Essiac: The Secret Life of a Document

by BARBARA CLOW

In the 1930s, a nurse by the name of Rene Caisse captured the attention of the public, the medical profession, and the government in Ontario with an herbal treatment for cancer.¹ The remedy was not Caisse's own invention; she obtained the recipe for the tea from a patient who had been instructed in its use and preparation by a Native-Canadian healer. Having acquired the therapy, Caisse tested it, modified and refined it, and finally named it "Essiac"--her own last name spelled backwards. She treated hundreds of cancer patients in the 1930s and 1940s, often with remarkable results. Despite the alleged success of the therapy, however, Caisse's work was deeply contentious, in large measure because she refused to discuss the formulation of the medicine. In other words, though Essiac began its long and chequered career through a free exchange of information, once in Caisse's possession it became shrouded in mystery. To varying degrees, that same shroud has clung to the remedy for most of the intervening seventy-five years, enhancing its cachet and notoriety even as it has plagued investigators of every stripe. Yet the fate of Essiac is not at all uncommon in the annals of alternative medicine. Even as the historical record of regular medicine has expanded in the twentieth century, sometimes to the point of despair for historians and archivists swamped by the volume of information, the history of unconventional medicine has remained both fragmentary and elusive.

The purpose of this article is twofold. First, as the title indicates, it will trace the history of the Essiac recipe from its origins as a native remedy through long years of concealment to the present day, taking into consideration both the reasons for secrecy and its influence on the life of the document. Rene Caisse's story is necessarily integral to this aspect of the discussion for, without her, the herbal remedy might never have had a public life, let alone a secret one, and her decisions about the formula shaped its fate after her death as well as during her lifetime. Second, the paper will consider the broader implications of secrecy for the history of unconventional practitioners and therapies. As we attempt to follow the Essiac recipe along its labyrinthine course, we will encounter some of the common problems that confront researchers and records managers committed to exploring and preserving the history of alternative medicine.
Born on 11 August 1888 in Bracebridge, Ontario, Rene Caisse trained as a nurse in private hospitals in Ontario and Connecticut. Her interest and involvement in the treatment of cancer began in 1922, when she encountered a patient who claimed to have been cured of breast cancer. Rather than face the mastectomy recommended by her doctor, the woman turned to a local native healer who supplied her with an herbal remedy. The tumour in her breast apparently disappeared as a result of the treatment; when Caisse met her twenty years later, the patient was still free of the disease. Impressed by this story and aware of the limitations of conventional treatments for cancer, the nurse asked for the recipe. "I knew doctors threw up their hands when cancer was discovered in a patient," Caisse said, "it was the same as a death sentence just about. I decided that if I should ever develop cancer, I would use this herb tea." Two years later, she had an opportunity to try the remedy when a relative was diagnosed with inoperable stomach cancer. When her aunt's condition improved dramatically after only two months of treatment, Caisse began to think she was onto something important—as did the attending physician, Robert Fisher. For the next few years, Fisher and Caisse worked together, testing the therapy on human and animal subjects, apparently with very promising results.

Despite the auspicious beginnings of this partnership, however, Fisher's association with Caisse was short-lived; in 1926, he signed a petition to the federal government in support of her work, but thereafter was not connected with Essiac in any way. Indeed, though Fisher had been intimately involved in the process of testing and refining the original formula, Caisse later emphasized only her own efforts to improve the herbal treatment. As she told the press in 1932, "I took a list of the things the Indian [had recommended.] I began to think about them, and gradually discarded what I thought would not be essential." Furthermore, Essiac was clearly named by and for Caisse. She may have been attempting to oust a potential rival by marginalizing Fisher's contributions in this way, but whatever the reasons for his disappearance, it effectively ended Caisse's only genuinely collaborative effort. Thereafter a veil of secrecy descended over the formula for Essiac, and her name—backwards or forwards—was the only one associated with the herbal medicine.

Throughout the 1930s, the medical profession in Ontario opposed Caisse's work in a variety of ways while the government kept a wary eye upon her. Both groups, doctors and legislators, were concerned about the unsubstantiated claims made for Essiac, and the medical profession, in particular, expressed grave reservations about the credibility of "secret remedies." But patients and the public were less concerned with the nature of Essiac than with its results, and as word spread that Caisse was enjoying remarkable success in the treatment of cancer, sufferers in growing numbers queued up outside her door. She soon left her small lodgings in Toronto, and, after a brief hiatus in Peterborough, Ontario, finally settled in her home town of Bracebridge. In 1935, the town council offered her the use of the former British Lion Hotel, where she ran a busy cancer clinic for many years. Indeed, by 1938, Caisse estimated that she had treated close to fifteen hundred patients with Essiac. In a medical environment supposedly dominated by regular practitioners, Caisse's popularity was remarkable and, as such, demands close attention. Yet, ironically, her success also tends to complicate the study of her work because the pace of her practice often precluded extensive or systematic record-keeping. In 1938, for example, when the provincial authorities asked Caisse to submit documentary proof of Essiac's
effect on cancer, she hedged for several months and then produced only eighty-four case histories, many of them incomplete and highly anecdotal. These few records are a rich source of information on the social history of medicine for, in contrast to most conventional medical documents, they often contain the patient’s view of illness, suffering, and healing. Nonetheless, they provide a very small sample on which to construct an account of alternative medicine in the past, especially when compared with the records of regular practitioners and institutions in the twentieth century.

Even when case histories or correspondence are extant, it is no easy matter to gain access to them, for the records of unconventional medicine are usually closely guarded by proprietors and proponents of specific remedies. In 1935, for example, James Faulkner, the Minister of Health for Ontario, proposed an official investigation of Caisse’s work. He arranged for Frederick Banting, discoverer of insulin and doyen of the medical community, to evaluate the therapy. In order to facilitate the investigation, Faulkner asked Caisse to supply a complete account of her treatment, including “the exact nature of the materials suggested for use, the manner in which they are to be used including dosage and the experience which has attended their use with such detailed reports on pathological diagnosis, treatment and present condition of patients as exist.” Although Caisse was eager to convince the medical and political authorities that she had an effective treatment for cancer, she had no intention of blithely surrendering her formula to do so. For the better part of two years, Faulkner and Caisse tried to negotiate an arrangement acceptable to both of them, but since neither would budge on the issue of disclosure, this first attempt at an official investigation of Essiac ended in an impasse.

As with other unconventional practitioners in this period, Caisse’s determination to withhold the recipe for Essiac was rooted in a deep and enduring suspicion of the medical and political establishment. She refused to cooperate with Banting, for instance, because she feared that he would be given credit for her discovery. When not worried about the appropriation of her therapy, Caisse fretted that doctors would try to suppress it: “I was afraid with all the money spent on radium, and apex[sic]-ray and those sort of things that [Essiac] being a simple treatment they would shelve it without a full enough investigation of its merits.” Consequently, Caisse insisted that she would not release the formula until the medical profession acknowledged the value of Essiac based on her clinical success with patients. “I thought if I cured enough people that it could not be disputed,” she explained, “then they could not shelve it, and suffering humanity would have to get it.”

Born of her sense of vulnerability, Caisse’s commitment to secrecy became an insurmountable obstacle to official investigators in the 1930s and 1940s. As the controversy aroused by Essiac and other alternative cancer remedies reached its peak in 1938, the provincial government once again proposed an official enquiry. It established the Commission for the Investigation of Cancer Remedies to evaluate a variety of unproven or unconventional therapies available in Ontario. Caisse expressed confidence that she would be able to demonstrate the merits of Essiac; she was prepared, or so she claimed, to present volumes of clinical evidence in support of her work, and her patients were equally eager to testify before the commission or sign affidavits that they had been cured of cancer. But it soon became apparent that the commissioners were less interested in patient testimony than in the formulation of
unconventional treatments for cancer. Although they were prepared to consider the histories submitted by Caisse and other practitioners, they concluded that "a proper investigation [of Essiac] could not be made...without knowledge of the formula and the contents of the serum."\(^20\) The Cancer Commission's approach was entirely consistent with the standards of medical research in this period, but it clashed with popular notions about drug evaluation, which stressed the importance of sufferers' experiences. As one journalist observed about Caisse's therapy, "The general feeling here is that the sole test of her treatment should be 'Does it cure?' and that if it cures it should be nobody's business 'how' or 'why' it cures....When people take a train all they want is to get to their destination and they don't care whether the locomotive runs by steam, electricity or diesel power."\(^21\) Thus, Caisse's doubts about the government's motives were reinforced by the commission's apparent obsession with the recipe for Essiac; she became even more firmly committed to her policy of concealment.\(^22\) By 1940, the second attempt at an investigation of Essiac had also ended in a stalemate.\(^23\)

Exhausted by her long campaign to win recognition and acceptance for her work, in 1942 Caisse decided to retire.\(^24\) She continued to treat the small number of cancer sufferers who sought her aid. She made periodic attempts to gain new adherents or influential advocates.\(^25\) Occasionally, she made arrangements to have her treatment tested—without, of course, revealing the formula.\(^26\) But throughout the 1950s, 1960s, and early 1970s, Caisse remained an obscure figure whose work attracted little attention outside of Bracebridge. Even in the absence of substantial interest in or opposition to her work, however, Caisse's determination to keep her remedy secret did not flag. When two authors, Sheila Snow Fraser and Carroll Allen, approached her in 1977, Caisse was as coy as ever about the formula for Essiac. Yet the article that Snow and Allen published in Homemaker's Magazine, a popular Canadian periodical, not only revived interest in Caisse's herbal treatment, but also initiated the first real breach of her defenses.

In the summer of 1977, Eleanor Sniderman (née Koldofsky), wife of a prominent Toronto businessman, read the Homemaker's article on Essiac and became convinced that it had therapeutic potential. She also became concerned that Caisse, then eighty-nine years old, would die without sharing the details of her work.\(^27\) Consequently, she travelled to Bracebridge in the hope of convincing Caisse to entrust the recipe for Essiac to someone, anyone. For some reason, Sniderman succeeded where countless others had failed, and Caisse agreed to deposit a copy of the formula with Pauline McGibbon, Lieutenant-Governor of Ontario.\(^28\) After fifty years of jealously guarding her secret, Caisse had made a small concession to openness in order to secure the Essiac legacy. But the gesture seems to have broken down her resistance; a few months later, she decided to sell the formula for Essiac to a Toronto-based firm, Respirin Corporation.\(^29\) Perhaps she finally realized that Essiac would not be accepted as a legitimate treatment for cancer in her lifetime. As she told Pauline McGibbon, "I am old, and very tired of trying to battle the medical group alone, and I did believe that [Respirin Corporation]...would have the means and the power to make it available to many, many cancer sufferers."\(^30\) Whatever her reasons for relinquishing the formula, Caisse's decision saved her work from oblivion; when she died a year later, in December 1978, Essiac continued to attract attention and provoke debate.
Although Rene Caisse's commitment to concealment stymied researchers during her lifetime, since her death the attitudes and actions of both her followers and detractors have done more to obscure the history of Essiac than she ever could or perhaps would have done. Caisse's decision to entrust the formula to Respirin Corporation, for example, did not usher in a new era of candour and cooperation. Immediately upon acquiring the recipe, the company applied to the Canadian government for permission to test the herbal remedy on human subjects. Although Respirin Corporation was required to give a full account of the therapy, including the formula, in order to satisfy governmental regulations for the evaluation of new drugs, that information was privileged. On several occasions, the company demanded assurances from federal health authorities that all information pertaining to Essiac would be maintained in strictest confidence. Furthermore, Respirin Corporation still retains considerable control over the records pertaining to the clinical trials of Essiac. New Access to Information legislation has made available some records of recent vintage, but obtaining permission to see this material is a slow and uncertain process, subject to staffing restrictions, budgetary cuts, and, in the case of Essiac, the wishes of third parties with a vested interest in the documents. My requests to the Health Protection Branch of Health and Welfare Canada took more than a year to process, and the documents I subsequently received had been carefully selected and, in some instances, severely altered to protect the privacy of doctors, patients, and company officials. Significantly, the recipe for Essiac was not among the materials released to me.

Eleanor Koldofsky has also contributed to the secrecy surrounding Caisse and her herbal remedy, albeit for rather different reasons. As part of her effort to preserve contemporary knowledge of Essiac, Koldofsky taped a number of conversations with Caisse and her patients, as well as with doctors involved with the therapy. Learning of the existence of these tapes in 1991, I contacted Koldofsky about access to this important source of information. Initially very cooperative, she invited me to her Toronto home, but on the day I was to begin listening to these recordings, she balked and remains, to date, unwilling to release the tapes. Her reluctance is perhaps understandable; in 1977 she was inundated with pleas from cancer patients desperate to try Essiac and she is anxious to avoid a repetition of that scenario. Nonetheless, the same woman who was instrumental in convincing Caisse to release her formula twenty years ago is today unwilling to share her own knowledge of Essiac.

Gary Glum, Caisse's biographer, has likewise managed to obscure and confuse the history of Essiac. A chiropractor from Los Angeles, California, Glum became aware of Caisse's work in 1985 when he was introduced to a cancer patient who had apparently been cured by the herbal tea. Much impressed, he decided to pursue his interest in Essiac and, the following year, contacted Mary McPherson, a close friend of Caisse's who had kept all of the nurse's personal files. Like Caisse and her supporters in the 1930s, McPherson was initially suspicious of Glum's questions, but her reserve thawed and eventually she turned over the records to him. According to Glum, he made two more trips to Bracebridge, each time returning to Los Angeles with "large suitcases filled with papers." In 1988, he published a highly partisan biography of Caisse, entitled Calling of an Angel, which is filled with tantalizing excerpts from a seemingly prolific correspondence between the nurse and patients, journalists, government officials, and sympathetic doctors. Despite his professed
commitment to make Essiac available, Glum did not publish the recipe itself. Instead, at the close of the book, he offered readers the opportunity to purchase video-taped instructions on the art of brewing Essiac—for only $79.95—though the recipe itself is not especially complicated or difficult. Clearly, Glum’s involvement with Essiac has not been entirely altruistic and, as we will see, his personal agenda for the herbal tea has posed one of the graviest threats to its history.

After reading his book, I contacted Gary Glum in the fall of 1992 in the hopes of gaining access to Caisse’s records. Like Eleanor Koldofsky, Glum initially seemed willing to let me see the documents, but when I called to finalize my travel arrangements, his wife informed me that, on the advice of their lawyer, they had decided to close the files. Many unanswered telephone calls and letters later, I have still not been able to gain access to these records. Technically, legal mechanisms do exist to recover historical documents that have been transported out of the country. Canada and the United States have passed legislation to protect national cultural treasures, and both countries have ratified UNESCO recommendations regarding the protection of movable cultural property. Yet these regulations are not only difficult to enforce, but also subject to a variety of interpretations. Probably the greatest obstacle to the recovery of Caisse’s records, for instance, is the fact that few officials would deem them to be of sufficient cultural, historic, or economic interest to fight for their return. Although Frederick Banting’s notes on the discovery of insulin would undoubtedly be considered a national treasure—worth considerable effort to recover if they should suddenly disappear—the documents of alternative medicine are typically not so highly prized. Consequently, Caisse’s files may never be returned to Canada and the original recipe for Essiac, as well as a wealth of other material pertaining to the social and medical history of Ontario, may be lost.

Glum’s intransigence has obvious implications for the history of Essiac, but his attitude also exposes a more general problem facing researchers and archivists interested in the history of alternative medicine. Like Caisse, modern proponents of unconventional remedies may be very cautious about inquiries that originate outside of the alternative medical community. Glum’s decision to deny me access to Caisse’s records, for instance, may well have been the result of my inability to share his view of the world or of Essiac; I was not prepared to endorse the herbal tea as a cure for cancer, nor could I subscribe to his theory that the Canadian government and the medical profession had conspired to suppress a known cure for cancer. In other words, researchers may encounter resistance to their requests for information about alternative therapies unless they are willing to adopt the guise of a convert or an advocate. Archivists may be doubly disadvantaged in their dealings with the alternative medical community. Often employed by governments, corporations, or other institutions of the “establishment,” archivists may seem to be intimately associated with or even representative of the “enemies” of alternative medicine. Certainly neither Glum nor Koldofsky was willing to entertain my suggestion that the records in their possession would be safer and more accessible in an official repository.

Although Caisse’s followers have contributed to the secrecy and confusion that currently surrounds Essiac, the regular scientific and medical communities, as well as the government, have been no less culpable in this regard. For example, in the early 1970s, Caisse allegedly managed to convince officials at Memorial Sloan-Kettering Cancer Center in New York, one of the most prestigious cancer research
institutions in the world, to test Essiac. I was initially rather skeptical about this claim, but decided to investigate further, contacting the Rockefeller Archives Center and the Memorial Sloan-Kettering Cancer Center for more information. My first two sets of letters went unacknowledged but, in the meantime, I received confirmation that the tests had indeed taken place; a letter from Chester Stock, a top-ranking official at Sloan-Kettering, was among the papers sent to me by Health and Welfare Canada. Recently, I renewed my efforts to view the material pertaining to these trials of Essiac, only to learn that the files have been restricted indefinitely for undisclosed reasons. Nor is my experience unprecedented. During her investigation of the vitamin C and cancer controversy in the 1970s, Evelleen Richards found that the alternative medical community was enthusiastic about her work, sometimes excessively so, while representatives of the Mayo Clinic bluntly refused her access to their records.

The Canadian government has also had a profound impact on the history of Caisse’s remedy, especially after the failure of the clinical trials of Essiac in the early 1980s. As a result of Respirin Corporation’s representations to federal health authorities, Essiac was granted “investigational new drug” or IND status; in the fall of 1978, a number of physicians across Canada began to administer the remedy to cancer sufferers in the terminal stages of the disease. Unfortunately, the trial protocol designed to satisfy the scientific and medical communities was poorly conceived: no effort was made to randomize the patients under treatment; the therapy was not tested on control subjects; and the investigation was considered to be biased since treatment was usually instituted at the request of the patients. Consequently, three years after its inception, the clinical trial of Essiac was judged “inconclusive” and cancelled by Health and Welfare Canada. Yet even after the suspension of official testing of Essiac, the government tried to extend its control over the therapy.

Although the clinical trials of Essiac had not substantiated Respirin’s claims, or those of Caisse, they had at least demonstrated that the herbal tea was harmless. Consequently, under substantial public pressure, the federal authorities finally agreed to make the therapy available to patients on compassionate grounds. Throughout the 1980s, Respirin Corporation was the only “official” source of Essiac in Canada, and that privilege was transferred to Mankind Research Foundation, a Massachusetts-based firm, in 1991 when Respirin Corporation became inactive. But sufferers today cannot simply buy Essiac from the manufacturer, nor can they petition the government for access to the therapy; instead, they must convince a doctor to intercede on their behalf, and many regular practitioners are reluctant to do so. As one journalist concluded, “If you have been diagnosed as having cancer and you want to try Renee [sic] Caisse’s herbal treatment, Essiac, you’ll need to persevere if you wish to obtain it through approved channels.” Similarly, proponents of Essiac ran up against a huge bureaucratic wall in 1988 when they tried to make the therapy available through health-food stores. Although the investigation of Essiac was moribund and its IND status had lapsed, government officials refused to sanction this marketing strategy. Jake Epp, Minister of National Health and Welfare, wrote, “Essiac is considered a ‘New Drug’. . . .This means that scientific evidence of the safety and efficacy of Essiac must be submitted to the Health Protection Branch of my Department, reviewed and found adequate before [it] can be marketed in Canada.” Having received the dubious designation of “drug,” Essiac could no longer
be transformed back into an innocuous herbal tea. Thus, Caisse’s worst fears of appropriation and suppression were realized, to some extent, as her remedy became a hostage, of sorts, of the medical and political establishment.

Governmental intervention was probably designed to curtail the use of Essiac; public education material published by Health and Welfare Canada suggests that federal authorities shared the medical community’s conviction that even harmless therapies, such as Essiac, are dangerous because they tend to divert cancer sufferers from the benefits of conventional treatments. Yet official regulation of Essiac has not only failed to curb popular interest, it has also contributed directly to the confusion and controversy surrounding the therapy. Undaunted by governmental restrictions, the public continues to learn about Essiac and other unconventional remedies through informal networks, but since this information is often unclear or contradictory, there is now a good deal of disagreement about the “real” formula for Essiac and who possesses it. For example, though I easily obtained a copy of the formula for Essiac from Elene Freer, curator of the Bracebridge Historical Society, I could only guess at the origins of the recipe since she was not free to divulge her sources. And even as I held the recipe in my hands, I became aware that there are many other versions of the formula in print or circulation, and many contenders for the title to Caisse’s therapy. With the recent revival of Respirin Corporation, Mankind Research Foundation’s monopoly on the Essiac market has been challenged, and Elaine Alexander, a radio personality in British Columbia, has also established herself as a competitor. In 1992, she claimed that Respirin Corporation—and therefore Mankind Research Foundation—did not have the “final improved-upon Essiac formula” because company officials had insisted on acquiring Caisse’s original recipe. According to Alexander, Caisse had modified the formula in the 1950s and entrusted it to Charles Brusch, a doctor, friend, and supporter from Massachusetts; Alexander allegedly acquired it from him in 1988. The following year, she signed a contract with Flora Distributors, a health-products company, to manufacture, promote, and distribute the herbal therapy under the name Flor*Essence.” While the recipe remained in Caisse’s possession, its provenance at least was clear, even if its composition was not; in the hands of subsequent generations, however, the integrity of the formula has been seriously compromised.

The latest development in the saga of Essiac underscores the research and archival complications that surround the formula. In 1994, a number of interested residents of Bracebridge, including Caisse’s friend Mary McPherson, decided to mount an exhibit to commemorate one of the town’s most celebrated citizens. They were naturally eager to include material from Caisse’s records, but McPherson was unable to retrieve the documents in Gary Glum’s possession. Consequently, she decided to produce a copy of the recipe for Essiac, written in her own hand and notarized, in lieu of Caisse’s version. McPherson also indicated that this document could be given to cancer patients in order to ensure that they were using the correct recipe. Yet the release of the formula for Essiac, long overdue, may be too little and too late. We have no way of knowing what was in the original recipe Caisse acquired in 1922, nor how she may have modified it during her lifetime. Similarly, we have no clue as to Caisse’s experience with the herbal tea—either its preparation or administration. And after seventy-five years of cumulative obfuscation, we cannot easily authenticate the formula or appreciate its relationship to other records of Caisse’s life and
ESSIAC

A: Materials and ingredients

BASE MIXTURE

6½ cups cut burdock root
10 ounces powdered sheep sorrel (pick yourself)
1 ounce powdered turkish rhubarb root
4 ounces powdered slippery elm bark. (Source - Herbalist or Health store.)

Material: - Two gallon or plus capacity stainless steel pot.

B: For one (1) batch of essiac use 2 gallons (each 128 ounces).

BOIL: two gallons pure "spring water" (not distilled water).
BRING THIS TO A HARD BOIL.

Mix base mixture thoroughly and measure out 8 ounces.
Add the 8 ounces of base mixture to the boiled water.
Boil together for 10 minutes.
Turn off stove.
Let sit for 6 hours.
Stir after 1st. 6 hours.
Let sit for 6 more hours.
Now bring just to a boil then let settle for a few minutes.
Now strain off as pure a liquid as possible. (ladle out with glass measuring cup)
Discard all silt. (you will have approx. 210 ounces of essiac).

Bottle the warm essiac into "sterilized" AMBER glass screw top bottles - DO NOT USE PLASTIC.
Tighten well.
Store in a cool dark place.
Refrigerate after opening. Shake well before each dose

USES;

TONIC OR PREVENTATIVE

1 tsp essiac + 2 oz warm spring water
Take 2 tablespoons essiac and 4 tablespoons of warm spring water
mixed, 2 to 3 times per week. - Take on an empty stomach
before bed. (No food or drink for at least 2 hours.)

THERAPEUTICALLY

Same dosage except take 2 times daily. (no food or drink for 1
hour after morning dose.

Figure 1

The "real" recipe for Essiac? Copy courtesy of Elene J. Freer, Curator, Bracebridge Historical Society.
times. Although the shroud of secrecy has finally been lifted from the recipe, it is an orphaned document, without ancestors or siblings.

Despite the many strange and frustrating aspects of the story of Essiac, it would be inaccurate to suggest that the history of alternative medicine is therefore entirely inaccessible. Newspapers and magazines frequently contain references to the debates over unconventional medicine as well as clues to the lay perspective in the controversy. Regular medical journals and the records of medical organizations provide important insights into professional attitudes and opinions. Since governmental agencies are often drawn into the debate about unconventional medicine, their records may also contribute to our understanding of alternative practitioners and therapies. Nevertheless, as the secret life of Essiac demonstrates, the history of unconventional medicine often presents a formidable challenge for historians and archivists alike. The documents of alternative practitioners are seldom as plentiful as those of physicians; often they are less accessible. The attitudes of the alternative medical community are partly responsible for the secrecy surrounding unconventional treatments, but, as we have seen, the medical and political authorities may also erect barriers to our knowledge of the medical past. Furthermore, legislation designed to protect our national and cultural heritage seldom extends to include the records of healers who are considered socially or medically marginal. As daunting as the task may seem, however, we must continue our efforts to uncover, recover, and preserve documents pertaining to the history of alternative medicine; for while they remain hidden, our understanding of the history of medicine will be incomplete, at best.

Notes

1 This article, derived in large measure from my doctoral dissertation, was made possible by support from the Social Sciences and Humanities Research Council of Canada, the Hannah Institute for the History of Medicine, and the Fulbright Foundation. I would also like to thank Ron Numbers and John Bingham for their comments on earlier drafts of the paper.


3 Gary L. Glum, Calling of an Angel (Los Angeles, 1988), pp. 16-18; Sheila Snow Fraser and Carroll Allen, "Could Essiac Halt Cancer?" Homemaker's Magazine (June/July/August 1977), pp. 12-14; "Doctors Back Nurse."

4 Rene Caisse, quoted in Glum, Angel, p. 16.

5 Glum, Angel, pp. 19-20; Fraser and Allen, "Essiac," p. 16.

6 Rene Caisse quoted in "Doctors Back Nurse."

7 For a fuller discussion of the controversy surrounding unconventional cancer therapies in this period, see Barbara Clow, "The Problem of Cancer: Negotiating Disease in Ontario, 1925-1945," (Ph.D. Dissertation, University of Toronto, 1994).


9 Questionnaire completed by Rene Caisse, Commission for the Investigation of Cancer Remedies, October 1938, R.C. Wallace Papers, Coll 1024b (hereafter Wallace Papers), Box 1, File 1, Queen's University Archives.

10 See Case Books 4-6, Wallace Papers, Box 1, Files 9-10.

11 "Miss Caisse Remedy to be Investigated," Toronto Daily Star (9 August 1935); "Health Minister Says Bracebridge Method Will be Investigated," Toronto Mail and Empire (25 September 1935).
14 "Cancer Cure to be Probed," Windsor Star (15 March 1937); "Visits Sir Fred Banting About Cancer Treatment," Toronto Telegram (16 March 1937). See also Fraser and Allen, "Essiac," p. 18 and Glum, Angel, pp. 36-37.
17 Caisse, quoted in "Proceedings of A SubCommittee," p. 3.
18 "Bill 1937 -- An Act for the Investigation and Control of Remedies for Cancer," (5 March 1937), Cancer Records, File 12.4; "Act Planned to Control Cancer Cures," Toronto Globe and Mail (5 March 1938);
20 "Caisse Terms Probe 'Laughable','" Toronto Evening Telegram (8 February 1938).
22 Harold Kirby, Minister of Health, Ontario, 30 May 1938, Cancer Records, File 13.11; "Cancer Clinic Remains Closed While Statesmen Pass the Buck," The Bracebridge Gazette (9 June 1938); F.S. to Kirby, 23 June 1938 and L.R.F. to Kirby, 7 July 1938, Cancer Records, File 13.13; Caisse to Cancer Commission, 27 October 1938, Wallace Papers, Box 1, File 1.
25 Rene Caisse to H.R.H. Prince Philip, 16 June 1960 and Esmond Bulter, Secretary to the Governor-General of Canada, to G.D.W. Cameron, Deputy Minister of National Health, 3 August 1960, National Archives of Canada, RG 29, vol. 1175, File 311-C1-4, part 2. According to K.J.R. Wightman, Director of the Ontario Cancer Treatment and Research Foundation in the 1970s, Caisse also approached the Queen, the Prime Minister, and "every new minister of health... It has become a sort of hobby to keep writing to people of higher and higher ranks." Wightman quoted in "Cancer 'Cure': Only 2 of 40 Show Signs of Improvement," Ottawa Citizen (7 September 1977).
26 Memorandum of Charles A. Brusch, Director, Brusch Medical Center, Massachusetts, 3 July 1982, Health Protection Branch (hereafter HPB), Bureau of Human Prescription Drugs, Health and Welfare Canada. See also C. Chester Stock, Vice President and Associate Director for Administrative and Academic Affairs, Memorial Sloan-Kettering Cancer Center, to Matthew Dymond, Respirin Corporation, 14 July 1978, HPB.
29 Caisse to McGibbon, 13 October 1977, McGibbon Papers. See also "Lab Test Secret Formula of Cancer," Toronto Star (25 October 1977); and Glum, Angel, p. 147. According to Glum, Caisse received $250 per week for six months, or approximately $6,000, from Respirin Corporation in return for the Essiac formula.
32 Glum, Angel, p. 157.
33 Ibid., p. 163.
34 Ibid., pp. 231-33.
37 According to the 1975 Cultural Property Export and Import Act of Canada, documents are designated as protected property if they are of historic interest or worth more than $500. See The Protection of Movable Cultural Property: Compendium of Legislative Texts 2, pp. 55-69.
38 Fraser and Allen, "Essiac," pp. 38 and 40; Glum, Angel, pp. 135-37.
39 Stock to Dymond, 14 July 1978, HPB.
41 A.B. Morrison, Assistant Deputy Minister, Health Protection Branch, Health and Welfare Canada to Dymond, 12 October 1978, HPB.
42 Henderson to A.J. Liston, Director General, Drugs Directorate, Health Protection Branch, Health and Welfare Canada, 25 July 1985, HPB.
47 “Essiac is Nowhere,” Bracebridge Examiner (7 February 1988); Stan Darling, M.P. Muskoka-Parry Sound, to Maureen Law, Deputy Minister of National Health and Welfare, 2 March 1988; and E. Somers, Director General, Drugs Directorate, to R.C.B. Graham, Acting Director, Bureau of Human Prescription Drugs, 5 July 1988, HPB.
49 Jake Epp, Minister of National Health, to Darling, 22 July 1988; and “Briefing Information on Essiac as an Herbal Tea,” 17 March 1988, HPB.
50 “Essiac - An Ineffective Cancer Treatment.”
51 In recent years, a number of authors have written about Caisse or about their experiences with Essiac and information about the therapy continues to circulate through small newspapers and flyers. See, for example, Byron F. Tylor, Cancer, There is Hope (Burnaby, 1993); Michelle Fletcher, “Thuna’s – Over a Century of Herbs on the Danforth,” Cabbagetown and Riverdale News (17 January 1993); “Essiac: The Rene Caisse Story,” Common Ground Magazine (Summer 1993), pp. 24-25. At the same time, information about Essiac is disseminated through alternative medicine advocacy groups, such as the Cancer Club in Toronto and the International Association of Cancer Victors and Friends, which has chapters in Canada. For further information about these networks in the United States, see Richards, Vitamin C, pp. 45-51; and Unconventional Cancer Treatments, pp. 169-70.
52 Personal communication, Elenie Freer, Curator, Bracebridge Historical Society, Bracebridge, Ontario to author, 26 October 1991.
58 Both the Ontario Medical Association and the College of Physicians and Surgeons of Ontario kept important documents pertaining to the history of Essiac and other unconventional cancer treatments in the province. In the spring of 1992, this material was made freely available to me, perhaps partly because the College was then under considerable pressure to disclose certain aspects of its own history. The American Medical Association also has an extensive collection of relevant documents, though
access may be determined by administrative constraints. See Arthur W. Hafner, James G. Carson, and John W. Zwicky, eds., Guide to the American Medical Association's Historical Health Fraud and Alternative Medicine Collection (Chicago, 1992).

59 The Archives of Ontario is an especially rich source of information on unconventional cancer treatments, at least in the years after 1934. Queen's University Archives holds records of the Commission for the Investigation of Cancer Remedies because Principal R.C. Wallace was a member of the Commission for many years. Further, he was a member of a sub-committee that investigated Caisse's work in 1939. The National Archives of Canada has a limited amount of material pertaining to the controversy over alternative cancer remedies in the 1930s, and the Health Protection Branch of Health and Welfare Canada has more recent records on the Essiac trials.