



# The Arthritis Fund Newsletter

5106 Old Harding Road, Franklin, TN 37064

*Dedicated to Eradicating Rheumatoid Disease From the Earth*

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## Raul Vergini, M.D.

**Raul Vergini, M.D.**, says, "I was born in Predappio (FO), Italy on March 8, 1958. I took my doctorate in Medicine at the University of Bologna in 1984. I began immediately my private practice in classical homeopathy (I had the luck to learn homeopathy, since 1980, directly from an old retired homeopathist) that is still my principle activity.

"Since the beginning of my practice I took interest also in alternative cancer therapies and in nutrition, including vitamins and mineral supplementations.

"I wrote my first article about magnesium chloride in 1986 for an homeopathic magazine.

In February 1994 the Italian most important publisher of books about "alternative" health [practices] published my book *Curarsi con il magnesio (Healing With Magnesium)* that details the proper-

ties and the use of magnesium chloride in human (and veterinary) therapy.

"Since 1989 I am interested also in hormone balance (thyroid, progesterone, DHEA, etc.), The Arthritis Fund/The Rheumatoid Disease Foundation protocol for rheumatoid diseases, Life-Extension and "smart drugs."

"I am a member of Mensa (the international "high IQ society") and of the New York Academy of Sciences.

"I am one of the organizers of the international symposium *Ripensare l'AIDS (Rethinking AIDS)* that was held on April and May of 1994 in Bologna, Italy. It featured the worlds most important "dissidents" about AIDS theory and therapy (Peter Duesberg, Eleni Eleopulos, Michael Ellner, John Lauritsen, etc.)."

## Editorial



I haven't gotten to Russia as yet, as I was promised, but I did visit my grade-school and high-school cities, Grand Forks, North Dakota and Mason City, Iowa, respectively.

I suppose that everyone who grows old -- as some say I have seemed to do recently -- has the same experience that I have had: School chums die, or simply disappear. One family of 13 children that I played with throughout all of grade school and two years of high school were totally absent, not even a relative remaining. Every one

of the children were dead, and their -- what used to be -- magnificent home, now a funeral parlor. There's no way to learn how they died, or why they died, but we can all guess based on experiences from two old friends that I did find in Mason City, Iowa, and another friend, my long-time barber, who returned to work in Franklin, TN after a 13 month absence.

Friend number one, R.E., in Mason City, Iowa, was at one time one of the best dancers of all my high school chums. He was tall, handsome, and projected a wonderful personality. Compared to me, he

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*The following is provided as information only, and does not constitute medical advice. For proper treatment, you should always consult with your family doctor, or pediatrician*

## Magnesium Chloride Therapy

by  
Raul Vergini, M.D.

Back in 1915, a French surgeon, Prof. Pierre Delbet, M.D., was looking for a solution to cleanse wounds, because he had found out that the traditional antiseptic solutions actually mortified tissues and facilitated the infection instead of preventing it.

He tested several mineral solutions and discovered that a Magnesium Chloride solution was not only harmless for tissues, but it had also a great effect over leucocytic activity and phagocytosis; so it was perfect for external wounds treatment.

Dr. Delbet performed a lot of "in vitro" [in test tube] and "in vivo" [in life] experiments with this solution and he became aware that it was good not only for external applications, but it was also a powerful immuno-stimulant if taken by injections or even by mouth. He called this effect "cytophilaxis." In some "in vivo" experiments it was able to increase phagocytosis rate up to 300%.

Dr. Delbet serendipitously discovered that this oral solution had also a tonic effect in many people and so became aware that the Magnesium Chloride had an effect on the whole organism.

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# In Memoriam

## Robert Bingham., M.D.

Lafayette, Colorado, July 21, 1910  
Desert Hot Springs, California, May 1, 1994  
Ashes scattered at sea

by  
Perry A. Chapdelaine, Sr.

As one of the founders of The Roger Wyburn-Mason and Jack M. Blount Foundation for the Eradication of Rheumatoid Disease (aka The Rheumatoid Disease Foundation, aka The Arthritis Fund) Robert Bingham was an inspired and dedicated contributor. He was a man of vision, a searcher for truth!

Robert Bingham contributed to many causes, among which were two closest to his heart: crippled children and arthritis victims. When polio no longer created vast numbers of pathetically crippled children, Robert Bingham switched to arthritis, and his life-long devotion to the cause of the arthritic victim began.

During travels to England, Dr. Bingham met Professor Roger Wyburn-Mason, M.D., Ph.D., a medical school professor and researcher who, although initially specializing in diseases of the nerves, now claimed to have discovered the source and causation of crippling Rheumatoid Arthritis.

Dr. Bingham wrote about Wyburn-Mason's claim and it was published in *Modern Medicine* (Feb. 15, 1976, pp.38-47) as "Rheumatoid Disease: Has One Investigator Found Its Cause and Its Cure?" [and also in *Orthopedic Review*.]

Philadelphia, Mississippi physician, Jack M. Blount, M.D., having been crippled from Rheumatoid Arthritis since early youth, and still suffering from the disease, read Bingham's article, and tried Roger Wyburn-Mason's treatment, after discovering a chemical related to Wyburn-Mason's Clotrimazole which was unavailable to Dr. Blount; i.e., Metronidazole.

Blount cured himself, many of his patients, and this author, of crippling Rheumatoid Arthritis. Thus, the story that began with a professor in England [who was eventually ostracized from a society that had embraced him for his two discoveries of nerve diseases (named after Wyburn-Mason)] passed through the open-minded eyes and ears of Robert Bingham, M.D., to the long-time arthritic Jack M. Blount, M.D. and on to this writer, and thousands of others who have also been cured.

Dr. Bingham wrote numerous articles describing Roger Wyburn-Mason's treatment, and tried his best to spread truth where he could. In a trip to Sydney, Australia attending the *16th International Congress of Rheumatology*, (19th-25th May 1985) The Rheumatoid Disease Foundation (aka The Arthritis Fund) was represented by Robert Bingham, M.D. who contributed a paper on the "Treatment of Rheumatoid Arthritis by the Use of Anti-Malarial and Anti-Protozoal Drugs." He displayed for two days a poster on the same subject and the findings of Dr. Roger Wyburn-Mason. He gave over 400 Rheumatoid Disease Foundation folders to the delegates telling them of the work of the Foundation, and also gave them a card upon which to request further information and literature.

An attempt was made to stop Dr. Bingham from distributing

the Rheumatoid Disease Foundation folder on a complaint from an "undisclosed doctor from England." This was the subject of an apology when it appeared that an international incident might develop if the action of the local committee chairman was disclosed to the local press and world news services covering the meeting. Dr. Bingham wrote, "As usual the Congress was dominated by the large multi-national drug companies, each anxious to convert the physicians to the use of their own brands of NSAIDS, the non-steroidal, anti-inflammatory drugs, many of which are not as yet available in the United States. However, in the scientific sessions, none was superior to enteric or time-release aspirin in the effect on pain and stiffness of arthritis, except perhaps in their one-a-day or two-a-day convenience of administration.

"Methotrexate seemed to be gaining in usage by the rheumatologists over gold and penicillamine in spite of its known toxic effects and complications.

"Only our presentations on the amoebic etiology of rheumatoid disease offered any 'new' information on the causes of arthritis. . . . The 'medical world' now knows of the existence of the new International Rheumatoid Disease Foundation."

In February of 1983 Dr. Bingham attended the *XI Congreso Mexicano de Reumatologia* in Merida, Yucatan, Mexico, where he presented a paper in the use of Roger Wyburn-Mason's treatment for Rheumatoid Arthritis. On his return home he was saddened to learn that Jack M. Blount, M.D. had been entrapped by Mississippi physicians who had not investigated the new treatment that was bringing patients to Dr. Blount's door by the thousands. Once again Bob Bingham set out to remedy the pains of the world, for he wrote on March 15, 1983 to the Mississippi State Board of Medical Licensure,

"Dear Fellow Physicians:

"On my return from Mexico this week I first learned of the difficulties Dr. Blount is having in regards to his medical license.

"In Merida, Yucatan, I had presented a preliminary report on the treatment he has so successfully used for acute active diseases of rheumatoid arthritis. This is based on work which he and I have been doing independently for the past five or more years. It is a 'break through' and, in the usual ten years it takes for a new treatment to be accepted by the medical profession, it will revolutionize the treatment of this disease and save millions of patients from pain, suffering and disability.

"Dr. Blount heard of this treatment through the first American publication of mine appearing in *Orthopedic Review* and then in *Modern Medicine* in 1975. He was totally crippled and suffering from rheumatoid arthritis at that time and has made a great recovery, enabling him to return to his medical practice and naturally making him very enthusiastic about this form of treatment.

"In his enthusiasm, and probably because he has not seen any serious or dangerous side-effects from the drugs -- quite different from the standard treatments with gold, penicillamine and other arthritis drugs-- he undoubtedly used poor judgment and violated the

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# Letters to: The Rheumatoid Disease Foundation

I am eternally grateful for your letter of August 10th and the book *Rheumatoid Diseases Cured at Last*. After 35 years of the 'monster' -- gouty Rheumatoid Arthritis -- and having experienced nearly all the treatments, it is with profound relief to know this breakthrough therapy is now available. I became quite emotional reading the book as the realization hit home that I have never been able to actualize by full potential. Both professionally and personal/family. Here, finally, is the basis of renewed hope of a chance to live with some quality to my well-being.

God bless you and the Foundation members.  
B.E., Queensland, Australia.

Dear B.E.

In any sickness, there is always hope, but not always with established treatments. Unfortunately, we have no certain alternate method for curing Gouty Arthritis, but perhaps you have a mixture of Gout and Rheumatoid Arthritis, in which case we may be able to help. Most certainly, the book you ordered, *The Prevention, Treatment and Cure of Arthritis* will include many alternate suggestions that rely on the experience of many patients and medical doctors. God Bless you, too!

Letter to an Editor in Apache Junction, AZ

After reading the Tribune about Gary Kennedy who is suffering from so many problems of health. He needs the address that I am including into this letter. These people have helped many who have had serious health problems.

The Rheumatoid Disease Foundation has a member who has written two books, *The Art of Getting Well* and *Rheumatoid Diseases Cured at Last* by Anthony di Fabio. This foundation is interested in helping their fellow man. [Our address follows].

Ruth Compton

Thanks Ruth!

Another 1,000 like you and we'd have 1,000 more articles across the United States! We now have a third book of importance and interest, entitled *Prevention, Treatment and Cure of Arthritis!*

We'd like to hear from you, good or bad!  
Maybe we can help! Certainly we can learn!!

## Editorial

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was another Clark Gable, a movie hero of our age.

R.E. had had bypass surgery, usually an unnecessary and costly procedure, where one foot of artery (of 100,000 miles of tubing) that appears to be plugged up with plaques is replaced by 1 foot of weaker vein, usually taken from one of the legs. This procedure, so common in American society, has long ago been discredited by established medical statistics. Results obtained by Chelation Therapy clears up about 80% of peripheral circulation problems, and usually makes the procedure unnecessary.

R.E.'s doctor did not know about Chelation Therapy, or, if he did, would most likely have been too frightened to use it. He might have lost hospital privileges, or peer-group sanction, and he certainly would not have been paid by an insurance claim for this inexpensive and effective method of providing more nourishment to each of R.E.'s cells. More than likely, had R.E.'s doctor ever

heard of Chelation Therapy, he heard about it through another doctor who also knew nothing about it, and he "bought in" on the big lie, that it was worthless, perhaps even dangerous.

R.E. -- at the time I renewed my old school chum's acquaintance -- was finding it painful to walk, his legs obviously not getting sufficient blood, hence, insufficient oxygen, to support all the cells in the legs. The pain was telling him that something was wrong. The doctor was trying ultra-sound therapy, which "might help." Ultra-sound stretches the arteries and veins, but does not reduce the arterial plaques.

Now here's R.E., in his early seventies, obviously preparing to go down-hill fast, because his doctor says, "there's nothing more that we can do." And here I am, almost the same age as R.E., still dancing up a storm (jitterbug, swing, C & W, et. al.) with ladies much younger than I am, and hardly breathing. (I've had 84 chelations, and wish I could afford one each month for preventive measures.)

I may die before R.E., but the probability is that the quality of my remaining years will be

far, far superior to R.E.'s because I've questioned the absolute authority of my family doctor, or the specialists he's sent me to. I've found wonderful physicians scattered everywhere, who are interested in helping me, and most of those are in our physician list.

R.S. first hired me in his paint store at eleven cents an hour in Mason City, Iowa. He has lived a useful 92 years, and is still mentally acute. His primary problem is a stiffness in certain fingers that could probably be solved by any one of several alternative therapies: Sclerotherapy, DHEA supplements, nutrition, et. al.

He won't receive any of these, however, because he's also accepted his doctor as The Authority, and so he'll continue to limit his pleasures and freedom by at least that much.

Lucky for him, his genetics operates effectively despite lack of good medical advice.

On arriving back in Franklin, TN I needed a haircut as my hair was as bushy as a long-haired sheepdog's. I was pleasantly surprised to find my long-time barber, C.S., back at work after 13 months of "sick-

ness." He'd had his leg cut off because of poor circulation, the same problem now facing my high-school friend, R.E.

C.S.'s operation, friends, was one of the most unnecessary that I've heard about in many years, the routine procedure for pain in the body: "Since I have no other answer, cut off the offending member."

Chelation Therapy, which is capable of restoring life to an almost dead gangrenous leg, could have easily solved C.S.'s problem.

Think of the pain and suffering C.S. endured, and still endures, because his doctor did not know, and did not want to know, about better procedures!!

Multiply these several inhuman experiences by tens of hundreds of thousands, and you will understand ignorance and bliss. We, the blissful, are those who accept Authority's word that a disease is inevitable; they the ignorant, who so inform us under the guise of modern medical treatment.

It is no wonder so many of our past school friends are dead!



# Therapy

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Photo: Raul Vergini, M.D.

In a brief time, he received communications of very good therapeutic effects of this "therapy" from people that were taking Magnesium Chloride for its tonic properties and who were suffering from various ailments. Prof. Delbet began to closely study the subject and verified that the Magnesium Chloride solution was a very good therapy for a long list of diseases.

He obtained very good results in: colitis, angiocholitis, cholecystitis, in the digestive apparatus; Parkinson's Disease, senile tremors and muscular cramps, in the nervous system, acne, eczema, psoriasis, warts, itch of various origins and chilblains, in the skin. There was a strengthening of hair and nails, a good effect on diseases typical of the aged (impotency, prostatic hypertrophy, cerebral and circulatory troubles) and on diseases of allergic origin (hay-fever, asthma, urticaria, and anaphylactic reactions).

Then Prof. Delbet began to investigate the relationship between Magnesium and cancer. After a lot of clinical and experimental studies, he found that Magnesium Chloride had a very good effect on prevention of cancer and that it was able to cure several precancerous conditions: leucoplasia, hyperkeratosis, chronic mastitis, etc.

Epidemiological studies confirmed Delbet's views and demonstrated that the regions of soil with richer incidence of magnesium had less cancer, and vice versa.

In experimental studies, the Magnesium Chloride solution was also able to slow down the course of cancer in laboratory animals.

Prof. Delbert wrote two books, *Politique Preventive du Cancer* (1944) and *L'Agriculture et la Sante'* (1945), in which he stated his ideas about cancer prevention and a better living. The first is a well documented report of all his studies on Magnesium Chloride.

In 1943 another French doctor, Dr. A. Neveu, M.D., used the Magnesium solution in a case of diphtheria to reduce the risks of anaphylactic reaction due to the anti-diphtheric serum that he was ready to administer. To his great surprise, when the next day the laboratory results confirmed the diagnosis of diphtheria, the little girl was completely cured, before he could use the serum.

He credited the immuno-stimulant activity to the solution for this result, and he tested it in some other patients. All the patients were cured in a very short time (24-48 hours), with no after-effects.

Dr. Neveu then began to treat some cases of poliomyelitis, and had the same wonderful results. He was very excited and tried to divulge the therapy, but he ran into a wall of hostility and obstructionism from "official medicine." Neither Neveu or Delbet (who was a member of the Academy of Medicine) was able to diffuse Neveu's extraordinary results. The opposition was total: professors of Medicine, Medical peer-reviews, the Academy itself, all were against the two doctors. "Official medicine" saw in Magnesium Chloride therapy a threat to its new and growing business -- vaccinations.

Dr. Neveu wasn't discouraged by this and continued to test this therapy in a wide range of diseases. He obtained very good results in:

pharyngitis, tonsillitis, hoarseness, common cold, influenza, asthma, bronchitis, broncho-pneumonia, pulmonary emphysema, "children diseases" (whooping-cough, measles, rubella, mumps, scarlet fever . . . ), alimentary and professional poisonings, gastroenteritis, boils, abscesses, erysipelas, whitlow, septic pricks (wounds), puerperal fever and osteomyelitis.

But the indications for Magnesium Chloride therapy don't end here. In more recent years other physicians (and I among these) have verified many of Delbet's and Neveu's applications and have tried the therapy in other pathologies: asthmatic acute attack, shock, tetanus (for these the Magnesium Chloride is administered by intravenous injection); herpes zoster, acute and chronic conjunctivitis, optic neuritis, rheumatic diseases, many allergic diseases, spring-asthenia, and Chronic Fatigue Syndrome, (even in cancer it can be an useful adjuvant.)

The preceding lists of ailments are by no means exhaustive; maybe other illnesses can be treated with this therapy, but, as this is a relatively "young" treatment, we are pioneers, and we need the help of all physicians of good will to definitely establish all the true possibilities of this wonderful therapy.

From a practical standpoint, please remember that only Magnesium Chloride has this "cytophilactic" activity, and no other magnesium salt; probably it's a molecular, and not a merely ionic, matter.

The solution to be used is a 2.5% Magnesium Chloride hexahydrate ( $MgCl_2 \cdot 6H_2O$ ) solution (i.e.: 25 grams/1 liter of water).

Those who have kidney problems should be carefully monitored by their family physician, according to the Center for Disease Control. Dr. Raul Vergini says, that "this is true only for severe renal insufficiency," where an obvious contraindication may exist; but this is also true for all minerals, that cannot be easily eliminated by a seriously impaired kidney. In all other cases, there are no risks. I never heard or read of any problem. The quantity of elemental magnesium contained in a 125 cc dose of the 2.5% solution is around 500 mg. That is not a large dose! Anyway, I think that it is a good precaution to advise people with renal problems to consult their physician."

But Raul Vergini, M.D. also advises that "the problem is that very probably their physicians and pediatricians don't know anything about this therapy, so how can they give good advice?" Children under 5, he says, nonetheless must consult their pediatrician."

## Dosages are as follows:

Adults and children over 5 years old .....	125cc
4 year old children .....	100cc
3 year old children .....	80cc
1-2 year old children .....	60cc
over 6 months old children .....	30cc
under 6 months old children .....	15cc

These doses must be administered by mouth.



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# Bingham

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letter of the law by making this medicine available to other rheumatoid arthritis patients whom he had not personally seen or examined. You are quite right in your authority and responsibility in seeing to it that this practice is not repeated. But I hope you will ask yourself these two questions in deciding your actions, 'Has anyone been injured because of Dr. Blount prescribing?' and second, 'Wasn't he acting in good faith and honest intent?'

Dr. Blount is a man who should be honored by the medical profession and by the State of Mississippi. Not since the work of Dr. Leslie V. Rush in Meridian, MS, in 1955, in announcing and discovering the use of the Rush Nail for intermedullary pinning of fractures, has so great a medical discovery, on this case a confirmation of a medical discovery by Dr. Wyburn-Mason, come out of the state of Mississippi. He has done more than any doctor in the world to boldly treat thousands of patients with favorable results and through the book by one of his patients, *Rheumatoid Diseases Cured at Last*, the treatment is becoming nationally recognized.

In this case Dr. Blount has worked against tremendous odds because the company which manufactures the drug [metronidazole] will not spend any money for its scientific proof of efficacy or to gain approval for advertising and sales as a treatment for arthritis from the Food and Drug Administration because the patent has expired and they see no great financial gain to manufacture a drug which can be copied, manufactured and sold by any pharmaceutical company. As a result, in the treatment of rheumatoid arthritis, Flagyl [metronidazole] is an 'orphan drug' and will only come into general use either by public demand, by spreading its knowledge to the medical profession, or by scientific verification by some non-profit organization such as a medical school or non-profit foundation. Even medical schools depend on grants from drug companies, so there is not much possibility there.

"If I may be so bold as to suggest, I would say that censure of Dr. Blount and prescribing a code of conduct for his use of the medicine should be a judicious decision. Any other restriction on his practice might discourage other physicians from using or trying this medicine and thus delay for years, the relief from this terrible disease, for which there is no known cause or cure other than this method.

"Thank you for your consideration of this information."

While Dr. Bingham's letter was not the only plea for Dr. Blount from state entrapment, Bingham's letter as well as the others helped Dr. Blount continue his practice of medicine, and he was not censured for use of Roger Wyburn-Mason's recommendations on rheumatoid disease patients.

In 1975 Dr. Bingham, in responding to a falsehood he felt was being propagated in news media by the Santa Ana, California, Orange County Arthritis Foundation, addressed a letter to the Arthritis Foundation Advisory Committee's Leon B. Katz, M.D., saying, "One of my patients quoted a newspaper article credited to you saying that 'special foods or diets can't help arthritis'. And 'dietary factors as causes of arthritis are said to be a myth.' The article suggested interested persons should write to the Orange County Branch of the Arthritis Foundation for the leaflet. Please send me the leaflet to

which the article refers.

"Sigmund Freud, besides his position as an outstanding pioneer in psychiatry, was also a critic of the medical profession. He has stated 'the greatest mistake of medicine is to seek a single cause for a single disease.'

"This is probably true with the various types of arthritis [more so] than almost any other family of related medical conditions. We have been looking so hard for single causes for the various types of arthritis and the single treatments that we have often neglected the patient as a whole, especially his nutritional condition -- which has such a tremendous effect on his body chemistry and metabolism.

"Unless the Arthritis Foundation is willing to undertake some very basic research into the relation of arthritis to nutrition it is only sticking its head into the sand to make generalized statements such as the one reported in your newspaper article. Almost every practicing physician is aware of arthritis patients who have been greatly improved, and some have completely recovered from the active signs and acute symptoms of their disease, by modifications in diet, vitamin and mineral supplementation and elimination of certain food and food products. What is needed is a more scientific evaluation of these therapeutic effects.

"Meanwhile, those of us who have made a clinical study of the application of nutrition to arthritis and orthopedic problems will continue to be helping people regain their health and strength, not by exclusion of other methods of treatment but by adding nutritional, metabolic and bio-chemical analysis and treatment of their patients to accepted methods of medical and surgical management.

"Meanwhile, it does the Arthritis Foundation no good to tell people that there are no dietary factors which are important in arthritis. So very many of them know that is not true, and it just makes the Arthritis Foundation less credible as an authority in its chosen field of fundraising."

A year later, in 1976, Dr. Bingham had to defend himself of false charges from a variety of sources. He had prior to 1974 practiced for almost twenty-eight years in Riverside, California, being the first qualified and board Certified specialist in orthopedic surgery in that city and in that county. During that time he pioneered in performing almost every type of orthopedic operation in that county and in that county's hospitals for the first time. For fourteen years he gave two mornings a week to the Riverside County General Hospital and, during two poliomyelitis epidemics, devoted from one-third to one-half of his time to the patients in that institution, doing major orthopedic surgery, instructing interns and residents and following patients in the out-patient clinics, all without pay or other compensation. For nine years, and until they had a full time orthopedic staff at the College of Medical Evangelists in Loma Linda he held the first orthopedic clinics at that hospital and medical school, taught medical students and interns and took care of without charge the orthopedic problems and operations on their missionaries, medical and nursing students and charity patients.

For two years, and until they had a full time orthopedic surgeon at March Air Force Base, Dr. Bingham conducted orthopedic

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# Bingham

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clinics and did the orthopedic operations at the March Air Force Base Hospital, as orthopedic consultant and Chief of Orthopedic Surgery.

He helped Sister Elizabeth Kenny establish the Sister Kenny Poliomyelitis Hospital in El Monte, California in 1950 and served there for seven years, five years as Chief of Staff, during which time he built the hospital up from fifty patients to one hundred and fifty patients and had an attending and consulting staff of over fifty doctors including five orthopedic surgeons.

He had no difficulty of any kind from any source until two doctors who had been his assistants and associates opened up offices in Riverside in competition and began an undercover campaign of untrue and unfair criticism, ostensibly to obtain referrals from doctors and hospitals who had been sending patients to Dr. Bingham. Until then, these two doctors had publicly stated that Dr. Bingham had the finest personal and professional reputation of any doctor in Riverside County.

Of course, one criticism led to another, and amid all the false charges and deceptions, Dr. Bingham eventually established his own clinic always with crippled folks in mind.

When The Arthritis Foundation, and because of them, Harold Davis from FDA's the Office of Consumer and Professional Affairs, (Center for Drugs and Biologics, HFN-17, Department of Health & Human Services, Public Health Service, Food and Drug Administration, Rockville, MD 20857) began inaccurate and scandalous attacks against The Roger Wyburn-Mason and Jack M. Blount Foundation for the Eradication of Rheumatoid Disease (aka The Rheumatoid Disease Foundation, aka The Arthritis Fund), Robert Bingham wrote a letter to Frederic C. McDuffie, M.D., Senior Vice President of Medical Affairs, at the Arthritis Foundation, saying:

"Isn't it about time that the Arthritis Foundation ceases to criticize physicians, clinics, hospitals and other medical organizations who share views different from the Arthritis Foundation on the cause and treatment of these diseases?"

"When the Arthritis Foundation was formed I urged Mr. Floyd Odlum, who lived in Indio not too far from our clinic in Desert Hot Springs, to fund and support the Arthritis Foundation because I believed it would itself do independent investigations of other treatments for arthritis, than those funded by the drug companies. I know a great deal of money has gone to medical schools for basic research and for many worthwhile investigations. However, the field of 'unproven' and 'unapproved' remedies has not had its investigations funded in spite of the public's interest and need for this type of study. I believe Doctor Dong's diet is one exception, but did not he pay for this himself?"

"Of course you realize that the specialty of rheumatology is narrowest of all medical fields, the fewest diseases, the fewest treatments and the fewest facts on which to make clinical and therapeutic decisions. In spite of its certification as a specialty, any physician with an interest, whether it be a general practitioner, internist, orthopedic surgeon or physiatrist, could master the field as well as any Board Certified specialist in a year's study. That is why the majority of cases of arthritis are not, and never will be, treated by

rheumatologists.

"You may believe that these attacks on other physicians and clinics, etc., are good for local fund raising for the chapters through the public education department, but it is unprofessional and unethical in furnishing lay people statements such as your memo 83-07 on Dr. Blount and distributed to lay persons and is on very thin legal ice.

"The efforts of the Arthritis Foundation should be directed primarily to the medical profession. When inquiries come in from lay people some statement such as this should be issued:

"The treatment about which you ask information is not one that is accepted and approved by the Arthritis Foundation. However, since we do not know the causes of any types of arthritis and we do not have any successful cures for them, other methods, such as the unproven remedies of which you inquire, may be useful and of help to some patients.

"Our advice is that you consult your personal physician or have him refer you to a rheumatologist of his choice and rely on him for guidance and treatment of your disease. Our 'professional' information memos serve to keep physicians informed of the newest and best information available in the diagnosis and treatment of rheumatoid arthritis.

"One more point. The American Rheumatism Association would render a much greater public service if it would emphasize it is an educational organization open to all physicians and surgeons who treat arthritis, general practitioners as well as specialists. The Board Certified Rheumatologists can form their own American College of Rheumatology and discuss auto-immune disease to their heart's content. It would sure raise the standards of medical care and professional knowledge and patient treatment of arthritis in this country."

The result of this letter, as well as threat of a suit through The Arthritis Foundation legal department by The Rheumatoid Disease Foundation possibly resulted in cessation of violent and false propaganda against both Dr. Blount and this foundation.

At the founding of The Rheumatoid Disease Foundation/The Arthritis Fund, a decision was made to sign-up physicians so that patients would know who would give the treatments recommended by us. There were five physicians founding members: Robert Bingham, M.D., Jack M. Blount, M.D., Gus J. Prosch, M.D., Roger Wyburn-Mason, M.D., Ph.D, Dr. Paul Pybus, and myself.

One of the serious problems faced by the Executive Director/Secretary was that once a physician signed with us to make Roger Wyburn-Mason's treatment available to patients, they would often switch, once the patient appeared, not unlike the traditional bait and switch tactics in used car advertising.

One such incident occurred no further than 16 miles from the foundation headquarters in a small city outside of Nashville, TN called Franklin. A doctor signed with us, and when our first referral drove all night long with high hopes in their heart to see this doctor, their hopes were immediately dashed. The doctor derided the treatment, said it was a fraud, and sold them extremely expensive gold pills, also denying that he had ever signed his name to our forms.

Of course the forms were signed, and available for inspection,

# Bingham

but this highlighted one serious end of a gradient spectrum of problems facing the foundation, where physicians would behave in unethical ways.

Robert Bingham, M.D., agreed to act as our special ethics officer, and every case that could not be resolved by the Executive Director/Secretary was immediately referred to him. Dr. Bingham spent many hours without charge investigating a physician's ethics, and in some cases recommended that certain individuals be dropped from our referral lists.

At our *Second Rheumatoid Disease Foundation National Seminar* held in Santa Monica, CA, Dr. Bingham formed the Rheumatoid Disease Medical Association with Board Members Gus J. Prosch, Jr., M.D., President; Seldon Nelson, D.O., Vice -Chairman; Wayne Martin, B.S., Executive Director/Secretary; Robert Bingham, M.D., Medical Journal Editor and Chief Editor/Treasurer. Other Board Members were Warren M. Levin, M.D., Orville Davis, D.O., M.D., W.W. Mittelstadt, D.O., M.D., Archimedes A. Concon, M.D., Harley Robinson, D.O., Albert Jellen, M.E. Additional Research Advisory Board Members were: Harold Buttram, M.D., Laszlo I. Belenyessy, M.D., and Dr. Paul Pybus. In addition to myself, all of the above were also charter members.

This fledgling organization published, through Dr. Bingham's efforts, a series of pamphlet-sized volumes each containing new and novel approaches to the problem of Rheumatoid and related arthritides.

It is the intent of this foundation to continue Robert Bingham's Rheumatoid Disease Medical Association, as a memoriam to him, in the future, and permission has been granted us to all remaining publishing rights by Dr. Bingham's surviving spouse, Charlotte Bingham.

Robert Bingham, always the communicator, also wrote the book *Fight Back Against Arthritis*. He graciously permitted this Foundation to reprint the book for fundraising purposes, and we have handled the first edition for many years because of his generosity.

He must have been loved and trusted by his staff, for when *The Calgary Herald* on January 22, 1981 printed a particular Dagwood and Blondie strip, they cut it out and pasted it on their bulletin board for all to see.

Panel by panel, Blondie says to Dagwood, "Started on Dr. Bingham's worry-free diet today." She turns to Dagwood, in the second panel, saying, "You can eat whatever you want without worrying."

Dagwood, Third panel: "Does it make you lose weight?"

Blondie, last panel: "No, but it sure makes you a big fan of Dr. Bingham."

Together with Roger Wyburn-Mason, M.D., Ph.D. who first recommended the use of Clotrimazole, Ornidazole, Tinidazole, Rifampicin or Rifampin, Allopurinol, and Furazolidone for Rheu-

(continued on page 8)

## **Robert Bingham, M.D.**

**Graduated:** University of Redlands, CA, A.B., 1932; School of Medicine, University of Colorado, M.D., 1938.

**Experience:** Internship, Hospital of the University of Pennsylvania, 1940. Orthopaedic Residencies, New York Orthopaedic Hospital and Dispensary, and Columbia-Presbyterian Hospital, 1942. Medical Corps, Army of the U.S., 1942-1946. South Pacific. Private practice of Orthopaedic Surgery: Riverside, CA, 1946-1974; Orange County, CA 1975-1985; Desert Hot Springs, CA, 1994.

Assistant Clinical Professor of Orthopaedic Surgery, College of Medical Evangelists, Loma Linda, CA 1946-1955.

Orthopaedic Consultant, March Air Force Base, 1949-1951. Chief of Staff, Sister Kenny Poliomyelitis Hospital, 1950-1957.

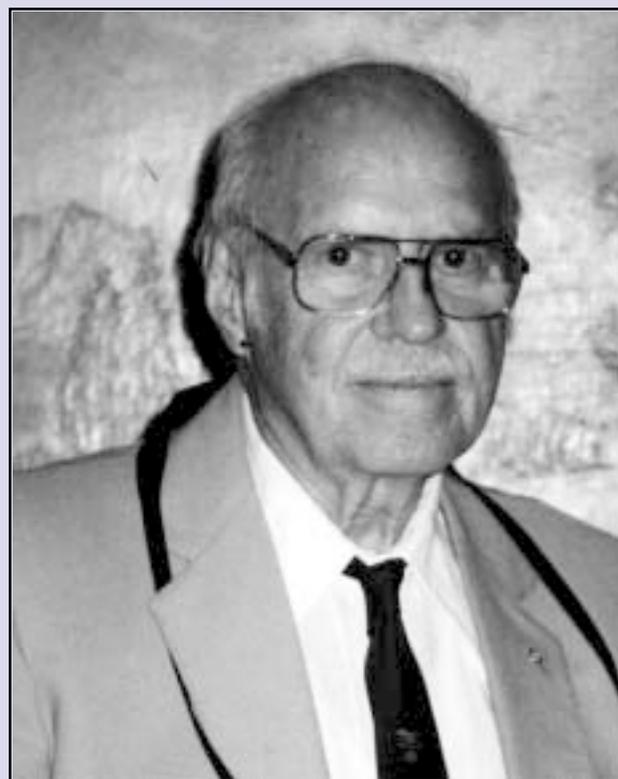
Attending Orthopaedic Surgeon, variously: Riverside Community Hospital, Riverside General Hospital, Parkview Community Hospital, Esperanza Inter-Community Hospital, Good Samaritan Hospital (now Midwood Community Hospital, Stanton, CA 90680).

Founder and Medical Doctor, variously: Angel View Crippled Childrens Foundation, Desert Crippled Childrens Clinic (changed to Desert Arthritis Medical Clinic, Desert Hot Springs, CA 92250.)

**Organizations:** Certified by the American Board of Orthopaedic Surgery, Fellow of the American College of Surgeons, Fellow of the American Academy of Orthopaedic Surgery, Fellow of the International College of Applied Nutrition, Member of the American Medical Association, California Medical Association, Orange County Medical Association and the Pan-Pacific Surgical Association.

Founding Member and Chairman of the Medical and Scientific Advisory Board of The Roger Wyburn-Mason and Jack M. Blount Foundation for the Eradication of Rheumatoid Disease (aka The Rheumatoid Disease Foundation, aka The Arthritis Fund).

Editor of *Arthritis and Health News*; editor and publisher of *Fight Back Against Arthritis*.



Robert Bingham, M.D., Taken 1993

# Bingham

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matoid Disease, Jack M. Blount, M.D. who first introduced the use of Metronidazole [Flagyl], and Seldon Nelson, D.O. who first introduced the use of coated copper ions on small resins, Robert Bingham, M.D. introduced the use of diiodohydroxyquinon [Yodoxin] for the treatment of Rheumatoid Arthritis.

There are many who must in good conscience be grateful to Robert Bingham, M.D. But, I am personally and profoundly grateful for the many good deeds that Robert Bingham, M.D. has performed for this foundation since 1982, for his continuous defense in the cause of justice and good ethics, and for his learned advice and assistance when needed.

I'm particularly grateful for his foresight in bringing to the attention of others, such as Jack M. Blount, M.D., Dr. Paul K. Pybus and Gus J. Prosch, Jr., M.D., Roger Wyburn-Mason's hypothesis and successful treatment. Without it, I'm convinced, I'd be crippled and probably dead, rather than actively at the age of 69 doing swing dancing (jitterbug) with every young lady who'll have me four times a week for several hours each night.

Bob Bingham suffered cruel and unabiding pain from cancer of the spine, according to one of his friends.

Bob wrote a farewell letter "To my patients, colleagues, friends

and family," saying:

"This is to announce that as of today, February 1, 1994, I am retiring from the active practice of medicine and orthopedic surgery after 55 years.

"I will continue to be available for consultation by physicians at the clinics on a volunteer basis and to support our arthritis programs by research and writing.

"Like the 'one hoss shay,' that 'fell apart in one day', and since 83 years of good health have been mine, it must be 'my turn'. (For those of you who are medically interested, a combination of a type of spinal bone cancer -- multiple myeloma, anemia, and disc degeneration with sciatica limits my strength and endurance and will require blood transfusions.)

"My dear wife and I, after 57 years of marriage, have been fortunate to live and work in Riverside and Orange counties -- and for 33 years part time and 5 years full time in this very healthful city of Desert Hot Springs. Our three children and six grandchildren have had these advantages also.

"To all of you who have supported me with your good wishes and prayers I give my heartfelt thanks and appreciation. It is for you that I have wished to serve for better life and health.

"May God bless you all, sincerely,

"Robert Bingham, M.D."

Thanks Bob! Thank you very, very much!



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Editor-in-Chief: Perry A. Chapdelaine, Sr.

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*The Rheumatoid Disease Foundation and The Arthritis Fund are projects of The Roger Wyburn-Mason & Jack M. Blount Foundation for the Eradication of Rheumatoid Disease, a non-profit, charitable organization chartered in 1982 in The State of Tennessee. Tax exemption approved by the United States Internal Revenue Service. All donations are tax deductible to the fullest extent of the law.*

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## Therapy

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For chronic diseases, the standard treatment is one dose morning and evening for a long period.

In acute diseases the dose is administered every 6 hours (every 3 hours the first two doses if the case is serious); then space every 8 hours and then 12 hours as improvement goes on.

After recovery it's better going on with a dose every 12 hours for some days.

As a preventive measure, and as a magnesium supplement, one dose a day can be taken.

Magnesium Chloride, even if it's an inorganic salt, is very well absorbed and it's a very good supplemental magnesium source.

For intravenous injections, the formula is:

Magnesium Chloride hexahydrate ..... 25 grams

Distilled Water ..... 100 grams

Make injections of 10-20cc (over 10-20 minutes) once or twice a day. Of course the solution must be sterilized.

This therapy gives very good results also in veterinary medicine, at the appropriate dosages depending upon the size and kind of animals.

[In the United States, Magnesium Chloride hexahydrate can be purchased chemically pure (c.p.) from most chemical supply houses without a prescription: Ed.]

