

ST. JUDE RESEARCH HOSPITAL/ST. JUDE MEDICAL/ABBOTT LABORATORIES

CHARITY OR PROFIT DRIVEN COMMERCIAL ENTERPRISE?

ST. JUDE RESEARCH HOSPITAL IS LOCATED IN MEMPHIS, TN AND PRIMARILY TREATS CHILDREN FROM THE MID-SOUTH

1962 – Danny Thomas founds St. Jude Research Hospital and promises a cure to childhood cancer.

1991 – Danny Thomas dies after spearheading St. Jude’s fundraising drives for several decades.

2004 – Marlo Thomas and her siblings, Terre and Tony Thomas create the *Thanks and Giving Campaign* that raises \$700 million a year for St. Jude.

2017 – St. Jude Medical, the medical device manufacturing arm of St. Jude, becomes a subsidiary of Abbott Laboratories, a pharmaceutical company, to create a global medical device giant with total sales of \$8.7 billion in a \$30 billion market

ST. JUDE

2021 – Total Assets of St. Jude - \$7.6 Billion

2021 – Income for St. Jude – 1.2B. ALSAC provided \$975 million. St. Jude received millions more from patients’ insurance companies, government taxpayer grants, royalties, vending machines, etc.

Of the \$1.2 billion in expenses, \$628 million was used to compensate 5,693 employees who received an average compensation of \$110,000. 1,509 employees received more than \$100,000 in compensation. The 12 most highly compensated employees were reported to be:

2021 – ST. JUDE EXECUTIVE SALARIES

- \$1,558,983 – James R. Downing – President, CEO
- \$1,496,461 – Charles M. Roberts – EVP, Director, Cancer Center
- \$1,273,466 – Matthew J. Krasin
- \$1,068,828 – Richard C. Shadyac – Ex-Officio Director (from ALSAC)
- \$1,013,176 – Thomas E. Merchant – Chair
- \$1,006,524 – Ellis Neufeld – EVP, Clinical Director
- \$ 992,591 – Andrew Davidoff – Chair
- \$ 926,569 – Douglas R. Green – Chair
- \$ 869,393 – Ching-Hon Pui – Chair
- \$ 862,285 – James I Mogan – EVP, Scientific Director
- \$ 852,538 – Patricia A. Keel – SVP, CFO
- \$ 809,803 – Carlos Rodriquez-Galindo – EVP, Chair

The 14 most highly paid employees of St. Jude received a total of \$12.7 million in compensation. St. Jude also paid for first class or charter travel expenses, companion travel expenses and tax indemnifications.

[THE AMERICAN LEBANESE SYRIAN ASSOCIATED CHARITIES \(ALSAC\) IS THE FUNDRAISING ARM OF ST. JUDE.](#)

2021 – Total assets of ALSAC \$8,234,655,503

2021 - Total revenue of ALSAC \$2,890,395,094

2021 – [ALSAC EXECUTIVE SALARIES](#)

\$1,558,983 – James R. Downing – Ex-Officio director (from St. Jude)

\$1,068,828 – Richard C. Shadyac, Jr. – CEO and Ex-Officio Director

\$ 693,285 – Emily S. Greer – Chief Administrator Officer

\$ 666,106 – Anurag Pandit – Chief Investment Officer

\$ 657,794 – Emily Callahan – Chief Marketing Officer

\$ 645,450 – Robert Machen – COO

\$ 603,398 – Sara Hall – Chief Legal Officer

\$ 597,641 – George Shadrouti – Chief Strategy Officer

\$ 492,867 – Abed Abdo – CFO

\$ 451,521 – Jeffrey T. Pearson – *Former* Chief Financial Officer

James R. Downing is ALSAC's highest paid executive and has received more than \$7 million in compensation in the last 5 years.

ALSAC paid employees for travel expenses, companion travel expenses, health and social club dues and initiation fees.



[THE IMPACT OF ST. JUDE'S GREED](#)

St. Jude Hoards Billions While Many of Its Families Drain Their Savings

"It was the middle of the night on a Saturday in 2016. Jason Burt was sleeping in his pickup truck in the parking lot of St. Jude Children's Research Hospital in downtown Memphis, Tennessee, where his 5-year-old daughter was being treated for brain cancer. He'd driven more than 500 miles from his home in Central Texas to visit her. A St. Jude security guard peered into the truck and asked Burt what he was doing. Burt explained that his daughter and her mother, his ex-girlfriend, were staying in the hospital's free patient housing. But St. Jude provides housing for only one parent. Burt, a school bus driver making \$20,000 a year, told the guard he couldn't afford a hotel. The guard let the exhausted father go back to sleep."

"St. Jude currently has \$5.2 billion in reserves, a sum large enough to run the institution at current levels for the next four and a half years without a single additional donation." – ProPublica

St. Jude Fights Donors' Families in Court for Share of Estates

St. Jude has arguably the most successful bequest program in the country. They wine and dine potential donors, call them hundreds of times when they know an elderly person is considering donating to St. Jude, and dig into every aspect of their personal life. At times, St. Jude's lawyers argue in court that relatives are not entitled to any proceeds from their families' estates. Vance Lanier, of Lafayette, Louisiana won a long battle with St. Jude over his father's estate with both sides spending heavily on the case. "Think of all the fees for lawyers that didn't go to St. Jude, not one child, not one cancer patient," Lanier said. "Where is the sanity in all this?"

A lawyer in Las Vegas, Cary Colt, who is battling St. Jude in court on behalf of a son whose father died and whose money St. Jude is determined to get, said, "Where I think they cross the line is when they promote the disinheritance of children or families."

Nona Harris and her husband, J.D., who was in bad health, had substantial wealth and no children and Nona had notified St. Jude she was thinking of leaving St. Jude \$6M. St. Jude spent two decades wooing her to insure they received that money. Surprisingly, Nona died first, and J.D. reduced St. Jude's payout to \$2.5 million. St. Jude took the family to court in a long expensive legal battle to receive the full amount while J.D. was dying. St. Jude lawyers claimed he was incoherent and incapable of making decisions. Time after time St. Jude's applications in court were denied. They took their battle all the way to the Supreme Court. J.D.'s nephew Doug Holmes said. "The continued unfounded litigation has caused significant pain to family members, as we repeatedly have to relive the final days of our dear uncle with each of St. Jude's legal filings." He said he had been a supporter of St. Jude, but the litigation had changed his views. "I thought this was a waste of time and money. I will never give them another dime."

In 2017, Fred Jones the ALSAC lawyer who oversees bequest matters, told an Oklahoma court that St. Jude was involved in more than 100 legal fights over disputed estates. Several years later we can assume that the number has only increased. Taking family members to court to wrest money from them when they are at their most vulnerable is beneath contempt, as is using donors' money on legal fees to spend years in court fighting the deceased's wishes. Other charities refuse to take survivors to court as it sends a strong negative message to supporters and the public.

ILLEGAL KICKBACKS, RECALLS AND LAWSUITS

2010 – After a 5-year investigation by the Justice Department, St. Jude Medical and two hospitals are forced to pay out \$3.7 million in claims to settle fraud allegations for paying illegal kickbacks to two hospitals to secure St. Jude's heart device business.

"These incentives have more to do with sales than patient well-being." Warner Mendenhall – Whistleblower's attorney.



2011 – St. Jude, under investigation by the Justice Department for the third time since 2010, is forced to pay \$16 million to settle claims for giving kickbacks to doctors for implanting St. Jude medical devices in their patients.

"Hospitals should base their purchasing decision on what is best for their patients...to ensure that choices about healthcare are not tainted by illegal kickbacks." Tom West – Assistant Attorney General

ST. JUDE RIATA LEAD RECALL

2006 – Several doctors inform St. Jude that they have safety concerns about St. Jude's Riata leads (small wires used to connect an implanted cardiac defibrillator to the heart) regarding insulation problems.

2008 – St. Jude's internal audit confirms 246 cases of insulation breach.

2008 – Supreme Court rules that manufacturers of medical devices approved by the FDA cannot be held accountable for their failure.

2010 – St. Jude sends out warning letters to doctors informing them of defects in the leads.

2011 – The FDA recalls St. Jude’s Riata leads.



“The St. Jude Riata lead is a perfect example that FDA approval does not make a device safe and without legal accountability device manufacturers have little incentive to put the safety of patients over their profits.” Katie Gommel – American Association for Justice.

2012 – Class action lawsuits are filed against St. Jude for withholding information regarding serious risk of injury and death to patients from the faulty Riata leads.



ST. JUDE’S DURATA WIRE

November 2012 – The FDA finds flaws in St. Jude’s testing and oversight of the Durata wire which is similar and provides the same function as the Riata lead.

August 2012 – Dr. Robert Hauser, renowned heart specialist, makes a public statement saying that St. Jude’s Durata wires are at risk of abrasion and warns other doctors not to use them.

August 2012 – The FDA orders St. Jude to do a 3-year study of the Durata wire and recommends that patients with the Durata wire be thoroughly examined but does not recommend removal because of the risk of injury or death during the surgery.

November 2012 – St. Jude releases a critical federal report with all references to the Durata wire redacted and is accused by critics of doing so to avoid embarrassment.

November 2012 – Amid the controversy, the value of St. Jude plummets more than \$1 billion but experts say that St. Jude’s actions will have a more lasting impact on its reputation and *the health of patients*.

ST. JUDE CARDIAC DEFIBRILLATOR RECALL

2014 – St. Jude management is told by medical advisory boards of premature battery depletion in their cardiac defibrillator, risking serious injury or death to patients.

2014 – St. Jude conceals evidence regarding the full scope of the battery issue and presents false or incomplete evidence of the defects to their board.

2014 – Even after a patient dies, St. Jude continues to market the device despite the risk to patients of injury and death. The FDA states that St. Jude knew of the problem for years, and systematically underestimated the risk to patients. The company only focused on a few confirmed battery failure cases. Even when an outside supplier provided evidence to St. Jude that its batteries were a problem, St. Jude still denied it.

October 2016 – The FDA recalls the devices following patient deaths and hospitalizations. *St. Jude continues to ship and allow flawed devices to be implanted into patients after recall.*



January 2017 – Abbott Laboratories acquires St. Jude Medical.

April 2017 - The FDA sends St. Jude/Abbott a warning letter stating that they underestimated the hazardous situation.



September 2017 - Class action lawsuits are filed against St. Jude/Abbott.

“St. Jude knew for years its implanted cardioverter defibrillator was faulty yet sold it anyway.” Michael Brady Lynch Law Firm

RECALL OF THE VADO STEERABLE SHEATH

February 2016 – Abbott acquires Kalila Medical, maker of the Ado Steerable Sheath.

August 2016 - Muddy Waters Capital, an investment firm, implores St. Jude to recall its pacemaker and other devices citing danger to patients because cyberattacks could cause them to malfunction.

September 2016 – St. Jude sues Muddy Waters Capital claiming they’re trying to drive down St. Jude stock prices before a stockholder meeting regarding a major merger.

September 2016 – To appease federal regulators before an important stockholder vote to unite the two companies, St. Jude/Abbott sells Kalila Medical, Angio Seal and Femo Seal products to Teruma, a Japanese Company.

December 2017 – FDA investigations find that the Vado Steerable Sheath has a flaw, presumably caused by its manufacture.

February 2018 – The Vado Steerable Sheath is recalled.



July 2021 – St. Jude agrees to pay \$27 million to settle allegations under the False Claims Act that, between November 2014 and October 2016, it knowingly sold defective heart devices to health care facilities that, in turn, implanted the devices into patients insured by federal healthcare programs.

LAWYERS FEES

In their 2017 Annual Report St. Jude states that they freely share their groundbreaking discoveries – unless patents that will garner huge profits are involved. In 2013, St. Jude sued Novartis asserting rights over certain DNA molecules that could lead to several patents, asserting that Novartis “has caused and will continue to cause St. Jude irreparable injury and damage.” (loss of profits)

Fighting over patents that could result in putting more drugs on the market is not unusual in the biomedical research community. Why not freely share if the drugs will help people? Big Pharma and St. Jude don’t operate that way. Like any Big Pharma corporation, St. Jude is ruled by profits, not concern for patients.





Donations to St. Jude are important components in paying for their lawyers' fees to fight lawsuits and defending themselves against complaints by the Justice Department and the FDA.

CLINICAL EXPERIMENTS ON CHILDREN

With permission from parents, St. Jude is given complete authority to try new therapies on babies, toddlers, and older children with cancer that has newly occurred or reoccurred after being treated by St. Jude in the past. Descriptions of some of these experiments follow.

BRAIN TUMOR CLINICAL TRIALS

1. HIPPOCAL AVOIDENCE USING PROTON (RADIATION) THERAPY IN CHILDREN WITH BRAIN TUMORS

Requirements: Must be 6-22 years old with low grade glioma. (brain tumor)

2. THERAPY USING THE DRUG MEMANTINE (AN ALZHEIMER'S DRUG) TO FIND OUT IF IT WILL PREVENT MEMORY LOSS IN CHILDREN RECEIVING RADIATION FOR CERTAIN BRAIN TUMORS

Among requirements: Must be 6-21 years old, be able to swallow pills, have had cranial radiation and diagnosis of certain brain tumors.

Side effects of Memantine include pain and swelling of face and limbs, dizziness, fainting, fast heartbeat, bleeding gums, high fever, seizures, trouble breathing, no pulse, no breathing.

Federal regulations allow children to be inundated with risk, harm, and pain while undergoing experiments even though the experiments will not benefit them but may benefit children sometime in the future, making children, with the full approval of parents, perfect experimental, human guinea pigs.

3. SURGERY AND SECOND COURSE RADIATION THERAPY IN TREATING YOUNGER PATIENTS WITH RECURRENT EPENDYOMA (a rare type of tumor that arises from the central nervous system.)

Among the requirements: Must be between 1-21, have progressive intracranial ependymoma *after prior focal irradiation*, does not require mechanical respiration.

4. PROTON (radiation) THERAPY FOR PEDIATRIC CRANIOPHARYNGIOMA (brain tumor)

Among requirements: Must be 21 or younger, have diagnosis of craniopharyngioma.

5. PHASE II STUDY OF ALISERTIB THERAPY FOR RHABDOID TUMORS

Among requirements: must be 21 years old or younger, have newly diagnosed atypical teratoid rhabdoid tumors (ATRTs) or synchronous extraneural ATRTs or malignant rhabdoid tumors (MRTs) *that have come back after previous treatment* or ATRTs or MRTs *that are growing after previous treatment*.

6. PHASE 1 STUDY OF A CHK1/2 INHIBITOR THERAPY IN COMBINATION WITH CHEMOTHERAPY FOR CHILDREN AND ADOLESCENTS WITH REFRACTORY OR RECURRENT MEDULLOBLASOMA BRAIN TUMORS

Requirements: be at least 1 year old and younger than 25, have *recurrent*, refractory or progressive medulloblastoma.

7. A CLINICAL AND MOLECULAR RISK DIRECTED THERAPY FOR NEWLY DIAGNOSED MEDULLOBLASTOMA/PNET

Among requirements: Must be at least 3 years old, younger than 22 or between 22-40 and have SHH medulloblastoma, have not had previous chemotherapy and radiation, must start treatment within 36 days of tumor removal.

8. PHASE 1 STUDY OF GDC-0084 IN YOUNG PATIENTS WITH NEWLY DIAGNOSED DIPG OR OTHER GLIOMAS AFTER RADIATION THERAPY.

Among requirements: Must be between 2-22, diagnosed with diffuse intrinsic pontine glioma or other midline glioma that has not spread, no prior therapy other than surgery and/or steroids.



Chemotherapy weakens the body's immune system and radiation burns away parts of the body along with the tumor. After a certain amount of time in remission the cancer inevitably comes back and spreads to other parts of the body, at which point the children at St. Jude, as in the above experiments, are given more radiation and chemotherapy. The statistics of recidivism at St. Jude's are not publicly available. Natural cures for cancer that have been proven to be successful are shunned by the medical/pharmaceutical industry. Those types of therapies would garner little or no profit for Big Pharma organizations like St. Jude. Big Pharma's choice, since the 1930s has been to inflict "cut and burn" therapies on adults, and at St. Jude, they are inflicted on babies and little children. Natural therapies for cancer that have worked for thousands of people are not options for Big Pharma cancer organizations like St. Jude.

THE STORIES OF TWO CHILDREN

2005 – 3-year-old Corbin is treated at St. Jude for cancer with chemotherapy, surgery and radiation.

2017 – Corbin's cancer returns and again is treated with chemotherapy and radiation at St. Jude. St. Jude doctors claim that the cancer did not come back because the previous treatments caused more cancer but because Corbin has a genetic predisposition to cancer, a controversial theory that provides cover for those who choose to treat patients with toxic therapies. And when patients die, the convenient excuse is, "Well, it was cancer, we did the best we could and besides, he/she had a cancer gene." Parents of children with cancer who die accept that kind of reasoning and do not question its validity.

February 2011 – Laniah Harris is treated for leukemia at St. Jude. 48 hours after she is released, she becomes deathly ill and is taken to the ER where she almost dies. Laniah spends a month on a ventilator fighting for her life. Later she struggles to learn to use her limbs and walk again. St. Jude avoids saying Laniah's near-death experience was caused by her toxic treatments at St. Jude, rather, they claim she is a victim of a virus for which they have created a vaccine that they intend to market.

Instead of studying the potential link between childhood cancer and the huge increase in vaccinations of children, St. Jude has chosen to go into the vaccine business and plans to manufacture and market new flu vaccines with the help of a \$130 million contract from the National Institutes of Health.



Vaccine inserts state: “This vaccine has not been evaluated for its carcinogenic or mutagenic potentials or impairment of fertility.” Considering the amount of toxic chemicals in vaccines, the fact that children are now inundated with massive doses of various vaccines, and the fact that since the 1980s brain cancer in children has skyrocketed, wouldn’t it be more prudent to investigate the effect of vaccines on children? Wouldn’t those kinds of investigations make more sense than cutting up animals in laboratories? And more sense than manufacturing more vaccines?

PATIENT SURVIVAL RATES

St. Jude takes credit for the fact that the survival rate for children with cancer has gone up from 20 percent to 80 percent. Survival rate means that if a child survives treatment for five years and then dies, that child is still a survivor and a part of the survival rate. Mortality rates (how long children actually live after treatment) and the recidivism rates (the cancer comes back or another disease is caused by the St. Jude therapies) are not available from St. Jude or from the CDC through the Freedom of Information Act. St. Jude and the Tennessee Department of Health did not respond to our requests for information regarding mortality rates and recidivism.




St. Jude commercials show a young child cancer free having been treated at St. Jude. The commercials show him a few years later at age 11 with thyroid cancer and back at St. Jude. Treatments like chemotherapy and radiation and other toxic treatments do exactly to children as those therapies do to adults – the immune system is destroyed, and the cancer comes back. Nevertheless, if the patient survives for 5 years he is counted in their statistics as a survivor.

EXPERIMENTS ON ANIMALS AT ST. JUDE/ABBOTT

St. Jude/Abbott has experimented on hundreds of thousands of animals through the years, including monkeys, gerbils, small pigs, guinea pigs, beagles, rats and mice. *St. Jude/Abbott vivisectors are aware of the fact that experiments on animals cannot be extrapolated to human beings because of differences in physiology, metabolism, biochemistry, genetics and environment.* Nevertheless, they continue to perpetrate animal experiments because vivisection garners grants and donations. The following is a miniscule portion of those experiments.



1. Amputate the limbs of mice in whom they have created osteosarcoma metastatic cancer.
2. Experiment on mice regarding “Six3Gene” to study development of *human* brain.
3. Inject mice with various drugs, glucocorticoids, dexamethasone and more to compare results in male and female mice.
4. Withhold oxygen from rats  to study result in *human* babies.

5. Inject macaque monkeys with toxic drugs and study the results after the monkeys die.
6. Experiment on pigs and ferrets to study *human* genes.

St. Jude doctors often tell patients that they have a genetic predisposition to cancer. Dr. Thomas N. Seyfried, PhD, renowned genetics researcher states that cancer is a metabolic disease and yet St. Jude vivisectors receive millions of dollars to study animal genes knowing their animal “models” have nothing to do with cancer in humans. Dr. Seyfried’s nontoxic, painless cancer therapies are ignored by St. Jude.

7. Inject mice with flu viruses and study the mice after they kill them.
8. Radiate rabbits and inject them with anti-thymocyte serum to study *human* immune tolerance.
9. Inject mice with toxins then kill them to study inflammatory disease in *humans*.
10. Inject groups of mice with toxins to study the effects on the *human spleen*.
11. Inject “bioluminescent virus” into the nose, trachea and lungs of mice to find out the result in *humans*.
12. Throw small animals into containers of water and watch them swim, grow tired, give up, sink and drown for reasons unknown to anyone but the vivisectors who have been doing these senseless experiments for over 30 years.
13. Cause inflammatory pain in mice by injecting their paws with toxic chemicals and then break their spines to study their reaction to excruciating pain.
14. Induce chemotherapy pain in rats and test pain drugs on them.

ST. JUDE/ABBOTT AND ANIMAL CRUELTY ISSUES

St. Jude/Abbott claim that they follow the rules of the Animal Welfare Act in their use of animals. This means that they and their vivisectors get to decide what is too gruesome and painful to perpetrate on animals in their laboratories. As with all vivisectors, there is no such thing as inflicting too much pain. Rats, mice and other small animals are the favored research subjects because they are not considered important enough for regulators to keep track of. Despite St. Jude/Abbott being aware that vivisection is a fraud they insist, “There is no substitute for animal testing when evaluating the effects of diseases and proposed treatments to fight these diseases.” If that is true then why do they do so many of the same kinds of painful, risky tests in their young human patients to find out the results in human children?

ST. JUDE/ABBOTT AND PETA

2004 – PETA files a resolution asking Abbott to replace five of their most sadistic and crude animal experiments with non-animal methods. Abbott refuses to consider the resolution and it fails to pass at the annual stockholder meeting.

2006 – PETA uncovers horrific cruelty at Covance, a contractor Abbott uses for some of their animal testing, and files a resolution asking them to stop. Abbott defends the treatment of animals at Covance to stockholders at the annual meeting and the resolution fails.

2012 – PETA files a resolution for Abbott to be more transparent regarding their treatment of animals but the resolution fails at the annual meeting.

Thousands of doctors and researchers have made clear that animal testing does not predict the outcome in humans. (*A Thousand Doctors and Many More Against Vivisection* – Hans Ruesch – Amazon)

One of them, Dr. Robert Sharpe adds, “...animal tests...are at least flexible. They can be deemed inapplicable when necessary, ignored when convenient and used to imply certain advantages over competing products.”

FUNDRAISING

ALSAC does most of the heavy lifting when it comes to fundraising and their employees are generously paid for their efforts. Celebrities also are a huge part of the fundraising effort, along with Marlo Thomas and her St. Jude commercials using cute children, who are miraculously free of pain, to convince the public to give and give more. Celebrities who raise money for St. Jude like Jennifer Aniston, Mariah Carey, Sofia Vergar, Michael Strahan and more, rarely look behind the headlines to find out what is going on with disease charities. They are usually more interested in the publicity they garner as “humanitarians.”

ST. JUDE “COON HUNT” – A YEARLY FUNDRAISER FOR ST. JUDE

During this yearly St. Jude fundraiser in Decatur County, Tennessee, terrified raccoons are chased by dogs and forced to climb trees to avoid being ripped apart. “Coon hunting” is a popular pastime in Tennessee where people have enjoyed watching their dogs chase, catch, and kill raccoons for many decades. St. Jude joined in this tradition in 1977 but insist the raccoons in their hunts are not killed only chased. But some raccoons do die during these horrific events and their babies are left to fend for themselves and die as well. These hunts go on for three days. Animal protestors have been trying for years to get St. Jude to end these hunts but they won’t. Why should they? So far, the hunts have brought in at least \$3M to St. Jude’s coffers. Instead, in 2016, St. Jude merely asked organizers to change the name of the hunt to “Raccoon Festival” because “Coon Hunt” sounded too racist. Organizers agreed to call the event a “Raccoon Hunt” but that’s as far as they’d go, and they never want to hear any ethical arguments against their favorite pastime ever again. It is doubtful that they will get their wish.



ST. JUDE IS TOO PROSPEROUS TO ALLOW A CURE

St. Jude, like The American Cancer Society, Susan G. Komen, Alzheimer’s Association and other disease/vivisection organizations, is much too successful as a billion-dollar industry to admit to or actually find any cures to cancer or any other disease. The children’s hospital serves as a massively successful money-making tool that can never be allowed to go out of business by using natural healing methods that actually cure the children.

Ending the useless but profitable animal experiments, the painful toxic therapies and admitting that natural cures that build up the immune system instead of destroying it, are ideas St. Jude will never

contemplate. Toxic therapies that ensure that children will come back again and again along with money from their insurance companies (if they have insurance) helps fill their coffers. Stopping the inundation of children with toxic vaccines is also a suggestion that St. Jude will never consider – vaccines must be manufactured and marketed, not only because there are billions of dollars to be made in that business but because children who are damaged by vaccines could very well end up as patients at St. Jude.

St. Jude Medical/Abbot are an integral part of the vivisection industry. *The vivisectors at the NIH are always eager to give taxpayer dollars for any and all animal experiments the vivisectors can come up with.* Testing and marketing devices is a billion dollar industry with one part of St. Jude feeding another in a web of fraud and cruelty. Giving up any part of St. Jude’s multibillion-dollar business would be unthinkable – no more million-dollar salaries, no more perks, no more media stories hailing everyone at St. Jude as a savior of children.



A BETRAYAL OF TRUST

Is everyone who works at St. Jude hospital cruel and devoid of compassion? That is highly unlikely. Many employees are kind, decent people. Some of them were treated at St. Jude as children, survived the therapies and now work there. That can happen. But defending well-meaning doctors and nurses who inflict pain on children is difficult. Most of us have family, friends, neighbors who had their immune systems destroyed by chemotherapy, their flesh burned away by radiation and through it all, suffered terribly then died. We have seen celebrities like Farrah Fawcett burned with radiation until her pain became unbearable and death was her only escape. Children at St. Jude are no different, but we are not allowed to see their suffering, only their bald heads and smiling faces. And we are shown pictures of parents filled with hope that *their* child will make it. And when the doctor tells them their child is dead – “Well, you know, it was cancer. We did the best we could.” The parents walk away believing they did their best as well, but they didn’t. Good intentions and kind words are not enough. Ignorance and blind faith in Big Pharma kills people. And when those people are children, there is no defense for that.

“I worked at St. Jude on staff for over 17 years. I saw it change from an institution focused on children to an institution that derided its clinical staff and placed its priorities elsewhere, though they still used the children as the means to raise money.” Former St. Jude employee on the Kronstantinople.blogspot.com

IN CONCLUSION

St. Jude’s endless campaign to raise more money and add to their 5-billion-dollar worth is convincing and their commercials impossible to avoid. Their media campaign is relentless and using children to raise money has worked well since time immemorial. We don’t have millions of dollars to spend on commercials to tell the truth. We wish we did are worth every penny. We can only offer up the anyone else who chooses to look them up on the difference. Truth matters.



because the suffering children facts that are available to us and internet. We hope we make a

In 1962 Danny Thomas promised that St. Jude would find a cure to childhood cancer. After all these years of human and animal experimentation, after many billions of dollars have been raised, after thousands of people continue to enrich themselves to the tune of millions of dollars a year, where is the cure? Answer – admitting that there are cures to cancer and that childhood vaccines cause cancer would bring an end to the massive cash cow that is St. Jude.

Additional Resources – cancercontrolsociety.org mercola.com thevaccinereaction.org *Slaughter of the Innocent* By Hans Ruesch (KSA) *Killing Cancer – Not People* by Michael G. Wright (Amazon)

KINDNESS AND SCIENCE IN ACTION <https://kindnessandscience.org/> Contact: 425-760-8902