left us with a legacy. His philosophy of simple foods, common herbs, and healthy living are still as valuable today as they ever have been, maybe even more so. His life's work has touched thousands of people and continues to touch people today.

Here at The Herb Shop Connection, we live by The Dr. Christopher philosophy. Please browse the shop and choose a few herbal formulas that will become your life long friends.

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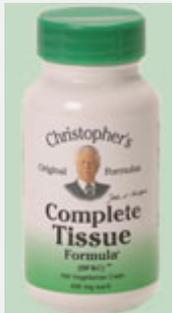
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Description: A synergistic blend of popular herbs for bone, flesh & cartilage.

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Description: A synergistic blend of herbs for bruises, stiff necks, sprains, and strained or sore muscles. Also known as Bone, Flesh & Cartilage or Regenerative Formula. For External Use Only.

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Description: A synergistic blend of popular herbs favored during winter times. Available in 4 & 16 Ounces.

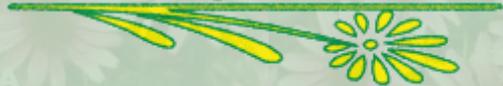
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Description: A synergistic blend of herbs for the eyes.

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### WHAT IS A PREFERRED CUSTOMER?

A preferred customer is a person who receives a 25% discount on all products sold thru the HERB SHOP CONNECTION.

### WHAT DOES IT COST TO BECOME A PREFERRED CUSTOMER?

There is an initial membership fee of \$49.95 and an annual fee of \$25.00

### ARE THERE ANY OTHER BENEFITS TO BECOMING A PREFERRED CUSTOMER?

Yes, in addition to receiving the 25% discount, a preferred customer may receive additional discounts offered via email, phone or direct mail. Currently we are offering a REFERRAL BONUS PLAN, wherein preferred customers are given \$30.00 CREDIT each time when they refer a friend or family member who becomes a preferred customer.

### ONCE I BECOME A PREFERRED CUSTOMER CAN I CHANGE BACK TO A REGULAR CUSTOMER?

Yes, however the annual membership is not refundable after it has been used.

### TYPICALLY WHAT ARE THE SAVINGS?

Assuming the average retail customers spends about \$80.00 per month, the annual savings is approximately \$240.00 per year.

### HOW DO I SIGN UP?

It's easy just call 1-888-235-3265 and talk to one of our friendly representatives.



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"WHAT DOCTORS WON'T TELL YOU THAT YOU NEED TO KNOW!"

**What would it cost you to go to your local doctor and have 14 tests performed in his office and take up an hour of your doctors time? The cost would be prohibitive for the average person.**

DR. ROBERT JONES in conjunction with CHRISTOPHER'S ORIGINAL FORMULAS INC. has developed an affordable, reusable detailed home test kit that will allow you to find out exactly what your body needs to be in balance. KNOWLEDGE IS POWER-Once you have taken the tests you can send your results to Dr. Jones for a FREE DETAILED EVALUATION. The Doctor will examine your test results and then suggest the correct products and diet you need to take to get your body back into balance. You may send your new results again and again to chart your progress.

**TEST YOUR WHOLE FAMILY TOO!**

Doctor Jones says "This effective testing was originally developed by and for the medical profession. It does not diagnosis disease, but it identifies which organs in the body are not functioning properly which allows the body to become diseased".

Dr Robert Jones realized that with the rising health care and insurance costs the average American does not seek medical advise until symptoms appear to be somewhat out of control. The Herb Shop Connection was the first to release this kit to the public. Hundreds of our customers have purchased this HOME TEST KIT and are now taking the correct herbal products. The kit removes the guesswork.

If you would like more information and a free cassette tape explaining the kit, please send an email with your name and mailing address to the address below. If you would like to order a kit today, you may do so by clicking on the [Shopping](#) link.

Send an email for your free tape.

[webmaster@theherbshopconnection.com](mailto:webmaster@theherbshopconnection.com)



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**Description:** Boulder Bar ® Endurance focuses on the goodness found in nature. These oven baked bars are designed for active, health conscious people who care about what they eat. They contain no refined sugars, no wheat or dairy, and no animal products.

**Comes in:** Original Chocolate

Apple Cinnamon

Peanut Butter

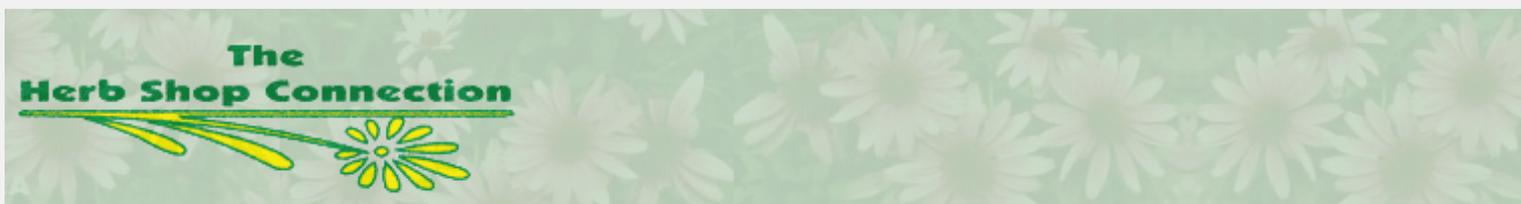
Boulder Berry

Choc Chip Peanut Butter

**Product Size:** 1-2.5 oz bar

18-2.5 oz bars per box

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