



## **Transcript of “A Second Opinion: Laetrile at Sloan-Kettering with Ralph Moss & Eric Merola”**

Bulletproof Radio podcast #155



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Dave: Hey it's Dave Asprey with Bulletproof Radio. Today's cool fact of the day is that the Tesla model S scored 5 out of 5 stars by the National Highway Safety Administration in the US. That's the highest score any car has ever had in the history of the automobile. It was so good that it even broke the machine that was supposed to crush the car during a rollover test. That's what I call Bulletproof.

Today's guests are unusual. I have no financial ties, no incentive to be working with these guys but it's phenomenal work and it's 2 guys today. One of them is Eric Merola who's an international award winning documentary filmmaker and Ralph Moss who has a PhD, the executive director of [cancerdecisions.com](http://cancerdecisions.com) and the former assistant director of public affairs at Memorial Sloan-Kettering Cancer Center in New York and also a founding advisor to the NIH office of alternative medicine.

The reason that I've asked these guys on the show today is to talk about their new movie which is called Second Opinion which is a really incredible story about how young science writer Ralph Moss as a young man risked his entire career by blowing the whistle on a cover up involving cancer therapy. Ralph, you and I haven't had a chance to talk in person before but I run the Silicon Valley Health Institute. It's an anti-aging nonprofit group based in Silicon Valley obviously, based in Palo Alto and for 20 years we've had luminaries and anti-aging alternative medicine coming and give lectures once a month and we've got many years of video online for free.

In that time I've had more than a few people call me and say "Dave I have cancer. I really bad cancer. What do I do?" My answer is "I'm not a doctor and I know a few things about a few alternative treatments." If you want to see someone who's done the analysis from a scientific looking at both alternative and western medicine you always go to [cancerdecisions.com](http://cancerdecisions.com). I referred countless people to your work because I consider to be open minded yet science based review. If I was looking a diagnosis of cancer in the face I want the information that you do. You've already earned my respect long before you made this movie.

In fact it's the depth of your own research and the research that I've read that actually made me want to invite you on the show. Number one thanks for that work and welcome to the show Ralph.

Ralph: Thank you very much.

Dave: If you're watching on iTunes or on YouTube, you can see Eric but you don't see Ralph because Ralph's audio and video connection wasn't good enough. We've got the best audio we can get there and you'll be looking at Eric most of the time and Ralph's we're not looking at each other eye to eye but still it's a pleasure to get to speak to him in person.

Ralph: Same here.

Dave: Now Eric you've also got a cool story here. You worked as on part Michael Moore's featured documentary Capitalism: A Love story and this is your third documentary that you're working on?

Eric: That's right. Before doing my own documentaries, I've worked in animation and postproduction in TV and film for a long time. I did a really hilarious animated bit for Capitalism: A Love Story where George Bush was basically telling the world that the whole financial system is going to collapse. I animated all hell breaking loose behind his speaking at the podium.

Dave: How nice. I want to interview both of you which is a little tough over Skype but it's cool because both of you are very accomplished people and you're both high performing but you came together. How did you guys come together to make this movie? Did you know each other ahead of time or is there a good story there?

Eric: I'll start actually with that and I'll let Ralph pick it up. Essentially living in New York City long trains ride home I always like to have my friend, my book and my backpack just to have something to read. I was walking by a used bookstore in New York saw a book titled a The Cancer Industry sitting on the outside bargained in shelf. It had been published around 1980. The title just really caught my eye, sounded interesting,

also wasn't very much money and I read it. I couldn't put it down. I must have read it 10 times. I have still with highlight and post it notes.

Again, I never made my own documentary film at that point but I felt wow what an amazing story as a subject for a documentary film. I actually made an attempt to get Ralph to do this back in 2007 and I think it was just bad timing for him and I had no real documentary credentials to speak of at the time. I went off in another direction and did 2 documentaries based on another chapter of his book about a scientist named Dr. Burzynski. Then we came back around again and I presented to Ralph again and he agreed. In fact, I'm happy we waited because I've learned so much as a filmmaker and I couldn't be more proud of this final product of this Second Opinion. I just don't know if it would have been nearly as good if I've done it back in 2007. That's the short story.

Dave: That's amazing and Ralph your experience in the cancer industry goes way back. What made you decide to do documentary now versus a while ago?

Ralph: Well I think Eric had to convinced me because aside from his experience or lack of experience in the film business when you go through some traumatic experiences I did at Sloan-Kettering and then publicizing and I did a lot of publicity around my book Cancer Industry starting about 1980 but then I went on and I did a lot of other things in the cancer fields. I have a lot of other thoughts other than just Laetrile. Laetrile was the subject that propelled me into this field or this as a public figure in the field but I felt like I want to move on from it. Eric convinced me really that the story hadn't been told.

First of all a whole new generation of people had arisen who were not even weren't alive in 1970's when this all occurred. My book Cancer Industry was as Eric said relegated to the bargain basement shelf at bookstore. More importantly as it turned out there was a lot to learn and to say about Laetrile. I was too close to in the 1970's and 1980 to realize what a fascinating story it was, was a fascinating compound it is and what real potential it still has a possible treatment for cancer.

Once Eric and I decided to do the film about 3 years ago, 4 years ago then I started my own reinvestigation of this whole laetrile question, laetrile controversy. I actually wrote a book that came out recently called *Doctored Results* which is a very detailed 250 page analysis of exactly what happened at Sloan-Kettering stuff that we couldn't go into in the film. A lot of stuff frankly that I discovered and realized after we shot the film. We did the filming which was in 2012. I kept working on the book and the book came out this year.

I'm still blown away by the how diabolical this way even though I was involved in it and I was a little pawn in their game. I self-titled *Doctored Results* the suppression of laetrile at Sloan-Kettering Institute Cancer research. I thought long and hard over that title was the words suppression to sensationalist but it isn't. It's actually what happened. A good and promising treatment was suppressed because of personal reasons and economic reasons on the part of the leadership of the institute that I worked for.

Dave: What was the treatment? Tell people who are maybe driving right now and aren't familiar with what laetrile is. Tell them where it comes from and how it got even to be of interest as a cancer compound.

Ralph: Laetrile is just really just another name for amygdalin. Amygdalin is a common chemical found in fruit pits of various fruits of the apple, apricot, peach, almond family. That's a whole big family of trees and there's a pit and then if you took a hammer or a nutcracker if you open up that pit inside there's a softer more edible portion called the kernel. These apricot pits and kernels are pretty much a waste product of the apricot canning industry. The price on them is very low. This is very important to understand. They're almost a throw away item.

A man named Ernst Krebs Jr. was a graduate student at the University California Berkeley and for various reasons none were terribly good in retrospect he developed the idea that these kernels would be useful in treating cancer. He may or may not have known that in traditional Chinese medicine peach kernels are used as a treatment for lung inflammation and lung diseases. He lived in San Francisco within walking distance of China town and I often wondered whether part of

his “research” wasn’t going around and talking to these traditional Chinese healers or it was just a huge coincidence.

Dave: His name was Krebs. Is he related to the Krebs of the Krebs cycle, the citric acid cycle for cellular ... no different guy.

Ralph: Other coincident. Another coincidence is the word Krebs in German means cancer. It also means crab. Of course kreb is the word cancer in Latin means kreb and it means the disease cancer and in German it’s the same deal. Krebs in German means crab or it means cancer. Here’s these cancer researchers who have been named cancer and he was a little crabby at times too maybe he pertained in that way as well. In any case his father Ernst T. Krebs, Sr. was a physician in San Francisco and another brother. The 3 of them basically invented this substance and they gave the name laetrile which they thought they had invented a unique patentable product. They never were really able to make that product.

Really from the beginning which was the early 1950s they were marketing amygdalin, manufacturing it in their basement, marketing it and calling it laetrile. This is a source of a tremendous amount of confusion even to this day. There was a paper published just a couple of months ago where a very bright scientist in Germany doing wonderful work but they [sooner 00:12:29] got a little wrong in terms fo the relationship between laetrile and amygdalin. For all practical purposes these are the same things.

What happened next or how I became involved was that there was so many people who believed that laetrile was beneficial to cancer patients. They got up a petition 43,000 people to ask the president of the United States who Richard Nixon at that time to test laetrile in humans. Nixon didn’t know what to make of this but he gave it to his so called cancer czar. A cancer czar, Benno Schmidt was also an officer of Memorial Sloan-Kettering Cancer Center so he then asked his cancer center to test this.

They started testing it 1972 and then I came on in 1974. I was hired as science writer and writer and assistant director public affairs at



Memorial Sloan-Kettering and so the program and testing laetrile in animals was already well under way by the time that I got there.

Dave: It was basically invented in the 40's and it was already being tested because these guys had basically started selling it. Honestly that is the classic recipe for it being a scam. We had this traveling medicine people back in the west. It didn't start out looking pretty, but what happens during the trials?

Ralph: Everything about it I would say was crying out that this was a quack remedy, a useless remedy and so forth. That's the way the medical profession dealt with it even to the point of let's say not reporting any positive results but only emphasizing the negatives. Sloan-Kettering was objective initially and they were interested in testing as my big boss Robert A. Good once said "We'll look at it. We'll test anything and if it has any promise at all." They were good to their work for a couple of years. The test that they put it through initially everybody was testing it in transplant tumors it didn't work.

Then they decided we'll give it one more try. We'll try it on spontaneous tumors in animals which would then becoming more like a human tumor. A tumor that arises without being injected with the carcinogen or injected with cancer cells would be more typical what happens in a human being. A tumor that arises spontaneously in the animal. They gave it to their best researcher who was also retired. His name was Kanematsu Sugiura. He tested it special kind of mouse that spontaneously developed cancer in 80% to 90% of cases. It developed breast cancer and then the breast metastasized or spread to the lungs of these animals.

Lo and behold it worked. It stopped the spread of the cancer which is the most important thing that a drug could do because 90% of the people who died of cancer even today die of metastases, of the spread of the cancer to vital organs. It didn't cure the cancers. It didn't particularly shrink the tumors. It stopped or slowed the growth of small tumors temporarily but it had this enormous effect on the metastasis. Based on his 60 years of research he said that it kind of looks like a vitamin because the coats of the animal become shinier. They become frisky



even on the day that they were injected by the afternoon of the morning that they were injected you can see the difference in their behavior.

As I say this man co-invented therapy. He did original research as going back to 1909 on cancer in animals. There was no greater expert in the world on testing drugs in animals than Dr. Sugiura so you had to listen. I wouldn't know the difference between a healthy mouse and a sick mouse but he did. He said this was pretty remarkable. The most important thing the thing that we keep our eye on this was the best agent ever discovered up until that point in stopping the spread of cancer, the most important question that confronts people treating advanced cancer.

Dave: What happened?

Ralph: I'll put it very briefly. In 1974 and again in 1975 the top leadership of Sloan-Kettering, presidents of the hospital, the institute and the overall center went to Washington and pleaded the case of laetrile. They went to the National Institute for help, the National Cancer Institute and then to the Food and Drug Administration and the American Cancer Society was there and other people were there. They said this stuff is working beautifully in animals so we want to go ahead now and do a clinical trial. We have arranged to set up a clinical trial at a very good, very famous and important hospital in Mexico City called [inaudible 00:18:27] hospital.

They had identified people at that hospital who though that laetrile was of some interest at least to worthy of doing clinical trials and it wasn't a magic bullet but it had some ameliorative benefits for patients and they got shot down. We have the notes. Eric shows them in the film of the meetings but I think the notes are sanitized. I don't think they really showed what really happened. The leaders came back after the March 1975 meeting basically with their tails between their legs. I think somebody who [inaudible 00:19:07] riot act at that point.

We know that the American Cancer Society was pressuring Robert Good, the president of Sloan-Kettering to let them handle all the publicity around Sloan-Kettering's testing. That's what's happened.

They did an abrupt about face led by Lewis Thomas who was president of the center and I think the person most [inaudible 00:19:30] in all of this. I wanted to talk to Thomas after this happened. I couldn't understand why he had turned on a dime and gone from being at least neutral and public on the question to being completely lying about and denying the [inaudible 00:19:51] I asked my boss if I could talk to Thomas. My boss said "No but I will talk to him." Meaning himself, he would go.

There was a little bit of rivalry between me and boss because this was his most cherished contact in the center, the president of the whole center so he went to talk. We were a very close confidential terms my boss and I. He would never lie to me or anything like that. He came back and he was red in the face and he said, "I asked Thomas at why he made these negative statements and Thomas said I'm not going to die on the barricades for laetrile. It's only a palliative drug. If it were a cure, I might do so but since it's only a palliative, meaning it only stops spread of the disease it didn't destroy the tumors completely or remarkably shrink them. I won't die on the barricades."

I think that is the closest we have to insight into why they turned on a dime in March of '75 and then joined the crusade against laetrile when up until that point for 3 years they have been at least honest within the confines of the cancer establishment and neutral in the public sphere. Then it became a nightmare because we were then as an institution upholding a lie. Everything we said and did about laetrile from that point on was wrong, was suspect. It was tainted by the fact that these people individually and collectively had decided to sacrifice the truth about laetrile.

The truth is they didn't see up until the day they went to Washington for expediency sake. It's what makes the story I think both complicated and interesting that it's not like a grade B thriller in a sense that there's the bad guys and there's the good guys and which color hat each one wears. These guys could have been the biggest heroes of all. People would be making movies about them if they have just stuck to their guns. Good [inaudible 00:22:11] but it wasn't so important. Lewis Thomas, when he caved in everybody else ran for the exit.

Dave: Why was there so much pressure to cave? You're saying that the America Cancer Society was actively telling Sloan-Kettering not to continue work with this. What was the motivation?

Ralph: They had put their reputation on it. They had to put laetrile as exhibit number one on their list of quack remedies. The public looked to them for truthful statements. They could have said I think most people would have understood if they said look stuff happens. We thought it was negative because there really was no good evidence that it was a good treatment. Sloan-Kettering has now done this work we're going to have to reconsider. That would have been the honest reaction. Instead they panicked and I think in some sense they thought they could bluster their way through.

It was almost like they thought that their ideas were the objective the reality. I'm not putting terribly well but it was like it was so egotistical and they thought they determined what was real and not real and not science determining. Not the outcome of scientific experiment but what their opinions were and their opinion were these are a bunch of dangerous quacks running around telling ... They saw all kinds of dangers real some of which were real and some of which were imaginary. They were afraid of people would go to laetrile instead of doing conventional therapy.

70,000 people did [with all of their 00:23:53] disapproval. At least 70,000 ran to Mexico to get laetrile. You could see their world was crumbling and it was a whole another proof of doctors not well credentialed, not really terribly brilliant or leadership quality from the ... The people who took the anti-laetrile stance were the highest ranking people in all of medicine. This was the establishment and how come these crazy, wacky people mostly from California and they've got a theory about cancer by the way they developed this into a whole another theory which involved the John Birch Society and the Rockefeller and conspiracies and this [inaudible 00:24:45] anti-cancer vitamin.

Dave: Who did all that? You're saying the America Cancer said?

Ralph: No laetrile is.

Dave: The people who were taking it became cult like in their belief that this was going to help them because they're grasping for life so they over marketed the stuff that they were clinging on to so they wouldn't die of cancer. That's kind of what happened?

Ralph: The people who were marketing it, not the people taking it but there became a lot of money involved in it. The US government illegalized it and it then became a black market item and of course the price shot up and then the government were hunting for the smugglers. The John Birch Society got involved in this because the major party wouldn't touch it with a 10 foot poll and it became a circus. It was a complete circus. Theories arose that this was not only the cure for cancer but if you ate apricot kernels you would be bulletproof from cancer. You would never get cancer and people were eating handfuls of apricot which contain cyanide. If you ate enough of this stuff you kill yourself and that was another area of concern.

There was ample reason why the establishment was worried about laetrile. Some people were abandoning good effective conventional therapies to take this very still unproven thing. Based on everything I was talking about [inaudible 00:26:09] animals which doesn't necessarily convert into human. They thought they had good reasons to oppose this. The problem was they're not positioned and [inaudible 00:26:22] into denial of [inaudible 00:26:25] and they couldn't stand the thought that this thing that they had fought for 25 years actually turned out to have some merit to it. It wasn't the merit that the quacks were saying but it had merit that [inaudible 00:26:41] very clearly it stopped the spread of cancer.

Eric: [Inaudible 00:26:46] everything stacked up against it. If you think about it you have an established quack remedy you have the John Birch Society being its biggest supporter. You had the laetrile proponents also not being honest and taking advantage of people. It was a mess and then Sloan-Kettering not to mention the fact that it's dirt cheap nearly impossible to patent, impossible to regulate. It just seems pretty obvious that they went oh my god after realized it worked. They gave it their best shot in DC. They said no so I guess we're going to have to get in line and lie about it.

Dave: Is it like a normal behavior and you would know this better. If you have cancer and you've tried some traditional treatment or you look at the research and you find out that chemotherapy doesn't have very good statistical odds for your kind of cancer. I know if I had that I would be reaching for pretty much the grab bag full of things that might potentially work. If I could afford it, I would do all of them because hey I'm going to die and I'd rather die broke and much later rather than die wealthy of painful tumors. It's ...

Ralph: [Inaudible 00:27:52] happy hunting ground for charlatans.

Dave: It's true I suppose.

Ralph: We could brainstorm and come up with some plausible sounding remedy right here and now if we wanted to and sell it over the internet and we might make some money. We might make a lot of money. I've never done that but it's something one could do and people do it. It sounds completely heartless but that's the world that we live in. Yes people do get desperate and it is a big problem. The thing was though that the ACS, the American Cancer Society up until 1975 they lived in a very neat world.

Their world was divided up between good honest effective remedies and ineffective fraudulent quack remedies. That was a simple world for simple people similar times. In 1975 they had the biggest jolt something that's actually still reverberating today in the whole cancer world. They were convinced to remove 3 treatments from their unproven methods list. One of them was Coley toxins which was a kill bacterial vaccine that was a early form of immune therapy. There was another form of vaccine or immune therapy from the list and the third one was hyperthermia or heat therapy.

It was never acknowledged that they had ever made a mistake but implicit in this was the idea that they were not infallible. Up until that point they were like more infallible than the pope. There were millions of people who believed anything ACS said was the truth about cancer. Their world got shaken by that. Then of course along comes the laetrile. If laetrile works at any level if it's biologically active in cancer patients

and it's much less stops metastases their whole world would crumble. They're intellectual framework and as we saw a few years later they really succumbed in good measure to their own institutional inertia because they lost control of the breast cancer field to the Susan Komen Foundation and then the other foundations that have come along.

ACS was very vulnerable because of their ultra-conservatism. They're political conservatism but their unwillingness to accept new ideas. They were not in a position they could take very many more blows at that time. They basically put pressure to one individual in particular put pressure on Rob Good, the president of Sloan-Kettering Institute at a moment when Good was extremely vulnerable to that kind of pressure and the old institute was in a financial crisis. ACS had pulled it's \$4 million contribution out of Sloan-Kettering at that point it would have been tremendous crisis. Good and [inaudible 00:31:06] management didn't want to have to pay shortfall for all the money that was begin lost by Sloan-Kettering at that point.

They put pressure on. The other people and the NIH the public health service. The national cancer institute I think ego was the biggest driving factor there. Going back to 1953, they had been issuing these statements saying we know what the deal is with laetrile doesn't work. Don't go anywhere it. FDA the same thing. FDA wouldn't approve of the clinical trial and a very good book history written by FDA that came out about 2 years ago exclusively says that FDA was waiting to line up the anti-laetrilist at a number of institutions in order to have them do the trial.

They didn't trust the leadership of Sloan-Kettering. They were too progressive. They didn't want to let Good and specially Lloyd Old the vice president of Sloan-Kettering have anything to do with the testing of laetrile because then it might not have come out positive. They were terrified I think of Old. Old was this young dynamic brilliant guy, genius level guy who was if not pro laetrile he was at least very open to any new idea especially Coley toxins. He was instrumental in getting that immunotherapy removed from the ACS quack list but very open to laetrile. He had all the major laetrilist come to the 13<sup>th</sup> floor of Sloan-Kettering and give presentations and treated them with respect. This was absolutely unheard of.



It was a little bit ahead of its time I would say and they couldn't prevail. Old ran away. Thomas just caved completely. Good just did whatever they told him to do. The only one who stood firm were only one really was Dr. Sugiura and then I came along as a public relations person and a science writer. I was involved in the testing but I just couldn't abide what they were doing. Essentially they threw Dr. Sugiura under the bus as we would say today. They sacrificed his reputation and good name and slandered him and their own publication said that he was biased, that he has positive results because of his bias which is [inaudible 00:33:43] in science.

Dave: I've continuously seen misinformation and very nasty targeted campaigns to discredit people who disrupt the status quo. Some of the physicians I respect the most get the most grief. Some of them had to move from one state to another to continue practicing stuff that I personally seen just transforms people's health but it's not that common thing. It feels to me like cancer therapy has definitely changed something over the past 40 or so years since all this really went down. Have there been major changes in cancer therapy since then or are we treading water?

Ralph: I think there's been major changes. On the plus side they now know how to give chemotherapy. First of all they know how to give it in a more humane way so it doesn't have incredible side effects that I witnessed that Sloan-Kettering in 1970's not as often. They've gotten a good handle partially because they've incorporated complementary medicine into a certain degree into as far as a conventional approach so that's very positive. Chemotherapy is actually quite effective in certain areas. I think the most important tool is preventing recurrences of breast cancer. The numbers are quite striking if you have a very high risk of breast cancer.

The addition of chemotherapy which is now it's settled which ones to give 3 list of 3 drug regiment that's pretty effective and this could result maybe [inaudible 00:35:26] as much as a 20% increase in 10 year survival of the people who take it. That's [inaudible 00:35:34] this is very important. Colon cancer as well we now know that most colon cancers develop from polyps. If people have colonoscopy routinely



every 5 years or so or every 3 years after the found a polyp then you can prevent most colon cancers. Most people don't realize this. It's like Katie Couric's campaign to get the world to understand this. I bet most people I talk to had never had a colonoscopy.

There are areas of progress without a doubt. It's a different world plus intellectually speaking an oncologist from 1974 would hardly recognize the oncology of 2014 because it's all about genes and it's all about targeted drugs and about markers and about growth pathways. There's all kinds of fascinating stuff going on at the scientific level but we haven't cracked the basic problem that laetrile address stopping the metastasis or at least being able to treat ... stopping the spread of the cancer. There's some very promising leads even basic anti-inflammatory drugs may be able to do this but we don't have any more proof of them either.

I would suggest that has a lot to do with the economics of the situation that there's very little money to be made from traditional nonsteroidal anti-inflammatories like aspirin. There's a less than overwhelming enthusiasm for doing the trials that will prove whether or not aspirin and the other NSAIDs are as effective as they look to be in terms of preventing spread of cancer.

Dave: What are the 3 most exciting new not yet proven but maybe with potential breakthroughs in cancer that you've come across?

Ralph: I have my bias which is towards the less toxic complementary treatments. I just mentioned one that which is that there is some amazing data that has come out of Belgium where they looked at the women who got anti-inflammatory drugs as part of their anesthesia for their breast cancer surgery and then compared those who received standard opioid based analgesics. There were like 4 or 5 times as many recurrences of the cancer at 1 to 2 years a common time when breast cancer often recur than in the women who by accident received the anti-inflammatories. This is tremendously promising on important. When you look at what's the list of the traditional ... this was a traditional anti-inflammatory aspirin and ...

Dave: [Inaudible 00:38:35]

Ralph: Over the counter. This is tremendous. The other 2 things that I think are the most important both within the world of [commercial 00:38:45] therapy and also the world of alternative therapy we still use that term is immunotherapy. Manipulating or enhancing the immune system so that it attacks the cancer. That was the idea behind the Coley's toxins and it's still very widely practiced in Europe especially but it's the darling child now of conventional oncology. So called anti PD 1 and anti PDO 1 drugs. This is the hottest item there is. It just given accelerator approval by the FDA and you're going to see a lot more in here a lot more about that.

Anti-inflammatory, immune therapy and the third one is hyperthermia heat therapy the best adjuvant treatment in the world. The one that can be added to almost any other treatment to make it more effective. There's a tremendous research that's been done on this. Breakthrough research showing that when you add heat therapy to conventional chemotherapy or radiation therapy you're like double the effectiveness of those other treatment.

Dave: Double the survival.

Ralph: Certainly improve the survival and you double the response rates and it's blow away research and this goes back many years. The early results some of them even better but we have rigorous phase 3 clinical trials out of Holland and Germany now. Stuff that took years and years maybe decades to put together and get these trials done and they were highly positive. Everybody in oncology knows they were positive. What they say at the meetings is "The problem with that with hyperthermia you can't get it." That's the problem with it. You can't get it ...

Dave: Not in the US.

Ralph: ... for sure. Not in the US because there's only 3 hospitals using the same machinery they used in Europe to get those results, 3 hospitals. They won't use them because FDAs approved 1 indication cervical cancer stages 2 and 3. It's literally going to take thousands of years at the

current pace before hyperthermia will be fully [approved 00:41:08] in the US.

- Eric: I'll say quick thing that going back to the US and going to back to why they would do this. Hyperthermia was tested pretty rigorously at Duke University in North Carolina. They were given permission for I believe phase 3 randomized by the FDA and the moment that occurred the NIH came and ripped all the funding away from them. You make what you want of that as well. 125 clinics in Germany are giving this and it's all over Holland.
- Dave: With hyperthermia you acutely take the blood out, heat the blood up and put it back in if memory serves right. There's some technique like that but how does hyperthermia work the real short version because we're running up towards the end of the show but I'm sure some people listening are interested.
- Ralph: They just run a current through the tube by putting an electrode on the side and another one on the other side that's the main way. Dinner plate sized electrodes I mean they just sit on top of the patient and the current goes through. The current may also be part of the treatment. That's [inaudible 00:42:07] discussion.
- Dave: I suspect it is.
- Ralph: You can put somebody in a tent and heat up the tent. Either heat up water or acutely use infrared or microwave or whatever. You can heat the whole person, that's whole body hyperthermia. As I already said there 125 clinics at least in Germany using that right now. That's whole body. The FDA bans whole body and the one clinical situation to give whole body hyperthermia was shut down 2 years ago for lack of funding.
- Eric: I know we're getting towards the top of a hour and I was make sure I get a few things in. First of all this film considering how challenging the subject matter is and how polarizing it can be is doing remarkably well beyond our expectations. We got a great review in the New York Times, the Daily News said that was a documentary as just as thrilling as The

Insider with Russell Crowe about big tobacco. We're in 5 cities theatrically.

By the time your listeners hear this it will be right before our big opening at the AMC Pacific Place 11 in Seattle. Basically the AMC is giving us a shot at possibly going nationwide with this. It all comes down to that opening weekend at the AMC Pacific Place 11 in Seattle. Any Seattle listeners I beg of you to come out. In fact if you come out and approach me and say I heard you on Bulletproof Radio I'll give you a DVD signed but just coming out to this theater opening weekend September 19, September 20 or September 21.

Ralph: You should mention that I'll be giving a lecture with question and answer.

Eric: Also if you show up the AMC take your ticket stub again Seattle Pacific Place 11 Monday night the 22 of September we're going to host a free Q&A with Ralph discussing all his expertise to anyone who wants to listen, have a nice Q&A afterwards and it'll be free for those who have purchased the ticket for the AMC that weekend.

Dave: Eric, one thing I'll ask you to do is make sure that you send me an email with all that info right after us recording the show. I'm going to do my best to get the show edited with all the audio quality and all that so that we can get it up ahead of time. If we don't hit that window, what I will do is I'll put the site in social media and we'll do what we can to make sure that the Seattle area gets to see this. Fortunately I have a lot of the bulletproof teams in Seattle. I'm 45 minutes away in Victoria at least if you like [inaudible 00:44:29]. I'm not sure I can come down that weekend but I'll do my best and we'll make sure that we get the word out.

This is the thing where it is an exciting story. It is a really good movie and I'm really hoping that for listeners who sat here and listened, you guys had made something special. Ralph is an incredibly credible believable guy, amazing credentials who's spent his life looking at the sum total of cancer treatments not rejecting chemo or looking as a blind thing or it's just going to work no matter what. If you really want to

understand how scientific research in general gets biased by organizational hubris, inability to admit that they're wrong and things like that we see this happening in our society over and over. It's happened in this scenario at least we think and there's room for more research on laetrile.

It's happened with the low fat diet. This came about from a 28 year old guy who had never treated an obese person threw out a theory and the government didn't want to admit it was wrong. Here we are millions of people suffering and obese later scratching our heads going "What just happened to us?" What just happened was a breakdown of core basic science for whatever political reasons. I don't think it's a really John Birch situation either. It's just organizational hubris and it's not even one evil person it's many people making many small decisions to just buy us things in that direction that's convenient or less fearful.

Ralph: It's a great parallel there.

Dave: You guys have a petition that I also think listeners will be interested in hearing about with [change.org](http://change.org).

Eric: Sure. If you go to [secondopinionfilm.com](http://secondopinionfilm.com) you can't miss the banner to find that. You can also read all of the reviews. You can look at all the documents we discussed and evaluate them for yourself. Trailer, all the dates for the tour, the film, everything is there. [Secondopinionfilm.com](http://Secondopinionfilm.com).

Dave: In fact it's great so I was about to ask you guys for that. This will be in the show notes as well. It is a film that's worth watching and it's not just about cancer it's a story about how politics change health research and this matters for all of us because it's happening right now with other sets of science altogether.

Eric: You want to know what else is very exciting that we should put in. Unbelievably exciting and unexpected on August 19 2 huge universities, research centers in Germany decided they're going to tackle amygdalin or laetrile and they publish in plus one just came out August 19 unrelated to our release. We're very blown away by it. There it is it blocks cancer growth in vitro and they want to continue. Ralph's been in

touch with them and they actually want to do a genuinely well designed clinical trial in people over there. That's unbelievable to go along with the release with this.

Ralph: Our ultimate goal would be to help them financially to do that trial. If we are successful enough.

Eric: If this film does nationwide, we have a nonprofit sympathetic to us we can theoretically raise a whole lot of money through the film as a springboard for the Germans to do this.

Dave: Definitely consider crowd funding campaign too. There's so many people who've had cancer touch their lives. I've lost relatives to cancer and I know from my work in anti-aging that we're not doing everything we could do and that some of the things that are most promising may not hit the market if they ever do for 30 or 40 years at the current rate. I think you'll find that there's a lot of community passion for unbiased but open-minded science that is driven by making people well rather than corporate interests combined with making people well.

There's a question that I've everyone who has been on the show. I want to ask both of you the question separately. You're different stages in your careers and you do very different things. The question is, what 3 pieces of advice would you have from your journey and not just dealing with laetrile but just in life? The 3 pieces of advice for people who want to perform better. People who want to kick more ass at life not at work or wherever else, what are the 3 most important things you've learned that you've offered them? Eric, why don't you go first?

Eric: I actually had to write down so I'm going to read it if you don't mind. My number one is just to stay absolutely true to yourself and follow your instinct and gut tells you and even if everyone around thinks you're absolutely crazy. Number 2 I find that failing at something is the only way to learn anything. Many people fail at something and they have a difficult time adjusting themselves up. I find that my failures or something I should embrace and of course it makes my successes even more valuable. There's only one way to learn. A parent always want you



not to fail at things but in reality they should just let you fail so you can learn the hard way.

The last thing I would say is just take chances and for me personally I've had to ignore everything my indoctrinated educational system has given me and taught me. I had this thrown it all away and start over. In my opinion, every single human being that's made a difference in our world wither it be Steven Jobs or Elon Musk or whomever including yourself have done so by going against what has been told and taught.

You look at people like Albert Einstein and all of them I can name them forever but they pushed against what they're told, what has been established and they stepped outside out of bounds and they succeeded. I find that in my opinion if they haven't done that, they wouldn't have been successful. If they stuck to the so called rules they wouldn't have made it. I hope that answers those 3.

Dave: That's a wonderful set of answers. Thank you Eric. Ralph, what do you think?

Ralph: My philosophical answer is to question authority. I think in particular that means question the institutions that set themselves up as the experts on health advice and health matters not just the American Cancer Society but I think all the other major institutions that fund raise. Don't be overly impressed the so called nonprofit status that certain institutions have because they can be just as prejudiced if not more so than for profit institutions.

In particular though I'm very fired about the whole diabetes epidemic. 75% of the people who will make it to the age of 70 in the United States are even diabetic or prediabetic that's a figure I recently read. I would say that if you're suffering from ill health, you should always suspect diabetes and if you're gaining weight over what you were let's say when you were in high school or college that would be the first thing that I would look to. I would really try very hard to nail down whether or not this problem is creeping up on you.



We're actually extremely fortunate in that there's a little device called the glucometer or glucose meter that you can buy for like 12 bucks and you can test your own blood on a pretty regular basis to see how much glucose or sugar there is in your system. That sugar is not an innocuous thing. It can [inaudible 00:52:23] or you cope with sugar not only red blood cells but your white blood cells diminish your immunity. It can get into your kidneys, get into your eyes. This is extremely toxic.

Remember when I was kid they used to talk about people pouring corn syrup into people's gas tanks, their cars to punish them or to get even. In a way we're doing that in our society. All of the sugar, the high fructose corn syrup, the rampant carbs that we consume that are unnatural to our bodies this is like corn syrup in our gas tank. It's gums up ... I'll put it in simple terms our old works. I would say be very proactive with your health, very proactive.

Use a glucometer if you have any reason to believe that this might be creeping up on you. Get A1c test done by your physician to see what your glucose has been over the past 4 months or so. Take your blood pressure routinely. Get an app that test your pulse. See how that's going. Be proactive because once the dam breaks, it's very hard to fix it. Do this ahead of time and you can reverse these things. Absolutely can reverse them and by the way there's a lot of good research going on now to examine the connection between high blood glucose and cancer. Cancer cells are avid consumers of glucose. They love that high glucose environment and by reducing the amount of glucose you may be able to also reduce the virulence of the cancer.

Dave: I've had Dominic D'Agostino talking about ketosis and cancer on the show. It's amazing what happens when you stop burning sugar for a while. Cancer really doesn't like that very much.

Ralph: Very much not and one of the biggest myths going is that if you don't get 60 or 120 grams of carbohydrates you'll die. You'll fall down. You're [inaudible 00:54:30] but you can become ketoadapted. Certainly your body is running on ketones. You have tremendous energy. You'll feel better. You'll look better and how bad could it be. Your numbers get better. Your triglycerides get better. Your cholesterol. There's some

unbelievable myth at the core of the generalized health advice that the American public is getting and has been getting since the day you reference [inaudible 00:54:58] the guy “invented” the low fat diet got onto the cover of Time magazine.

It’s a myth bound culture. We’re following advice that has no factual basis to it but’s incredibly profitable for the big corporations to sell you these concocted foods that are really bad for you. My advice is twofold. You need to pursue this but you also need to use your intelligence. That’s the most important tool of all and your critical intelligence. If you try to change your diet and it goes against the standard advice of the culture, the minute anything happens adverse or you run into the waves or bumps or whatever, you’re going to be a tremendous loss.

You don’t know how to investigate these questions yourself so come back to question authority because you have to think are these so called authorities really as smart as they say they are and really is objective as they claim to be and I would say not always.

Dave: That is amazing advice. Would you guys one more time name your url. Talk about the dates and where people can learn more about this the dates in Seattle just so they hear it one more time.

Erci: Sure. It’s [secondopinionfilm.com](http://secondopinionfilm.com) and even if you’re not Seattle it’s available on demand as well. The links are all very clear on the website. We have a video on demand and of course blue rays and DVDs. The Seattle opening is the most important weekend is where it all boils down to is Friday September 19<sup>th</sup>, Saturday September 20<sup>th</sup> and Sunday the 21<sup>st</sup> of September and we’re going to try to be there as many times as the theater will allow us to do Q&As.

We’re going to get a place really close by and be there and do Q&As as much as possible. We found that every time we did Q&As like say in New York the place was basically sold out. In fact it did so well in New York they extended it a week. We want to take advantage of the fact that people want to hear us talk after seeing the film and try to be there. Again, if you go to the AMC that weekend save your weekend stub.

We're going to have a free lecture with Ralph Monday night. We'll announce where that will be.

If you show up the AMC and you see me there and you say that you heard about this on Bulletproof I will happily give you a signed copy of the DVD of this film. By the way the DVD also has an extra whole movie attached to it that is not playing in the theaters. [Inaudible 00:57:32] so much of the story I added another 74 minutes of footage and clips and interviews that pertain to where laetrile went since the story and where Ralph has gone since. Where the cancer industry really has gone since these days.

Dave: Do you guys mind if I can convince a few of team Bulletproof people to show up with a few extra T-shirts. You up for that?

Eric: I'm totally up for that. Are you kidding me? Yes.

Dave: Let me see if I can twist their arm to go to a free movie. We'll make that happen. Finally I'm going to hit you guys up. I've been spending the last 6 months making a documentary. It's not done yet on toxic mold in our environment and in our homes and it's linked actually to cancer as well as a host of other inflammatory and neurodegenerative diseases. Interviewing experts around the country as well as people who have been exposed and are affected by what they eat and what they breathe. I have no idea.

I've never made a documentary before but I've invested a huge amount of just passion and time and frankly and money in doing it. You've guys gone to theater, holy crap that's amazing. I'm going to call you later and pick your brain so I can ask how to do the same thing with a movie that's going to help people.

Eric: I'd love to share my experience. It was a huge hustle. Huge learning experience and I feel like I have created a well-oiled machine for my next movie. It's a long conversation I'll be happy to talk to.

Dave: Lovely. Thank you so much and thanks for being on Bulletproof Radio today. Have an awesome day.



Eric: Thanks. You too.

Ralph: Thank you.

Dave: If you're looking for a way to know which foods are making you weak check out the free app called bulletproof food sense. This is an awesome app. Bulletproof food sense is free and it makes a huge difference in how you manage and control your stress.

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## Resources

[Silicon Valley Health Institute](#)

[Capitalism: A Love Story \(Documentary by Michael Moore\)](#)

[The Cancer Industry by Ralph W. Moss](#)

[Laetrile \(American Cancer Society\)](#)



[\*Doctored Results: The Suppression of Laetrile at Sloan-Kettering Institute for Cancer Research\* by Ralph W. Moss](#)

[Amygdalin \(National Cancer Institute\)](#)

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[Krebs Speech on Vitamin B17 \(Laetrile/Amygdalin\) at the Cancer Control Convention](#)

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