

# **CLOSED TUNNEL THEORY OF CANCER**

(12 Pages)

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## Introduction:

Several decades ago, Father Flannagan of the famed *Boy's Town* in Nebraska said, "There's no such thing as a bad boy." He could have added, a bad boy is a good boy reacting to a bad situation. Resolve the bad situation and you've resolved the bad boy. Basically, this was Father Flannagan's approach to resolving juvenile delinquency. With this very brief essay, I'd like to propose a variation of that approach to juvenile delinquency and apply it to the body: *There's no such thing as a bad body cell*. Using this approach, I intend to offer a redefinition of an old body malady known as *cancer*.

As I do so, however, be it known that I do so only as a layman with an idea. I am not a doctor and am in no way qualified to offer advice. My ideas are strictly conceptual in nature and are not based on any factual research or medical evidence known to me. My arguments are basically logical arguments of a somewhat philosophical nature applied to a physiological matter. Of course I think they are valid arguments, regardless of any personal scientific understanding or lack thereof. Otherwise, I would not take the time nor the trouble to relate them.

## Why I Am On The Case

Before we get on with it, though, perhaps it would be interesting to know how I even started speculating on such a thing as cancer. All ideas have their start someplace. In the case of the idea I will present in this essay, it started on Stone Mountain, a few miles from Atlanta, Ga. It was a cold early morning in Feb. in 1982 and at around 7 A.M. I was coming down the mountain. I had been hiking and was wearing little, knowing as I do that a body in action generates its own heat. Half way down the mountain, I encountered a very heavily dressed couple going up. There I was with just a little covering and there they were dressed like Eskimos. The contrast was rather stark, to say the least.

Neither of us knew what to say for a moment, as each of us was caught off balance by the other. They did not expect one lightly clad and I did not expect anyone to be hiking on a cold morning as I was. To break the ice, pardon the pun, I remarked: *Aren't you guys about to burn up?* I thought it was kind of funny, but they scowled at me and went on their way.

As I proceeded down the mountain, however, I began to take my off-the-cuff quip seriously. Perhaps it was true that they in their heavy clothes were almost literally "burning up". As strange as it might seem, maybe I was the far wiser of the three of us by not overprotecting myself and overheating myself. As it happened, I had just learned of the unexpected and quick death of my dentist who had been an exercise nut. This guy would run in his sweat clothes to the dental office. The thought occurred to me that maybe both he and the two of my encounter on the mountain had been guilty of overheating the body while thinking they were promoting good health.

Since my dentist friend had just died of cancer, I asked myself – could there be a connection between cancer and overheating or overprotecting the body? By the time I reached the bottom of Stone Mountain, I was eager to pursue the idea. Immediately, I checked out several books on cancer and even bought a few. I was determined to play like a detective and chase a lead that might end in apprehending a "culprit" called *cancer*. Keep in mind that, like Father Flannagan, I have no enemies in life – only friends. In researching cancer, I was really trying to get to know a friend.

As I pursued what I thought might be a lead, however, it soon became apparent to me that a whole herd of detectives have been following what they consider their own lead – or leads. As it is, our leads are different. Almost all of the detectives already trying to track down the cause of cancer have been convinced of one suspect. Unbelievably, I found myself taking aim at another suspect. The problem is that all the other detectives on this case have degrees classifying them as “experts” whereas I have no degree nor even any official education on the matter I am trying to resolve.

Initially, then, of course, I should be considered the dunce of all the detectives on the case of cancer. Indeed, I may well be that dunce; but on the other hand, maybe I can lend something to the search for a killer that the others cannot simply because I started out trying to pursue a different evidence. In following a different evidence, I may also be tracking to a different suspect. In brief, the evidence I think I found is “overheating the body”. None of the other traditional detectives on the case have uncovered this lead that might turn into evidence. Thus, Detective Francis William Bessler, previously uneducated and still unheralded, may find something relevant in the case of tracking down the killer (and friend) called *cancer* that all other detectives have missed. I admit, it is not likely, but as way of introducing why I am even on this case, I am beginning to address the court of public opinion.

Now, let us continue.

### **The Defective Genetics Theory**

What is the traditional theory of cancer? According to conventional traditional opinion, what is cancer and what causes it? Near as I can tell, the traditional and almost unanimously accepted explanation of cancer is that it is a malignancy within the body that occurs when normal body cells go awry and multiply at an abnormally excessive rate. This abnormality most frequently results in tumor like growths that impede normal body functions. Traditionally, it has been assumed that the reason for this abnormal growth or multiplication of normal body cells is that for some unknown reason, the regulatory mechanism – or mechanisms – of the guilty cells become defective. That which triggers cellular division is upset and derailed, thus causing runaway activity of the defective cells. Sick cells overtake healthy cells; and chaos results.

Let’s keep in mind now that we are talking about genuine body cells derailing the system, not external germs or viruses. Let us analyze in brief the natural conclusions of this theory that I have taken the liberty to name the “*Defective Genetics*” theory. As I see it, there are two main issues it expresses. First, cellular division is due to genetics if it’s a violation of a genetic mechanism that stimulates excessive division; and second, a deranged and sick cell can attack or immobilize and overcome a healthy cell.

Taking the first conclusion at hand that cellular division is a result of genetic direction, I suspect that to be a false conclusion. It would seem to me that cellular division must be an automatic process, depending primarily upon nutritional supply. I doubt that the genetics of a cell governs cellular division, although it probably does affect and effect cellular development in terms of use of assimilated input. We’ll go into this a little deeper when discussing my own theory about cancer; but for now, let’s just say that I don’t think the genetics of a cell dictates the division of a cell. Rather, it’s the quantity and quality of cellular food available, so to speak, that determines cellular growth and cellular division. The genetics of a cell probably only directs internal cellular activity – as if the brain of a cell; but it depends entirely upon food supply (including hormones) to carry on.

It would be interesting to test the *defective genetics* idea, as I have called it, by isolating two lab batches of cells – one comprised of normal body cells of a given organ and the other comprised of so called cancer cells from that same organ – and then submit both batches of cells to identical stimuli of varying input and conditions. Maybe cancer research has already done this and the results have verified their expectations. If they haven't done this, maybe they should. Of course, I could be wrong, but I suspect that the findings would show that under identical circumstances, alleged cancer cells with alleged defective regulatory mechanisms would not multiply any faster than regular cells. If that were the end result, the assumption that alleged cancer cells multiply at an excessive rate would be disproved; and the theory that alleged cancer cells have defective regulatory mechanisms would become very suspect; or at least, it should.

Concerning the second conclusion of the *defective genetics* theory that a sick cell can dictate to a healthy cell, that, too, seems rather implausible. If a cell is sick for whatever reason, it is not likely it could have enough stamina to direct anything, let alone take on a role of a conquering warrior. A sick cell would be like any other sick thing – a victim, not a controlling agent. The idea that cancer is due to the unchecked activity of defective and sick cells assumes that in sickness, there is strength.

Even if it is true, however, that irregular multiplication of cells is due to a defective regulatory mechanism within the genetics of victimized cells, what caused the defect? Could a cell be isolated and have its genetic structure bombarded or burned or whatever and still survive to become a terror on the loose? I doubt it. A dead cell is not a cancerous cell. Cancer cells are living cells out of control, it's assumed; but normally speaking any assaulted cell violated to the point of decimation (as might be claimed of a cancer cell) would likely soon become a dead cell, not a monster free to fire all torpedoes. Something must cause a defective cell to become defective in an environment where some cells of the same family are victimized and their brethren left intact. If the traditional explanation of cancer is correct, it seems to me that a primary question to be answered is: what causes the defect? The primary question should not be: what causes the alleged defects to act as they do?

At this point, I'd like to remind you that I am a layman and have no knowledge of lab evidence regarding cancer; but I must admit, a big question in my mind is: what reveals a cell to be cancerous? A biopsy specimen is taken to a lab and the lab technician investigates and reports that sample to be benign and non-cancerous or malignant and cancerous. What evidence revealed in a lab declares the status of a cell? Are cancerous cells flatter or fatter or rounder or more jagged or redder or browner or what? Can a lab technician see the genetics of a cell through his or her microscope? Even if a cancerous cell can be identified visibly, why is it assumed that it has a defective regulatory mechanism that turned it that way? Or is it possible that a cancerous cell does not appear significantly different than a normal cell and the only indication that it is cancerous is that it appears to be out of place and therefore, suspected of invasion? I don't know the answers to these simple questions. Maybe if I did, I'd be more inclined to believe there's validity to the theory of *defective genetics* of a cancerous cell. As it is, I remain unconvinced that the traditional explanation of cancer is at all accurate.

### **Adding Commentary – October 24th, 2003**

Life for me is an unending series of wonders. I may be wrong as I wonder, but I never cease to tire of wondering. Considering the paragraph above at the time that I wrote it many years ago, I look back now and see what I said – or what I was wondering. I was wondering what a cancer

cell looks like and even theorized that it may not look any different than a “normal” cell of the same organ.

Well, thanks to a fantastic discovery of yesterday, via a friend, Clyde Edmiston, perhaps the smartest guy I have come to know, I now know different. Clyde taught chemistry at the University of Wyoming for over 30 years and seems to me to be a veritable walking encyclopedia. We just recently met through a local Unitarian congregation here in Laramie. I gave Clyde a copy of this paper on cancer – minus this little section and another I will add later.

Clyde knows chemistry, not cancer, but he was very helpful in resolving for me one nagging question I have had for many years. Do cancer cells look different than normal cells? Now, I finally have an answer. Yes, they do. In a meeting with Clyde yesterday, he shared a book with me – a book that includes a bit of a treatise on cancer. In that book, there were two pictures side by side – one of a particular “normal” cell and one of an “abnormal” cancerous cell. The major difference in pictures is that the normal cell was by itself, surrounded by some extra cellular (or intercellular) material; and the cancerous cell was not by itself. The cancerous cell was not really a cell, but a cluster of cells, stacked on top of one another, with almost no extra cellular material about. For what it’s worth, however, the cancerous cells were not only more abundant, but they seemed odder as well. They seemed fatter and perhaps more oddly shaped and there seemed to be hair like growths on them.

Be that as it may, let me now continue with my paper as I handed it to Clyde; but later I will add another October, 2003 comment about what Clyde showed me yesterday. I choose to add these comments rather than alter my original article because I think it is a bit more honest to do it that way. I pride honesty more than anything in life. Rarely have I found all the answers I have sought with a first speculation. As more and more knowledge becomes available, we learn more than we did before. Speculation is the key to all learning, however; and without it, no one would ever learn a thing in this life. I am learning as I write this – even though I wrote it originally it 1982. Twenty-one years ago I started with a speculative idea; and now twenty-one years later, I am continuing my speculation and adjusting with new data. Perhaps you can appreciate the whole trip more if you see where I have added an adjustment.

*End of Added Commentary – October 24th, 2003*

To continue, I believe our cancer research and researchers are guilty of plain ole unadulterated blindness. We may be clinging to a second assumption without having validated a first assumption, upon which the second assumption is based. We may have assumed cells to be defective without having proven them to be so; and then based on that assumption, we may have proceeded to assume further that these alleged defective cells are guilty of anarchy. If so, that’s like looking at the Chinese and declaring them inhuman because of their slanted eyes and then assuming they are guilty of some outrageous crime because they are inhuman. The Chinese are not inhuman because they have slanted eyes; and more than likely, cancerous cells are not defective just because they look different.

It’s only a hunch on my part, but I suspect that the feeding and growth and division of cells are strictly automatic processes entirely dependent upon food supply and availability and in no way are subject to varying genetic decisions among the same family of cells. In short, cellular division and growth are likely due far more to supply conditions than to genetic decisions. If so, any “defectiveness” within a cell’s genetic regulatory mechanism could not in itself explain cancer. If it’s true that our cancer research has assumed that cancer is due to irregular

multiplication of cells due to *defective genetics*, it may be no wonder that we have been chasing vapor trails to find a cure. How can we find a cure if we don't even know the cause?

### **An Alternative Explanation**

There's no such thing as a bad body cell or a body cell gone bad. This is my gut feeling and amounts to my starting point. As the traditionalists of cancer research assume for a starter that cancer cells are defective and rebel body cells, I assume for a starter that there's no such thing as a bad body cell or rebel body cell. Certain cells may look different and even act different, but that doesn't make them bad.

Consider this alternative explanation, if you will. What causes a cell to divide? I know we have asked that question before, but for emphasis, let's deal with it again. If I were to take a single cell and isolate it from any outside influence, would it divide all by itself? Could I force it to divide by bombarding its so called regulatory mechanism with something and thereby altering it? Again, I doubt it.

As previously stated, that which must influence cell division must be as much external as it is internal; and perhaps it is the analysis of an external cause of cell division rather than an internal cause of cell division that is indeed the key to irregular cell division. If nothing else, that cell must require food to survive and multiply; and perhaps that's where the answer lies in determining why cancer cells multiply at an irregular rate.

So, what is it that's the catalyst for cell division? At least partially so, the catalyst is, or are, hormones. To put it plainly, when hormones are present, cells divide. Hormones are at least one of the external stimulants of cell division – although, of course, nutrients are as essential.

Now, consider this. If the presence of hormonal substance is abnormal, would that not likely result in abnormal cell division? Thus, if not enough hormonal substance is present, would not abnormally low cell division likely result? And if too much hormonal substance is present, would not abnormally high cell division likely result? My Friends, the latter is cancer – abnormally high cell division. Perhaps here is where the answer lies and not in any defectiveness of genetic material.

Now, what could cause the presence of too much hormonal substance? Certainly an overactive organ that produces or generates the hormone could be the cause, but also consider this possibility.

As I understand it, the lymphatic system of the body normally drains off cell excrement, that is cell waste. It also drains off intercellular fluid which likely contains hormones and unused nutrients. If the lymphatic system were to malfunction and normal drainage was prevented as a result, what would likely happen? Would not an organ so plugged be susceptible to an oversupply of hormones and nutrients? And when that happens, would not the irregularly high amount of blocked cellular food likely cause abnormally high cell division and result in what we call *cancer*? Irregular cancerous cell division could then occur to actually eat into the lymphatic system itself, thus preventing any further drainage and setting up a malignant or life threatening situation.

Thus, what it might come down to is, in the case of a malfunctioning lymphatic system, what is it that could cause the malfunction in the first place? The lymphatic system is comprised of vessels that could be called *tunnels* which carry fluids. If the body were subjected to excessive heat, the

tissues surrounding the lymphatic vessels might expand, causing constriction of the vessels – thus preventing normal functioning. Because drainage is obstructed, hormones and cellular nutrients build up, as if in a dam, and stimulate excessive cell division. It would seem like if a cell is presented with food, it would do the natural thing – eat or assimilate that food. Thus, if it were presented too much food, it would eat too much and divide more quickly than normal. If this is so, cancer may have nothing to do with an assumed defectiveness of genetic material. Of course, I suspect it doesn't. Leastwise, that's the argument I am proposing in this little essay of sorts.

That which it might amount to is that at least one of the causes of cancer may be an overheating of the body or any given organ in which cancer has developed. Anything that bears the heat producing stimulus would then be the carcinogen or carrier that activates the process. That could be heat from sources external to the body or heat resulting from the energy processes of the body in digesting food and processing radioactive stimuli.

Smoking could lead to cancer by coating the lungs, thus prompting a retention of heat in the lungs much like blankets cause a retention of body heat. The body does not need too much heat anymore than it needs too much of anything. Too much heat could cause expansion of tissues surrounding needed flowing vessels – which could lead to the closing of those vessels by constriction. Smoking, taking long hot baths without cooling, wearing too much constrictive clothing or sweat wear, taking in too much radiation, lying too close to a fire or too long in the sun, eating too many heat producing foods – could all lead to cancer. That is, of course, if my speculation is correct.

Along with a simple overheating of the body, a number of other things could impede normal lymphatic vessel functioning as well and thus dispose the body to cancer. Viruses, perhaps, and germs, too, could infect and block vessels and prevent their normal drainage function; but the bottom line is the same. It could be a malfunctioning of the lymphatic system, regardless of cause, that could be the culprit that sets the table for cancer – not a defectiveness of the genetic machinery of the cells themselves.

Get rid of the virus, if the cause is a virus, and perhaps remission of the cancer will occur. Get rid of the germ, if the cause is a germ, and perhaps remission of the cancer will occur. Get rid of the heat carcinogen, if the cause is overheating the tissue, and perhaps remission of the cancer will occur. And though we haven't mentioned the possibility of tension causing a constriction of the lymphatic vessels, get rid of the tension, if that's the cause, and perhaps remission of the cancer will occur.

So – there it is, a new explanation for an old foe. Could it be that we have been on the wrong track from the beginning in assuming that the disease of cancer is far more complex than it actually is?

### **Closed Tunnel Theory**

Originally, I wrote a version of this speculative study of cancer in 1982, but at that time I did not give my theory a name. I passed on my unprofessional speculation without a name for my theory on cancer to cancer societies in Atlanta, Denver, and New York. Apparently my work was not impressive enough for comment because I received no official responses. I did, however, receive one unofficial response verbally from a secretary out of the Denver branch. She said that she thought my ideas were “*absolutely brilliant*” and she could not wait to pass them on to her superiors. It seems her superiors did not share in her enthusiasm because there was no further response.

In 1990, after eight years of silence, I decided it was time to open the box and rewrite my thoughts – and also to attach a name to my theory. It seems all things need names to be recognized at all. So, on that second attempt, in 1990, I gave my theory a name, but I also gave the conventional theory of cancer a name as well. The conventional theory I called the *Defective Genetics Theory*. I named my own theory the *Closed Tunnel Theory*.

After 1990, once again I spread my thoughts about – even tried to get publications like *Reader's Digest* interested in publishing them; but to date, as of this year of 2003, I have been unsuccessful in getting any response from anyone on an official basis. Friends have responded and friends of friends, but no actual official within medical research or medical treatment has offered me a response.

In 1994, I did receive a kind of response, however, from a fellow computer programmer – with whom I was working in Harrisburg, Pa. This one has a father who is a doctor. I asked my friend to ask his father to review my ideas. The response that came was by word of mouth only where I was hoping for the good doctor to write me so that I could study his comments. All I received from the good doctor, however, was that my ideas are “*too ludicrous for comment*”.

I might be remiss, however, if I did not offer the response of my own personal doctor in Atlanta. In 1990, I gave it to him to read. When I asked him what he thought about my ideas, he said that he started to read it and his dog started barking. He said that he took that as a sign. If his dog did not want him to read it, then it must not be worth reading. I kid you not. That is what he said. Earlier in 1987, I had been diagnosed with gall stones with a recommendation of gall bladder removal. I sure am glad that the doctor's dog was not present for the surgery. Otherwise, he may have started barking and the good doctor would have taken that as a sign that his dog objected to my gall bladder removal – and I would still be hurting with gall stones.

Maybe these ideas I have are so crazy as to merit no attention – or comment. I am willing to admit that is not only possible, but leaning toward the probable. It is unlikely that a relatively ignorant layman could discover something that all sort of experts have bypassed. On the other hand, maybe those experts have bypassed seeing the obvious for being too caught up in the rut of having assumed something to be true that is not true. I mean, if all the experts who are trying to resolve cancer have signed on to the *Defective Genetics* explanation and that explanation is not correct, then it is no wonder that all the experts are on the wrong trail. It is not likely, I admit; but it is possible; and it is because it is possible that I am once again typing out these thoughts. When I finish, once again, I will spread the resulting effort about and see what happens.

**To Review:** Essentially, my theory, *ludicrous* as it may sound, considers blockage of body tunnel systems to be the principal cause of cancer. So it seems appropriate to call my theory a *closed tunnel* theory. Perhaps, *blocked tunnel* or tunnels would be a better way to put it. When the vessels of the lymphatic system are blocked, normal body cells grow and divide more rapidly than normal for having an excess of available food and form little colonies and become tumors. These colonies eat into the essential body organs, causing the affected organ or organs to fail. That's the basic theory called the *Closed Tunnel Theory*.

Of course, there are bound to be a bunch of objections. I will try to anticipate the more likely ones.

First, there's the question of metastasizing. Cancer is considered to be dangerously threatening because it appears to have a nature of metastasizing or spreading to new sites. Does the *Closed*



*Tunnel Theory* provide an explanation? Does it explain why so called cancer cells would travel and infect other organs other than the assumed organ of origin?

My guess is that traveling cancer cells may be far more an illusion than a reality. I suspect that the condition of overheating – if that's the catalyst – may affect multiple organs simultaneously because the heat factor may be the same. This would lend itself to an appearance that the cancer of one organ originated from the cancer of another. Actually, the cancer may not spread, as assumed, from one single source, but occur wherever tunnel blockage occurs.

How about a cancer that does not result in a tumor, like Leukemia, for instance? Can the *Closed Tunnel Theory* offer an explanation? How can the overabundance of white blood cells, or a so called proliferation of leukocytes, occur in the blood? There's no tunnel blockage in the blood. Is there?

I would answer this objection by saying that Leukemia might occur, not only because there are too many white cells, but maybe more accurately because there are not enough red cells. White cells may be given bad press as the cause of the scarcity of the red cells, but perhaps that's not the answer. Perhaps the explanation for a scarcity of red cells lies with the red cells themselves and the conditions surrounding them in the blood plasma. Perhaps white cells populate the blood to an excessive degree simply because the red cells lack some essential and therefore cannot reproduce – like sterile sperm perhaps. Given that the red cells cannot use their portion of the nutrition in the blood plasma, the white cells might use what the red cells cannot use and therefore populate within the blood more than normal, throwing the blood into an imbalance.

Leukemia might be called a cancer because it seems to amount to a proliferation of one type cell to the detriment of another type, but personally I would not call it a cancer. I'd simply call it a blood disorder; and I'd look toward the red cells for an answer, not accuse the white cells of crowding the red cells into oblivion.

### **Cancer Cure and Prevention**

As previously discussed, there may be many causes of cancer, but it is another of my gut feelings that most of it is caused by heat – too much heat, quite often because of too much constriction and protection. Of course, preventing cancer is much easier to handle than arresting it or curing it, but the same measures needed to prevent it may be the best measures needed to arrest it too.

In short, don't overheat the body. Unwrap it and let it do its thing. Don't smother it. According to the *Closed Tunnel Theory*, doing so might cause overheating; and that might lead to vessel or tunnel blockage.

It might be worthwhile to note here that the bra could be a dangerous item for some ladies. Imagine for one little moment that you are a breast. How would you like it being trussed up and imprisoned and refused freedom to move and breathe? Of course, I am guessing, but I do suspect that the bra is quite possibly the single greatest cause of breast cancer for the ladies as briefs are for prostrate and testicle cancer for the men.

Perhaps the best of all external measures to prevent and arrest cancer is nothing more than nakedness, at least in warm weather; but I am willing to bet that in a vast majority of cases of cancer, the patient does just the opposite. Rather than loosen up, I bet they bundle up, thinking

erroneously that the body needs protected. If my theory is correct, that's the last thing any body needs – especially one with cancer.

The three biggest killers to set up cancer could be excessive exposure to the sun or heat, restrictive clothing or sweat wear, and long hot baths or saunas - although as long as the body is adequately cooled after being subjected to excessive heat, I suppose that no long term problems should ensue. Ideally, however, it should be clear that avoiding too much heat altogether would be the far wiser course; and that can best be achieved by wearing nothing at all.

About current treatments of cancer based upon the *Defective Genetics* perspective, I would rather not comment – at least not in any detail. Chemotherapy and Radioactive treatments may well be effective in terms of reducing cancer colonies. Once cancer has been started and has been allowed to develop into a crisis, I would not rule out the current treatments for myself if I were to get cancer. On the other hand, if confronted with a diagnosis of cancer, I may thumb my nose at all current practices because they are based on what I consider a wrong definition of cancer. I have no idea how I would react. Upon reflection, I might concede to current treatments or I might go my own way. My guess is that I would go my own way, prepared to call it an exit should that way fail. There are no guarantees in life; but should I come down with cancer, I reserve the right to decide then how to deal with it.

### **A New Ending – October 24th, 2003**

Remember – a little while back I added a comment from October, 2003. Now, let me add another; and in the process, I will replace the old ending with a new one.

In concluding this mini offering, I must admit that I may well be in over my head in speculating about a subject about which I know so little; but I do not think I have the right to assume that my thinking cannot be right. Who has the right in this world to assume he or she is wrong when if he or she is right, so much will have been lost in not going forward with an idea? So what if I am wrong. It won't be the first time someone has been wrong. Right?

My friend, Clyde, tells me that some cancer research suspects that cancer cells are like immortal cells in that they seem to be cells that can't age. I have no idea at this time in my speculation about cancer to even attempt a comment on that – except to say that since cancer research knows a whole lot more about cancer than I do, its suspicion is more likely correct than my own.

Without getting into details, as I understand it, it is believed by some that normal cells age with each division. For some reason, it is believed, that cancer cells lack that ability to age. Perhaps at some point these “immortal” cells – which may have been with us since infancy – get out of hand and go berserk. They begin to divide erratically - with each child cell retaining the “immortal” aspect of the parent cancer cell. Normal body cells lack this failure to age apparatus and get wiped out by the much stronger “immortal” cancer cells.

I must admit that this theory does sound smart, even if in the end, it isn't. I just do not know. Smart or otherwise, however, my current speculation tells me that my own chances are now even greater of being right than before. Before what? Before my chat with my friend, Clyde – and before the pictures he showed me. Wow! What a difference a picture makes. Before that picture I suspected that cancer cells may become overactive simply because they had too much to eat. My speculation – as you should know by now – is that due to blockage of lymphatic vessels, normal cells grow out of norm because they are trapped into doing so. They grow and divide

more than normal because they can't escape. It may be as simple as that. In being blocked from traveling in their own time down the lymphatic tunnel system into the body's evacuation system, they can't get out because the tunnels are blocked. Being blocked within all those nutrients swimming about in the intercellular fluid, they eat like mad, divide like mad, and act like mad; and in all this madness, only "normal" processes are occurring – normal in that given availability of food, a normal cell can only eat that which is provided.

And now, having seen a picture of a cancerous situation, I am inclined to believe even more that such is the case. Picture in your mind's eye, as it were, several cells lost somewhat in a sea of intercellular fluid. Now, picture in that same mind's eye some time later - a few cells have become many. But according to the picture Clyde showed me, the intercellular material or fluid that had appeared in the picture with the normal cells had disappeared in the picture with the cancerous cells. Where did it go? How could it be otherwise? It must have gone into the cells that have replaced the cells of the previous scene. Whatever happened between the first and second pictures did not only involve a multiplication of cells, but probably as importantly, a disappearance of intercellular fluid. Perhaps cancer research should study the reason for the disappearance of intercellular fluid and therein find the real root of cancer.

As the saying goes, this may not be *rocket science*. I do believe we have been looking away from the truth in thinking that cancerous cells become so due to a defective genetics within. Perhaps in our dedication to complication, we have wanted the explanation to lie in defective genetics; but wanting it will not make it so if it isn't so. Will it? Perhaps, as a society, we have wanted a defective genetics explanation because that explanation lends itself to an industry of drugs and to an economy, profiting via drugs. And so maybe we have been deliberately looking away from the real truth because the real truth does not lend itself to solution via drugs – and industry.

What is the solution to cancer if cancer is only dealing with a blocked lymphatic system? I'd say, *Cool it, Baby!* Stop overheating your system with external or internal heat processes if you do not want it to go awry. *Cool it, Baby!* Stop crowding your body. Let it live. Let it have its space. Let it breathe!

When I saw the picture of a cancerous colony that Clyde showed me, one of my first reactions was *too many cells in too little space*. As humans, I believe we are doing the same thing. We are bunching up our populations into too little space. In a way, as our bodies are reflecting cancer due to failure to loosen, our societies are beginning to reflect a cancer of their own. It is not natural to do what we are doing; and yet for economic reasons, we are doing it. It is not natural to crowd so many people into so small a space; but we are high rising ourselves to potential disaster by stacking people on people rather than spreading out. If something tragic happens on the first floor of a high rise, the top 140 floors could be doomed; and yet we continue high rising – just daring disaster to happen.

It is amazing what a picture will show – if we have eyes to see it. When I saw that picture that Clyde showed me, it was like a picture of New York in the body. All those cells stumbling all over one another and stacked on top of one another. It ain't natural – yet once the process has been given a green light, it is natural for cancerous cells to react or act as they do. It ain't natural that they had to be compressed, but being compressed, it is natural that they survive as they do – or try to survive.

I am sure some would argue that cancerous cells are defective in that they take on a new form. If you will remember, the picture that Clyde showed me offered fatter and odder cells than the norm. But my question is what caused them to be fatter and odder? I think the fatter should be

somewhat clear. The cells got fat because they ate too much – just like any of us would do. The odder part is not within my speculation to resolve. I have no idea why the cancerous cells I saw had hair like growths on them as they did; but I suspect that all of that happened because the cells could not get away. In staying and eating and multiplying and forming colonies where colonies should not be found, each of the members of a colony also assumed a transformation of sort. By finally seeing a picture, some kind of transformation or reformation is obvious to me; but I suspect that it was not due to any defective genetics; though part of the transformation of a cell could well include defecting the genetics. If, in fact, it turns out that a cancerous cell does have defective genetics, I suspect it is the cancer that caused the defect – and not the defect that caused the cancer.

### **A Final Challenge**

Where should we go from here? Demonstrate the truth, I guess. Take two animals of the same kind with similar lymphatic systems as humans, separate them into different environments, feed them the same, and pay attention to the results. If my claim that excessive heat may cause a blocking of the lymphatic system is correct, it should be easy to verify. Feed two critters of the same kind the same thing, but vary the heat in the room of each – making sure that one of the critters has to deal with mildly excessive heat. You won't prove anything by subjecting one to terribly excessive heat. Anything will fail in a hot environment. Make the excessive heat somewhat mild, not torrid. Watch and see what happens. My guess is that the critter in the warmer room is going to fail much quicker than the other.

Oh, sure, I can hear some responding, the critter in the warmer room will fail, but it may not be cancer that results. I agree. It may not. I am speculating now. That is all I have ever done. I am claiming it might be so. Perhaps a few who really want to know if my speculation has merit can do some testing. How else can we find out?

I think the key to this test is to make sure it is conducted with public awareness and audited by an impartial jury. Repeat the test to confirm it with multiple impartial juries; but under no circumstance, leave it to a prejudiced party – like cancer or drug industry - to conduct. I could be wrong. I know that; but if I am not wrong, perhaps it would be wise to start acting much smarter than we have with both our bodies and our societies.

**Thank you so much for taking a few moments to hear me out.**

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