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Dr. Kathleen French
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Dr. Bassema Antabli
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Dear Drs. French, Antabli & Song;

I am writing as the son of Nadene Dow Forsyth, who passed away on January 21, 2001.

She had a high grade glioblastoma brain tumor, which initially manifest as slurred speech at the end of September, 2000. It was this symptom that caused her to enter the Kaiser system for discovery and treatment. After determining that it was a brain tumor, surgery was promptly scheduled for October 3, 2000 with Dr. French.

I'm writing this letter to the three of you, because you three were instrumental in a) causing her to 'decide' to proceed down the treatment path all three of you outlined with perfect consistency, and b) inflicting the 'treatment' she received for her brain tumor.

I want to first acknowledge that I understand that the glioblastoma is particularly nasty in terms of the prospects of long-term recovery. I can accept the possibility that it *may* have been too late to do anything that would improve her long-term survival prospects. She was after all, a less than vigorous 77-year old woman with a long history of being slightly over weight.

Nevertheless, when I arrived in Virginia on October 2nd just before mom's brain surgery, my intention was to do all I could to support her and help her get through this ordeal as intact as possible. I was at the time one of the millions of clueless citizens that feared cancer, knew nothing about it, and assumed that the medical professionals we would be dealing with would a) be intelligent & capable, and b) apply the 'best practices' of cancer therapy that had been painstakingly discovered over the last 100 years or so of experience with the disease.

As I began to study this disease and the various approaches to treating cancer, I became aware of a huge chasm between the sensibilities of those practitioners that subscribe to alternative approaches vs. the sensibilities of those practitioners that subscribe to the "conventional" treatment regimen. I found that their respective views of what cancer is, and how it relates to the host body can't be more different, nor are the subjective, objective and statistical outcomes of the two very different approaches.

I began my education by reading the literature on brain cancer provided to me by the Fairfax Innova hospital, and observing closely what appeared to be important to practitioners of "conventional" cancer

therapies (as typified by yourselves), and especially what was deemed *unimportant*. I found that you all seemed to be almost entirely uninterested in the larger and subtler context of the host body in which this cancer was emerging.

For example, according to my mother, at no time was she asked about the things that directly and deeply impact her whole system, such as her eating and exercise habits, how much water she drank each day, what other environmental or psychological stresses may be present in her life, or in fact *anything* that might provide a cancer “expert” with the data arguably needed to make an intelligent treatment decision based on a more complete understanding as to why this particular body had become cancer-prone in the first place. There didn’t appear to be any attempt to discover how well mom’s critical systems were working, such as her digestion & elimination, or the level of NK cells in the blood, or the levels of the various trace minerals that are so important to keeping a body in balance and working well.

On the contrary, it was a bit unsettling to me how quickly and automatically the ‘surgery-radiation-chemo’ (herein ‘SRC’) mantra was recited as a given, starting with Dr. French promptly after the surgery, and continuing with Drs. Antabli and Song.

As I began to learn about the dozens of alternative therapeutic approaches to cancer, I began to see that there was not only sound science behind most of them, but they were also informed by a more complete picture of the context in which cancer emerges than is contemplated in the conventional ‘SRC’ model.

I learned that there are four overarching principles that inform every credible and effective alternative therapy. These principles are amazingly consistent across a broad cross-section of therapies, and are so profoundly important that they can and are used to assess the viability and effectiveness of a given therapeutic approach to cancer. I learned that how a therapy measures up to these overarching principles is a good indicator of not only how effective it will be in the short-term, but also how much it is in the patient’s best long-term interests.

In order to be an effective response to cancer in the short-term, and also provide the maximum long-term benefit, a cancer therapy must adhere to these four principles:

1. Recognize the role of accumulated toxins in the body (regardless of source), and aggressively cleanse and detoxify the body;
2. Recognize the role of adequate nutrition to strengthen the cells and bodily processes, and therefore, eat only the highest quality foods and aggressively supplement the diet with an individually tailored mix of vitamins and minerals;
3. Recognize the need for a strong and responsive immune system, and therefore do what is necessary to build and stimulate the immune response to the cancer;
4. Above all, do no harm.

There is actually a fifth principle that overlays the above four, and is every bit as important as the others. That is the need for a “fighting spirit” and a focused peaceful frame of mind.

I learned that undergoing any cancer treatment that embodies these guiding principles, regardless of the details of the treatment, is much like cultivating a garden. There is much work to do on many fronts, but an overarching awareness of the system in which this garden lives is essential to achieve lasting results.

On the other hand, I observed the mindset informing and driving the SRC approach to cancer as one of “waging war” on the symptom (i.e. the tumor), with the body serving as the battle zone. If this toxic and adversarial approach was effective at removing cancer from the body, it could be forgiven. But SRC is so alien and toxic to our system on so many levels that it fails miserably the four-point “litmus test” described above. To make matters worse, SRC not only fails the credibility test on all four points, it actively undermines the possibility of simultaneously following a credible and therapeutic approach.

By the time I heard about mom’s condition, surgery had already been scheduled. Because the surgery was scheduled before any of her children were “in the loop”, I have no idea whether there was any discussion between mom and Dr. French about the full ramifications of this surgery. I don’t doubt that a clear statement was made to mom that the surgery was deemed necessary (it would be hard to schedule such a procedure without saying at least that), but I wonder if she received a full disclosure of the downside as well, so that she might be given a “full deck of cards” to work with, and in so doing, become an active participant in this process that was to affect her so deeply and permanently.

Was she told, for example, that this surgery is a hugely traumatic experience to the body and the brain, and that it would substantially weaken her energy level and immune system (which was already weakened & nutritionally ‘bankrupt’), and that this weakened state would in fact further reduce her chances of fighting off this cancer? Or was she told of the statistical survival rates for patients with her condition that did not pursue surgery? If the 3-year or 5-year survival rates are not dramatically different for example (and they aren’t), a reasonable person might easily conclude that it wasn’t worth the damage and trauma, both direct and indirect, such a procedure inflicts.

Because I wasn’t there to witness the initial interactions with mom and Dr. French, I will assume for the purposes of this letter that Dr. French told her all mom needed to know so she could provide a fully informed consent, and that mom made a reasonable decision to proceed with the operation based on this full picture of the risks and benefits. Since it’s her body and her life, that’s a fair expectation. My personal experience with the communication style of Dr. French concerning such profoundly important issues tells me that such a conversation did not occur at that level, but that is mere speculation on my part.

Starting with Dr. French, and continuing with Drs. Antabli & Song, and apparently permeating the entire health care system mom was navigating, the SRC mantra was recited promptly, automatically, without statistical justification *and* without providing the least bit of credible space for any other approach to this disease. I’m not saying that there was NO acknowledgment of the existence of alternatives to the SRC gauntlet, but these alternatives were treated dismissively as if they are something one might do at the end of one’s life to “feel good”, like buying a new hat, or treating oneself to ice cream.

Mom's next experience was with Dr. Antabli, when my mother and I had an office visit. I think it was on Tuesday, October 17, 2000. When I brought up a question about the role of nutrition and the immune system in the treatment of her cancer (I had just begun to learn that this can play a key role in the progress and treatment of the disease), she gave me a puzzled look and said, "I'm not aware that this cancer is caused by a vitamin deficiency", and then she continued with the SRC mantra. She did make some condescending and dismissive remarks along the lines that if mom wants to do these things, she should do them, but the tone of her remarks made it clear that she considered such stuff as alternative approaches to cancer therapy trivial and unimportant, but mostly harmless - provided the *real* therapies (i.e. SRC) were duly completed.

Although I have no direct personal experience with Dr. Song, I do have abundant experience with the results of my mother's radiation treatment. There are two issues with Dr. Song that I would like to address here:

Issue #1: The choices my mother was given in Dr. Song's office on Thursday, October 19, 2000, and the way they were presented, and;

Issue #2: Once mom made a decision to proceed with radiation, the way in which she was allowed to persist with the original radiation schedule, in spite of the fact that she had been throwing up almost nonstop for approximately eight weeks in a row. No midcourse corrections were provided by Dr. Song, although the persistent radiation-induced nausea was preventing her from keeping any food down literally for weeks. In essence, the treatment was causing her to starve to death, or at least become so weakened that she could not muster the energy needed to recover from the double whammy of starvation and the demands of this aggressive tumor.

Concerning issue #1: The visit that sealed mom's fate in terms of how she would proceed with her cancer treatment occurred at Dr. Song's office on Thursday, October 19, 2000, the day I had to fly back to Alaska. My sister Janene was present at that visit, and the way it was described to me, Dr. Song artfully presented a compelling case to proceed with radiation treatment. He was adept enough to fully acknowledge the alternative approaches when he was questioned about them by either my sister or my mother. According to my sister's report of the visit, the phrase that sealed mom's fate went something like this, in response to a question by either my sister or my mother about the role of nutrition:

"...the tumor that is growing in her brain is not a foreign object according to what her body 'thinks'. Her body's cells are producing this tumor. Feeding the body healthy food is feeding this tumor healthy food as well, and tumors like healthy food just like the rest of the body..."

That did it. After all, what reasonable person wants to feed their tumor? And my mother was an intelligent and reasonable person. She was also very afraid and very worried about whether she would have enough money to proceed with an alternative approach. Combine all this into the artful presentation by Dr. Song, and the path was clear. From that moment on, he had her hook line and sinker.

The insidious part of this seemingly helpful bit of information from Dr. Song is that it was less than a half-truth. Had mom been given the “rest of the story”, she might well have made a very different decision. The rest of the story, as you all well know, or at least certainly SHOULD know, is twofold:

1) Tumors grow when the blood sugar level is high, or when it spikes and drops. This is why all successful alternative therapies, among other things, scrupulously avoid sugars in any form, whether it be candy, fruit juice, Ensure, starches that can be converted to sugars, etc.

So, had she heard Dr. Song talk about this well-established relationship between sugars and tumors, she might have reasonably asked what she could do to eat in such a way as to starve the tumor and feed the body. And *this* question would lead her down an entirely different, more intelligent path - one that apparently was outside the scope of Dr. Song’s expertise.

2) The body becomes *cancer-prone* when, for whatever reason (and there may be hundreds of reasons, ranging from environmental toxins to genetic predisposition to diet), the body's immune system becomes suppressed and ineffective. Since cancers emerge only *after* a body has become cancer-prone, the immune system in a cancer patient is *by definition* either not ‘thinking’ at all, or at least not ‘thinking’ as it should. That is why all credible and successful alternative therapies make it a point to, among other things, strengthen, reorient and stimulate the immune system.

Again, had she heard Dr. Song talk about the importance of a healthy and responsive immune system, she might have reasonably asked how she might strengthen her own immune system. And again, this would lead her down an entirely different, and more intelligent path - again, one that apparently was outside the scope of Dr. Song’s expertise.

While you all share the responsibility for the treatment direction mom took, Dr. Song was the one among you that wielded the most influence on her, first, by virtue of the carefully cultivated “mantle of authority” that all three of you wear so regally, second, because of the artful half-truths he presented, and third, the fact that, unlike SRC which is fully paid by insurance, mom would have to pay for any alternative therapies out-of-pocket. How absurd is *that*?

For Dr. Song to leave out these last two parts of the complete picture is a gross misrepresentation of the facts and the dynamics of cancer and its interaction with the body. Dr. Song's portrayal of nutrition and cancer was demonstrably and substantially incomplete and misleading. In my mother’s case, the impact of these misstatements was profound and the results irreversible.

I don’t think any reasonable person would consider mom’s consent in this case to be fully informed. In fact, she might have reasonably concluded that one of the many successful alternatives that adhere to the four principles I outlined earlier would be a far better bet. Not only would she be able to starve the tumor and strengthen her body & immune system with the right combination of diet, supplementation and other healing remedies, but she would have other collateral benefits from such a cleansing and rejuvenating regimen, including increased energy, improved muscle tone, a healthier digestive system, reduced arthritis pain, and more.

Most importantly, she would have the energy needed to fight this emotionally, spiritually & intellectually, all which tends to translate directly into physical manifestations.

Concerning issue #2: One of the greatest and most bitter ironies of this fiasco for me is that as she underwent eight weeks of radiation, with accompanying nonstop nausea, Dr. Song's main concern was that she at least get some Ensure down her for nutrition. The second ingredient in Ensure is sugar! From the perspective of the unique needs of a cancer patient, Ensure might as well be poison, as it is the pure tumor food Dr. Song warned mom about.

Then, as the combined effect of eight weeks of radiation, nonstop nausea and drinking nutritionally enhanced sugar water (Ensure) came to a pitiful end in December, cachexia began its insidious work in earnest. By the first week of January, mom's already starving body lost whatever appetite was left, thanks to the cachexia.

It was in early December *at the very latest*, that aggressive action to interrupt the cachexia should have been taken. From a holistic point of view, December was probably too late in the game to begin feeding and cleansing the body with any hope of a long-term recovery. At this late stage, the only thing left that could stop mom's rapid descent caused by cachexia was a chemical interruption of the body's natural enzyme that converts lactic acid (cancer wastes) to glucose (cancer food).

The safest and the most effective way to do that is with hydrazine sulfate (when used as directed), a common and inexpensive chemical. For reasons other than it's obvious and proven merits, Mom was not given this option by Dr. Song, even though there was a 70% chance that it would have broken her cachexia, which in turn would have restored her appetite and energy level, and provided at least a modicum of hope that she could avoid starving to death.

Instead, Dr. Song prescribed Magace which, although perhaps 100 times more expensive than hydrazine sulfate, is completely ineffective at breaking the "sick relationship" established between the tumor and the liver that is cachexia. Magace is indicated for stimulating the appetite in AIDS patients, and was an inappropriate and useless directive in my mothers' case.

The health care system imbues you with a tremendous presumption of authority - you are the ones to turn to, and place one's faith in, when faced with a terminal disease. I have seen from direct experience that you (specifically and generally) actively cultivate this frame of mind in the patient.

So, if you will be the absolute authorities in the cancer arena, you have a corresponding obligation to be able to OBJECTIVELY look at the problem from a mile high or an inch away, and be able to move easily from one perspective to the other. There is also an obligation to be aware of the full gamut of options available to a client/patient, and to know of the "prior art" and the "state of the art" in the realm in which you are professing expertise.

While I found that you ALL were able to effectively carry the mantle of absolute authority in the realm of cancer, I also found you so narrowly focused on your specific areas of expertise (other than to be

able to recite the SRC mantra), that I got the distinct feeling we were talking with the Wizard of Oz during the office visits I was privy to.

The SRC approach to cancer is not only outrageously expensive, invasive, toxic and mechanical, I find it almost completely divorced from any whole-systems thinking. SRC is like a bull in a china closet - a “scorched earth” approach to cancer with the healing sensibilities of Attila the Hun, rather than what I might expect of thoughtful and objective experts in this field with a firm grip on the healing arts.

There is a huge body of prior art and current practice that lies outside of the SRC fortress, and it was scrupulously ignored and dismissed in my mother’s case. Because of your colossal superiority complex coupled with your failure to fully disclose the severe limits of your expertise as it relates to this non-SRC body of knowledge, my mother suffered what I’ll call here the Wizard of Oz effect. She transferred to you a mantle of authority and powers that you simply do not possess legitimately, and legal sanctions notwithstanding, that you cannot ethically wear.

Like the message on a pack of cigarettes, full-disclosure is in order. You should be required to state to each and every patient:

“As far as your cancer is concerned, I am trained and qualified to do only one thing well. I am mostly ignorant of the prior art and state of the art in alternative cancer therapies, as well as the subtle dynamic between toxins, nutrition & the immune system, and cannot speak with absolute authority about what is the best way for you to address this cancer in particular, and your cancer-prone body in general. I advise you to consider all the options available to you, including those alternative cancer therapies that have a long and impressive track record of success.”

I am outraged that this myopic battlefield mindset epitomized in SRC should prevail as the only credible approach to this disease. I say the only credible approach, because it is clear that any thing else that uses a different paradigm is not only labeled by the cancer establishment as “unproven”, but it means that the cancer patient pursuing alternatives cannot have the benefit of insurance coverage. This simple “financial bias” has profoundly crippled the potential for more intelligent alternatives to move from beyond the fringes into the mainstream.

I am further outraged at the ‘cancer treatment’ my mother has been given. Because of the combination of fear, lack of money to pay for alternative approaches, half-truths spoken by Dr. Song, and the “Wizard of Oz” effect, mom threw her hat completely into the conventional therapy camp. She was devoted to making those radiation appointments, despite the fact that her already exhausted and depleted body was being made even more so with each treatment. Her faith in what Dr. Song was telling her to do was complete, and she gave her life for it.

The relentless radiation-induced nausea was of course the primary culprit. It doesn’t take a rocket scientist to realize that eight weeks of vomiting will place even the most healthy and robust person into a dangerously weak state. The nutrients essential to her recovery, let alone her survival, were being consistently denied her, and ironically, the sugars that feed the tumor were being prescribed for her by Dr. Song in the form of Ensure!

Again, I acknowledge that even the most pure and effective alternative treatments may not have had a significant impact on her *long-term* survival, although statistically speaking, they had a better chance than what you were giving her. But one thing I would bet my life on, she would have been in a very different place on January 21, 2001 had she followed a healing and nutritional regimen that was designed (and proven) to starve the tumor and cleanse & feed the body. It doesn't take much imagination to realize that she most certainly would have felt better and stronger after eight weeks of such a diet vs. what she got, which was eight weeks of radiation and vomiting.

Beyond the self-evident subjective outcomes between the two paths, a diet and supplementation regimen designed to not only starve the tumor but stimulate the body's immune response to it makes real the possibility of an objective reduction in tumor size, even a grade four glioblastoma, and without the immense "collateral damage" associated with SRC.

I accept as an article of faith that your radiation worked as advertised - the tumor was no doubt reduced in size as a result of the radiation. Assuming this is true, my worst fear as mom entered into the radiation routine in October was nevertheless confirmed only a few weeks later...you won the battle, but lost the war. If this was your first time doing this with an elderly woman, it could be chalked up to inexperience. But I doubt it was your first time...

By virtue of your positions of authority, you have an obligation to ensure that your work adheres to the Hippocratic oath. Your automatic SRC response to cancer places you in violation of that oath.

Again, if SRC was capable of transforming a cancer-prone body into one that could remain cancer free for the long haul, much could be forgiven. But SRC is, by any objective measure, a pitifully inadequate response to a complicated systemic problem. The myopic and mechanical nature of SRC defies credibility in the more open and objective world of whole systems thinking. The fact that the SRC mantra is parroted repeatedly despite the uniquely individual circumstances of each case, and despite its miserable failure rate, begs the question: Why would such otherwise intelligent professionals continue down such a dismal and ineffective path, when larger perspectives and more effective and healing approaches exist? This is where a look at the sheer size of the conventional cancer industry today (\$2.5 billion annually) gives us a clue.

Ironically, the American Cancer Society's "unproven methods" list contains the answers (and there are dozens of valid approaches) to the cancer dilemma, as it embodies perspectives and sensibilities far larger than the pitiful "search and destroy" mentality of SRC.

The moral issue here is *not* that you don't have all the answers - no one does. Rather, it's that you present yourselves as if you *DO* have all the answers. The sheer arrogance and cluelessness of the SRC establishment boggles the mind. To be both arrogant AND clueless is a dangerous combination in any context, but especially in medicine. What happened to my mom, and thousands like her, is the inevitable result.

You should be ashamed of yourselves. Your response to her condition was automatic, preprogrammed, and limited in scope to the extremely narrow expertise and biases you possess. The state of the cancer healing arts is far larger in scope and sophistication than your pitiful and mechanical response. She was poorly served by you. In a more intelligent and compassionate system, I have no doubt such behavior would be deemed criminally negligent.

The really sad part is that what happened to her is the rule, not the exception.

Like the Berlin wall, SRC as an *exclusive* response to cancer will someday crumble of its own dead weight. But since there are so many influential parties profiting from and actively reinforcing the status quo, it will take some doing to dismantle.

I intend to do my small part in making this happen sooner rather than later.

Most sincerely,

Karl J. Forsyth

cc Nadene Forsyth's family members

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Dr. Marie Schum-Brady, MD

Dr. Jason J. Harmon, ND

Jeanne M. Wallace, PhD, CNC

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