

MR. MURPHY: There is here a reply with a photograph in connection with some of Dr. Noble's matter, that he refers to as the condition of some of these individuals and the actual photographs. I thought they were just filed, perhaps that would be the best way to handle them.

THE CHAIRMAN: Yes, I think so.

EXHIBIT NO. 9 Reply with accompanying photograph

MR. MURPHY: There was one I wanted to make reference to -- an interview that will conclude this matter.

Page 13 of this exhibit No. 9, are pictures which Dr. Banting considered the most conclusive proof. This says;

-- Mr. Murphy reads.

37. DR. BENJAMIN LESLIE GUYATT, sworn

BY MR. MURPHY: Q. Dr. Guyatt, you examined at Bracebridge, a Mr. Oak, of Huntsville, with cancer of the lip? A. Yes, that is true.

Q. Have you got what happened there at the time of your examination? A. Well, I recall the case.

What was known as cancer of the lip, had disappeared when I examined him.

Q. I understand it was diagnosed by Dr. Hipwell of Orillia? A. Yes.

Q. As cancer of the lip? A. Yes.

Q. He had been treated by Miss Caisse?

A. Yes, sir.



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Murphy

Case of
Mr. Oak of
Huntsville
was dismissed

COMMISSIONER YOUNG: Q. Could we get the date with regard to that?

MR. MURPHY: Yes, I can give you the date.

THE CHAIRMAN: ^{Oak?} Mr. Lee has not given evidence.

MR. MURPHY: No. His age is 44 years. It says here "cancer of the lip".

BY COMMISSIONER YOUNG: Q. Perhaps Dr. Guyatt could remember whether it was this year or last year, or five years ago? A. Yes, this was on February 4th.

Q. Of this year? A. Yes.

Q. You found that something had been done there-- something which had been there before had gone? A. Yes.

BY COMMISSIONER VALIN: Q. But you had not seen it before? A. No.

Q. Before the treatment? A. No.

BY COMMISSIONER COLLINS: Q. Where do you practice? In Bracebridge? A. No, I am on the staff of the University, in the Department of anatomy.

MR. MURPHY: I was going to ask the doctor some questions on that.

COMMISSIONER YOUNG: Are we through with Mr. Oak?

MR. MURPHY: I have not really further particulars.

COMMISSIONER YOUNG: Do we know that Mr. Oak was treated by Miss Caisse? I do not see that here?

MR. MURPHY: There are not sufficient particulars, so we will cross that out.

BY MR. MURPHY: Q. Dr. Guyatt, in regard to Mr. Lee; have you any particulars on his examination, cancer of the penis? A. There was still a small ulcer present when I examined him on that same day, February 4th.

Q. Do you know who made the diagnosis?

A. Dr. Reinhard of the Reinhard clinic. That is near Bracebridge.

Q. How long had he had that cancer, do you know?

A. I have those notes, but I was not aware that you were going to ask me this question. It was some months.

Q. You did not bring the notes? A. They are in my book out there.

Q. Have you any notes about Oak? A. Not very elaborate. I just kept the notes of my examination and I kept nothing about the history.

Q. Neither Lee nor Oak? A. No. NAK

Q. Now, Dr. Guyatt, you said --

COMMISSIONER YOUNG: That comes out of the record, too, regarding Mr. Lee?

MR. MURPHY: Yes.

BY MR. MURPHY: Q. There was a great number of others whom it was inconvenient to bring, in the holiday or because we could not locate them?

Some had gone to Vancouver, and some to the World's Fair.

THE CHAIRMAN: You seemed to locate a pretty good day's work

Following page 1390 missing

Book

BY MR. MURPHY: Q. Have you made any observations as to these treatments at Bracebridge; following it up in any way, shape or form? Have you been interested in it?

A. I first became interested three years ago this fall. It was brought to my attention by a doctor who was a friend of mine, a prominent man. He asked me if I knew anything about it, and I was travelling through the north country, and I stopped at the clinic. That was my information, that there was a clinic there.

Q. Have you been there on occasions since then?

A. Since that time --

Q. Give the Commission some observations you made there?

A. I have made it my business to go to Bracebridge to the clinic to observe what was happening, and from time to time without close checking-- I have not had the time, or the apparatus to make a check such as I would like to have made, but I saw patients come in, in very bad shape, and the next time I went along I found improvement in a number of those cases.

This happened on about three occasions, and I was so impressed that I brought the matter to the attention of Dr. Routley of the Canadian Medical Association, later asking that some investigation be made into this form of treatment. That is how impressed I was.

Since that time I have been endeavouring to follow the thing not in any elaborate sort of fashion at all, but just to see what was happening in a number of cases I followed, which I felt were cancer, and which have

1 definitely improved. I would not say they are cured. I
2 would not use that statement, because a cure of cancer
3 means 25 years, and then you are not sure, but certainly
4 there has been a great benefit in those cases.

5 BY COMMISSIONER DEADMAN: Q. Your clinical im-
6 pression of these patients -- to your mind, were they
7 definitely cancer? A. Yes, quite. As I
8 say, I have had considerable clinical experience, there-
9 fore, I base my observations largely on the clinical
10 diagnosis which has been made of the patients sent in.

11 BY COMMISSIONER VALIN: Q. Did you make any
12 attempt to examine them at all -- those rectal cases? K

13 A. No, Dr. Valin, I did not, because after treatment,
14 one can question the advisability of manipulation. If
15 there is disintegration going on, is it wise to manip-
16 ulate it by examination?

17 Q. What harm would that do?

18 A. You might get a perforation.

19 Q. You might' after radium treatment, but not after
20 serum treatment:

A. I don't know about that. I am
21 not sure. I am not taking any chances in that respect.

22 BY COMMISSIONER YOUNG: Q. You were just drawing a
23 conclusion from what you saw? A. That is all I

24 saw -- the clinical observations which impressed me
25 sufficiently. MK

26 BY COMMISSIONER VALIN: Q. You are not curious?

27 I would have liked to examine a lot of these patients
28 here today, and put a speculum in, and see what had

happened to the cervix, and I would have liked to put a proctoscope up the rectum, and see what is happening there.

THE WITNESS: So Would I.

BY COMMISSIONER VALIN: Q. Some of them are two or three or four years old. There is no objection to examining them. You could not do them any damage.

A. I am not in a position to do that, but I have an inquisitive sort of mind, and always have had. I investigated manipulative surgery in 1924, and recommended it to the Society.

BY MR. MURPHY: Q. How many approximately would be attending these clinics on the days they were held there?

A. The time I have been in there, I should say there would be from 30 to 50 -- at least that.

Q. Some individuals who were quite ill?

A. The number who are actually very ill?

A. Yes, / A. I never saw more than two or three who are very, very ill.

Q. How often do they hold the clinic there?

A. I believe three days a week -- that is my information I usually went up at the week end, to make my observations + have not been there very often, but enough to impress me.

Q. You were satisfied that the individuals who were seeking this treatment, from your observations, were improving? A. Were definitely receiving benefit.

They were suffering a great deal of pain, and they were giving them morphia, and they have ceased to use morphia as a result of this treatment, and that relief lasted from one week to another. It impressed me.

BY COMMISSIONER CALLAHAN: Q. What would you say about a man who makes a complaint of a mass in the rectum, temperature, throbbing pain, feeling very ill and that a few days after he had received this Caisse treatment, that this mass supposedly cancer, would break, and a large amount of yellowing greenish pus comes away from it? What would you say about that?

A. I would say there was an abscess there. Whether he had anything else or not --

Q. You would not make a diagnosis of cancer in that case? A. Not on that particular information, unless he had something else.

Q. We have had three or four presented to day as cases being treated for cancer; what would you say about those? A. If it was occurring in three or four days, I would hesitate to say.

Q. Would you expect a cup full of blood to come away a carcinoma of the rectum. A. At any stage?

Q. At any stage, after it burst?

A. Not on the first treatment.

Q. Pain relieved, and the patient starts to improve, the throbbing stops, the pain ceases, and he has no more trouble. A. You say throbbing pain in the rectum, and he takes one treatment, and three days --

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Q. He gets five or six treatments, and the thing bursts? A. I would say there was something wrong with the doctor who made the diagnosis.

COMMISSIONER YOUNG: I would say that is a very good conclusion.

THE WITNESS: But, on the other hand, if this individual has gone on for some length of time, and you have disintegration of that tissue, the like of which I saw in a post mortem case of carcinoma of the rectum, it might discharge a considerable amount of pus, and still be carcinoma.

Q. Would you expect it to improve in a few treatments? It would be very phenomenal? A. If it was an advanced carcinoma with an abscess, yes. If you had a beginning carcinoma of the rectum, and you had an abscess as well, that could be evacuated.

Q. But a simple carcinoma would not produce a stoppage of the bowels? A. Not in my experience.

Q. That would be due --- A. To your tumor, which you say was filled with pus.

Q. Which you would expect to be an abscess, with symptoms of that type, and findings of that kind, the rupture of this mass and the discharge of a cup full of pus?

A. I have treated a good many cases of abscess of the rectum, and I cannot imagine that being a diagnosis of carcinoma



BY COMMISSIONER DEADMAN: Q. Were you impressed by your observations that reasonable care in diagnosing these cases was being taken? A. I do not know that that is just a question I could answer.

Gayatt Q. I wanted your impression? A. I was impressed. In the most cases of carcinoma, it is pretty obvious, if your patient is in the least advanced stages.

Q. You see a good many of those?

A. I saw quite a number of those. There was -- the last man you had. I was interested in his case, because I saw him before, and he has evidently made quite a distinct improvement, which apparently there is no doubt of the diagnosis in his case. Like yourselves, I am just after the truth, and nothing more.

BY MR. MURPHY: Q. You mean Mr. Wolfenden?

A. Yes.

Q. Three doctors passed on him, and said he had carcinoma.

A. Yes, and that was the impression of Dr. Callahan, too.

BY COMMISSIONER VALIN: Q. But a case like that would have to be considered by repeated examination from month to month, to see whether there is a regression of the tumor there or not? A. Certainly.

Q. I would not have been satisfied unless I could have visualized this tumor. A. Is that not just what I am saying? I was impressed sufficiently to feel that some closer observations should be made. Many of these cases have had other treatments. True. Now, why

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Lines 17 & 18



did they not get to the clinic, and having a proper diagnosis have these treatments alone, and then you could see whether these treatments alone are doing the work.

Q. You have seen cases of carcinoma of the cervix, cured by radium? A. Oh yes -- I believe they are cured.

Q. You have seen them yourself?

A. I have seen them cleared up.

Q. Cured? A. Yes.

A. For a period of four or five years at any rate?

A. Yes, that is what I say.

Q. They nearly all do? I can show you a good many of them.

A. Do not think I am discrediting any other treatment --

VALIN: Q. A lot of these patients have had radium; we know we can cure cancer of the cervix by radium, and deep therapy. If it was a case of my own, I would rely on radium, and deep therapy.

A lot of these patients who have gone to this clinic and have had this treatment have had radium.

A lot of these cancers of the lip have had radium to the lip, and when they are in the reaction from radium, they go to Miss Caisse?

A. I only know of one case where it occurred -- not all of them, but those I took an interest in were those which occurred in two or three years or four years after they had radium, which we considered a definite recurrence of the growth, and over which radium has no influence. *

I think you will agree with me on that.

Anything that happens after six months -- I am not an authority but I believe those who are authorities feel that if you get a growth persisting or increasing after that time, you had better get busy and do something about it, or you cannot rely on what they have already had to cure the case.

BY MR. MURPHY: Q. I suppose Dr. Guyatt, like others, you have observed some cremations done by radium before the individual died? A. There have been accidents, yes. You cannot destroy a tumor without destroying some of the other tissues. That is reasonable.

-- The witness retired.

THE CHAIRMAN: Before you leave, Mr. Murphy, I think I would like to have Miss Caisse's position definitely on the record respecting her formula, and whether she has changed or not, and any observations to the Board you have to make in connection with me.

We have heard more case histories from Miss Caisse than from any other sponsor. She is the only sponsor, I think now who has not been willing to disclose her formula. I do not remember any others. Every other applicant has done so, and I would like to have it definitely on the record what her position is now.

MR. MURPHY: I think her position is the same. She would like the Commission, having heard this evidence, to pass upon it, and she will quite willingly abide by that decision.

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END OF
GUYATT'S
TESTIMONY

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