

Painless Therapy for Major Diseases

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Preface Update to Painless Therapy For Major Diseases

Much has happened since my *Vitamins Can Kill Cancer* was published seven years ago.

Four years ago, I was diagnosed with congestive heart failure, an often-fatal disease.

The doctor added a pacemaker and diuretic pills to my multi-vitamin regimen. I added lipoic acid¹ and acetyl-L-carnitine¹ pills to strengthen my heart and leg muscles.

Seven months ago, my heart doctor’s report read, “Houston is a 90-year-old male with conduction system disease (I needed a pacemaker) ... along with valvular heart disease.

He continues to do amazingly well. ...”

In 2013, I got married, so my heart is doing great!

Preface Update Continued

For cancer, I have continued the late Dr. Abram Hoffer's multivitamin regimen, a therapy that strengthens the immune system and has kept my cancer in painless remission. When I got congestive heart failure, adding two pills to my regimen appears to have cured it.

For thousands of years, our immune system took care of our diseases. In the last hundred years, we have been given a choice of (1) strengthening our immune system (such as by vitamins) or (2) expensive modern medicines which emphasizes new compounds, with their approval based on commercial profit as well as health. For cancer, modern medicine provides primarily radiation, surgery, and chemotherapy with their expected side effects. Dr. Hoffer and many other doctors used safe vitamins to effectively control cancer without causing pain or side effects.

The competition between old and new therapies is based on money as well as health. Modern medicine is supported by hospitals, drug and insurance companies. The FDA (Food and Drug Administration) requires doctors to use only approved compounds. Since approval is extremely expensive, only patented compounds that would sell at high prices get to be tested. Natural compounds such as vitamins cannot be patented.

Doctors who use unapproved compounds (such as vitamins) for cancer therapy can be fined or threatened with decertification.^{2,3,4}

Because doctors cannot recommend vitamins, many discourage the use of vitamins. Patients should realize that a doctor's disapproval of vitamins for cancer is political. If the doctor says, "Vitamin C is not approved," he is technically correct but only because politics and lack of money have kept vitamin C from being properly tested and approved. Fortunately, patients are not bound by these FDA rules and they can freely use safe vitamins. The doctors' comments on vitamins are often biased and can be disregarded by patients.

Should patients choose the old or the new therapies? Dr. Hoffer and others showed that patients can choose both simultaneously. In one test, those who chose multivitamins and approved therapies lived 3.5 years longer with less pain than those who chose approved therapies only.

References:

1. Hunninghake R. Basic Health User's Guide to Energy-boosting Supplements. Basic Health Pub. 2006
2. Richards, E. The politics of therapeutic evaluation; The vitamin C controversy. *Social Studies of Science*. 1988. Sage Publications;18(4) 653-701, Downloaded August 2009; <http://www.jstor.org>3. Carter JP. Racketeering in Medicine—The Suppression of Alternatives. 1993; Hampton Roads, ISBN 1-878901-32-X. The American public has no idea how politics secretly control the practice of medicine. If a doctor dares to introduce a natural, less costly method, no matter how safe or effective, Organized American Medicine can target this doctor for license revocation using fear tactics and legal maneuverings.”
4. Epstein, Samuel S. American Cancer Society: The World's Wealthiest “Nonprofit” Institution. http://www.preventcancer.com/losing/acs/wealthiest_links.htm. Downloaded November 22, 2010.

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Chapter 1 - My Happy Cancer Journey

My parents smoked three cartons of cigarettes a week. They died in their 60s, as expected from the “don’t smoke” media I read. I didn’t smoke, so I didn’t expect to get cancer. Well, I actually did smoke one lone cigarette in high school. Lousy taste. Why in the world did my parents smoke?

About 18 years in 1996 ago at my annual physical exam, the doctor said my PSA was a little high. PSA, prostate specific antigen, is always present in men but higher if cancer is present. He said to get another PSA test in 6 months. Fortunately I remembered. My PSA had doubled in 6 months to 8.1. Suddenly I had a urologist who repeated the test. A single test is not a reliable basis on which to plan the rest of my life. However, a biopsy gave a Gleason score of 3+3, confirming that I had aggressive but early cancer.

The doctor said “I can get you started on radiation before I go on vacation.” Wrong comment. I am the inquisitive type. As a kid I had a furnace in the basement where I could melt steel and glass. My parents were very understanding. Now I’m a retired chemical engineer who likes information, especially when the rest of my life depends on it. I knew there were two types of radiation: external and implanted radioactive seeds. In my mind I wondered if I had the best doctor for whatever was the best therapy for me. I asked for temporary hormone therapy while I studied what type of radiation to take. He agreed and asked, “What type hormone therapy do you want?” I said I didn’t know and asked what he recommended. He gave me Lupron, a monthly shot in the fanny in those days, and Eulexin, a pill. I bless Colin Thomas, MD, for giving me hormones, a highly unusual therapy for a patient just diagnosed.

I suddenly changed from a retired chemical engineer experienced in rare gases, molten steel, and specialty chemicals into a patient learning cancer therapy. I had had many job assignments for which I was given a problem and had to find the answer. I needed help. I got into medicine when cancer got into me. At a prostate cancer support group, I found a book by Linus Pauling, PhD. His name was familiar to me because he had a Nobel Prize in chemistry. I bought his book and found out about Abram Hoffer, MD, PhD. Cancer and Vitamin C was written by Ewan Cameron and Pauling while Vitamin C and Cancer was written by Hoffer. I recommend both books as they may have saved my life. Both books recommended high-dose vitamin C for cancer therapy.

The local prostate cancer support group had a facilitator who came to monthly meetings

only rarely. I was asked to take his place. To provide speakers, I could ask local doctors, chiropractors, nutritionists, dieticians, and even myself. As I studied and wrote articles on cancer therapies, others became interested. I spoke at cancer and church groups in several states and started my web site: www.cancertherapies.org. Some of my articles were published in Townsend Letters, a monthly magazine.

I was initially interested in controlling my prostate cancer. Gradually I learned that all cancers have much in common, including the wonderful benefit that vitamin C appears to kill all types of cancer at doses completely safe to people. My aim changed from prostate cancer therapy, to cancer in general, and now to helping all cancer patients.

None of the local oncologists ever agreed that vitamin C should be used for cancer therapy. Dr. A is an example. My friend Bill Sears (name used with permission) was diagnosed with non small cell lung cancer, stage III-B. Dr. A estimated 8 months life or 11 months if Bill took chemo. Bill estimated that chemo might give him 3 months of misery to get 8 months of good life. He initially rejected chemo.

Bill and his wife asked me, and others, about vitamin C and other therapies. I described Cameron's vitamin-C-only therapy and Hoffer's multivitamin therapy. Neither of their therapies required prescription or proprietary medicines. Bill chose Hoffer's vitamins but did not choose a low sugar diet as emphasized by Hoffer. Bill lived 24 months and had narcotic-type pain pills only during his last two weeks or so. Bill had a high tolerance for pain.

Shortly after Bill's death, Dr. A spoke at our prostate cancer support group. When asked, he said he could not recommend vitamin C for cancer therapy—it's not approved by FDA. I asked if he could refer his cancer patients to me (a vitamin C enthusiast). Again he said no, he was the new doctor in the group.

Why don't most doctors recommend vitamin C for cancer therapy? Dozens of books, including my *Vitamins Can Kill Cancer*, advocate vitamin C for cancer therapy and give convincing clinical data from thousands of patients. Were the books all wrong, including mine? I had hoped that cancer deaths would greatly decrease. I had to study more. I Googled "state medical boards discipline." That showed me why doctors fear FDA and the state medical boards, SMBs, who follow the FDA.

All states have SMBs to assure that doctors are properly trained and follow good medical

procedures to protect the public from snake oil peddlers. SMBs are instruments of the state and have monopolistic powers. For example, they do not approve vitamin C for cancer therapy, possibly due to choosing profitable therapies rather than good medicine. The next chapter explains how well vitamin C works. The following chapter explains why doctors cannot recommend vitamin C, but how patients can safely and legally use vitamin C to live longer with less pain.

As I worked on publicizing vitamin C as a therapy for most cancers, I found I was again thinking far too small. Vitamin C works by strengthening the immune system, a therapy called immunotherapy. Immunotherapy applies to hundreds of diseases including the big ones: cancer, heart, stroke, lung, influenza, and pneumonia. Perhaps diabetes will eventually be controlled by vitamins C & E, plus restricted intake of sugars and trans fats. I have much study yet to do.

Oh, I forgot to tell you. After 17 years, my cancer is in full remission with no radiation of any sort, no surgery, no chemotherapy, no pain, no worry, and only minor side effects. My happy cancer therapy included short-term hormone therapy plus Hoffer's regimen with ordinary vitamin C and other supplements, all economical and available over the counter. Vitamin C has helped patients with most types and stages of cancer.

Vitamin C can be used before, during and after radiation and with most types of chemotherapy. Like me, many patients got well before they ever got sick from. Perhaps Hoffer's therapy is all you need to get well.

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Chapter 8 – Cardiovascular Diseases

“We don’t have a cure for this disease,” Dr. Allan Schwartz, New York Presbyterian Hospital, told USA Today.¹ That was during a newscast on 2/12/2010 when Bill Clinton was released from a hospital after he got two stents in veins. “It is a chronic condition . . . but we have excellent treatments. “Heart bypass surgery lasts about 10 years while stents to prop open veins last“ four or five years,” according to Dr. Cam Patterson, cardiology chief at University of North Carolina. About one million such operations are done each year, said Dr. Ralph Brindis, cardiologist at Kaiser Permanente health plan. “Suprisingly, this [bypass surgery] doesn’t shorten someone’s life span,” said Dr. William O’Neill, cardiologist and executive dean of clinical affairs at the University of Miami.

The above news conference depicts a monstrous money making machine. Millions of patients a year get expensive treatments that last five or ten years before they need another “tune up!” Mainline cardiologists “don’t have a cure.” In fact, cardiovascular patients of most types have been given longer life with less pain by the combination of a water-soluble antioxidant (vitamin C), an oily antioxidant (vitamin E), and a semi-vitamin that helps every cell in the body to make more energy (Coenzyme Q10 or Co Q10), Few tests have been run but results are encouraging.

The cancer community has chosen to not run significant trials, since favorable results might upset the money making machine. Even with successful tests, approval by the FDA is uncertain. Approval by FDA is expensive.

Cardiovascular patients can choose over the counter therapies safely and legally. Fortunately, we have safe, natural therapies that have worked on others and might work for you. Atherosclerosis (hardening of the arteries) is the most common form of heart disease. There are several suggested regimens but Table 12 is simple, tested and effective, individual results may vary.

Table 12.

Therapy for Atherosclerosis, Angina and Congestive Heart Failure, Stages I and II

Vitamin C^{2,3} 3-6 grams/day or to bowel tolerance.

Take in 3 or 4 divided doses, preferably with meals

Vitamin E^{3,4} 400 to 1200 IU,

as natural d-alpha tocopherol

Co Q10^{5,6} 300-600 mg, divided doses

Lysine² 3,000-6,000 mg

Lipoic Acid³ 300-600 mg, divided doses

Acetyl-L-Carnitine^{5,6} 2,000-3,000mg

Based on work by Marvin Bierenbaum, Hickey³ recommended that d-gamma tocotrienol at 300+ mg and d-alpha tocopherol at 800+ IU be substituted for vitamin E in Table 12. Vitamin E succinate⁷ (natural d-alpha tocopherol succinate) is water-soluble and more effective than oily vitamin E, according to John Boik⁷ and Abram Hoffer.⁸

Successful treatment often includes improved heart ejection fraction, less fatigue, shortness of breath, chest pain, and palpitations. Treatment often makes fewer sticky platelets, lower diastolic pressure, and may decrease the need for Warfarin.

Pauling⁹ describes a distinguished biochemist with heart disease who was on disability, in pain, and unable to work or exercise. He was taking 5,000 mg/day of vitamin C plus vitamin E and other vitamins. Pauling added lysine at 1,000 mg/day increasing by 1,000 or 2,000 mg/day every week or so. After a month he was taking 5,000 mg/day of lysine along with the vitamin C and other supplements. He could then walk 2 miles without chest pain or nitroglycerine. He had cut his heart medicine in half. A couple months later, he was chopping wood and painting the house, but he had increased the lysine to 6,000 mg/day. He commented, "It's almost miraculous." He may have been more fortunate than most, but he gives us hope.

For atherosclerosis the Shute brothers^{3,4} advocated 400 to 800 IU of natural vitamin E in the form of alpha tocopherol. Other supplements were not mentioned. Strokes are often prevented by vitamin C, which strengthens capillaries.³ Vitamin C helps prevent pieces of plaque from breaking off and then clogging veins or capillaries.³

To prevent cardiovascular disease,¹⁰ keep C-reactive protein at or below 2 mg/L by taking 1,000 mg/day of vitamin C. Keep homocysteine at or below 9 micromol/L by taking folic acid at 5 grams/day, vitamins B-6 at 300 mg/day and B-12 at 1,000 mcg /day. Perhaps you are already taking most of these vitamins.

High Blood Pressure

High blood pressure, BP, has several possible causes: excess blood volume, the bodies' constriction of small arteries, and/or atherosclerosis. High BP causes weak heart muscles to get thicker and stiffen. In one large group⁵ of patients on Co Q10 at 300 to 600 mg/day, one fourth of patients needed no other medication and another fourth reduced their dosages of heart medicine by

half. If Co Q10 alone does not work, consider following the regimen in Table 12. Diet, weight control and stress are important. If you take statin drugs, even red yeast rice, PLEASE take the coenzyme Q10. Statin drugs deplete the body of Co Q10 that can cause miserable side effects.

One man^{11,12} lowered his blood pressure from 225/115 down to 130/85 on a 2-week diet of rice and fruits. The diet was miserable but OK for a short time, then he could slowly add other foods. The diet never became popular but it can be considered.

Congestive Heart Failure

Congestive hearts have dead muscle and scar tissue. Some doctors say congestive heart failure⁹ has no drug cure. But vitamins and supplements offer tested, honest hope of maintaining the heart's health, Table 13. A weak heart muscle¹³ should be strengthened slowly to prevent one heart chamber from beating stronger than the others. Work under professional medical care.

Table 13. Congestive Heart Failure¹³ Stages III and IV

Vitamin C 4 to 10 grams/day preferably with meals⁶

Vitamin E 50 IU and slowly increase to 800 or 1200 IU

Natural d-alpha tocopherol preferred

Under professional supervision

Coenzyme Q10 400 mg, divided doses

Lipoic acid 300-600 mg, in divided doses

Acetyl-L-Carnitine^{5,6} ..2,000-3,000 mg, in divided doses

B-50 complex For vitamin B-1 and B-6, take with meals

Selenium 100-300 mcg

Magnesium 400 mg

Potassium 800 mg

Chromium 200-400 mcg

Amino acids From diet unless really sick

Diuretic Per doctor's instruction

AVOID Sugars, alcohol, smoking,

extra weight, and added salt.

Functions of Supplements

Vitamin C is a water-soluble antioxidant that can regenerate vitamin E and other vitamins. It is necessary for strong repair of tissue. Vitamin C dissolves fresh plaque, is needed for production of collagen to make blood vessels strong and flexible, makes plaque less likely to break up and release pieces that can clog veins. Ascorbic acid can dissolve calcium held in flesh.¹³

Vitamin E³ should be the natural type, not synthetic. Vitamin E comes in 2 types, tocopherol and tocotrienol, and 4 versions of each type, alpha, beta, gamma, and delta for a total of 8 versions.

When oxidized, all versions can be regenerated by vitamin C. Vitamin E can cut blood vessel blockage, keep cell membranes flexible and able to move materials in and out of cells. Tocotrienol cuts artery blockage, can work relatively rapidly-6 months. D-Alpha tocopherol protects fats in lipoproteins from oxidation, inhibits platelet aggregation, and enhances vasodilatation.

Coenzyme Q10 or Co Q10 is a water-soluble⁶ antioxidant that is required in every cell of the body. It strengthens the mitochondria to produce more energy, is anti-inflammatory, protects cell membranes against free radicals, and minimizes free radicals in cholesterol. Beginning in our 40's and into our 90's, the Co Q10 level in our blood sinks to only 5% of our youthful level.

Supplements are necessary to help prevent cancer, cardiovascular diseases, diabetes, mental fog, chronic fatigue, and gingivitis. Co Q10 "can restore to normal a patient who is in line for a heart transplant," if patient is treated within a year of diagnosis. Co Q10 is more effective if eaten with fat.

Lysine dissolves plaque and can prevent plaque from sticking to vein walls.

Lipoic Acid^{5,6} is a fat-soluble antioxidant. When used with acetyl-L-carnitine, it keeps free radicals from damaging the mitochondria, and helps weary, old rats run like youngsters. It helps rid the body of toxins, combats peripheral neuropathy from diabetes, rapidly moves glucose into cells, and increases the permeability of cell membranes. Lipoic acid can reduce the pain of type 2 diabetes in legs. Mix pills with peanut butter, almond butter or otherwise eat with fat to increase absorption by the body.

Acetyl-L-Carnitine, ALC, with lipoic acid, strengthens the muscles in hearts, arms, legs and abdomen. ALC enters mitochondria through its cell membrane and then helps move waste material out of the cell. ALC minimizes heart attacks and can greatly improve survival if given quickly after the attack.

Safety of Supplements

Vitamin C is safe even at oral doses of 200,000 mg/day. Diarrhea is your personal indicator of maximum dose, and a warning to decrease the dose slightly. Dosage changes as you become more or less sick. Other supplements are safe at the dosages indicated. For maximum doses, see www.drugs.com/npc/ and enter the name of the supplement.

For example:

Vitamin E is safe at 1,500 IU/day as an upper limit.

Lysine. Average humans require 800 to 3,000 mg/day. The average American diet plus 3,000 mg/day appears to be safe. In one test, the patient received 7,000 mg/day without adverse effects. Co Q10 is safe at 1,200 mg/day although 3,000 mg/day has been used. Lipoic acid. Oral dosage of ALA given in numerous clinical studies ranges from 300 to 1,800 mg daily.

ALC is non-toxic and has a recommended dose of up to 3,000 mg/day.

Patients should work with their doctors or dieticians when considering doses larger than those listed.

Conclusion

Cardiovascular diseases are probably controllable by vitamins. Patients can safely and legally use the supplements listed here for cardiovascular therapy, but see “How to Talk to Your Doctor” in Chapter 3. The suggested regimens have been given insufficient clinical testing, so work with a knowledgeable medical professional. Patients have the knowledge and the power to live longer with less pain.

Caution: This chapter is educational and is not intended as medial advice. Each person should check with his or her doctor.

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References for Chapter 8 - Cardiovascular Diseases, p. 59

1. <http://www.usatoday.com/news/health/2010-02-12>, then "clinton/heart"
2. Pauling L & Rath M. Solution to the puzzle of human cardio-vascular disease. Journal of Orthomolecular Medicine. 6:125- 134 1991. Use of lysine to dissolve plaque.
3. Hickey S & Roberts H. Ascorbate, The Science of Vitamin C. 2004; United Kingdom: Lightning Source UK.
4. Shute E. The current status of alpha tocopherol in cardiovascular disease, In Vitamin E, Your Key to a Healthy Heart, by Herbert Bailey, 1964. ARC Books, New York.
5. Zucker, M. User's Guide to Coenzyme Q10. 2002, North Bergen, NJ, Basic Health Pub.
6. Hunninghake, R. User's Guide to Energy-Boosting Supplements. 2006, Laguna Beach, CA, Basic Health Pub.
7. Boik, John. Natural Compounds in Cancer Therapy. 2001, Princeton, MN, Oregon Medical Press.
8. Hoffer A and Pauling L. Hardin Jones biostatistical analysis of mortality data for a second set of cohorts of cancer patients with a large fraction surviving at the termination of the study and a comparison of survival times of cancer patients not receiving these doses. J of Orthomolecular Medicine. 1993;8:1547-167.
9. Pauling, L. Case report: lysine/ascorbate-related amelioration of angina pectoris. J of Orthomolecular Medicine. 1991;6(3-4): 144-146. Early use of lysine.
10. Faloon W. Media says: no cure for heart disease. Life Extension. 2010; September:7-22.
11. Whitaker, Julian. Health & Healing, 1993;3(3) p2. See Walter Kempner, Am J Med. 1948;4:545-577. Quick reduction of blood pressure.
12. Murphy R J F. The effect of "rice diet" on . . . hypertensive subjects. J Clinical Investigation. 1950, July 19(7):912-917.
13. Saul, Andrew. Doctor Yourself. 2003, Laguna Beach, CA, Basic Health.
14. Levy TE. Curing the Incurable, Vitamin C, Infectious Diseases & Toxins. 2009, Harrison, NV. LivOn Books.