

**WHAT BECAME OF THE RIFE TECHNOLOGY?"**

By Daniel Haley  
Copyright 1998

From the forthcoming book "Politics in Healing"

If you would like to be notified when "Politics in Healing" is available, please send a self-addressed, stamped envelope to:

Daniel Haley  
P.O. Box 191421  
Dallas, TX 75219

"What Became of the Rife Technology?" is the finest summary of the Rife story I've ever read  
It is concise, clear, focused. I heartily endorse it."

Barry Lynes author of "The Cancer Cure That Worked: The Rife Report"  
(now available through Amazon.com or Borders.com)

## **What Became of the Rife Technology?**

In 1976, the late Christopher Bird published an article in East West Magazine entitled "What Became of the Rife Microscope?" What indeed? And what became of the Rife Ray Tube as well?

In San Diego in the 1920's and 30's Royal Raymond Rife built several light microscopes capable of seeing viruses and bacteria in their live state with magnification said to be 60,000 times. The best light microscopes of that time - or today - could magnify around 2,500 times, not enough to see virus-size microbes, or bacteria because the nature of its process kills the specimen.

Thomas Jefferson defined genius as the infinite capacity for taking pains. In this respect and others, Rife was certainly a genius, first as an intuitive researcher and also as a creator of superb technological instruments, some of which have not seen their equal since his time.

Rife set a goal of finding out if there was a virus capable of causing cancer. After completing his microscope, he spent most of the 1920's in this pursuit. Working with cancerous tissue confirmed by lab analysis to be malignant, Rife found what he deemed to be the guilty microbe and injected it into mice. When they then developed cancer; he removed their cancerous tumors and in them once again found the same microbe. In the late 19<sup>th</sup> century, German researcher Dr. Robert Koch (apparently no relation to Dr. William Koch) established a procedure for determining the cause of a disease; recovering a suspect microbe from a sick animal, injecting it into a test animal, and then, if that animal develops the same disease, recovering the same microbe from the second animal. Rife had fulfilled the Koch postulates.

Rife named the cancer microbe the Bacillus X, or BX virus, since under his microscope (observing it alive), he could see it change from a bacteria, or bacillus, to a virus-size microbe. Rife asked himself if this live organism producing a purplish red color, and therefore a frequency, could be killed by another frequency which would resonate with the vibratory rate of the microbe. Rife thus created a ray tube which broadcast various frequencies. When it was finally ready, he would sit in front of his microscope tuned to the BX microbe for hours on end, tuning the dial of his frequency device, going through one frequency after another. Finally one day when he reached a certain frequency, he saw the light of the BX microbe glow brighter and then go out, after which it disintegrated. He painstakingly repeated the process and always saw the same results. Then he placed the BX microbe in test mice and, after they had developed cancer, exposed them to the frequency he had discovered. There was no contact between the animals and the ray tube; they were simply in its presence a few feet away. He repeated the process numerous times to double-check his research. In this way, Rife determined what he called the Mortal Oscillatory Rate (MOR) for the cancer microbe.

During the summer of 1934, 16 terminal cancer patients sat a few feet away from Rife's Ray Tube for three minutes every third day. After 90 days, 15 were declared fully recovered by attending physicians and in another month, the other ones as well.

In a nutshell, that is the essence of the Rife story - a microscope that could see virus-size microbes, which the best electron microscopes cannot see in their live state, and a frequency-emitting ray tube capable of killing the microbe which caused human cancer, thus enabling cancer patients to recover.

This story fired up Christopher Bird to write his 1976 article five years after Rife died at age 83, a forgotten man. The article revived some interest in Rife's work but was largely ignored. Then Bird showed the article to independent scholar/journalist Barry Lynes, who urged Bird to write a book on Rife. Bird, researching for his "Secrets of the Soil", told Barry "I don't have time-why don't you write it?" The result was Lynes' comprehensive "The Cancer Cure That Worked", which triggered a Rife revival. Then came "The Royal Rife Report" by Borderland Sciences and later "The Rife Way" by the late Dallas researcher Mark Simpson. An article by Dr. R. E. Seidel and Elizabeth Winter entitled "The New Microscopes", published in the February 1944 "Journal of the Franklin Institute" and later reprinted in the Smithsonian annual report, contains a great deal of information on how the Rife microscope worked and about research done with it.

After reviewing available materials on Rife, one has the same feeling as when reading about Dr. Koch: something lost, something wonderful.

The tragic story of Royal Raymond Rife started with his birth in 1888 in Elkhorn, Nebraska, but little is known about his very early life. At some point, perhaps 1906, he settled in San Diego, where he lived the rest of his life. "The Rife Way" contains a picture of Royal Rife (called Roy by his friends), as a dapper young man in his early 20's "on the concert stage playing the mellophone, French horn, and cello". Rife met a Chinese American girl, Mamie Quinn, and married her in 1912, settling down in a house near the mansion of the Bridges family, who had made carriages until they went out of style. Mrs. Bridges had money of her own as a sister of Henry Timken, an Ohio magnate in ball bearings. During a period when Rife served as the Timken's chauffeur, Mrs. Bridges became fascinated by Rife's dreams of high technology and set him up a lab above their garage. When Rife was not researching, he shared the Timken's hobby of racing fast cars and fast boats. Rife's skills as a chef were much appreciated, and he was a good musician. It was said of Rife that he was a quiet man, but when he talked, he was fun. Encouraging Rife's idea of building a super microscope, Mrs. Bridges funded a two-year sabbatical for him in Germany. Taking Mamie, Rife spent a couple of years in Germany, may have studied at Heidelberg University, and spent some time at the Zeiss Corp. Learning what he needed, he returned to San Diego and completed his first microscope in the early 1920's.

In time, word of his endeavors began to get out. Over the course of the next 20 or so years, Rife's tracks begin to get a lot clearer from the 10-15 newspaper articles that appeared in San Diego newspapers about the young genius Royal Rife and his amazing microscope. An article in the May 6, 1938 San Diego "Evening Tribune": gave a retrospect of Rife's early years:

*"The San Diego man, who is hailed by many as a veritable genius, has experimented with important studies, inventions and discoveries in an unbelievably wide and varied array of subjects. These fields of pursuit range from ballistics and racing car construction to optics and many equally profound sciences. And in 1920 he was investigating the possibilities of electrical treatment of diseases.*

*"It was then that he noticed these individualistic differences in the chemical constituents of disease organisms and saw the indication of electrical characteristics, observed electrical polarities in the organisms.*

*“Random speculation on the observation suddenly stirred in his mind a startling, astonishing thought: “What would happen if I subjected these organisms to different electrical frequencies?” he wondered.*

It may have been an article in the July 1931 issue of “Popular Science” which brought Rife to the attention of one of the most prominent medical researchers of the time, Dr. Arthur Isaac Kendall. Kendall was head of the Department of Bacteriology and Director of Medical Research at Northwestern University Medical School in Chicago. In 1904, Kendall had been director of the Panama Canal Commission’s Hygienic Laboratory, which evolved into the National Institutes of Health in 1930. Sometime in 1931,

Dr. Kendall asked his friend Dr. Milbank Johnson in Los Angeles to investigate what he had heard about Royal Rife and his microscope. Dr. Johnson was medical director of the Pacific Mutual Life Insurance Co., former president of the Los Angeles Medical Association, a member of the board of directors of the Los Angeles County Pasadena Hospital, one of the founders of the American Automobile Association, well connected and politically influential.

In November 1931, Dr. Johnson arranged a meeting with Royal Rife and took three other doctors with him, one of who was Dr. Alvin Ford, head of pathology at Pasadena Hospital and later president of the American Association of pathologists. On November 9 Johnson wrote Rife: “I want to say that we all spent one of the most instructive and interesting afternoons of our lives in your laboratory...I wired Dr. Kendall on what we had seen and our opinion of it and this morning I received the following telegram: ‘Expect to start for California Saturday’”. Dr. Johnson added “He should arrive in Pasadena November 17, so be sure and have your microscope in perfect condition for the Big Chief when he arrives. I will bring him down to San Diego in my car”.

When Kendall arrived, he brought along his “K medium: in which, he reported, he was able to detach dwarf bacteria from normal size bacteria. At the time, these disease-causing microbes were called “filterable viruses”. This claim was considered impossible at the time by many prominent researchers. Working with Rife, Dr. Kendall placed a typhoid germ in his “K microscope”, they could clearly see tiny microbes glowing with a turquoise blue light as they escaped from the larger bacteria. Rife and Kendall thus proved that bacteria contained smaller pathogens that could be seen under Royal Rife’s microscope.

Wasting no time, on November 20 Dr. Milbank Johnson invited 30 of the most prestigious medical figures in southern California to a banquet in honor of Rife and Kendall at “Belbank”, his mansion in Pasadena. In a opulent setting, Rife’s and Kendall’s discoveries were announced and discussed. On November 22, the “Los Angeles Times” reported:

*“Scientific discoveries of the greatest magnitude, including a discussion of the world’s most powerful microscope recently perfected after 14 years of effort by Dr. Royal R. Rife of San Diego, were described Friday evening to members of the medical profession, bacteriologists and pathologists at a dinner given by Dr. Milbank Johnson in honor of Dr. Rife and Dr. A. I Kendall.”*

*“The strongest microscope now in use can magnify between 2,000 and 2,500 times. Dr. Rife, by an ingenious arrangement of lenses applying an entirely new optical principle and by introducing double quartz prisms and powerful illuminating lights, has devised a*

*microscope with a lowest magnification of 5,000 times and a maximum working magnification of 17,000 times.”*

*“The new microscope, scientists predict, will prove a development of the first magnitude. Frankly dubious about the perfection of a microscope which appears to transcend the limits set by optic science. Dr. Johnson’s guests expressed themselves as delighted with the visual demonstration and heartily accorded both Dr. Rife and Dr. Kendall a foremost place in the world’s rank of scientists.”*

Rife and Kendall wrote up a report on their research “Observations on Bacillus Typhosus in its Filtrable State” which was published in the December 1931 issue of “California and Western Medicine”, the official publication of the California, Nevada, and Utah medical societies. The discovery was also reported in “Science” magazine on December 1, 1931, and in the “Science News Letter” on December 12, 1931 in an article entitled “Filtrable Germ Forms Seen with New Super Microscope”.

On December 27, 1931, the “Los Angeles Times” reported that Rife had demonstrated his microscope at a meeting of scientists and that “Dr. Rife has developed an instrument that may revolutionize laboratory methods and enable bacteriologists, like Dr. Kendall, to identify the germs that produce about 50 diseases whose causes are unknown.”

In the next step in Rife’s growing recognition, Henry Timken, the Ohio industrialist, brought him to the attention of Dr. Edward Rosenow, a senior researcher at the Mayo Clinic. In July 1932, at Dr. Kendall’s invitation, a three-day series of experiments were carried out in his Chicago lab by him, Dr. Rosenow, and Royal Rife, who brought his microscope. Working with two other microscopes as well as Rife’s, the three reconfirmed what Rife and Kendall had already published and studied some viruses of special interest to Dr. Rosenow. Rosenow published the results in the July 23, 1932 “Proceedings of the Staff Meetings of the Mayo Clinic” and also in an August 26, 1932 article in “Science” magazine entitled “Observations with the Rife Microscope of Filter-Passing Forms of Micro-Organisms.”

A bacteria in its normal state is too large to pass through the tiny pores of ceramic filter, but a virus-size “dwarf bacteria” can. So the orthodox view holds that if something can pass a filter, i.e., “filterable”, it cannot be a bacteria but must be some smaller form. The title Rife and Kendall’s report was a contradiction in terms for those who accepted as fact that a bacillus cannot be “filtered”. Thus some of the outstanding authorities of the time didn’t believe Kendall and Rosenow. Strangely, when Dr. Kendall announced his findings at a major scientific meeting in July 1932, he neglected to mention that his observations had been seen and could only be seen through a new and very special microscope to which he had access. This omission left him open to attack, and his critics did not hesitate to do so. As Barry Lynes observes, had Kendall made clear how he arrived at his findings, the JAMA article the following month might have focused on the marvelous new microscope rather than on the dispute between Kendall and his critics. These happened to be the most distinguished bacteriologists of the time, Dr. Rivers of the Rockefeller Foundation and Dr. Zinsser of Harvard. The critics having set the tone, Dr. Rosenow received the same treatment as Kendall – disbelief, even derision – even though he referred to the Rife microscope. This put a damper on the forward momentum of Rife’s acceptance.

For lack of a shoe a horse was lost, for lack of a horse a battle was lost...In retrospect, Dr. Kendall's failure to announce the Rife microscope simultaneously with his findings at that conference may have had just that significance; had he done so. Probably Drs. Rivers and Zinsser would have left no stone unturned until they too could do research with a Rife microscope (Kendall had one), and things might have turned out very differently.

In the 19<sup>th</sup> century Louis Pasteur had pronounced the germ theory – that an external germ was responsible for each disease. His rival, Antoine Bechamp, taught instead that the environment inside the body causes certain normally harmless microorganisms to change forms, after which they become harmful and cause disease. The concept that germs and microbes could change forms is called pleomorphism. In the insect world we see this in the change from caterpillar to cocoon to butterfly. Insects aren't microorganisms, to be sure, but the illustration demonstrates the concept. Pasteur's concept that germs do not change form is called monomorphism and is still the accepted view in bacteriology.

In reality, it would appear that they were both right to some extent. Certainly children at school "catch bugs" that are going around; according to Pasteur, that would be the only way one could catch something, i.e; from an outside source. Almost everyone knows that can't be true, having come down with a cold. There's no question that certain specific microbes cause certain specific diseases but that doesn't prevent them from changing forms – like the butterfly, or evolving within the inner environment of a person's body if it turns toxic.

One summer during college, I worked in Yosemite Park and climbed Half Dome. Although in good health, I was not in shape for mountain climbing and was exhausted by the time I got to the top, although not so much that I will ever forget the spectacular view. I cannot remember ever having been so tired as when I finally got to bed that night. The next morning I was off to the infirmary with a 104-degree fever. No illness had been going around Yosemite; nobody had flues or colds. It seemed that exhaustion had so weakened my immune system that something which normally had been held in check was able to take over and put me in bed for a couple of days. Considering pleomorphism, it might be that exhaustion produced specific chemicals, which changed the environment within my body and caused something that had not harmed me before to change into something that did. Or in Dr. Koch's terms, a toxin (produced as a result of the change in the body's environment) had momentarily broken down my oxidation system.

Under his microscope, Rife was clearly seeing bacteria changing forms. Growing microorganisms with Dr. Kendall's K-medium, Rife, Kendall and Rosenow all saw a "filtrable" form (hence the titles of their reports) produced from various bacteria, indicating pleomorphism. Even in the 1990's this view is not accepted by orthodox scientists; Dr. Robert Gallo, co-discoverer of the HIV virus, said that "pleomorphism is insanity". Gallo doesn't have access to a Rife microscope, so he cannot see for himself anymore than could Kendall's and Rosenow's critics in the 1930's. Solid evidence of pleomorphism has been published since Rife's time by the New York Academy of Sciences on October 30, 1970, in reporting the work of Dr. Virginia Livingston-Wheeler, Dr. Eleanor Alexander-Jackson, Dr. Irene Diller, and Dr. Florence Seibert.

In 1932, Royal Rife was not focusing on the pleomorphism argument that had engaged Kendall and Rosenow but on cancer, and after Kendall's visit, he was now armed with the K medium. After 20,000 tries, he told a friend, he at last succeeded in isolating what he called the "BX virus" (which today might be called a dwarf bacteria or microbe) and establishing it as capable of

causing cancer, as noted earlier. He also found a bacterial form of the microbe and wrote in 1953 “this BX ‘virus’ can be readily changed into different forms of its life cycle by the media upon which it is grown”, observing that a variation of as little as two parts per million in the media was sufficient to trigger the change. Rife’s next step was to seek the frequency to kill the BX microbe. Barry Lynes quotes a long-time friend of Rife, who wrote in 1958:

*“I’ve seen Roy in that doggone seat without moving, watching the changes in the frequency, watching when the time would come when the virus in the slide would be destroyed. Twenty-four hours was nothing for him. Forty-eight hours. He had done it many times. Sit there without moving. He wouldn’t touch anything except a little water. His nerves were just like cold steel. He never moved. His hands never quivered.”*

*“I’ve seen the cancer virus. I’ve seen the poliovirus. I’ve seen the TB virus. Here was a man showing people, showing doctors, these viruses of many different kinds of diseases, especially those three deadly ones – TB, polio, and cancer.”*

*“Time and time again since that time some of these medical men had made the proud discovery that they had isolated one of the viruses of polio. Why, that was one of the most ridiculous things in the world. Thirty-five years ago (1933) Roy Rife showed them these things.”*

Closely following Rife’s progress during 1932 and 1933, the years of the breakthrough in cancer, Dr. Milbank Johnson kept in touch with Dr. Kendall and promoted Rife’s work with other researchers. Although his first letter in 1931 was addressed to Mr. Royal Rife, from 1933 on Johnson’s letters were addressed to Dr. Royal Rife, later calling him Roy. There is a report that Rife received an honorary degree from the University of Heidelberg for work in photomicroscopy. It is known that in the middle 1930’s the University of Southern California (USC) scheduled the award of honorary degree to Rife, writing him a letter asking certain questions. Dr. Johnson wrote Rife urging him to respond to USC; Dr. Kendall wrote that he would attend the ceremony. Not much of a writer, Rife apparently never answered the letter and the offer was withdrawn.

In the spring of 1934, Dr. Johnson asked Rife to meet him in La Jolla (just north of San Diego) to discuss setting up a cancer clinic for humans. Rife agreed since, as he wrote in 1953, he had conducted successful tests “over 400 times with experimental animals before any attempt was made to use this frequency on human cases of carcinoma and sarcoma.”

For the clinic, Johnson rented the large home of the recently deceased Ellen Scripps. (She and her brother founded the Scripps newspaper chain and she virtually created the town of La Jolla. Where her home stood – the site of the 1934-cancer clinic – is now the site of the La Jolla Art Museum.) Dr. Johnson persuaded Dr. Kendall to come for part of the summer.

At the end of three months in the summer of 1934, the results, as mentioned, were 15 cures out of 16 terminal cases of cancers of various types, as reported by Rife in 1953. Barry Lynes found evidence that the other one was cured by the fourth month.

We have descriptions of two of the cases. Dr. Kendall described Tom Knight, whose “tumor was on the cheek where it could be seen, watched, and measured from the start to the finish, and this I have done”. A year later, Dr. Johnson wrote a letter to two San Diego doctors “to introduce Mr.

Thomas Knight. He was the one who had the carcinoma over the malar bone of his left cheek that we treated at the La Jolla clinic last year”. Dr. James Couche, a San Diego doctor who became a colleague of Rife as a result of the 1934 clinic, wrote 22 years later about a case he saw there:

*got the strength to drive to El Centro’. ‘Oh yes’, said he. ‘I have, but I’ll have a man to “the one that impressed me the most was a man who staggered onto a table just on the last end of cancer; he was a bag of bones. As he lay on the table, Dr. Rife and Dr. Johnson said ‘just feel than man’s stomach’. So I put my hand on the cavity where his stomach was underneath and it was just a cavity, almost, because he was so thin; his backbone and his belly were just about touching each other.”*

*“I put my hand on his stomach which was just one solid mass, just about what I could cover with my hand....it was absolutely solid! And I thought to myself well, nothing can be done for that. However, they gave him a treatment with the Rife frequencies and in the course of time over a period of six weeks to two months, to my astonishment, he completely recovered. He got so well that he asked permission to go to El Centro as he had a farm there and he wanted to see about his stock. Dr. Rife said ‘Now you haven’t drive me there.’ As a matter of fact, the patient drove his own car there and when he got down to El Centro he had a sick cow and he stayed up all night with it. The next day he drove back without any rest whatsoever – so you can imagine how he had recovered. I finally bought one of those frequency instruments and established it in my office.”*

A year later, Dr. Johnson wrote in a letter that “the clinic was opened and run by me to satisfy me personally that the Rife Ray would destroy pathogenic organisms in vivo as well as in vitro. The latter we had repeatedly demonstrated in the laboratory. I had to have this information conclusively positive before I could recommend to my friends to get behind the work...I intended to finance it through to the end.” Upon the conclusion of the Clinic, Dr. Johnson formed a Special Medical Research Committee at the USC to supervise the Rife research and eventually to announce it. Composed of cautious medical professionals, the Committee balked at early release of the Clinic’s amazing results, preferring instead to gather more data.

To this end, in 1953, Milbank Johnson arranged for Dr. O. Cameron Gruner of McGill University, Montreal, to spend May and June with Royal Rife. Dr. Gruner’s significance is that he was a renowned researcher in blood and had obtained a fungus organism from the blood of 92% of cancer patients he had examined. Rife took Gruner’s fungus, placed it in Dr. Kendall’s K medium, and then filtered from that culture Rife’s BX virus. Barry Lynes reports: “In 1937, Dr. Milbank Johnson wrote a letter describing what Gruner and Royal Rife had discovered in May-June 1935: ‘Dr. Gruner was present at all the experiments and we agreed-I think beyond a doubt – that our BX and the organism which he obtained from the blood, although in a different form from our BX, are one and the same organism. It looks, therefore, as if we know how to produce at will, by means of the appropriate culture, any one of the three forms desired”. (Rife had found a third and later a fourth form of the organism.)

Dr. Gruner’s findings, then, would suggest that a simple blood test would indicate the presence of an organism capable of causing cancer if the blood’s environment changes. The contemporary Gaston Naessens of Quebec has discovered another version of such a test.

In November 1935, Dr. Johnson decided to set up a second Clinic using an advanced version of the Frequency Instrument with modifications suggested by Rife’s new assistant, an engineer

introduced by Johnson named Philip Hoyland. Johnson closed the Clinic in the spring of 1936 to wait for another improved version of the frequency device.

Earlier in the year, Rife had trained Dr. Walker, assistant to Dr. Meyer of the Hooper Foundation in San Francisco. Walker wrote in October “The copy of the results of the test on typhoid organisms would appear to establish conclusively its efficacy to kill these organisms in the tissues. If the Ray should prove equally efficient in killing other pathogenic micro-organisms, it would be the greatest discovery in the history of therapeutic medicine.”

Meanwhile, Royal Rife built a newer, smaller microscope. With his “Universal” microscope, completed in 1933, having cost over \$30,000, the new one was intended to be able to sell for around \$1,000, so that many more people could be involved in the research. With a magnification of 10,000 to 15,000 times, the new ‘scope was still far better than any other light microscope.

In July 1936, Rife moved into a new lab, the lab of his dreams, built with funds supplied by Henry Timken.

In September 1936, Dr. James Couche opened a clinic, having acquired his own Ray Tube Frequency Instrument. Writing in 1956, Dr. Couche stated:

*“I saw some very remarkable things resulting from (the Frequency Instrument) in the course of over twenty years.*

*“I had a Mexican boy, nine years of age, who had osteomyelitis of the leg. He was treated at the Mercy Hospital by his attending doctors. They scraped the bone every week. It was agonizing to the child because they never gave him anything; they just poked in there and cleaned him out and the terror of that boy was awful. He wore a splint and was on crutches. His family brought him to the office. He was terrified that I would poke him as the other doctors had done. I reassured him and demonstrated the instrument on my own hand to show him that it would not hurt. With the bandage and the splint still on he was given a treatment. In less than two weeks of treatment the wound was completely healed and he took off his splints and threw them away. He is a great big powerful man now and has never had any comeback of his osteomyelitis. H was completely cured. There were many cases such as this.”*

An interesting case, which John Crane reported in 1956 from Dr. Couche’s 1936 clinical cases, was a Mrs. Tobish who was suffering from senile cataract. After six exposures to the frequencies for carcinoma and streptothrix, her vision returned to normal.

In September 1936, Dr. Johnson opened his third clinic, which he continued until May 1937. On June 1, he wrote to Dr. Joseph Heitger, an eye specialist in Louisville, Kentucky (to whom he had sent Royal Rife, whose eyes were suffering from too many hours at the microscope): “Our special effort this past winter has been working on cataracts...The application of the Rife Ray as we have used it does, in the great majority of cases, restore the visual function of the eye, that is the portion of visual disturbance due to opacities in the lens. How it does it and why it does it I do not know, but the above statement is an absolute fact supported now by many cases. How I wish we could get together and go over this work. I believe it will result in epochal changes in the profession’s handling of cataract cases.”

In 1937, Rife agreed to the formation of Beam Ray, a company set up to manufacture the frequency instruments. Ben Cullen, Rife's old friend since 1913, became president; Philip Hoyland, the engineer, and Dr. Couche were also involved. Barry Lynes reports that "Fourteen Frequency Instruments were built by Beam Ray. Two went to England, a third to Dr. Richard Hamer, and a fourth to Dr. Arthur Yale. Two more went to Arizona doctors and the remaining eight went to southern California doctors."

Ben Cullen later reminisced about Dr. Hamer's results: "Hamer ran an average of 40 cases a day through his place...Hamer was very well known on the Pacific coast...His case histories were absolutely wonderful. We would go in there and see rectal cancers...He cleaned them up completely...People...that had developed cancers, he'd find they had syphilis or gonorrhea. By golly he'd clean those up completely. Not a doggone taint of it in the blood stream at all. Clinically cured."

In 1937 the Special Medical Research Committee came to a decision that in retrospect could not have been more unwise. Queried by Montreal doctors as to why the results of the 1934 Clinic had not been released, Dr. Johnson replied: "Our Committee has decided that the etiology of cancer must first be established before we publish anything concerning the possible treatment. We are therefore going to let the Rife Ray rest until this most important work is done."

To help establish the etiology (origin, how it develops), Dr. Johnson put a lot of effort into attempting to arrange for Dr. Gruner of McGill to return and spend a year working with Rife. Because he was internationally known for his research with blood, it was thought that his prestige, added to that of Kendall and Rosenow, would help win acceptance once an announcement was made. Johnson sought a grant to fund Gruner's year with Rife from the International Cancer Research foundation in Philadelphia. However, the Foundation's staff was full of skepticism and pre-conditions, and no grant was ever made.

Recalling Dr. Johnson's statement in 1935 that he "intended to finance (the Rife work) through to the end", one might wonder why he did not finance Dr. Gruner's visit himself when it was clear there would be no grant. Barry Lynes' research discovered that between the famous dinner in 1931 and 1944, Dr. Johnson sold Belbank, moved to a smaller house, sold that, moved to a yet smaller, and sold that, moving to an even smaller house. All of them, Lynes noted, were fine houses, but not as grand as Belbank. It is largely forgotten, Lynes points out, that there was a second stock market crash in 1937, not as severe as that of 1929, but enough to stall recovery from the Great Depression until the Second World War. It may be that Dr. Johnson suffered financial reverses, causing him to reduce his scale of living and making it difficult to carry through on his original plan to finance Rife's work "through to the end".

As Barry Lynes puts it "Funny how men often think they have forever". A power in the CMA (California Medical Association) by virtue of having been head of the Los Angeles Medical Association, it seemed unlikely that there might be anything in the CMA/AMA situation that Dr. Milbank Johnson could not handle.

But clouds were gathering that would upset Dr. Johnson's and Royal Rife's plans. Ben Cullen describes what happened, as quoted by Barry Lynes in "The Cancer Cure That Worked":

*“Among Dr. Hamer’s cases was this old man from Chicago. He had a malignancy all around his face and neck. It was a gory mass. Just terrible...It had taken over all around his face. It had taken off one eyelid at the bottom of the eye. It had taken off the bottom of the lower lobe of the ear and had also gone into the cheek area, nose, and chin. He was a sight to behold.”*

*“But in six months, all that was left was a little black spot on the side of his face and the condition of that was such that it was about to fall off. Now that man was 82 years of age. I never saw anything like it. The delight of having a lovely clean skin again, just like a baby’s skin.”*

*“Well he went back to Chicago. Naturally, he couldn’t keep still and Dr. Morris Fishbein heard about it. Fishbein called him in and the old man was kind of reticent about telling him. So Fishbein wined and dined him and finally learned about his cancer treatment by Dr. Hamer in the San Diego clinic.”*

*“Well soon a man from Los Angeles came down. He had several meetings with us. Finally he took us out to dinner and broached the subject about buying Beam Ray. Well we wouldn’t do it. The renown was spreading and we weren’t even advertising. But of course, what did it, was the case histories of Dr. Hamer. He said this was the most wonderful development of the age.”*

Unable to buy Beam Ray, another tactic was devised. Ben Cullen said that a partner in the company was bribed. Philip Hoyland had helped Rife with certain electronic improvements and apparently was the only one beside Rife who knew the frequencies, which were kept as a closely guarded secret. Deeming himself to be more valuable to the company than the others, he demanded more shares, which had been distributed equally among the partners. When he was refused, he cooked up a suit against Beam Ray claiming that he’d discovered the frequencies, apparently hoping to seize control of the company and then cut a deal with the Los Angeles man. Because the Los Angeles law firm he employed was more high-priced than his partners believed Hoyland could afford, they presumed it had been paid for by the man they assumed to be Fishbein’s representative.

Hoyland’s lawsuit went to trial on June 12, 1939 and Beam Ray won. In giving judgment in favor of the company, Judge Edward Kelly stated of Hoyland “I am not convinced of his blameless character...I am denying the plaintiff has clean hands”.

It is unlikely that in 1939 Beam Ray was rolling in money. They had built 14 instruments and their hope for fame and fortune was linked to eventual widespread approval and acceptance by the medical profession, the long-range campaign Dr. Milbank Johnson was managing. How lucrative Beam Ray could have been can be judged by the rapidity with which hospitals everywhere installed expensive radiation equipment from the 1930’s to the present day. By 1939, however, big money had not yet happened for Beam Ray. Ben Cullen had used his own money to set up the company, and by the end of the trial, he was broke.

The biggest problem was that the market had disappeared. During and after the trial, the San Diego Medical Society warned all the doctors who had been involved with the Rife Ray that if they continued using it, they could lose their licenses. Dr. Hamer returned his instrument, which was rented. Dr. Couche stuck it out, did not lose his license, and continued using his machine

until the 1950's. With no market, Beam Ray disintegrated. Ben Cullen lost his house and had to take a job.

Before the trial, Rife was planning to leave for England in mid-May to take a microscope to Dr. B. Winter Gonin, who had ordered it and two Frequency Instruments. Gonin and his associates planned to distribute the microscope worldwide. One week before Rife's departure, he was subpoenaed for the Hoyland trial.

Of the material available to us about Royal Rife, one gets the impression of a gentle genius, both a gentleman and a gentle man. Ben Cullen, who had known him from the inception of his ideas on cancer through their implementation, described him in 1958 in this way: "In my estimation, Roy was one of the most gentle, genteel, self-effacing, moral men I ever met. Not once in all those years I was going over there to the lab, and that was approximately 30 years, did I ever hear him say one word out of place". A religious man, an accomplished musician, obviously a superb researcher, Roy Rife's pictures show the face of a gentle and brilliant man but not that of a fighter. Not like one-time coal miner Harry Hoxsey, whose pictures show someone who could take it and dish it out, who almost relished a fight.

The main casualty of the trial was not Beam Ray but Royal Rife. Barry Lynes describes what happened at the trial: "Hoyland's lawyer tore into Rife in a way he had never before experienced. His nerves gave". Lynes quotes Ben Cullen: "Rife was called in to testify two or three times...Rife had never been in court and he just became a nervous idiot...in that he couldn't stand it and he did his best to keep calm, his hands shaking like a leaf. He had started smoking pretty heavily and inhaling which he didn't use to do before. Anyway, he took to drinking pretty heavily because the doctor couldn't find anything to stop his nervousness without forcing him into a drug addict."

The pressure had pushed Royal Rife into alcoholism. Ben Cullen recalled: "afterwards, during his clear moments when he wasn't under the influence of liquor, he would endeavor to progress but every doggone day at a certain time he would go and get a little nip out of his car and that was the end of it".

Ben Cullen's statement is the only known evidence linking Dr. Morris Fishbein and the disaster that befell Beam Ray and the Rife technology. Some sources say that Fishbein knew about Royal Rife all the time from Dr. Kendall, a thoroughly establishment man there in Chicago. While Fishbein may have heard vaguely about Rife's microscope from Dr. Kendall, it would appear that it was the case of the cured 82-year-old, which caused him to focus on Rife's technology. Did Fishbein precipitate the attempt to buy out Beam Ray and then, when that failed, Hoyland's lawsuit? The most important question, however, is who caused the San Diego Medical Society suddenly to come down hard on the Rife doctors, whose work could hardly have been unknown to them. Dr. Fishbein had already been warning in the JAMA against electronic medicine in the 30's. Did the San Diego Medical Society finally, in 1939, tet around to following Fishbein's advice-or were they pushed? With Dr. Milbank Johnson's clear delight in the Rife technology and all he had done to encourage it, he must have been horrified at what happened. Given his changes of residences and the indication that his financial situation may have changed, it may be that he was no longer in a position to exert as much influence as before, and to stave off the disaster. We will probably never know the answers to these questions.

Dr. Johnson conducted no further clinics and in 1942 sent his Frequency Instrument to Dr. Gruner in Montreal, hoping the latter would make use of it to provide corroboration of Rife's great work. However, Gruner at McGill, in an atmosphere of academic orthodoxy, feared to use the device and gave it to a friend who dismantled it for spare parts. It may well have been Johnson's hope to seize a later opportunity to restore the momentum behind Rife's research, and to announce the results of the 1934 and subsequent Clinics. If he had survived until after Harry Hoxsey so thoroughly embarrassed Morris Fishbein that the AMA removed him in 1948, Johnson might have found a way to reverse suppression of the Rife technology.

But he did not survive until then. In 1944, Dr. Milbank Johnson entered the hospital for a routine tonsillectomy and did not come out. He was 73 by then and it may have been that his death was from natural causes, precipitated by the stress of the operation.

That ended the first chapter in Rife's work, during which he achieved his greatest breakthroughs, worked with some of the top medical figures of his day, and nearly saw his technology accepted as standard for the medical profession, Milbank Johnson's goal. This was the period during which, Rife told the San Diego "Evening Tribune" in an article printed May 6, 1938: "the mortal oscillatory rates for many organisms have been found and recorded. The Ray can be tuned to a germ's recorded frequency and turned upon that organism with the assurance that the organism will be killed".

Little is known of Royal Rife during the World War II years. There was a period from 1946 until 1950 when he virtually disappeared, apparently part of it being an attempt to "dry out" from the alcoholism.

In 1949, Dr. James Couche made a trip to Montreal to visit Dr. Gruner. Upon his return, he gave an interview to the "San Diego Union" which appeared in its edition of July 31, 1949:

*"Gruner told Dr. Couche that he was satisfied that Dr. Rife's large microscope had revealed a virus. He said further that the work he did with Rife at his Point Loma laboratory and follow-up researches at McGill University, had confirmed that tumor growths positively could be produced by the virus discovered in San Diego."*

*"In San Diego yesterday...Dr. Rife said..."I discovered that the viru organism gets in the blood of the victim at one stage of the growth."*

*"Dr. Couche said...that if cancer is a blood disease it is carried to all parts of the body in the blood stream and surgery would be of little use...It will surely be a great honor for that patient San Diego investigator, Dr. Rife, if his virus turns out to be the entity chiefly responsible for causing this dread disease."*

Rife's comment combined with Dr. Couche's statement would be of significance to those who have undergone surgery to remove tumors only to have cancer materialize somewhere else.

In 1950 Rife advertised for a tool and die maker and John Crane answered the ad. Crane had the needed skills, was a good machinist, and had some knowledge of electronics, so Rife hired him. Fascinated by Rife's story, Crane urged him to build more Frequency Instruments. In addition to

helping him with these, Crane urged him to write, and several of Rife's few writings are from this period.

In 1954, Crane contacted the National Cancer Institute (NCI) concerning the Rife therapeutic instruments. Barry Lynes writes: "The Committee on Cancer Diagnosis and Therapy of the National Research Council 'evaluated' the Rife discovery. They concluded it couldn't work. No effort was made to contact Rife, Gruner, Couche, or others who had witnessed actual cures (Couche was still curing cancer patients at that time). No physical inspection of the instruments was attempted. Electronic healing was thus bureaucratically determined to be impossible. (In 1972, NCI Director Dr. Carl G. Baker used the superficial 1954 evaluation to dismiss Rife's work when asked for information by Congressman Bob Wilson of San Diego.)"

In November 1956, Rife was the featured speaker at the November meeting of the San Diego section of the Instrument Society of America. The flyer states that "on display for their first public showing will be on of the new 'Frequency Instruments' and a 17,000 power optical microscope developed by Dr. Rife". Rife's speech was on "Optics in Industry and Medicine", and he was identified as Director of Research of Life Labs Inc., which was Crane's creation."

Crane engaged a John Marsh as a sort of traveling salesman for the instruments he and Rife were building. One day in 1957 while visiting his parents in Dayton, Ohio, Marsh came down with a bad sore throat and sought out Dr. Robert Stafford, the family doctor. Having known John since infancy, Dr. Stafford asked him what he was doing. "I'm doing something that will put you out of business", John replied. "Well, then I want to hear all about it", the genial Stafford replied. Marsh told him about the Rife Frequency Instrument, adding "If you ever have a terminal cancer patient, let me know and I'll bring you a machine".

A few years ago, a friend in Ohio told me that there was a doctor in Dayton who had worked with a Rife device for five years. With the encouragement of former Congressman Berkley Bedell for whom I was doing some research at the time, I was soon on my way to Dayton. There's nothing like talking with someone who's been there to drive home the reality of what we lost with the disappearance of the Rife technology, I realized after talking to Dr. Stafford.

Over lunch at the Country Club where he had invited my friend and me, Stafford told us the above story and about his experiences with the Rife device. Perhaps six months after his conversation with John Marsh, one of his patients, Mrs. Byess, age 82, was nearing death from cancer, so he called Marsh. In 1957, Rife and Crane had finished a new generation device but there were few takers and they were anxious to find reputable doctors who would work with them, Marsh told Stafford "I'll drive across the country and bring you a machine." He arrived at night, Dr. Stafford recalled, too late to go to the hospital. They talked and Marsh told him about the background and accomplishments of the wonderful Rife Ray Tube Frequency Instrument. "From what you tell me, John", said Dr. Stafford, "this machine of yours will do virtually anything. Well, here's a test case for you. Here's our old dog Skip. We have to lift him up onto the couch and lift him into the car. But we can't put him to sleep; he's one of the family. Do you think your machine will do anything for Skip?" They gave Skip three treatments in all, one every three days, Dr. Stafford reminisced, and after that Skip could jump onto the couch and jump into the car, and lived another five years. "If anybody had told me that story", Stafford laughed, "I'd never have believed it. I'd have said 'hogwash!' But I saw it happen to my dog."

Later, he said, his nurse's dog had a cancerous tumor and it too disappeared after Ray Tube treatments.

The day after Skip's first treatment, Stafford and Marsh took the Ray Tube to the hospital to treat Mrs. Byess. Delivery of the frequencies from the early 1930's had always been done through a large bulb, or tube, filled with helium or argon gas. Following instructions sent by Crane, they rigged up an apparatus to pass the bulb slowly up and down the length of Mrs. Byess' body, suspended about two feet above. Treatment was every other day for 3-5 minutes. At that point, her life expectancy would have been about 2-3 weeks; she was bleeding extensively and was clearly nearing the end.

Over the course of the next two weeks, to Dr. Stafford's amazement, Mrs. Byess began to recover. The bleeding stopped, she began to feel better, enough to complain about the food, got out of bed, walked around, and began to make plans to go home. Despite her remarkable recovery, that didn't happen. Hearing that a friend was on the next floor, she climbed a flight of stairs, missed a step, fell and broke her hip, and was dead in a week. Dr. Stafford secured her husband's permission for an autopsy, which was done by Dr. Zipp, the Dayton corner. The results: no cancer.

The lady in the next bed was also dying of cancer; seeing Mrs. Byess' recovery, she asked if she too might be treated. Dr. Stafford pointed out that she was not his patient but if it was okay with her doctor, it was okay with him.

Dr. Robert Stafford was one of the most respected doctors in Dayton. At that time (1958) Chief of Staff of Good Samaritan Hospital and former head of the county medical society, Stafford was solidly mainstream and anything but far-out. The other doctor quickly gave his permission and treatment began on the second patient. To everyone's amazement, she too quickly recovered in about two weeks and actually went home, but died about a month later. Dr. Stafford again secured permission for an autopsy, also performed by Dr. Zipp. He again reported no sign of cancer and that the woman had died of complications caused by radiation treatments.

These results made him a believer, Dr. Stafford told us. John Marsh was happy to leave the machine with him and drove back to California. Stafford was several more dramatic results. One involved his 4-year-old son, who "threw one of those fevers that kids will do, right in the middle of the night before Mrs. Stafford and I were to leave for a convention. I was preparing to cancel our trip but my sister, who had come to take care of the boy, said 'why don't you try the blue light?' That was how we referred to the device, since the Ray Tube glowed blue. She sat beside the glowing bulb with the boy in her lap for an hour. After a half hour, he quieted down and in an hour the fever was gone and he was fine." Another time, Dr. Stafford told us, he had been out shoveling ice and snow on a cold drizzly day. "I should have known better", he said, since that whole week I'd been tending patients with the flu. Suddenly I began to start feeling sick and getting sicker by the minute. I can't go to the office, I thought, but I must; I'm on duty and my partners have the day off. Well, I considered why not try the blue light, which we usually kept at the house at that time. So I sat in front of it, began to feel better, and after about 45 minutes I was no longer coming down with the flu and went to the office as planned."

Engaging Dr. Zipp's cooperation, the two carried out a series of tests with mice, implanting tumors, treating the mice with the Ray Tube, and seeing tumors disappear.

Dr. Stafford told us another story that is remarkable and puzzling. “You know how Dayton winters are cold and clammy. I was always cold in winter and regularly wore long underwear to keep warm. But after I’d used the blue light for a few months, I was never cold again!” We all agreed that if that device were still available it would sell well up north, even as we wondered what could be the mechanism which would produce such a fortuitous result.

He had use of the machine for five years, Dr. Stafford told us. During that time, the California health authorities cracked down on John Crane and John Marsh for practicing medicine without a license, and both spent three years in jail. Upon his release, Marsh called Stafford and asked for his machine back. “It’s yours”, Dr. Stafford told him, “so John came and got it and that was the end of my experience with the Rife Frequency Instrument”. During the time it was with him, a few of his colleagues gently questioned his use of it but nobody ever made any trouble.

Crane’s and Marsh’s problems started when authorities sent an undercover agent to buy a machine one day in 1960 after Crane unknowingly had been taped making medical claims for the instrument. As Crane took a check in payment, he was arrested, the check was snatched back from him, and his machines were seized.

Crane and Marsh brought witnesses to the trial who attested to having been cured by the machines. One case was especially interesting, indicating that the 1950’s instruments had the same ability to dissolve cataracts as their 1930’s predecessors. As Harry Lynes reports it: “During the trial, James Hannibal, age 76, testified. Blind in one eye, he’d been treated by the Frequency Instrument. After several applications, his cataract disappeared, just as cataracts had disappeared in many of Dr. Milbank Johnson’s patients during his 1935-37 clinics.”

Royal Rife prepared a deposition in behalf of John Crane, which was not accepted at the trial. Other witnesses at Crane’s trial, Barry Lynes reports, “testified to the curing of chronic bladder irritation and the elimination of a throat lump one-half the size of an egg. Also cured were fungus growths on hands, fissures in the anus, pyorrhea, arthritis, ulcerated colon, varicose veins, prostate troubles, tumorous growths over eyes, colitis, pains in the back, and heart attacks. One man testified that for 17 years he had a growth the size of an egg on his spine. After treatment, it had disappeared.” It was all to no avail. Crane and Marsh were convicted and sent to jail.

Concerned about being subpoenaed again, Royal Rife spent the time of the trial and a few months more in Tijuana, Mexico, returning in poor health. Around the time of these troubles, someone broke into Rife’s lab, set a fire, and destroyed much of his equipment. The concrete building did not burn but gone were the irreplaceable movies Rife had made of various viruses and of their destruction by the Ray.

Until his imprisonment, John Crane was a bold and enterprising man, but upon his release from prison, he was no longer the same. The lab was destroyed, Rife was failing, and Crane was understandably bitter. The second, but lesser, Rife chapter was over.

As a footnote to the story, Dr. Arthur Kendall, who’d played such an important part in the 1930’s, retired in 1942; he too was cut out to be a researcher, not a fighter. After buying a ranch in Mexico, he lost it and was living with his son-in-law in La Jolla in 1958, according to Ben Cullen. Barry Lynes reports that he died in 1959 – close to the Scripps Ranch where he had

observed the 1934 Clinic, and close to Royal Rife. One wonders if they got together to talk about better times, but there is no record that they ever met again.

Rife's wife Mamie was still alive in 1955 but died before he did. In 1971, Rife quietly passed away, an ill old man, at the age of 82.

John Crane deserves credit for having salvaged many to Rife's files from total oblivion, and for getting Rife to put on paper a record of his achievements. Chris Bird did his usual superb job when he reopened the story. But Barry Lynes deserves even more credit for having tracked down the fading pieces of an almost forgotten story before nearly everyone connected with it had passed away. I have relied heavily on his "The Cancer Cure That Worked" and his helpful advice in the preparation of this chapter.

Where did the Rife microscope and Frequency Instruments go? Probably some are in the hands of the FDA. A few original ones are in private hands, but are not in commercial use, i.e., in treatment for pay. As for the microscopes, shortly after the 1944 Franklin Institute article by Seidel and Winter appeared, a lab technician stole a vital part from the Universal microscope, rendering it inoperable. It still exists and has been partially restored. One microscope, apparently the one bought by Dr. Gonin in England, was in the Wellcome Museum in London, but it is said that parts have been removed from that as well. In other words, there is no place where serious researchers can go and view living organisms which, as noted, cannot be seen under an electron microscope, and test the effects on them of a Rife Frequency Instrument. This capability has not existed since the destruction of the Rife lab.

Could we recreate the Rife technology if there were a focused effort to do so? Steve Ross, Director of the World Research Foundation and very knowledgeable about Rife, states that to his certain knowledge the Eronom microscope in Germany, invented by Kurt Olbrich, can see viruses in their live state. As for the frequency devices, BK frequency generators are readily available and it is likely that the beam tube through which Rife broadcast his Ray could be reproduced. So it is possible that with an Ergonom microscope, a frequency generator, and a beam tube, the bacteriological research opened by Rife with Kendall, Rosenow, and Gruner could be restarted and move forward again.

Since Rife's time numerous researchers, such as those mentioned earlier whose work was published by the New York Academy of Sciences and more recently Dr. Alan Cantwell, have found microorganisms which they have observed to be capable of causing cancer. Thus obtaining a BX microbe or its equivalent should not be difficult. There remains the matter of the frequencies. Lists of them are around, but are they really the ones Rife found? Conceivably, with contemporary computerization and automatic focusing capabilities, it might be possible to test various frequencies without the need to spend 24 or 48 hours at the microscope, as Rife did.

It would be a lot of work, but the conceivable results would justify the investment. In addition to its potential for impacting the cancer epidemic, the Rife Beam Ray would probably put an end to the growing epidemic of tuberculosis. It would have been a lot simpler if our society had taken advantage of the discoveries of the genius Royal Raymond Rife and his discoveries when we had him around.

At the moment, the Rife technology is as lost as Atlantis, but could it be found again?

Barry Lynes' book contains a letter written in 1953 by a naval officer who had commanded a unit of doctors and bacteriologists, who had known Rife for many years. It is, as Lynes suggests, "a fitting epitaph to the Rife tragedy".

*"I have been privileged in having known you and having heard from your own lips the story of your work. You gave me a glimpse of science of the year 2000. But often I'm a little sad when I realize that men must struggle so hard to get what you tried to give them, and I am even more sad when I see so many problems for which you alone have the answers. When I see pictures taken with the electron microscope, I have to laugh, because I remember better pictures showing more detail which were hung in the hallway of your laboratory. When I read 'research' reports on genetics, evolution, or any of the fields of microbiology I have to laugh, because years ago the scientists were offered the answer and they refused the gift! The combination of your mind, your will, and your energy is so rare as to skip entire generations. The world has great need for your work.*

*"Perhaps the world will someday rediscover one of the greatest gifts on which it has ever turned its back. Someday we may develop equipment similar to the Rife Ray machine. By then the AMA will be forced to accept its use for the elimination of disease organisms. Man will live a healthier, happier and longer life."*

*"If we reach that millenium in my life, I will have one unhappy memory-that the man most deserving to have his name linked for all time with human happiness will have been all but forgotten because his life's work was lost in a struggle with the AMA and the 'accepted' scientists of his day rather than made available through a new approach; and when it is rediscovered, the Rife Ray will be given a new name."*

Something lost. Something wonderful.

