

# Gerson's History and The Diet Therapy

**"There is no cancer in normal metabolism,"** wrote Max Gerson, M.D. ( 1881-1959). A pioneer of what is today known as nutritional metabolic therapy, the German-born physician, who lived in the United States for twenty-three years, believed that cancer cannot occur unless the functions of the liver, the pancreas, and the immune system as well as other body functions have degenerated. **Cancer, in his theory, results from faulty metabolism due to poor nutrition and long-term exposure to pesticides, chemical fertilizers, air and water pollution, and other irritants that increasingly saturate the environment.**

**The Gerson therapy combines vigorous detoxification with nutrition aimed at restoring the body's natural immunity and healing power.** Believing cancer to be a systemic rather than a localized disease, Gerson emphasized the rebalancing of the cancer patient's entire physiology. The therapy is thought to reverse the conditions necessary to sustain the growth of malignant cells. To rebuild the patient's healing mechanism, a twofold attack is mounted: a detoxification program helps the body eliminate toxins and waste materials that interfere with healing and metabolism; and a low-fat, salt-free diet floods the body's cells with easily assimilated nutrients that strengthen the natural immune defenses.

**The diet, the core of the therapy, includes organically grown fresh fruits and vegetables and thirteen glasses of freshly squeezed juices daily, taken at hourly intervals.** The emphasis on fresh fruits and vegetables means the patient receives high levels of vitamin C, beta-carotene, and other antioxidants that scavenge free radicals. Patients also receive supplements such as thyroid extract, potassium iodide, liver extract, pancreatic enzyme, and niacin. No meat is allowed. Animal protein is omitted for the first six to twelve weeks, then kept to a minimum. The diet is largely fat-free but includes some yogurt, pot cheese, cottage cheese, and churned buttermilk as well as linseed oil, a rich source of omega-3 fatty acids. Research shows that these fatty acids kill human cancer cells in tissue cultures without destroying normal cells in the same culture.

The key detoxification method is the coffee enema, which patients are taught to self-administer several times daily. Through his work with cancer patients, Gerson came to the conclusion that many patients on a radical detoxification program died not of the cancer itself, but rather from the liver's inability to absorb the toxic breakdown products of the rapidly dissolving tumor mass. Coffee enemas, long a part of more orthodox medicine, seemed to him a logical component of a detoxification program. Caffeine taken rectally is believed to stimulate the action of the liver, increase bile flow, and open the bile ducts so that the liver can excrete the toxic products of tumor breakdown more easily.

Although coffee enemas may sound bizarre, and are distasteful to some, many cancer patients taking them report increased energy, improved appetite, relief from nausea, and a marked decrease in pain. Coffee enemas have been used by a number of other metabolic and immunotherapeutic practitioners, notably William Kelley (Chapter 18).

As a further aid in detoxification, some patients take castor oil orally and by enema every other day.

**Max Gerson, a refugee from Nazi Germany with impeccable scientific credentials, was an eminent if controversial figure in Europe because he successfully treated tuberculosis, migraines, arthritis, and cancer by means of his salt-free vegetarian diet.** One of Gerson's patients was Albert Schweitzer, the Nobel Prize-winning doctor-missionary. Through a prescribed nutritional program, Gerson enabled Schweitzer, at the age of seventy-five, to control his diabetes so well that he stopped taking insulin. Gerson also cured Schweitzer's wife of apparently terminal tuberculosis. Schweitzer wrote of the nutritional healer: "I see in him one of the most eminent medical geniuses in the history of medicine..

But in the United States, where he emigrated in 1936, Gerson was persecuted and harassed by the medical establishment. Because of his unorthodox cancer therapy, Gerson was expelled from the New York Medical Society and deprived of his hospital affiliations. His therapy was prominently featured on the American Cancer Society's Unproven Methods blacklist, where it remains today, even though his anticancer diet is quite similar to the preventive diet now endorsed by the ACS, the NCI, and the American Heart Association.

**Today, Gerson's legacy is kept alive by his daughter Charlotte, who runs the Gerson Institute in Bonita, California, and works closely with the Centro Hospitalario Internacional del Pacifico (CHIPSA) in Tijuana Playas, Mexico.** The hospital's inpatient facility, employs the Gerson method in the treatment of cancer and other degenerative diseases. Over the years, the Gerson therapy has yielded an impressive number of long-term cancer survivors, all of whom had well-documented illnesses. A current brochure gives the mini-case histories of thirty-six cancer patients, reportedly termed "incurable" by their orthodox physicians, who achieved long-term remission using the Gerson regimen. The names, ages, and photographs of these "cured incurables" are given, along with the details of their illnesses and treatments. Several of these patients are featured in Max Gerson's 1958 book, *A Cancer Therapy: Results of Fifty Cases* (see Resources), and are still alive and well-and cancer-free- over thirty years later.

Among the thirty-six cases profiled are seven survivors of cancer metastasized to the lung, which usually kills patients quickly, and three survivors of "hopeless" spreading melanoma who have lived thirty-six to forty-four years free of cancer after diagnosis. Other recovered patients include two survivors of metastasized pancreatic cancer and a fifteen-year survivor of advanced liver cancer who was given three to five weeks to live by her conventional doctor. These two forms of the disease are incurable by chemotherapy, radiation, or surgery. Also profiled in the brochure are long-term survivors of inoperable brain cancer, uterine cancer spread into the pelvis, metastasized breast cancer, prostate cancer, recurring bone cancer, and colon cancer.

Dora Sherken, now in her late eighties, was brought unconscious by ambulance to Dr. Gerson at Gotham Hospital, New York City, in March 1944. Doctors at Mount Sinai Hospital had diagnosed her in June 1943 with an exceptionally large tumor of the pituitary gland that left her blind in the right eye, with the left optic nerve and surrounding bones partially destroyed. Dora, who lived in Brooklyn at the time, had noticed a progressive loss of vision in both eyes during 1941 and 1942. At Mount Sinai, she had been given X-ray treatments, which were ineffective. Told by many doctors that she had six months to live and would shortly go totally blind, Dora was advised to have surgery to remove the large tumor mass pressing on the optic nerve. She refused, having seen the adverse aftereffects in other hospitalized patients who underwent neurological operations.

Under Dr. Gerson's care, Dora remained unconscious during the first week of treatment, which

began immediately. Teaspoon by teaspoon, day and night, she was induced to take fruit and vegetable juices. She was also given many enemas. After one week, she regained full consciousness. At the end of two months, she was feeling fine, was able to do housework, and had improved visual acuity. At the end of eight months, she resumed her part-time job as a secretary to her husband. Tests taken in 1945 indicated that her cancer was in remission. Dr. Gerson's treatment had saved her life and also saved the remaining vision in her left eye, allowing her to resume her active schedule.

Dora followed a strict Gerson regimen for seven years. Her husband assisted with the food preparation and gave Dora her liver-extract and vitamin injections as required. "My mother has a tremendous will to live, and once she decided to go on the Gerson diet, she never once cheated or went off it," recalls Diane Rosen, Dora's daughter. After seven years of strict adherence to the protocol, Dora gradually did go off it and has remained in good health. Two CAT scans in 1980 showed her brain, bones, and pituitary completely cancer-free.

Gregory Grover, at age fifty-six, was diagnosed by X-rays in October 1966 with an advanced, aggressive tumor in the bladder. The tumor, rated Stage III to IV, was removed, but doctors at Cedars-Sinai Medical Center in Los Angeles advised him to have his bladder removed also. They told him that even if the operation went well, he had only a 50 percent chance of survival, and that if the bladder was not removed, he had a 5 percent chance of survival.

Refusing further surgery, Grover started the Gerson therapy in January 1967. "I followed it 100 percent, by the book, with no deviations through the end of 1968." After he had been on the program one year, he had a cystoscopy performed at UCLA. According to Grover, the urologist was amazed to discover that his patient was completely cancer-free. "'How do we account for this?' the assisting physician whispered to the urologist as he did the cystoscopy," recalls Grover, who is now in his eighties, still in remission, and quite active.

**Almost all types of cancer are said to respond to the treatment.** The types that respond particularly well, according to personnel at the Gerson Institute, are melanoma and lymphoma. The Gerson therapy has not been effective in leukemia, in the opinion of various alternative therapists. Chemotherapy gives at least a 50 percent five-year survival rate with leukemia.

**During his lifetime, Max Gerson claimed a 30 percent rate of remission in his terminal patients.** The current patient literature states that "the Gerson Therapy is able to achieve almost routine recoveries in early to intermediate cancers. Even when the disease is advanced and incurable by conventional standards (i.e., involves the liver or pancreas or multiple internal sites) excellent results are possible." The patient literature also claims that for cancer patients with additional afflictions (for example, arthritis, heart disease, or diabetes), the treatment "usually heals the body of all diseases simultaneously." Norman Fritz, vice president of the Gerson Institute, stated in "Cancer? Think Curable! The Gerson Therapy," by S. J. Haught (see Resources), that the Gerson treatment "can save about 50 percent or more of advanced 'hopeless' cancer patients" and that "the percentage who recover can exceed 90 percent for early cancers and some 'early terminal' cancers."

**These claims should be taken with great skepticism, as should all such claims in the alternative cancer field.** (A figure of 80 percent or greater for five-year survival seems to be a favorite among alternative practitioners.) The reality appears to be that remission remains the

exception rather than the rule with Gerson patients, according to Michael Lerner in his study *Varieties of Integral Cancer Therapy*.<sup>1</sup> Lerner cites a resident of a Gerson halfway house in the San Diego area who reported that during her stay of several months, she observed one of the approximately twenty patients in residence make a significant recovery. This story, of course, is anecdotal, but even if roughly accurate, the 5 percent recovery rate is a far cry from the claims made by the CHIPSA Gerson Hospital.

Another evaluation of the Gerson treatment's efficacy comes from Steve Austin, a naturopathic physician who recently completed a survey tracking twenty-one Gerson cancer patients over a five-year period.<sup>2</sup> Austin, who teaches nutrition at Western States Chiropractic College in Portland, OR, visited the CHIPSA Gerson Hospital in Mexico in 1983 and randomly asked approx. thirty cancer patients for permission to follow their progress. He was able to track twenty-one of these patients over a five-year period, or until death, from 1983 to 1988, through annual letters or phone calls. At the end of the five years, only one of the twenty-one patients was still alive. All the rest had succumbed to their cancers. This also suggests a recovery rate of around 5 percent.

Austin, who plans to publish his study, comments, "The patients tracked had a wide variety of cancers. Many appeared to do well when they were at the CHIPSA Hospital, but if they went home they died 'on schedule.' I was favorably predisposed, even prejudicially so, toward the Gerson therapy, because you hear so many remarkable stories about recovered Gerson patients in alternative cancer circles. But the reality turned out to be different. The Gerson staff may be out of touch with the ultimate results of the therapy. They see patients doing well while they're at the clinic, something I observed myself. When these people go back home, however, most of them go downhill. The data admittedly are based on a very small sample, but they suggest that the therapy does not work as well as its advocates claim."

Interestingly, Austin also tracked eighteen late-stage cancer patients at Oasis Hospital Del Mar in Tijuana, a clinic by Dr. Francisco Contreras, (competing with the Gerson Hospital) which combined metabolic therapy with detoxification, laetrile, enzyme supplements, megadoses of vitamins, and special vaccines. All eighteen patients died within three years of their stay at the Contreras clinic, according to Austin. "On the basis of these results, I recommend that all cancer patients avoid the laetrile clinics, despite the fact that I've run across occasional anecdotes suggesting efficacy. Even if a rare patient is helped, zero out of eighteen is a terrible indicator," says Austin.

More positive evaluations of the Gerson therapy, and scientific research supporting the validity of key components in the Gerson protocol, will be discussed later in this paper.

The Gerson Hospital have the patient services to monitor patients' once they return home. Gerson Institute members tend to explain the therapy's failures by saying those patients either did not follow the regimen strictly enough or went off the therapy. This is often true, but sometimes patients discontinue the therapy because they are no longer seeing results: tumors continue to grow or the patient becomes too weak to adhere to the program.

What is beyond dispute is that the therapy is not easy to follow. It's a rigorously demanding approach and should not be undertaken without the intention to persevere. Sticking to the regimen may sometimes seem like a full-time job. In his book, Max Gerson cautions, "It is advisable not to start the treatment, if for any reason strict adherence to it is not possible." Each element in the therapy is important, and all are interrelated in their workings. The diet is restrictive. Milk, most

cheeses, and butter are forbidden, as are tobacco, salt, coffee, tea, cocoa, chocolate, alcohol, sharp spices, refined sugar and flour, candies, ice cream, cakes, nuts, mushrooms, soybeans, pickles, cucumbers, and all berries with the exception of red currants. Also taboo are canned, frozen, processed, smoked, salted, dehydrated, powdered, or bottled foods.

Juices must be freshly squeezed every hour so that the oxidizing enzymes will not be destroyed by light or air. Even the type of juice extractor and grinder are specially selected. Standard home juicers are not recommended because the electric charge produced by their centrifugal actions destroys enzymes and their preparation process mixes oxygen into the juices, hastening their decomposition. Gerson patients are encouraged to buy a more expensive, stainless-steel grinder and for pressing.

**After treatment at the CHIPSA Gerson Hospital**, patients are advised to continue the regimen at home for one and a half years or more, until the liver, pancreas, and oxidation, immune, and other systems have been restored sufficiently to prevent a recurrence of cancer. The support of family and close friends-both emotionally and on a practical level-is believed to play a vital role in the therapy's success.

For those who do persevere, the benefits can be dramatic. "It's a lot of work," says Charlotte Gerson, "but those people who want to be well, and remain well, with their bodies rebuilt, with their organs rebuilt, and normal and functioning, they go through it, and they do the job, and they regain health in all areas, whether we are talking about cancer, multiple sclerosis, rheumatoid arthritis, glaucoma, kidney disease, or even diabetes."

**The therapy is multifaceted. Dr. Gerson placed great emphasis on the liver, which he believed to be the body's most important organ in defeating malignancy.** He maintained that nearly all cancers were allowed to develop because of poor liver function. Support for this view comes from Dr. Jesse Greenstein, former chief of the National Cancer Institute's biochemistry laboratory. In his 1954 book, *Biochemistry of Cancer*, Greenstein wrote, "There seems to be little doubt that hepatic insufficiency is a concomitant phenomenon with cancer." According to Dr. Raymond Brown, former investigator at Sloan-Kettering Institute for Cancer Research, Gerson's "thesis that a damaged liver is a primary precursor of degenerative disease is consistent with current concepts that liver status reflects the functional capacity of the reticuloendothelial system.", The reticuloendothelial system defends against infection and disposes of the products of cell breakdown. It is composed of macrophages, liver cells, and cells of the lungs, bone marrow, spleen, and lymph nodes.

The liver, the body's largest organ, weighs seven to ten pounds and performs a multitude of tasks. Among its vital functions are metabolizing essential fats (and thus preventing their accumulation in the bloodstream), synthesizing necessary blood proteins, breaking down and eliminating toxic substances, and secreting bile, which is stored in the gallbladder and the enlarged bile duct. Bile, which empties into the small intestine, acts as a carrier for all liver wastes. One reason animal proteins are drastically reduced on the Gerson diet is that they have been found to interfere with liver-boosting medications and to impede the detoxification process. Keeping animal protein at a minimum frees the protein-dissolving enzymes to "digest" cancer tissue rather than food, according to Max Gerson.

**Gerson also found that both animal and vegetable fats have the effect of promoting tumor growth.** Whenever he eliminated fats from his cancer patients' diets, the results improved

substantially. Recent research supports his finding. Studies show that the higher the level of cholesterol and fats in the blood of cancer patients, the less chance the patients have of surviving. Cancer patients receiving Gerson therapy therefore avoid both animal and vegetable fats. An exception is linseed oil, which helps the body transport vitamin A. Linseed oil has been shown to have antitumor action, and it is rich in an essential fatty acid that reduces blood viscosity. Low blood viscosity correlates with a decreased tendency to spreading (metastases) of cancer.

**Eliminating animal protein is only one aspect of Gerson's liver therapy.** Patients are also given injections composed of liver extract, administered daily for four to six months, sometimes longer. These liver injections provide vitamins, minerals, and enzymes believed to help restore the liver to its proper functioning. Intramuscular injections of liver extract are combined with vitamin B<sub>12</sub> injections, which Dr. Gerson held to be important for proper protein synthesis. Full restoration of the liver may take from six to eighteen months, during which time patients should have their blood monitored by a physician so that the supplements and diet can be adjusted.

Nobel Prize-winning biochemist Dr. Albert Szent-Gyorgyi believed that the liver may hold the secret of cancer prevention and cure. In 1972, he reported that extracts of mouse liver "strongly inhibited" the growth of inoculated cancer in mice. He and his associate, Dr. Laszlo Egyud, isolated from liver extract a potent anticancer substance, which they dubbed retine. This liver derivative proved so effective in the laboratory, Dr. Szent-Gyorgyi was moved to predict, "We are on the verge of finding the key to curing cancer.... Retine stops the growth of cancer cells without poisoning other cells."<sup>4</sup>

**Another major feature of the Gerson therapy is restoring the balance of potassium and sodium in the body.** Dr. Gerson maintained that cancer alters the body's normal sodium-to-potassium balance, already disturbed by the modern oversalted diet. Liver, brain, and muscle cells normally have much higher levels of potassium than of sodium, but in cancer patients, observed Gerson, the ratio is reversed. The Gerson therapy aims to remove as much sodium from the cancer patient's body as possible, replacing it with potassium. The diet stresses foods rich in potassium and low in sodium, with no salt added.

In addition, patients receive a potassium solution, added to juices ten times daily. Edema, or fluid retention, caused by an excess of sodium, reportedly disappears with great frequency when patients ingest high amounts of potassium in juices. Restoring potassium levels to normal in the major organs of severely ill patients can take a year or two.

**Gerson's emphasis on restoring the potassium balance in cancer patients finds considerable support in modern research.** Several studies outline rationales to explain Gerson's theory that elevating the potassium level while restricting sodium in the diet acts against tumor formation.<sup>5</sup> Freeman Cope, M.D., wrote in *Physiological Chemistry and Physics* in 1978, "The high potassium, low sodium diet of the Gerson therapy has been observed experimentally to cure many cases of advanced cancer in man, but the reason was not clear. Recent studies from the laboratory of Ling indicate that high potassium, low sodium environments can partially return damaged cell proteins to their normal undamaged configuration. Therefore, the damage in other tissues, induced by toxins and breakdown products from the cancer, is probably partly repaired by the Gerson therapy through this mechanism."

**Supplying oxygen to the cells is another central feature of the Gerson therapy. Dr. Gerson**

**believed that cancer cells thrive by fermenting sugar in an oxygen-depleted cellular environment.** This still-controversial theory, put forward by the great biochemist Otto Warburg in 1930, has some support in modern research. To enhance the patient's oxidation function, Dr. Gerson gave patients oxidizing enzymes through vegetable, fruit, and raw-calves'-liver juices. The Gerson clinic discontinued the use of raw-liverjuice in 1989, but the present diet is still a rich source of oxidation enzymes. These enzymes are also produced naturally by a healthy, restored liver. Through the Gerson treatment, "oxidation is usually more than doubled," says the patient brochure, which adds that "most 'incurable' diseases are oxygen deficiency diseases also (heart attack, strokes, cancer, etc.)."

**Tumor breakdown begins, according to Max Gerson, when the detoxification process is active, the repaired liver is producing oxidative enzymes, and the potassium-to-sodium balance has been restored.** Once the body starts breaking down and eliminating the tumor, detoxification is critical so that the liver is not overloaded with toxins. Here is where the coffee enema becomes especially important. Some recent scientific research gives credence to the coffee enema as a detoxification measure. In 1981, for example, Dr. Lee Wattenberg and colleagues demonstrated that substances found in coffee promote the activity of a key enzyme system that detoxifies a vast array of electrophiles from the bloodstream. According to Gar Hildenbrand of the Gerson Institute, this "must be regarded as an important mechanism for carcinogen detoxification." This enzyme group is responsible for neutralizing free radicals.

Dr. Peter Lechner, who is investigating the Gerson program in Graz, Austria, has reported that "coffee enemas have a definite effect on the colon which can be observed with an endoscope." Two chemicals in coffee, theophylline and theobromine, dilate blood vessels and counteract inflammation of the gut. Palmitates, a group of substances also found in coffee, enhance the enzyme system responsible for the removal of toxic free radicals from the serum. (Note: While coffee enemas are part of the Gerson program, drinking coffee is forbidden.)

For a full review of the scientific research supporting the use of coffee enemas, see Ralph Moss's two-part article "Coffee: The Royal Flush," in *The Cancer Chronicles*, Autumn 1990 and December 1990.

**The Gerson diet features three organic vegetarian meals daily.** Along with a potassium supplement, six of the thirteen daily juices contain three drops of half-strength Lugol solution, an iodine-potassium compound, plus a small amount of thyroid extract. Dr. Gerson theorized that these substances are absorbed by the cancer mass along with the oxidizing enzymes. The combination makes it impossible for the cancer cells to ferment, and they die, he held. Iodine appeared to him to be a decisive factor in the normal differentiation of cells. He believed that iodine also counteracted the cancer-stimulating effect of certain hormones. Several studies validating Gerson's hunches have shown that thyroid extract boosts natural resistance to infection by increasing antibody formation and augmenting the power of reticuloendothelial cells.

**Most cancer patients have a deficiency of digestive enzymes.** To aid digestion, patients on the Gerson therapy take tablets of pancreatic enzyme (pancreatin), which helps restore stomach acid to normal levels. They also take tablets of niacin, which, according to Gerson, helps to check cancerous growth, restores cell energies, and raises depleted liver stores of glycogen and potassium.

Through carrot juice, liver supplements, and other foods, the Gerson diet supplies an enormous amount of beta-carotene, vitamin A's precursor, which the body converts to vitamin A. Recent research suggests that vitamin A inhibits the cancer-causing action of tumor promoters and tumor initiators. Furthermore, in laboratory experiments, vitamin A has been shown to transform cancer cells to cells that resemble normal cells. This effect has been noted with tumors such as lung cancer, prostate cancer, colon cancer, and neuroblastoma (a tumor of embryonic nerve cells). In a 1960 German study in *Nutritional Abstracts and Reviews*, 218 cancer patients received large amounts of vitamin A along with vitamin C for approximately three to seven months. Tumor growth generally stopped or regressed with no side effects.

Since 1983, the Gerson clinic has offered ozone therapy as an adjunct to its basic protocol. Available in many countries for cancer treatment but officially barred in the United States, ozone therapy has been shown to shrink tumors.

**Max Gerson's nutritional treatment for cancer might never have come into being if not for his migraines.** A brilliant medical graduate of the University of Freiburg (Germany) in 1909, Dr. Gerson was disabled by recurrent migraines for which his own doctors had no cure. By the early 1920s, Gerson had cured himself by devising a diet very high in fresh fruits and vegetables and very low in fats. He then prescribed his diet for migraine sufferers who came to him as patients. Their headaches disappeared. Next, using a slightly modified version of his diet, he cured patients with lupus vulgaris, a form of skin tuberculosis then considered incurable.

**Gerson's success brought an invitation in 1924 from eminent German surgeon Ferdinand Sauerbruch, M.D., to test Gerson's diet in a lupus clinic at the University of Munich.** Over a three-year period, the two doctors treated 450 lupus patients with the diet; 446 of them recovered, according to Sauerbruch in his autobiography *Master Surgeon*. Gerson extended his therapeutic system to other forms of tuberculosis. In 1928, he reluctantly accepted his first cancer patient, at the insistence of the patient—a woman who had undergone unsuccessful surgery for cancer of the bile duct that had spread to the liver. Within six months, the woman seemed fully recovered. Gerson's next two patients, both with inoperable stomach cancer, had the same good results.

After the rise of Hitler forced him to leave Germany, Gerson lived in Vienna and Paris, moving to the United States in 1936. He got his New York medical license in 1938 and was soon attracting more and more cancer patients, obtaining remissions even in far-advanced cases.

**In 1946, Gerson testified before a Senate subcommittee along with five of his patients, all of whom had recovered from advanced cancer.** One of the five was fourteen-year-old Alice Hirsch, whose orthodox doctors had predicted would be paralyzed by the end of 1945 due to an inoperable spinal cord tumor that would quickly kill her. Also testifying was George Miley, M.D., professor of medicine and medical director of Gotham Hospital, where Gerson was treating patients. Dr. Miley called the Gerson therapy "a highly encouraging approach." He presented the committee with signed statements from five other doctors who said that they had observed advanced cancer reversed by the Gerson regime.

**After Gerson's congressional appearance, his anticancer diet surged in credibility and prestige.** But it was just at this time that chemotherapy was seeking public acceptance, soon to become a gigantic money-making operation for the medical-pharmaceutical industry. Within five months of Gerson's Senate hearing, the American Medical Association launched a vehement

campaign intended to discredit his therapy. Gerson was attacked in the pages of JAMA, the association's prestigious journal, for treating cancer patients with diet and for warning against cigarettes. In the same issues, JAMA ran ad copy in praise of cigarettes: "Many leading nose and throat specialists suggest, 'Change to Philip Morris,'" read a typical ad. Cigarette maker Philip Morris was the main source of advertising dollars for JAMA during the years of its assault on Max Gerson. The marriage of medicine and the tobacco industry, which helped addict hundreds of thousands to cancer-causing cigarettes, was "one of the most outrageous alliances in the history of medicine," says Gar Hildenbrand of CHIPSA: The Gerson Hospital.

Dr. Gerson's medical privileges at Gotham Hospital were revoked, and he was unable to secure an affiliation with any other hospital. In 1953, he was denied malpractice insurance because his therapy was not "accepted practice." Refusing to give up, he opened a sanatorium of his own. However, laboratories used by Dr. Gerson were threatened with economic ruin if they continued to provide services to him. In 1958, the New York Medical Society suspended him for "advertising." He died a year later.

A modified version of the Gerson+Therapy was tested, beginning in 1984, by Dr. Peter Lechner at the Krankenhaus in Graz, Austria. Lechner's program excluded niacin and liver juice and used thyroid supplements only in hypothyroid patients.

**The CHIPSA Hospital designed and has been practicing Gerson methods exclusively under the Gerson+Therapy ever since 1979, with outstanding remissions and positive outcomes for degenerative disease.**