

Tijuana's Elite Healers: The Blending of Western Medicine with Ritualistic Cures

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Tijuana, Baja California, has long been a haven for people from the United States seeking health cures (rather than health care). Visits were generally made in secret, either because the procedure desired was illegal, for example, abortion, or for the sake of vanity, as in the case of cosmetic surgery or weight reduction. Neither the doctors nor their facilities were advertised by proprietors or by those needing the services, in part because the procedures were often substandard. In addition, a negative connotation was commonly associated with going to Tijuana, except for the occasional shopping spree or to attend a sporting event.

In recent years, however, Tijuana's health care (or cure) facilities have received increased publicity and visibility. Now, hundreds of people cross the border each year to visit well-known Tijuana clinics. This shift in attitude began in 1963 when a Mexican physician, in response to requests from cancer patients in the United States, began to administer a medical preparation called Laetrile to treat the disease. Since then, other "cancer" clinics have opened, some offering similar healing therapies but employing different methodologies. Some healers promise to cure almost any disease, regardless of its severity, while others attempt to control only certain conditions, however serious. Both strive to restore human dignity and to improve the quality of life-for many patients are terminally ill.

These Tijuana healers are an elite.¹ They exist because they deliver a form of health care unavailable elsewhere. They perpetuate themselves through their healing lore—an eclectic mix of timely scientific knowledge and ancient curing techniques, permeated with an ethereal spiritism. Their lore is implicit, based upon the manipulation of medical symbolism and cultic devices. Some of the healers promise cures for the most incurable diseases—terminal cancer, epilepsy, rheumatoid arthritis, herpes, multiple sclerosis, and many other devastating disorders. Their followers (or patients), the folk-infirm, subscribe to their teachings because they offer, through charisma and an assumed professional expertise, a panoply of remedies that is augmented by supportive camaraderie and an aura of the supernatural.

Remarkably, this corps of elite curers continues to thrive, bringing personal ideology, style, and unusual curing methods to their clinics as they anticipate future needs and new dimensions of health care. This article focuses on three of the more popular and successful (in terms of continuing operations) Tijuana healers' clinics, during the period 1978-1986: Centro Medico del Mar, Clinica Manner (Cydel), and La Gloria. Since the 1960s there have been other healers with offices or clinics, but none has enjoyed the high level of recognition and sustained involvement in the international network of alternative medicine practitioners that these three have.

In-depth study of the clinics or of the healers themselves has been difficult because clinic proprietors have been reluctant to (or will not) allow researchers to examine their files, prepare clinical case histories, or even perform statistical analyses based on clinic censuses.² The information contained in this essay was collected from personal observations and discussions with clinic proprietors, healers, personnel, and patients; material posted on clinic bulletin boards; brochures; conversations with motel operators serving the clinics on both sides of the border; and chats with coffee shop waitresses, taxi drivers, and Tijuana physicians—in short, anyone I could find during my visits over an eight-year period who had some experience with the clinics.³

¹ “Elite” in this sense connotes a small group or stratum that exerts influence or authority appropriate to this study. James W. Wilkie, in *Elitelore* (Los Angeles: UCLA Latin American Center Publications, 1973), p. 16, distinguishes between the elite and the non-elite: “the latter develop lore which allows them to make sense out of situations beyond their control. The former develop a special lore to justify their attempts to control society.” Hence the healers' rendering and promulgation of their very own brand of elitelore. I am grateful to Professor Wilkie for his encouragement and interest in my research on Tijuana's elite healers.

² Only one clinic healer (at Centro Medico del Mar) has issued clinical findings on his success with Laetrile treatment of certain carcinomas. Another healer (at La Gloria), during an orientation tour, indicated that all records were destroyed by fire and for this reason they had no statistics regarding treatment efficacy.

³ This research project began in 1978 as part of a program to provide continuing educa-

Tijuana, located in the Mexican Free Zone, is an ideal location for the healers and their clinics.⁴ In order to better understand the syncretic therapeutics of the Tijuana healers, it is necessary to study the operation of the clinic, the treatments themselves, and the style of the major healers.

The medical care that the border practitioners provide is unique because it is, in part, a blending of the new and the old, or what Edward H. Spicer calls "Western medicine" and "popular medicine."⁵ According to Spicer, Western medicine encompasses a body of scientific knowledge which is utilized by licensed physicians in their practice of the art of healing. In contrast, popular medicine, which Spicer suggests may even be considered "parallel medicine" (accepted, ongoing healing theory and practice not based on absolute scientific principle), is the product of techniques developed over long periods of time by nonprofessionals in a given community to satisfy the health needs of the local population.⁶ The Tijuana healers, however, go beyond traditional approaches, making broad claims of remedies (though reportedly unproven) that appeal to a select, vulnerable group -the desperately ill.

In Mexico, traditional popular medicine, which dates at least to the time

tion courses for registered nurses from California. The course consisted of a three-day seminar offered four times a year. It included visits to the clinics, in-depth discussions with clinic healers, and considerable interaction with the patients. We also ate the food. Initially, the course was very popular and nurses, as well as some medical doctors and hospital administrators, from the United States attended. Enrollments declined after California legalized the use of Laetrile. Many of the nurses who enrolled either knew someone with cancer, someone who had died from cancer, or had the disease themselves. My last regular visit to the Tijuana clinics was in December 1986, although I returned again (in 1988 and 1990) to update my information.

⁴ The Free Zone, a belt about sixty kilometers wide along the length of the U.S.-Mexican border, was established in the nineteenth century to stimulate the development of border cities. Import and export items are exempted from duties and U.S. visitors are permitted to travel freely back and forth across the border within the boundary of the zone. The Free Zone was terminated in 1909 during the Mexican Revolution, and was not reestablished in Baja California until 1937.

⁵ See Edward H. Spicer. *Ethnic Medicine in the Southwest* (Tucson: University of Arizona Press, 1981), pp. 4-6.

⁶ Popular medicine healers are variously called witches, shamans, *curanderos*, "folk" or "traditional" medicine practitioners, spiritualist healers, and so on. It is important to keep in mind that healers (whatever the title) have their own theories of illness and methods of treatment, which are appropriate for the culture. According to Kaja Finkler. *Spiritualist Healers in Mexico: Successes and Failures of Alternative Therapeutics* (South Hadley, Mass.: Bergin and Garvey, 1985), Mexican "spiritualist" healers have a sophisticated, unique health care system which has much in common with other popular medicine modes. Finkler found that while spiritualists bring together religious ideologies and ritual cleansing by means of pharmaceutical substances, trances, and "touching," they tend not to develop strong interpersonal relations with their patients. Their treatments succeed (in many cases) because they offer symbolic nurturing, which encourages the patient to try to improve.

of the Aztecs,⁷ attempts to serve both the physical and spiritual needs of the sick and usually employs an established ethnopharmacopoeia of domestic herbs as well as purgatives and enemas.⁸ In addition, the setting itself is important because a specific ritual is followed. The healing ceremony may be held in either the patient's or the healer's home, or in another designated sacred location.⁹ Often, only the ill person's family is in attendance. In addition to the herbal preparations, the healers may use incense, candles, other special religious objects, as well as incantations. The intent is to bring about physical and spiritual purification (or the ridding of the disease) through ritual cleansing. While imbued with the occult, Mexican popular healers, both men and women, are often able to effect certain physical cures.¹⁰ But more important, they can assuage emotional insecurities brought on by unwanted conditions in the environment by attempting to ward off evil spirits.¹¹ If the healer is unsuccessful, blame can be placed on the spirits themselves or on the patient's lack of faith or failure to carry out the ritual precisely as prescribed.¹²

Popular healers continue to practice today in Mexico's countryside and cities.¹³ In Tijuana, clinic healers blend the spiritualist aspect and other an-

⁷ Fray Bernardino de Sahagún describes some of the healers and sages during Aztec times: the wise man (*tlamatini*), the physician (*ticitl*), the sorcerer (*naoalli*), and the possessed one (*tlacateculotl*). See Sahagun, *The General History of the Things of New Spain, Book 10: The People* (Santa Fe: School of American Research and University of Utah, 1961), pp. 29-30. Chimalpahin, the seventeenth-century Nahua annalist, notes that indigenous healers used herbs to try and help those stricken by epidemic diseases in the 1570s. For a Nahua account of disease and treatment, see Susan Schroeder, "Cocoliztli: (epidemic disease): The Impressions of a Nahua Annalist from Amecameca." Paper presented to the Latin American Indian Literatures Association, Cornell University, June 6, 1987.

⁸ Sahagun lists many of the herbs in *The General History of the Things of New Spain, Book 11: Earthly Things* (Santa Fe: School of American Research and University of Utah, 1963), pp. 105-289. Their use as remedies is recorded in *Book 10: The People*, pp. 139-163.

⁹ Finkler *Spiritualist Healers*, states that the spiritualists use "temples" for their healing ceremonies.

¹⁰ More specifically, they are called curanderos and curanderas. In a recent survey of the current literature on health and folk or popular healing practices in modern Mexico, I found that many traditional healers were curanderas and that some also practiced as *parteras* (midwives). The curandera is accorded great respect and is called upon to attend to a multitude of problems, both physical and spiritual. See Susan Schroeder, "Women and Health in Latin America, 1977-1985: A Bibliographical Essay," in K. Lynn Stoner, ed., *Latinas of the Americas: A Source Book* (New York: Garland Press, 1989).

¹¹ "Evil spirits" include a whole range of wicked forces such as the evil eye, a hex placed on someone: unfavorable astrological prognostications, or an outsider who can serve as a scapegoat.

¹² A registered curandero in Mexico City attributes his success in healing to the fact that his patients "have faith and that is important in any cure." See Dan Williams, "Poor Fall Under Spell of Witches," *Los Angeles Times*, April 13, 1987.

¹³ In fact, owing to the continuing economic crisis in Mexico, many sick people are turning to curanderos for treatment because the remedies cost less and tend to satisfy more of

cient traditional modes of curing with modern Western medicine, reflecting the historic duality of Mexican society.¹⁴ Patients come from the North because Western medicine (and everything that is new) has failed them. Even upon recognizing the hopelessness of their own condition, they patronize the Tijuana clinic practitioners, who soothe the psyche and make yet another attempt to repair their patients' ravaged bodies with their own personally devised combinations of ancient formulas and new methodologies.¹⁵

What is being offered in Tijuana is not what one encounters during a typical office or hospital visit in the United States. U.S. medical practice is based upon some science, some experience, and some luck, all of which are used to generate statistics about success and failure rates—the key determinants of modern medical practice.

The Tijuana healers do not quantify their cures. Instead, and fundamental to understanding why the healers enjoy such a following, they attempt to provide health care that incorporates elements that seem to be vanishing from orthodox medical practice—the personal touch, comfort, and hope.

The purported healing regimes of the major "cancer" clinics in Tijuana are referred to as "alternative therapies," treatments and medications other than those prescribed by clinicians practicing conventional medicine in the United States. The cures are advertised as "healthful," nontoxic, nonaggressive, and restorative, compared to the "harmful" Western practices of radiation, chemotherapy, and surgery—which are said to burn, poison, and scar permanently. The suggestion here is that the "evil" may rest in Western medical treatments.

the general needs of the patient. The Mexican government is even encouraging the collaboration of curanderos and medical doctors with the hope that patients with serious physical ailments will be referred to hospitals. See Williams, "Poor Fall Under Spell of Witches," and for similar collaborative efforts in the United States see Alfredo Corchado, "Folk Healers Stay Popular with Poor in Rural Southwest," *Wall Street Journal*, January 4, 1989.

¹⁴ For the Mexican perspective on the complex nature of one's own culture, see Octavio Paz, *The Labyrinth of Solitude: Life and Thought in Mexico* (New York: Grove Press, 1961).

¹⁵ As Western medicine advances and refines its scientific theory and technology, many medical practitioners overlook the fact that an anxious, ill patient needs something more than a cursory examination or a pharmaceutical prescription. The physician's recurring failure to understand that a sophisticated body of knowledge must be combined with a genuine concern for the total condition of the individual increases the patient's dissatisfaction with respect to the treatment received. The sick and the needy then look for alternative treatment. For a discussion of several possible reasons for disillusionment with the current state of the art of medicine, see Spicer, *Ethnic Medicine*, p.14. See also George M. Foster, "Medical Anthropology and International Health Planning," in Michael H. Logan and Edward E. Hunt, Jr., eds., *Health and the Human Condition: Perspectives on Medical Anthropology* (Belmont, Calif.: Wadsworth, 1978), pp. 301-313. Foster has determined that the current sequence of choice in seeking medical assistance is first the use of home remedies, then a medical doctor, and finally an indigenous curer (or faith healer in the United States).

All clinic proprietors are healers, but only a few are medical doctors. Many of them share common theories of curing, differing more in degree than in kind. They all advocate strict dietary controls, use herbs and natural foods, and, like their popular medicine counterparts (or *curanderos*) elsewhere in Mexico, employ cleansing rituals. In fact, one of their curandero colleagues in Sonora boasts, "Physicians can cure you of many things, but herbs and cleansing can cure you of everything."¹⁶

The Tijuana healers are ridiculed by physicians in both Mexico and the United States, but their clinics continue to prosper—perhaps more today than ever before. Their ideology is holistic—emphasizing total physical, psychological, and spiritual treatment. The healers claim that by subscribing to and strictly following one of their regimes, an individual can attain good health, regardless of the preexisting medical condition.

The lore of healing and the wish to be well are compelling. Pandemics come and go, and border restrictions and U.S. federal drug laws impede the flow of important medications. Yet the clinic healers manage to adapt to each new health crisis, promising relief through various "cures."

In the last ten years there have been at least four distinct healing cycles: cancer, herpes, rejuvenation, and, now, detoxification/immunology—each one formulated in response to popular demand or need expressed by individuals or groups in the United States.

It is essential that each healer provide an optimum environment in order to effect the desired cures. Hence, each has his or her own clinic in order to implement the specific ritualistic healing regimes necessary for their patients. The healers take into careful consideration the various elements that may make their services more attractive and, it is hoped, more effective.

The Clinic

Of the major clinics, all of which are located in Tijuana or on the outskirts of the city, two, Centro Medico del Mar and Clinica Manner (Cydel), are owned by Mexicans. The others (La Gloria, Bio-Medical, Plaza Santa Maria, and American Biologics) are leased from Mexican owners but are run, for the most part, by individuals or firms in the United States. With respect to facilities and therapies offered, the clinics have a great deal in common, but their programs differ markedly from those in the United States.

The Physical Plant

The healers often compete with one another to provide facilities which are attractive" and comfortable and that create an atmosphere of well-

¹⁶ Curandero Manuel Lozano; see Williams, "Poor Fall Under Spell of Witches."

being. Except for Centro Medico del Mar, most are remodeled motels or houses. Many are multistoried and lack elevators, ramps, and rails; often very sick patients must climb flights of stairs or walk long distances for their meals. Nevertheless, all are fairly modern, clean, and relatively well maintained.

All healers claim to have physicians on staff but most do not have doctors in residence nor professional nurses to provide routine supervision or emergency treatment. Physicians come to the clinics to diagnose and prescribe, but the family or the patient's companion is responsible for administering most treatments and medications.¹⁷ Intravenous infusions are given by clinic technicians during the day.

Only two clinics offer hospital care. Hospital del Mar has long been an integral part of the Centro Medico clinic program, but it is also a bona fide community hospital, providing emergency and maternity care as well as nonconventional therapy. The San Francisco-based American Biologics Company advertises that it has reserved the fourth floor of Tijuana's Notre Dame Hospital for patients seeking alternative therapies. Most other clinic patients who require immediate attention are treated in Tijuana hospital emergency rooms or, more commonly, they are taken by car or ambulance to San Diego hospitals.

The Psychological Facility

inspire confidence and to instill a positive attitude about getting well, staff members, especially in the larger clinics, tend to be young, good-looking, and upbeat—from consulting physicians, receptionists, and public relations representatives, to the laboratory technicians. Nearly all speak English. Morale is high and a spirit of community is evident everywhere.¹⁸ Minimizing or eliminating the typically cold, clinical atmosphere found in Western medical offices and surrounding the patient with friends and family create a sense of belonging and a feeling of confidence that the treatments will have the desired effect. A few clinics even have psychologists who provide individual or family counseling sessions, group therapy meetings, and biofeedback instruction.

¹⁷ The family is an essential part of the therapy. Few patients come to Tijuana alone. In fact, the clinics make it very clear that patients must either be well enough to take care of themselves or bring someone who will assume that responsibility. In Mexico, the nuclear and extended family traditionally provides support and care. In contrast, in the United States it is common for hospitals to restrict visitation and interaction to brief periods.

¹⁸ In addition to Laetrile's purported benefits, one of its most enduring qualities is the socialization and sense of belonging that comes from participating in a Laetrile-healing regime. Yvonne M. Vissing and James C. Petersen, "Taking Laetrile: Conversion to Medical Deviance," *CA-A Journal for Clinicians*, 31:6 (November/December 1981), pp. 365-369, report on Laetrile clubs in the United States which provide a support network for patients and potential clients.

In addition, at Centro Medico del Mar group activities take place. Patients (who are well enough) and friends are encouraged to go on clinic-organized trips to the beach, downtown Tijuana, and sporting events. This clinic also provides a recreation room where patients play ping pong or cards, listen to music, or visit with one another. Other healers are beginning to promote recreational group activities in their clinics.

The Spiritual Aspect

Just as curanderos attempt to mollify evil spirits, Tijuana healers deal with the supernatural, asserting that faith-belief in a Divine Spirit will facilitate recovery.¹⁹ It appears that, until recently, only Centro Medico emphasized spiritual healing as an essential part of therapy. A large attractive church is part of the clinic complex and patients are encouraged to attend services, where the healer regularly participates by reading passages from the Bible, playing the guitar, singing hymns (with family joining in or playing the organ), or just gently sermonizing on spiritual wellness. Recently, other healers have begun to stress the importance of faith and being "Christian" in the healing process. In some locales religious murals decorate the walls, and pictures of the Good Samaritan or sacred images illustrate clinic brochures. At one clinic, during orientation the administrator explains the critical role his Christian faith played in his cure.

The most important element in the operation of the clinic, however, is the healer. Through personal charm and professional rhetoric, the healer suggests, convincingly, that while his abilities are considerable, the treatment's success, that is, restoration to a healthy state, depends upon the patient's faith in the healer as well as the Divine Spirit. When the healer's prescriptions prove futile, failure is attributed to the damage caused by previous therapy (malevolent Western medicine) or the patient's lack of commitment.

The Treatments

As noted above, one reason the Tijuana healers enjoy a continued following is that they offer "alternative therapies," treatments that differ from those available in the United States. These alternative therapies are said to be effective because, unlike the more orthodox methods, they are designed to repair and restore the body rather than to destroy both healthy and diseased tissues. But the healers offer even more than medical care,

¹⁹ Curanderos resort to all sorts of devices to exorcise the evil from their patients' bodies and souls. The Tijuana healers, in contrast, tend to stress the benevolence of a "heavenly being" to counteract the perverse forces prevailing upon their patients.

for their cures are based specifically upon the philosophy of human holism -the belief that a living organism has a reality other than and greater than the sum of its constituent parts.²⁰ They view disease (usually cancer) as a breakdown in the entire system, not just a local manifestation. The treatment consists of restoring the whole body to normal function and entails not only tending to the physical problem but also improving the psychological and spiritual state as well.

Nearly all the healers' therapies are classified as "metabolic" and consist of comprehensive treatment programs which absolutely must be taken together-all part of the rite. For example, a Laetrile-metabolic regime includes Laetrile,²¹ enzymes, vitamins, minerals, a strict diet, enemas for detoxification, and supplements taken all at once and regularly.²² The cost of each treatment varies according to the clinic, the therapy, and the duration of stay (see table 1). The fees of the major clinics are fairly competitive. However, healing repertoires and clinic costs are adapted in response to each new health need cycle. Prices have increased in recent years, but are far lower in Tijuana clinics than in acute cancer treatment facilities in the United States. While the Tijuana practitioner's compensation is considerably more than the curandero's customary payment in goods, most of today's healers advertise their willingness to be flexible with respect to costs and payments. As noted above, the alternative therapy may vary from healer to healer. The most frequent methods for curing cancer and degenerative diseases in the border clinics are discussed below.

²⁰ Glenn D. Kittler, *Laetrile. Nutritional Control for Cancer with Vitamin B-17* (Denver, 1978), p. 105.

²¹ Laetrile" is a patented product synthesized from a compound prepared from the pits of apricots. It is commonly called amygdalin or by several pharmaceutical brand names. For ease of reference in this paper, all preparations will be categorized under the popular name "Laetrile." For background on the history of Laetrile, see Glenn D. Kittler, *Control for Cancer* (New York, 1963) and *Laetrile, Nutritional Control for Cancer*. Kittler is a long-time advocate of Laetrile therapy. Because most of the literature on Laetrile is written by promoters, and often is poorly documented, reliable, unbiased information is hard to find. Surprisingly, except for a few articles about Laetrile toxicity, medical specialists have had little to say about why one should *not* seek this form of therapy. In trying to present a balanced perspective, I have invited numerous U.S. doctors to discuss the issue. Not one physician has agreed to speak to my classes about the negative properties of Laetrile; the only excuse offered was by a Los Angeles oncologist who did not want to go to Tijuana but would participate if I moved the course to Mexico City and paid his travel expenses. Other physicians are either unable or unwilling to address the issue of Laetrile therapy and its popularity in Tijuana.

²² When Laetrile was tested on terminally ill patients at various research institutions in the United States in the 1980s and determined to be ineffective as a cure for cancer, Laetrile proponents protested vociferously, claiming that the testing was inconclusive because researchers had failed to employ the complete metabolic regime.

Table 1.1
Tijuana Clinic Cost, 1978-1990^a
(Dollars)

Clinic	1977-1979	1880-1981	1982	1984	1986	1990
Centro Médico de la Mar						
Treatment (3 weeks)						
Clinic	500-700 ^{c,g}		1,200		8,000 ^{h,i,j}	10,000 ^{h,j,u,v,w}
Hospital	1,500-1,800		1,500			
Deposit (cash)	300		1,000		3,800	6,500
Medications (6 months)	1,900 ^h		720-1,380 ^h			
Motel Los Girasoles						
Single (per day)	10		14			
Double (per day)	14		18			
Suites (per day)	18-21		28-32			
Meals (per meal)						
(Hospital or)						
Tu Casa Restaurant	1-2		3-4			
Trailer hook-up			8			
Cyde (Clinica Manner)						
Treatment (21-27 days)	3,100 ^{d,k}			6,350	6,890 ^{l,m}	9,750 ^{l,m,x}
Medications (6 months)	1,650 ^h					
Companion (per day)						
Room (shared)	5					
Meals	10				50 ^y	50 ^y
Live cell therapy					3,000	
Gerson						
Treatment (3-8 weeks)	910-700 ^{b,n}			1,470 ⁿ	1,470 ⁿ	3,000 ^z
Deposit	910			1,470	4,000	6,000 ^{aa}
Extras				100-400 ⁿ	400 ⁿ	
Companion (per week)	280			223	223	322
Bio-Medical Center						
Treatment		1,000 ^{e,o}	600 ^p			
Plaza Santa Maria						
Treatment						
Kelley metabolic		10,000 ^{e,q}				
Brandford Interferon		90,000 ^{f,r}				
Hippocrates Health Institute						
Treatment (includes room, 23 weeks)		390-825 ^{e,s}				
Dr. Virginia Livingston						
Treatment		2,000 ^{e,t}				

- a. Costs are taken from brochures, newsletters and other published materials, clinic bulletin boards, and telephone quotations.
- b. 1977.
- c. 1978.
- d. 1979.
- e. 1980.
- f. 1981.
- g. Does not include laboratory tests, x-rays, or hospital procedures.
- h. Approximate.
- i. Either clinic or hospital since clinic facility was closed for remodeling.
- j. If patient does not have insurance, other arrangements could be made.
- k. 27 days.
- l. 21 days.
- m. Includes transportation from the San Diego airport.
- n. Per week.
- o. For life.
- p. Includes one week of injections and a six-month supply of the Hoxsey herbal formula.
- q. Approximately one month, includes complete program.
- r. Three months; room, board, and interferon.
- s. Depends on size and quality of the room.
- t. First day deposit only. Total costs not stated.
- u. Includes all routine laboratory, x-rays, scan, and ultrasound studies, as well as a six-month supply of oral Laetrile and enzymes and a three-month supply of prescribed nutritional supplements.
- v. Includes "intermediate" care room with meals for patient and one companion.
- w. All additional costs, from liver catheters to private duty nurses are itemized and charged separately.
- x. This price is for cancer therapy only. The cost for treating multiple sclerosis (\$9,425) or arthritis (\$7,150), or the prevention program (\$2,100), or cellular therapy (\$4,100) varies according to the regime or how it is combined with another program.
- y. Per day.
- z. Per week after initial \$6,000 two-week treatment.
- aa. Does not include transportation from airport.
- bb. Will not accept insurance assignments.

The Basic Program

Laetrile

Laetrile, also known as Vitamin B-17, is one of the more popular treatments employed in border clinics. Devised and patented by California laboratory researcher Ernst Krebs, Jr., in 1952, Laetrile is a molecular compound fashioned after amygdalin (from Gr. *amygdale*, "almond"), an extract from the kernels of certain foods (cherries, peaches, apricots, bitter almonds, and others). According to healing practitioners, Laetrile has been used for thousands of years to treat tumors.²³ Cyanide is one of the natural elements of the compound and is believed to have specific destructive effects upon cancer cells. Because of the cyanide, Laetrile is said to be dangerous and dosages are carefully monitored. Though frequently challenged by U.S. medical authorities, healers and patients alike deny toxicity and report few side effects from the drug.²⁴

Laetrile is believed to be more effective than amygdalin against malignant cells, especially when administered in conjunction with certain enzymes. In addition to its reported destruction of cancerous tumors, Laetrile contains the analgesic benzaldehyde. As a result, the healers report that 60-70 percent of their patients who receive Laetrile-metabolic therapy no longer require narcotics to alleviate pain.

The intravenous method is the preferred means for administering Laetrile. In the past, patients would receive three to six weeks of medication at the clinic and were expected to continue taking modified amounts at home. Tablets are available, but they are believed to be less effective, and they are considerably more toxic. The primary problem with Laetrile home care was finding someone to administer the intravenous injections. Sympathetic doctors and nurses were often called upon to help, but such participation became problematic where it was, or is, illegal.

Laetrile enjoyed an initial period of popularity as a cancer cure during the 1950s in Canada and the United States. Prohibited in both countries by 1960, Laetrile soon became available in Tijuana. In the 1980s, more than twenty U.S. states legalized the use of Laetrile provided the patient has an affidavit attesting to a terminal illness. After much controversy, in 1981 California legalized the use of the drug, and for a while interest in the Tijuana healers and their clinics declined.²⁵

²³ Harold W. Manner, *The Death of Cancer* (Chicago, 1978), p. 16.

²⁴ For results of research on Laetrile toxicity on laboratory animals, see George W. Newton, Eric S. Schmidt, Jerry P. Lewis, Eric Conn, and Ruth Lawrence, "Amygdalin Toxicity Studies in Rats Predict Chronic Cyanide Poisoning in Humans," *Western Journal of Medicine*, 127 (July 1977), pp. 55-62, and Thomas H. Jukes, "Laetrile for Cancer," *Journal of the American Medical Association*, 236: II (September 1976), pp. 1284-1285.

²⁵ In 1981 California legalized the use of Laetrile but only by patients diagnosed as termi-

Some patients claim to have been cured by Laetrile and continue to take the medication as a preventive measure. They return to the clinics annually for short-term treatment and to replenish their supply of the medication. These patients enjoy returning to Tijuana and look forward to a visit with the healer, other clinic personnel, and, they hope, former clinic patient friends.

Enzymes

Digestive enzymes, which are said to facilitate the digestion and assimilation of food and medications and to have a specific anti-tumor effect, must be taken along with Laetrile. They are available in tablet form but occasionally are injected directly into the tumors. Several enzymes are common. Wobe Mugas, widely used and considered the most effective, is available only at the clinics and must be taken across the border secretly. The enzymes are reportedly synergistic with Laetrile.

Diet

Following the curandero's practice of determining which foods can be consumed and which must be avoided, the healer devises a specific dietary regime which is considered essential to the metabolic therapy.²⁶ Each healer has a particular nutritional program, and some, like Gerson at La Gloria clinic, may differ greatly from the rest. All clinic healers advocate nutritional foods and impose strict regulations against the consumption of prepared, frozen, or fast food products, claiming that additives, preservatives, and - synthetic preparations may be harmful to an already diseased body. The rationale behind the nutrition program is that the sick, especially cancer patients, do not eat well because of side effects and medications associated with previous (and unsuccessful) medical or surgical treatments. Analgesics, particularly narcotics, tend to decrease appetite. Once off the drugs and free of pain (due to Laetrile), and with a diet of fresh, natural foods, the appetite returns, and with it normal functioning of the digestive tract. The result (according to the healers) is an increased sense of wellbeing.

nally ill by board certified physicians. There was a technicality; the authorizing board did not exist. This delayed the implementation of legalization procedures, but eventually patients were able to bring Laetrile into California. However, other necessary medications, the essential supplements to the metabolic program, were prohibited. For a summary of the Food and Drug Administration's position on Laetrile and the drug's current status in the United States, see Gerald M. Rosen and Ronald I. Shorr, "Laetrile: A Survey of Judicial and Administrative Activity," *Annals of Internal Medicine*, 94: 1(1981), pp. 530-533.

²⁶ One facet of the curandero's lore comes from an innate understanding of disease causation as it is related to hot-cold theories of particular-foods. See Margaret Clark, *Health in the Mexican-American Culture: A Community Study* (Berkeley: University of California Press, 1970), pp. 163-183.

The consumption of certain foods is restricted, especially animal protein, which includes dairy and poultry products. Fats and sweets are strictly prohibited. Coffee, alcohol, and tobacco are also taboo, and patients are advised to avoid situations where they might encounter cigarette smoke or other air pollutants. Foods are to be organically grown and prepared so that they provide optimum amounts of nutrients. Herbal teas, fresh fruit, and vegetable juices are strongly recommended. Much of the clinics' fare is attractively served and tasty.

Lists of foods which are compatible with the metabolic therapy are available and include products high in cyanide; some twelve hundred foodstuffs contain natural elements of cyanide. The healers write cookbooks and sell them for about ten dollars. Among the most popular are *The Laetrile Diet Cookbook* by Florence Joyce and *The Little Cyanide Cook Book* by June de Spain. Patients are encouraged to maintain their ritualistic regimes and to adhere to a metabolic diet for the rest of their lives in order to prevent recurrence of the disease once it is said to be cured, or at least controlled.

Vitamin and Mineral Supplements

In addition to the natural products in the regime, the healers prescribe megadoses of vitamins A and C as part of the metabolic therapy. Each vitamin has specific properties which are believed to facilitate the action of Laetrile while stimulating the body to repair itself and strengthen its natural defenses. Larger than normal doses are prescribed because it is believed that disease temporarily impairs body function and that vitamins are required in an amount greater than that found naturally occurring in the diet. While vitamin A can be toxic, healers report that they and their patients are able to tolerate very large amounts. Other vitamins are given as supplements. Minerals, particularly zinc and selenium, are also part of the regime. Laboratory analyses of blood serum and hair are used by the healer to determine each patient's deficiencies.

Detoxification

Most healers believe that disease can be traced to a breakdown in liver function. The liver normally serves as a reservoir of immunological antibodies, but also is responsible for the removal of toxic substances from the body. Therefore, this essential organ must be purified before the body can begin to repair itself. Liver purification is accomplished through a regular regime of detoxification: fasting, consumption of fruit juices, and coffee enemas. The theory is that the caffeine in coffee triggers the opening of the bile ducts and the discharge of accumulated liver and gall bladder wastes. High hot enemas are given to reach the portal vein supplying the

liver in order to activate a sluggish, perhaps incapacitated, organ. The usual recipe: boil 3-6 heaping tablespoons of ground coffee in one quart of water for 3 minutes; simmer 10-20 minutes; administer at room temperature.

Almost all metabolic therapy programs call for enemas as long as the patient is on the regime. Most clinics require about two enemas per day, but the Gerson therapy (at La Gloria clinic) specifies 9-11 each day around the clock. Enemas are always administered by the patient's friends or family. Clinics do not routinely employ nurses or technicians to carry out the procedure, although they do provide the equipment. Enemas are considered essential to prevent the accumulation of toxic materials which burden the liver and prevent it from producing important enzymes that facilitate the destruction of the cancer cells. High colonies and liver flushes are prescribed periodically, but seldom on a regular basis because of their potency.

Other Treatments

Over the years new treatments have become fashionable and the healers eagerly try each of them. Those described below are some of the more popular recent ones, all of which are used in conjunction with the basic metabolic therapy program. Much of the information contained in the following discussion comes from clinic promotional literature.

Spirolina

The Spirolina treatment program, surely taken directly from a central Mexican curandero, includes a three-week fast of nothing more than fresh fruit juices, enemas, and Spirolina tablets. The tablets are made of dehydrated plankton (a known source of protein) from Lake Texcoco near Mexico City. In ancient times, algae were skimmed from the lakes surrounding the Aztec capital, processed, and then consumed as a nutritional dietary supplement.²⁷ Today, patients and healers report that this treatment leaves them feeling revitalized and energized.

Herbal Compounds

The most famous herbal compound dates back to 1840 when Harry Hoxsey's grandfather's horse was cured of cancerous tumors on its legs after consuming certain pasture grasses. These grasses, or herbs, were blended into a compound that was marketed as a cancer cure. Among the identifiable substances were: potassium iodide, licorice, red clover, bur-

²⁷ For example, Sahagún speaks of *tecuitlatl* (fly eggs) and other lake products scooped from the water, cooked, and then eaten. See Sahagún, Book 11: *Earthly Things*, p. 65.

dock "root, Stillingia root, Berberis root, poke root, cascara amarga, prickly ash bark, and buckthorn bark.²⁸ In the 1950s Hoxsey opened clinics in Texas and Pennsylvania, where thousands of cancer sufferers spent millions of dollars on lifetime supplies of his all-natural herbal remedy, available in tablet and powder form. Hoxsey became very wealthy and was able to defend himself when faced with legal challenges by federal drug authorities. There was even a public crusade to protect the man and his product. Sale of the Hoxsey formula in the United States was prohibited in 1960, but it has since become available in Tijuana. Harry Hoxsey and his famous cure are the subject of a documentary film.²⁹

Live Cell Therapy

While people have long traveled to Europe to receive injections to halt the aging process or, better yet, become more youthful, a variety of such treatments are now available in Tijuana.

Patients receive injections of live cells from organs collected from recently slaughtered animals. The healers claim that both a general physiological response and a local one occur; that is, certain organs lacking sufficient activity react upon stimulation by cells from the same organ. This very popular practice has evolved from the reported successful laboratory experiment conducted by Dr. Alexis Carrel, who from 1912 to 1939 was able to keep a chicken heart beating in a bowl filled with a physiological solution to which he added daily extracts from another chicken heart, "proving beyond a doubt the possible immortality of tissue."³⁰ Dr. Carrel claimed that the chicken heart stopped beating because the bowl was accidentally broken. Live cell treatments also come in the form of Palmer tablets, which, although they reportedly do not contain hormones, are prescribed in different forms and quantities for men and women.

Usually, Laetrile with enzyme therapy is not required for patients taking cellular treatments. However, diet and detoxification are considered essential if the patient is to experience full benefit from the injections.

DMSO (Dimethyl Sulfoxide)

Dimethyl sulfoxide is a solvent used most often by veterinarians for trauma or joint inflammation. Some clinic patients report remarkable

²⁸ From the *San Diego Union*, six-part series. December 1980.

²⁹ The film *Hoxsey* was coproduced by Ken Ausubel, whose father died of cancer, and Catherine Salvesson, a registered nurse from rural New Mexico, who was familiar with alternative methods for healing. See Hollis Walker, "'Hoxsey' Probes Social Issues of Cancer Treatment." *Albuquerque Journal*, August 5, 1988.

³⁰ Cited from a Centro Medico del Mar clinic handout which promotes live cell therapy and Palmer tablets.

relief from arthritis pain after only one or two treatments. It is usually given in addition to other metabolic treatments. Known side effects are a pronounced garlic-like body odor and occasional retinal damage. DMSO usually produces a palliative but not permanent result.

Interferon

Clinic healers have been quick to incorporate interferon treatments into their programs. The human body manufactures several different types of interferon, which are known to promote immunological activity against cancer in certain patients.³¹

Although several cures have been attributed to interferon therapy, the treatment has not had the "magic bullet" effect that had been hoped for. Most healers prescribe interferon in combination with other treatments.

The Healers

The Tijuana curers represent an inner circle of quasi professionals. Almost all have credentials of some sort, having been licensed physicians, dentists, or nurses, or university professors. Each has a particular healing repertoire based upon experience and a personal theory of disease causation-infection, vitamin deficiency, improper diet, impaired liver function, diminished immunological capacity, and so on. Each claims to have something better to offer than what is available in the United States.

The healers are competitive and are aware that patients often shop for the "best" clinic.³² They do, however, compliment one another's success, attend and participate in the same national health conventions, and appear on U.S. radio and television talk shows.³³ Most publish a monthly newsletter and have established an institute to which one can belong.

The lore of the healers is simple. Their explanations of healing are easy to understand. Patients seldom question the curing rationale, but instead place their trust in the healer, who appears strong, confident, and professional. In addition, the healers are charismatic and caring, and have a calming effect on their patients. Patients are glad to be under their care, and believe, rightly or wrongly, that the cures will work. U.S. federal drug authorities and orthodox physicians consider the healers to be quacks and

³¹ For an overview of the properties of interferon, see Mike Edelhart, *Interferon: The New Hope for Cancer* (Reading, Mass.: Addison-Wesley, 1981).

³² Most patients learn about the clinics from health food stores or friends. There are also entrepreneurs, independent of the healers, who provide one-day tours of the clinics, which include a brief lecture and a lunch. An example is dental hygienist Marilyn Merrill's "Health on Wheels," based in Orange, California.

³³ The largest meetings are sponsored by the International Health Institute, the National Health Federation, and the Cancer Control Society.

a danger to society,³⁴ and view the clinics as sleazy back-alley shops. The healers deny medical malpractice. They see themselves as professionals who provide a service unavailable to the seriously ill in the United States.

The Healers and Their Clinics

Although several healers offer alternative therapies, four clinics have operated in Tijuana on a regular basis for an extended period of time. Best known and in business longer than the others are Centro Medico del Mar and Cydel Clinic (or Clinica Manner).

Centro Medico del Mar, in Playas (a suburb of Tijuana), is part of a clinic complex built by Ernesto Contreras Rodriguez, M.D., a former Army pathologist. Dr. Contreras moved his practice, originally located in a small office in downtown Tijuana, to Playas in the early 1970s to accommodate a burgeoning clientele. To serve the needs of his patients and their families, the facility includes a motel, rose gardens, a pharmacy, a coffee shop, a laundry facility, a 50-unit hospital, and a church.³⁵ A laboratory nearby, Kern, S.A., manufactures Contreras's own Laetrile-like product, Kemdalyn. The laboratory has stores of apricot pits (shipped from Chico, California) and equipment for processing and refining the drug. There are also laboratory rats and rabbits for clinical testing of toxicity levels.³⁶

Centro Medico is well equipped with diagnostic and treatment facilities. During the 1970s an impressive staff of Mexican medical specialists attended clinic patients on a daily basis. For many years the lines of prospective patients were long, trailing down the street. The patients, many of whom wait several hours for a consultation, come with x-rays, medical records, and hope.³⁷ Each patient receives a complete examination and spends a considerable amount of time with the doctor. It is not unusual

³⁴ For decades drug authorities have tried to prevent the duping of the public about phony cancer cures, which not only prevent the sick from seeking proper care but can be very toxic besides. Some of the old potions offered include ground up horses' warts mixed in an acidic sour cream solution, and "vaccine" injections containing tissues and cells collected injudiciously from tumors in hospital pathology departments. For a historical review of quackery, see Walter F. Janssen, "Cancer Quackery: The Past in the Present," *Seminars in Oncology*, 6:4 (December 1979), pp. 526-536.

³⁵ Some physicians in Mexico City also support the concept that the surroundings are important for the restoration of physical and emotional health. They provide handsome hospital suites with flowers and paintings, movies, and even reflecting pools, similar to what some of the Tijuana healers are attempting to provide. See Gordon Schendel, *Medicine in Mexico: From Aztec Herbs to Betatrons* (Austin: University of Texas Press, 1968), pp. 256-257.

³⁶ According to technicians at Kern, S.A., samples of Kemdalyn are periodically sent to San Diego laboratories for purity and quality evaluations.

³⁷ It is estimated that by 1980 Dr. Contreras had treated over 35,000 cancer sufferers from the United States. See Michael Satchelle, "Mexico's 'Miracle' Cure," *Parade*, April 20, 1980, pp.4-5.

for specialists to consult at this time as well. Just about everyone on the staff-physician, nurse, clerk, or technician-is young, attractive, and pleasant. Depending upon the stage of the illness, the patient is either admitted immediately to the hospital or is treated as an outpatient.³⁸ Centro Medico has outpatient motel facilities with suites, kitchenettes, and the like, and hookups for mobile homes and recreational vehicles. For patients who are reluctant to stay in Tijuana and who are able to travel to and from the border, a shuttle service operates to certain San Ysidro motels, which cater to clinic patients and even offer "Laetrile lunches."

Dr. Contreras's clinic received national publicity in 1979 when Gerald and Diana Green, the parents of three-year-old Chad, removed their son from Massachusetts General Hospital, in violation of a court order, and brought him to Centro Medico, hoping to find a less toxic and more efficacious remedy than the prescribed oncological regime in Boston. While under Dr. Contreras's care Chad received orthodox chemotherapeutic medications in addition to the clinic's established Laetrile metabolic therapy. Reportedly, Chad's lymphocytic leukemia was in remission for most of the months he was a patient at Centro Medico. Unfortunately, for reasons never fully explained and against the advice of Dr. Contreras and Centro Medico's entire medical staff, Chad's parents eventually put him in the care of another healer, believing that diet and a more holistic approach could cure his cancer. Chad Green died shortly thereafter.³⁹

At about that same time, the number of cancer patients seeking Laetrile treatment in Tijuana began to diminish because use of the drug was soon to be legalized in California and several other states. The flow did not stop altogether, however, as the clinics began to expand their services.

The metabolic therapy program at Centro Medico is designed primarily for the treatment of cancer, but patients suffering from other degenerative disorders like arthritis also seek help from Dr. Contreras, who always seems to be able to prescribe an appropriate remedy. In recent years Centro Medico has offered the 2000 Plus Program, which uses live cell therapy primarily for rejuvenation, although patients with Downs Syndrome apparently also benefit from the treatment. The slogan reads, "The Year 2000 is Around the Corner: How Old Were You Meant to Be? The legendary fountain of youth is no longer a dream for mankind." In addition to injections of the appropriate live cells, the program includes special massages and body alignment. Plastic surgery and hair transplants are also available. While continuing to offer Laetrile and rejuvenation programs.

³⁸ I have observed patient interviews with clinic healers and have seen doctors send patients home occasionally if they do not feel that Laetrile is the appropriate therapy, for example, if the patient has just finished a course of chemotherapy. Clinic doctors will also perform surgery or use radial ion if an invasive tumor is causing discomfort. .

³⁹ Chad died in October 1979. See also *New York Times*, October 14, 1980.

Dr. Contreras also promotes a regime designed specifically for detoxification and strengthening the immune system.

At the clinic patients attend lectures on nutrition, metabolic therapy theory, getting well and staying well, and home care. Information is also presented on how to transport the medications across the border into the United States. Dr. Contreras frequently participates in the sessions himself. He is very visible, accessible, and has an excellent "bedside manner." Though having suffered a serious heart attack in 1985, Dr. Contreras is practicing again, accompanied by two sons, both trained medical doctors. The clinic publishes a quarterly newsletter, *Contreras Amigos International*, which regularly contains a message from Dr. Contreras, names and addresses of Centro Medico supporters, poems, recipes, and letters from grateful patients. There is also a list of patients (or their survivors) who have leftover Laetrile and other metabolic medications for sale.

Cydel Clinic, which opened in 1975 and is reportedly owned by the Del Rio family of Mexico, also offers a Laetrile-metabolic treatment for cancer. Initially headed by Mario Soto, M.D., a research specialist from Mexico City who brought in a consulting staff of Mexican physicians, Cydel was busy but operated on a much smaller scale than Centro Medico. A converted motel with some twenty-four beds, the clinic consists of a cafeteria, small diagnostic laboratory, a somewhat outdated Roentgen machine, and an operating room. Like the personnel at Centro Medico, the staff is pleasant and very accommodating.

During the early 1980s clinic business slackened and neither Dr. Stoto nor any of the other regular doctors served the clinic any longer. In 1983 Harold Manner, a former biology professor from Chicago's Loyola University, took over the direction of the clinic, which is now called Clinica Manner.⁴⁰ The facilities have been enlarged to almost forty beds and now boast a Jacuzzi, a solarium, and a pitch and putt golf course. The clinic continues to treat cancer patients, but also advertises cures for various arthritic conditions and multiple sclerosis. The approach is again metabolic, involving the use of Laetrile, enzymes, vitamins, minerals, diet, coffee enemas, DMSO when indicated, and other specific drugs for multiple sclerosis. Live cell therapy became available at Clinica Manner in late 1986 as part of a new program called Renaissance II.

In 1989 Dr. Manner suffered a massive heart attack and died. Personable, self-assured, and well liked by the staff and patients, he visited the clinic on a regular basis until his death. He wrote a book titled *The Death*

⁴⁰ While at Loyola University Dr. Manner enthusiastically tested the efficacy of Laetrile on the tumors of laboratory animals and published his findings in *The Death of Cancer*. He retired from the University not longer afterward.

of Cancer. A large bronze bust dedicated to Dr. Manner's memory stands in the clinic's front patio. Photos of him still adorn the walls and the clinic continues to issue a monthly newsletter and circulate cassette tapes and videos of his lectures on metabolic therapy' at Clinica Manner. Brochures advertise the clinic as "One of the few institutes in the world offering a proven metabolic program."

The other major cancer clinics in Tijuana are operated by individuals or corporations from the United States or Canada who rent or lease the premises from Mexicans. Established in 1977, Hospital La Gloria, a converted motel and bar on the old inland road to Ensenada, and Hospital Jardines de la Mesa, a remodeled motel on the road to Tecate, began offering the Gerson therapy, a healing regime devised by the late German physician Max Gerson, whose initial success was in curing lupus vulgaris and cutaneous tuberculosis in the 1920s.

Although Gerson received praise from Albert Schweitzer,⁴¹ whose wife was reportedly cured by Gerson of tuberculosis, the medical establishment in the United States nevertheless frowned upon his treatments and he was frequently reprimanded by New York authorities. Dr. Gerson's daughter and ardent supporter, Charlotte Gerson Strauss, carried on the healing practice, using her father's formula and regime as she attempts to cure many serious diseases, including terminal cancer, heart problems, diabetes, arthritis, epilepsy, and even Guillain-Barre syndrome. Her program consists of drinking glasses of pressed vegetable and fruit juices mixed with pressed raw liver juice every three hours and coffee enemas every two to three hours. The diet (called Hippocrates Soup), carefully regulated and limited to selected fruits and vegetables, is designed to reduce the amount of sodium in the body or eliminate it entirely, and replace it with a high level of potassium which is intended to promote recovery of liver function, which, according to the theory, is inevitably impaired by any disease condition. Treatment lasts from three to six weeks. Most patients become quite sick initially and suffer from dehydration, prostration, and fever-all, supposedly, indications that the body is responding and beginning to rid itself of its disease. Patients report that after Strauss's treatment they are able to brush dead cancer cells from their skin and actually observe tumors as they pass from their bodies.

Though based in Bonita, California, Charlotte Gerson Strauss, who is not a physician, is very much a part of the clinic. She carefully oversees the operation of the facility and knows the patients well. She gives lectures

⁴¹ Gerson clinic literature attributes the following to Albert Schweitzer, " ... I see in Max Gerson one of the most eminent geniuses in medical history" (Max Gerson, *A Cancer Therapy: Results of Fifty Cases* [Del Mar, Calif., 1977]).

on Max Gerson's theory of curing and makes certain that there is a positive, friendly atmosphere in the dining room where patients gather for their juices and soup. The clinic lacks treatment facilities per se, although a Mexican physician does consult when necessary. Strauss exudes confidence in the Gerson program and claims successful cures regardless of the condition, as long as the body has not been severely damaged by previous radiation and chemotherapy. She states, "I am proud and happy to say that every time a patient recovers, is relieved of pain and despair, I feel that Dr. Gerson is reaching out beyond the grave with his healing hand and spirit."⁴²

Laetrile is not usually a part of the Gerson therapy; in fact, very few medications, other than potassium iodide and niacin, are given, for it is believed that they might do more harm than good. Even swimming in the clinic (motel) pool is forbidden because of possible chlorine poisoning.

A new addition to Charlotte Strauss's program is the Life Bloom regime, devised by Father Richard Willard, head of the Catholic Health Organization. Father Willard advocates the use of intravenous ozone and hydrogen peroxide enemas and drinks to destroy not only malignant cells but also to cure athlete's foot, smoking, warts, and Parkinson's disease.⁴³ He claims to have helped thousands of sufferers. The Life Bloom treatment has been integrated into Gerson's detoxification and revitalization program.

Another cancer clinic in operation for several years, Bio-Medical Center, occupies part of a half-finished mansion near downtown Tijuana. Healer Mildred Nelson, a registered nurse from the United States, oversees the clinic. Basing her approach to curing upon the Hoxsey herbal remedy, she operates only an outpatient facility. Nelson steadfastly believes in the Hoxsey potion and sells it in six-month supplies at the clinic. In the past, patients also received injections of BCG (a tuberculosis vaccine) from a physician who flew in from Manila once every few months to treat patients for a three-week period. For the last few years the clinic has provided a regular staff physician.⁴⁴

In February 1984 Bio-Medical Center received considerable news coverage when a Nevada couple abandoned conventional chemotherapy and came to Tijuana to try the Hoxsey remedy for their daughter's Hodgkin's disease. They believed the herbal remedy was less toxic than the radiation and oncological treatments their daughter was receiving, which, though potent, are known to cause the disease to go into remission. According to

⁴² Charlotte Gerson Strauss, *Healing*, 1:1 (Fall 1981).

⁴³ Information about the Catholic Health Organization has been hard to locate. Specifics about the Life Bloom regime may be found in handouts at the clinic.

⁴⁴ *San Diego Union*, six-part series. December 24, 1980.

the Bio-Medical clinic doctor, the girl responded favorably to the Hoxsey formula, but a San Diego newspaper reported that she was not progressing well.⁴⁵

Another clinic, Plaza Santa Maria, with about one hundred beds, is located near Rosarito Beach in a would-be resort. Although not now in operation, the clinic first came to the public's attention in 1980 when healer William Donald Kelley, a former orthodontist from Fort Worth, Texas, announced that he was treating Hollywood film actor Steve McQueen for cancer and fully expected to cure him. Steve McQueen, a patient at Plaza Santa Maria under the name "Don Schoonover," was suffering from what had been diagnosed in the United States as mesothelioma, a malignancy that is usually fatal.⁴⁶

Dr. Kelley believes that with proper nutrition and an appropriate metabolic regime, almost all degenerative conditions can be arrested, even corrected. Basing his theory, for the most part, on the assumption that with a full understanding of the properties of the human autonomic nervous system, that is, knowing if and when either the sympathetics or parasympathetics are dominating, he believes that optimum physiological harmony can be achieved. For diagnoses and the prescribed therapy, one needed only to answer several thousand questions in Dr. Kelley's initial evaluation form. The responses were analyzed by computer and, depending upon the patient's metabolic type and condition, specific diets with megavitamins and juices and enemas were prescribed.

Dr. Kelley is very proud of his metabolic program, claiming to have cured himself of metastatic liver and pancreas cancers in 1962. He also reports success in curing his children of their allergies and other maladies. His second wife, Suzi, also benefited from his treatments, although Kelley admits that she almost died when he put her on the wrong regime and she lapsed into a coma where she remained for several weeks.⁴⁷

The Kelley metabolic program claims to have helped over twenty thousand people, boasting a cure rate of 15-20 percent for terminal cancer patients and 60-80 percent success for sufferers whose disease is not as advanced.⁴⁸ Dr. Kelley is the author of *One Answer to Cancer* and founder of the International Health Institute, which publishes a monthly news-letter.⁴⁹

⁴⁵ *San Diego Union*, February 20, 1984, and March 13, 1984. I have not been able to determine the girl's current state of health.

⁴⁶ *People Magazine*, October 20, 1980, p. 50.

⁴⁷ w. D. Kelley and Suzi Kelley, "The Metabolic Types," in *One Answer to Cancer* (Arkansas City, Kansas, 1969), pp. 23-35.

⁴⁸ From information included in a packet of materials from Dr. Kelley's International Health Institute.

⁴⁹ From an interview printed in "Plowboy Interview." Dr. Kelley is quoted as saying, "When

According to Kelley, Steve McQueen was responding well to the metabolic therapy, but within a few weeks the media reported that McQueen died during the resection of a large tumor at a hospital in Ciudad Juarez.⁵⁰ Plaza Santa Maria soon closed and Dr. Kelley retired to his ranch in Oregon to grow organic vegetables.

Plaza Santa Maria opened again in spring 1981, offering a different cancer treatment-human interferon, a rare and precious commodity. Healers and clinic promoters from the United States had purchased all the known and available organic interferon and were offering it on a first come, first serve basis. The cancer treatment, a 90-day regime of daily doses of the medication, cost \$90,000, \$60,000 for the interferon and \$30,000 for the three-month stay at the clinic.⁵¹ Problems arose, however, because the interferon proved to be of inconsistent quality and the supply was unreliable. A synthetic interferon was developed at about the same time, demand for the drug diminished, and Plaza Santa Maria closed once again. The facility periodically reopens temporarily as different cures are attempted.

The newest and most modern of the alternative therapy centers is located on the fourth floor of Notre Dame Hospital, near downtown Tijuana. Sponsored by American Biologics, a firm headquartered in San Francisco and directed by Robert Bradford (promoter of the human interferon cure at Plaza Santa Maria), the healers at American Biologics prescribe Laetrile and the familiar metabolic therapies, but also place great emphasis on their live cell therapy regime for rejuvenation. Middle-aged men are among the clinic's most regular clientele.

Clinics offering alternative therapies can be found in other border cities but most seem to sell either diet pills or arthritis treatments.⁵² Among the latter, one of the more popular is Dr. Luis Carillo in Mexicali, who promises relief in a package of unidentified pills and injections. Healers in Piedras Negras and Ciudad Juarez are known to provide similar anodynes upon demand.⁵³

It should be kept in mind, however, that if the patient is satisfied with a modified program and no Laetrile, it is not necessary to cross the border

I began what I like to think of as my search for truth, I just wanted to find a little bit ... enough to make me feel comfortable and believe I was doing something worthwhile," from *Mother Earth News*, no. 59, pp. 17-22, n.d.

⁵⁰ *The Washington Post*, November 8, 1980.

⁵¹ *San Francisco Examiner*, May 2, 1981.

⁵² According to the *San Diego Union*, February 10, 1987, the preferred diet pill is Redotex, a potentially very dangerous drug unless taken under medical supervision. Although the drug is condemned by U.S. federal authorities, Mexican border physicians and pharmacists are pressured to provide large supplies for buyers from the north.

⁵³ Michael Satchell, "Mexico's 'Miracle' Cure," *Parade*, April 20, 1980, pp. 4-5.

at all. Two facilities in the San Diego area offer a wide range of cures. The Hippocrates Health Institute supplies a special diet and wheatgrass enemas, and satisfied clients claim the regime can cure everything from varicose veins to cataracts and cancer.

The program is based upon the purportedly near-miraculous cure in 1927 of a young woman who was refused medical help after an accident left her with fractured legs which soon became gangrenous. Left to die, she was "saved" by a white puppy who licked her oozing sores while she consumed the grasses within her reach to sustain herself. Today, the Institute claims that much of its success can be attributed to belief in this story, inspiration from the Bible, and a white kitten at the clinic. The usual treatment takes about three weeks and consists of fasting, juices, and purification of the digestive tract by enema preparations containing the appropriate grasses and herbs.⁵⁴

A somewhat different program is offered by healer Virginia Livingston, M.D., who has provided cures for arthritis, allergies, and cancer at her Point Lorna medical office since the late 1970s. Based on her belief that cancer is an infectious disease, Dr. Livingston developed the Livingston Vaccine and a therapeutic program which includes immunizations (including BCG), antibiotics, vitamins, minerals, a special diet, enemas, and whole blood transfusions from relatives if possible. She herself has taken the vaccine every Friday for the last twenty-five years. She sees some five hundred patients a year.⁵⁵

Conclusion

A group of elite health care practitioners in the Tijuana border area have more or less successfully developed their own schemes and techniques for curing a variety of diseases which continue to attract a wide range of individuals. It should be emphasized that Dr. Livingston's vaccine has been classified as an "unproven method" along with Laetrile, the Gerson therapy, and the Hoxsey herbal by the American Cancer Society.⁵⁶ Although most of the purported cures have yet to be substantiated, this admonition fails to deter those who are attracted to the clinics and their healers' claims of cures, offers of renewed hope, and another chance at living.

In the late 1980s for Tijuana's elite healers the curing business was booming. Charlotte Gerson Strauss moved to a newer, larger facility in Playas, Dr. Manner's clinic had almost doubled in capacity, and Dr. Contreras constructed a five-story addition to the Centro Medico. All of the

⁵⁴ *San Diego Union*, six-part series, December 23, 1980.

⁵⁵ *San Diego Union*, six-part series, December 25, 1980.

⁵⁶ *Ibid.*

healers have public relations representatives, attractive brochures, take-home videos and cassette tapes, newsletters, computers, and toll-free telephone numbers.

What is the current crisis? The healers deny that they treat AIDS (Acquired Immune Deficiency Syndrome).⁵⁷ Clinic practitioners, however, are more eclectic than ever in their ritualistic healing repertoires. They continue to use existing remedies like Laetrile, supplemented by orthodox medications when indicated. They prescribe DMSO because of occasional synergistic qualities, doses of megavitamins and minerals, hormones, live cell therapy regimes, precise diets, and more enemas than ever before all to cure, to restore, to calm, to enliven, and to purify a sick body. Why do people believe the rhetoric and why does the traffic to Tijuana continue?

The elite border healers prosper and proliferate because they recognize the limitations of current Western healing practices. Moreover, as yet, Western medicine has no prescription for curing cancers, and the prognosis at the present time is not encouraging. As Dr. Armand Hammer, physician, entrepreneur, and philanthropist, observed, "Efforts to find a cure for cancer may eventually succeed at their current pace. In the meantime, the price of delay is unacceptable. Each year, this disease affects one out of three Americans 'and kills 500,000, almost as many as were killed in World War II, 'the Korean War and Vietnam combined."⁵⁸

By combining two worlds of medicine, selectively bringing together what seems to be the best of both, and caring for the patient in a personal way, the Tijuana healers are often able to relieve the patient's despair and to instill a positive attitude about the present and a feeling of hope for the future. Harry Hoxsey explained the appeal of the healers when he wrote, "Cancer victims come to us because they are unwilling to accept as final a death sentence handed them by their own doctors."⁵⁹

⁵⁷ In the past, AIDS patients went to Tijuana to purchase Ribavirin and Isoprinosine, drugs manufactured in the United States but not approved for use by the U.S. Food and Drug Administration, though available for purchase along the border (*The Washington Post*, September 10, 1986; see also *New York Times*, March 17, 1987). Limited use of Ribavirin was permitted in the United States in late March 1987 (*New York Times*, March 21, 1987). Another problem has been the sale of phony serums which are advertised as cures for AIDS. Manufactured in Tijuana, they are mostly available in border bars (*San Diego Union*, February 2, 1986).

⁵⁸ Because of sharp cutbacks in funding over the last decade, the number of cancer researchers and projects has declined dramatically. For this reason, before his death in 1990 Dr. Hammer sponsored Stop Cancer, a nationwide crusade to raise one billion dollars over four years, his aim being to eliminate cancer by the year 2000, see Armand Hammer, "Funds Are Lacking, Cancer Is Gaining." *New York Times*, January 16, 1989.

⁵⁹ Cited in Janssen, "Cancer Quackery," p. 535.

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Schroeder Updated

From Elitelore to Popularlore

Tijuana atrae al turismo médico

Por Jorge Morales, *La Opinión*, 2011

'Baby boomers' de EEUU van en busca de servicios profesionales y a bajo costo

- Jorge Morales Almada/jorge.morales@laopinion.com
- `La Opinión, 2011-05-19
<http://www.impre.com/laopinion/noticias/2011/5/19/tijuana-atrae-al-turismo-medic-256660-1.html#commentsBlock>

La oferta médica en Baja California

Farmacias: 1,453

Laboratorios clínicos: 366

Ópticas: 285

Hospitales generales: 216

Consultorios generales: 1,049

Consultorios dentales: 2,079

Cons. de especialistas: 1,022

Por los servicios de salud que ofrecen, Tijuana y Rosarito están atrayendo cada vez más a los llamados baby boomers de Estados Unidos, quienes representan un enorme potencial para el turismo médico que en Baja California se ha consolidado en los últimos años.

De visita en Los Ángeles, el secretario de Turismo de Baja California, Juan Tintos Funcke, presumió que en el sur de la frontera se ofrecen servicios de calidad y a muy bajo costo.

Baja California, indicó, está incorporando servicios de calidad al turismo médico.

“Es un tipo de servicio cuyas alternativas ya no son sólo las tradicionales, de optometría y odontología, sino que está creciendo mucho más”, mencionó.

Esa oferta médica es la que Baja California está promoviendo como una opción para los millones de jubilados que ante la crisis del sistema de seguridad social de Estados Unidos y los elevados deducibles, buscan alternativas viables para el cuidado médico durante el retiro.

“Hay una ola que empieza a suceder en el estado y que es la atención a los adultos mayores, se viene una ola demográfica impresionante por estos 75 millones de baby boomers americanos que van a empezar a jubilarse”, dijo el doctor Miguel Ángel Torres, presidente de la Asociación de Turismo Médico de Rosarito.

Los baby boomers representan la generación de los nacidos entre 1946 y 1964, período de la posguerra en la que hubo una explosión de la natalidad y que actualmente están jubilándose a un nivel mucho mayor del promedio normal de retirados.

Para ellos, consideró Torres, las alternativas de cuidado médico son reducidas por la crisis del sistema de seguridad social y los altos costos en Estados Unidos.

“Es donde Baja California, en particular Tijuana y Rosarito, tiene un potencial impresionante, porque un cuidado de un paciente con Alzheimer que en Estados Unidos cuesta \$7,000 dólares, lo puedes encontrar por 2,000 dólares en Baja California”, mencionó Torres.

“Se están retirando miles de norteamericanos cada día, y esperamos captar al menos el 2%”, estimó Torres. “Baja California se ha distinguido por los servicios médicos, con mucho prestigio en la oftalmología, odontología, cirugías bariátricas y cardiología, y ahora el turismo para el cuidado de retirados es una industria nueva que está detonando”.

En 2010 Baja California recibió a 450 mil turistas estadounidenses que acudieron por servicios médicos debido a que no cuentan con seguro de salud en su país o porque les es más barato.

Este número de visitantes, que se ha recuperado después de los años de violencia que vivió la entidad, generaron una derrama económica de 89 millones de dólares; eso representó el 10% del total de lo que los turistas gastaron el año pasado en ese estado.

Juan Tintos indicó que el año pasado se formó el Consejo Estatal de Turismo Médico para analizar la situación de esta industria y se detectó que el gran potencial está en el mercado hispano.

“El turismo hispano es de enorme potencial para nosotros”, dijo el secretario de Turismo. “Hubo años en que se le discriminaba por los propios servidores turísticos, pero ha habido una apertura porque es uno que ha permanecido, los hispanos siguen yendo”.

El mercado anglosajón se vio reducido de 2007 a 2009, indicó, pero en 2010 parece estabilizarse y hay signos alentadores de que pronto retomará su auge.

El doctor Adrián Murillo, representante de la Asociación de Turismo Médico de Baja California, explicó que los seguros médicos en Estados Unidos establecen deducibles que muchas veces son difíciles de cubrir para casos de cirugías y ahora se está viendo también en consultas generales.

Los servicios de salud están resultando inaccesibles para muchos residentes latinos en California, apuntó, y por ello están acudiendo al sur de la frontera, por el costo, el acceso, la calidez y la facilidad del lenguaje.

Los precios por intervenciones quirúrgicas o consultas en Baja California resultan hasta en un 70% más baratos.

“Los servicios de salud se han encarecido demasiado y por lo tanto se buscan alternativas por ser una necesidad primaria”, dijo el doctor Murillo. “Y esa alternativa la han encontrado en México”.