

# Christian HealthCare

## NEWSLETTER

### MEMBER LETTERS:

#### MediBid saved more than \$10,000 on my hernia surgery

**MediBid is a** great resource that helped save more than \$10,000 on my hernia surgery.

My local medical center in Wisconsin gave me a price of over \$16,000, plus the cost of the mesh. On MediBid I discovered there are many places throughout the U.S. that were between \$3,000 and \$4,000. One I investigated didn't work out because they couldn't schedule it the week I needed it done, but I had several good options to choose from. I went with Premier Surgical Center in Knoxville, Tennessee. They were professional, friendly, caring, and the cost was what they told me up front, not a penny more! The doctor, nurse, and many staff were Christians. They explained everything in detail and even followed up with phone calls after I got back home. I would recommend MediBid and Premier Surgical Group to anyone.

Mark  
Wisconsin

### Who is your doctor?

by member Dr. Jane Orient

People used to know who their doctor was. His name and phone number were on the wall or the refrigerator next to the telephone. He was there for you and could manage most of your problems.

When I was about 13, my mom took me to our pediatrician for belly pain. He was on his way out the door, but he stopped to take care of me. He diagnosed appendicitis based on history and physical examination. He called his favorite surgeon ("Billy," a Tucson legend), who came from the golf course to meet me in the emergency room. Within hours, my red-hot appendix was in a jar. My parents paid the hospital bill (\$150—10 days' pay for a construction laborer) as I was discharged a few days later.

Today, the patient with abdominal pain could wait for hours to see the ER provider—possibly a nurse practitioner or physician assistant who had never seen a case of acute appendicitis. She'll probably get a CT scan, after another wait. Eventually, Dr. On-call may take her to the operating room, hopefully before the appendix ruptures. And the bill will be beyond the means of ordinary people.

I used to be able to direct-admit patients from my office and send them with a set of orders to the hospital admitting office. For years, this has been impossible. The hospital is decidedly unfriendly to independent doc-

tors. There's now a gatekeeper in the emergency room, and most patients are under the control of a hospitalist.

This hospital, still Catholic at least in name, is now owned by a huge national conglomerate. Recently, it thwarted all efforts to keep it from dehydrating a patient to death despite lack of an advance directive or permission from next of kin. The patient's mother disputed the diagnosis of brain death. The gastroenterologist of her choice was willing and able to place a feeding tube, needed in order to transfer the patient to a skilled nursing facility, but the hospital would not permit it. An outside physician whom the mother had called on was removed from the patient's room by security, when she was merely pray-

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**Sharing Summary from April**

Shares:	\$29,003,816	Personalized prayer requests of the members with Needs are in the Prayer Guide. Please use your version of the Prayer Guide to support the members assigned to you.
Needs:	\$29,080,877	
Unshared Needs in Negotiation:	\$2,032,997	
New Needs:	4,350	
Total Needs:	10,652	
New Rewards:	289	
Miscarriages:	32	Member Households: 81,988
Final Rewards:	15	(as of 3/21/19)

**Contact Us: 877-764-2426** [Dash.SamaritanMinistries.org](http://Dash.SamaritanMinistries.org)

Questions about?	Email	Phone Menu
Your medical need	needs@samaritanministries.org	1 - 1
Shares you are sending or receiving	membership@samaritanministries.org	1 - 3
Your membership	membership@samaritanministries.org	1 - 4



Health Resources

**Have a Need? Use the Health Resources app on Dash.**

- Compare quality and cost of health care services in your area using Healthcare Bluebook.
- Use MediBid to receive bids from doctors for tests or treatments you are seeking.
- Email a medical professional or call a nurse (free), or call a doctor who can write a prescription (\$25).
- Access discount tools for prescriptions and lab tests.

**Remember:**



**SEND A NOTE—**  
Burdens can be lightened emotionally as we encourage one another in the Lord.



**PAY YOUR SHARE—**  
Burdens can be lightened physically as we do our part to financially meet others' needs as they would in our time of need.



**ALWAYS STAY ALERT IN PRAYER—**  
Burdens can be lightened spiritually as we unite to call upon the God of the impossible.

## The Affordable Care Act's unhappy anniversary

by Ron Paul

March 23 marked nine years since the Patient Protection and Affordable Care Act (popularly known as Obamacare) became law. Obamacare's proponents promised that the law would reduce costs, expand access, and allow us to keep our doctors if we liked our doctors. The reality has been quite different.

Since Obamacare was enacted, individual health insurance premiums have more than doubled while small businesses have been discouraged from providing health insurance benefits. The increased costs of, and decreased access to, health care are a direct result of Obamacare's mandates—particularly the guaranteed issue and pre-existing condition mandates. Another costly mandate forces most plans to cover “essential health benefits.” This mandate is why postmenopausal women must pay for contraceptive coverage.

The increase in health insurance premiums has not helped those who like their doctors keep their doctors. Instead, patients' choices of providers are restricted to ever-narrower networks. As leading health care scholar John C. Goodman observed, the result is that a cancer patient from my hometown of Lake Jackson, Texas, who obtains insurance through Obamacare's exchanges cannot get treatment at nearby MD Anderson, one of the country's top cancer treatment centers. If health care were a true free market, insurance companies would compete for the business of cancer patients and others with chronic conditions by developing innovative ways to give them

the best care at an affordable price.

Sadly, few in Congress support free-market health care. The Democrats are divided between progressives who want to repeal and replace Obamacare with “Medicare for all,” the latest euphemism for single-payer health care, and establishment Democrats who want to save Obamacare by spending more money on subsidies for individuals and insurance companies.

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**Before Medicare, doctors routinely provided charity care and churches ran hospitals and served the poor. We are capable of providing health care if government gets out of the way.**

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President Trump has made some regulatory changes that make it easier for individuals to find affordable insurance. He has also recently called on Republicans to renew efforts to repeal and replace Obamacare. Most Republicans reacted to the president's call the way Dracula reacts to a crucifix. These Republicans are terrified of the issue because they believe their half-hearted attempts to enact phony repeal bills cost them control of the House of Representatives in 2018.

President Trump himself does not actually want to repeal all of Obamacare. He just wants to repeal the “unpopular” parts. However, because the popular parts include

many of Obamacare's most destructive mandates, even if President Trump gets his way, Americans will continue to suffer with low-quality, high-cost health care.

Any system combining subsidies that artificially increase demand with regulations and mandates that, by raising costs, artificially limit supply inevitably results in shortages, rationing, and lower quality. Therefore, no matter how much Democrats spend or how many “reforms” Republicans enact, Obamacare and other types of government-controlled health care will never “work.”

Instead of ignoring the issue, trying to prop up Obamacare, or implementing a single-payer plan, Congress should restore individuals' control over health care dollars by expanding health care tax deductions and credits as well as Health Savings Accounts (HSAs). Expanded charitable deductions could help ensure that those who need assistance can obtain privately funded charitable care instead of relying on inefficient government programs. Before Medicaid and Medicare, doctors routinely provided charitable care, while churches and private charities ran hospitals that served the poor. Individuals are more than capable of meeting their health care needs, and providing for the needs of the less fortunate, if the government gets out of the way. ♦

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*Ron Paul is a former obstetrician and former U.S. congressman from Texas.*

## Paul and Carol Bramsen ROCK International

by Andie Dill

The Lord Jesus Christ commands all His followers to make disciples of all nations. Paul Bramsen and his ministry partners at ROCK International seek to do just that through the Biblical resources they create.

Paul and Carol Bramsen's son, Nathan, with the help of his parents and others, founded the nonprofit organization ROCK International in December 2006. ROCK is a double acronym meaning Relief, Opportunity and Care for Kids (ROCKids) as well as Resources of Crucial Knowledge (ROCK Resources).

While Nathan was in Cairo, Egypt, studying Arabic and working with street kids, he felt a burden to start an organization through which prayer could be encouraged and

funds could be directed to projects that would bless kids and their families. That's how ROCK International was created, a channel for projects that help educate and meet the practical and spiritual needs of abused, neglected, and trafficked children in hard-to-reach places of the world, always with a clear Gospel focus.

One of the countries where ROCK has projects is in the West African country of Niger, one of the poorest nations in the world that is tragically plagued by human trafficking and child prostitution. ROCK's Youth Development Center in Niger is a place where lives are being transformed for time and eternity. Another ongoing ROCK project is in Tanzania, where a secondary school for girls is being built to give them the option of a high school education without the threat of sexual abuse.

Although ROCK International officially began in 2006, Paul's heart for the nations and Gospel ministry began much earlier. Before he and Carol were married, they had already been praying about where God might send them, desiring to go wherever He would lead. In 1981, Paul and Carol found themselves in



Senegal, West Africa, just three years after becoming husband and wife. It was there that they learned to speak Wolof, the language of Senegal, and French; raised their three children; and gave themselves to evangelism and discipleship.

Senegal is a 94 percent Muslim country, so preaching the Gospel has not been an easy journey. In fact, Paul and Carol had to wait seven years before they would see a Muslim come to know Christ. Today that former Muslim, Ali, is one of the key leaders in the church. He is also the voice behind a series of radio programs that have been broadcast in that land since 1992. Together, in the Wolof language, Ali and Paul wrote a 100-lesson radio series called *The Way of Righteousness*.

That series has become what TransWorld Radio calls their "most effective program for reaching Muslims around the world." Over the years, as more and more people

*Continued on page 13*



## ROCK International's *King of Glory* movie tells story of the Bible in 30 languages

**K**ing of Glory is a movie as well as a picture book produced by ROCK International telling the story of the Bible from cover to cover.

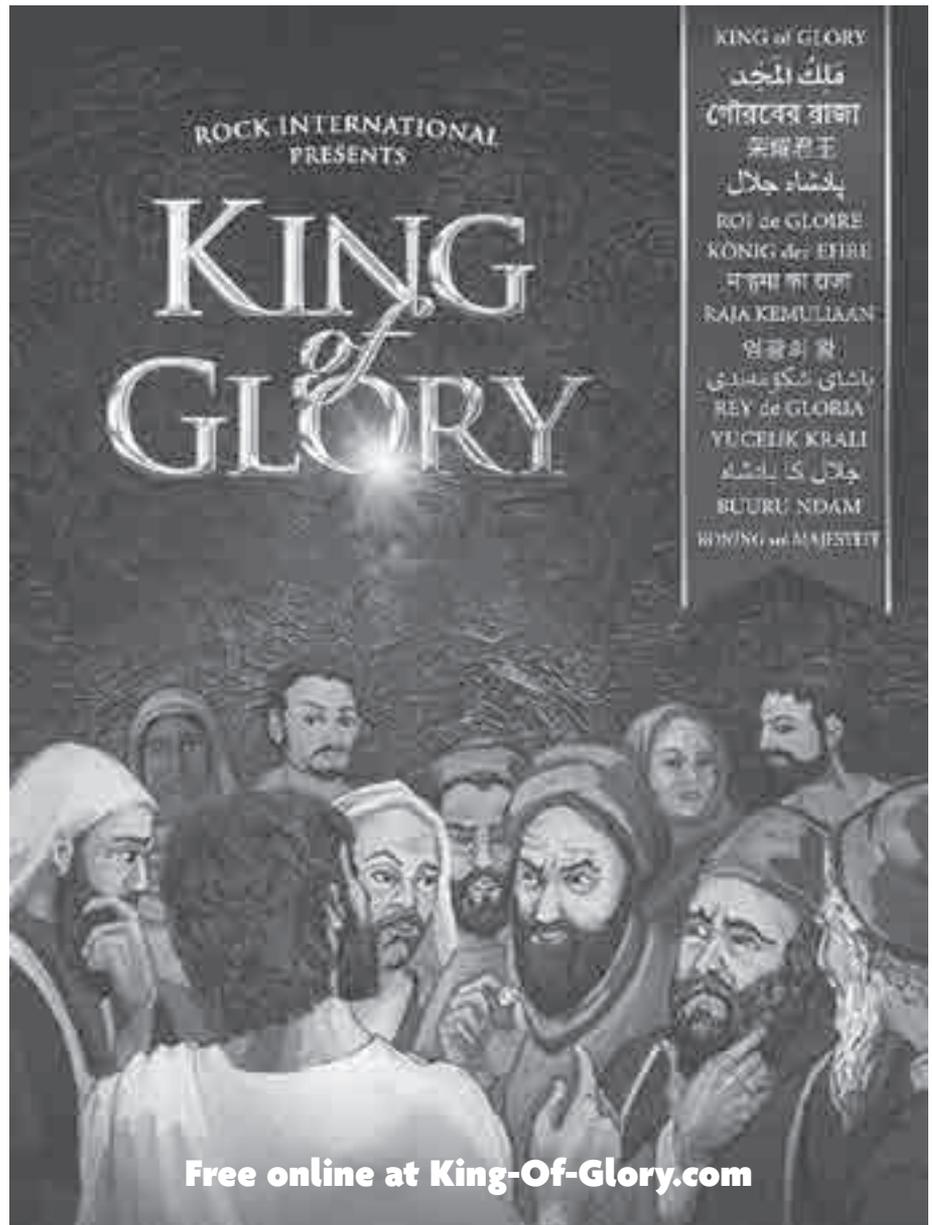
The movie is available free online at King-Of-Glory.com. It can be viewed in 15-minute segments and in more than 30 languages.

### Impact in Kyrgyzstan

*Here is a beautiful testimony of how God used King of Glory to bring a young woman to faith:*

Yesterday, we received a phone call from a worker in Kyrgyzstan, who oversaw the translation and recording of the *King of Glory* movie in Kyrgyz. Over the past two years, the entire 222-minute movie has been aired a few times on national TV in that “closed” country and is making an impact.

The worker told me of a Muslim lady who, with her young son, had checked into their women’s center, a hideaway for hurting, abused women. On the second day of her stay, she watched the *King of Glory* movie in her heart language—from start to finish. She then went back to her room where the staff heard her crying for hours. Later, when she came out and they asked her what was the matter, she answered, “This film gave me the answers I’ve been searching for most of my life.” As the women were talking with her about the Gospel, her child came, saying, “Mommy, don’t listen to these people, they are telling you lies! Don’t listen to them, they lie!”



But she sent her boy out and fell to her knees, repented, and called on the name of the Lord Jesus to save her. After she declared her faith in Christ, the believers said, “It was like an evil spirit had left the area.” Now even her boy is beginning to change. Pray that he too will come to know Jesus. Before coming to the

refuge, this precious lady had tried to kill herself several times. Then she heard about the women’s center. Out of her hopelessness, she came with the intent that if she didn’t find answers then she would end her life. Touched by Christ’s love and truth, through His people and Word, the rest is history. Glory to God! ♦



## Raped at 18, Samaritan member kept her baby

by Michael Miller

When even pro-lifers are willing to grant abortion exceptions in cases of rape, Nicole\* and her daughter, Zoe, disagree.

Nicole, now a Samaritan Ministries member, was raped by a high school acquaintance in 1998 in Florida. Nine months later, she gave birth to Zoe, who turned 20 in February.

"It wasn't her (Zoe's) fault, what happened," Nicole says. "I think a lot of people think abortion is an easy out because it takes away the 'problem,' but the problem is not the child. The child didn't do anything. The problem is you have to deal with the grief and the loss and the pain from what happened to you, and you deal with having to forgive somebody who has wronged you. But that person is not this innocent little baby."

Zoe, now a wife and mom herself with a job in a church preschool teaching 2-year-olds, is pretty happy her mom didn't get an abortion.

"I am really glad that she decided to keep me and really grateful for my grandparents being there and supporting her," Zoe says.

After all, she points out, if Nicole hadn't given birth to her, she wouldn't be able to teach the toddlers about Jesus.

Nicole married when Zoe was about 4 years old, and she and her husband, who adopted Zoe, have had four additional children.

With the help of such resources as Kay Arthur's *Lord, Heal My Hurts* Bible study, Nicole has been able to work through the pain of the rape. But it has taken a while.

The attack occurred when she and the boy went to his house to pick up a prop for a school play they both were in.

"He started coming on to me," Nicole says. "I was like, 'No, no, no. You have a girlfriend and I don't want to do that.' He kept persisting and becoming forceful and then he raped me. Then he acted like noth-

ing happened and went on about how great his girlfriend was. I was just sitting there mortified. To him it was no big deal."

But it was a big deal to Nicole, who wasn't able to tell anybody besides her parents what had happened until a couple years after Zoe had been born.

The rape occurred right before high school graduation, "so I didn't see him (the rapist) after that very much, which was a blessing from God," Nicole says. After scaling back her college plans due to the baby, she moved back in with her parents.

"I was too ashamed to say anything for a long time," Nicole remembers. "That was also hard because you're carrying that secret with you because it's just embarrassing. It's like, I should have been able to fight him off."

Nicole even found herself wishing for a miscarriage, "because then I wouldn't have to deal with it."

"I know that sounds terrible, but it

was out of fear,” Nicole says.

The thought of abortion was “a brief blip.”

“I was thinking, ‘Oh, if I had an abortion, no one would know, everything would be fine,’” Nicole says. “I think it was really just Satan trying to put that thought into my head, because I’m not pro-abortion at all and wasn’t back then. We had done foster care with my parents. I think it was just Satan trying to get me while I was vulnerable.”

Her conclusion, though, was that she could “never do that.”

“I don’t think I could live with myself if I actually went through with (abortion),” Nicole says, “so I never really entertained the thought.”

Adoption also occurred to her, but she decided against that because of her concern that her child might be raised in a non-Christian home and may never know Christ.

Nicole says her parents, both devout Christians, were “very supportive” of her choice to raise the baby.

Besides her parents, financial support came later from a job at a department store as well as a cash settlement from a car accident that happened when she was 11 and that now came to her at 18.

“I think God worked this out,” Nicole says.

She also eventually earned an associate degree in criminal justice.

God wasn’t nearly done working in her life, though. When Zoe was 3 and the mom and baby had found their own apartment, Nicole met a guy. A Christian guy. A Christian guy who was very kind to Zoe.

He and Nicole got married, and the family of three began to grow.

Eventually, of course, Zoe wanted to know more about her origins.

“We never really kept it a secret,”

Nicole says. “I just said, ‘Somebody did something bad to mommy. But I’ve always loved you. I never regretted having you. You’ve always been a blessing to me.’”

Zoe made one, unsuccessful attempt to contact her birth father in her teens but got nothing back.

“It was a huge hurt in my life for so long that I still haven’t really gotten over it yet,” she says. “Rape hurts the kid, too, and not just the woman. But it’s still possible to overcome.”

**“It’s so special that I have Zoe in my life, and she’s such a blessing. I don’t regret it. I’ve never regretted it for a day.”**

The rejection added to typical adolescent woes, but she survived them.

Helping was her adoptive father. Zoe says he has always treated her on equal footing with her siblings.

“He has always treated me like his biological daughter,” she says. “We went to daddy-daughter dances and Girl Scouts. He’s never treated me differently. I really commend him for that.”

Zoe and her mother are both actively pro-life and encourage pregnant moms in difficult circumstances to persevere.

“Having a baby alone is very scary, but it’s such a short time in your life that it’s not worth doing

something that drastic, something that you have to live with forever,” Nicole says. “You can’t take back an abortion. Ever. It’s so special that I have Zoe in my life, and she’s such a blessing. I don’t regret it. I’ve never regretted it for a day.”

Other moms in similar circumstances to hers, have kept their babies successfully, she points out.

“There are people out there who didn’t choose to have babies, but they still stood up and they took care of them, and raised them to be good, godly people,” Nicole says. “Just because you’re pregnant doesn’t mean it’s a horrible stigma against you. Sometimes things happen and you just make the best of what you’re dealt.”

Abortion doesn’t solve a woman’s pregnancy predicament, the mother and daughter say, even in the case of rape. It makes it worse.

“One wrong doesn’t right the wrong that has been done to you,” Nicole says. “Having an abortion doesn’t fix the pain and humiliation you feel from the rape. It just magnifies it. Yes, it’s hard to have a baby, but it’s not the end of the world.”

Zoe uses her situation to encourage women to keep their babies in all situations.

“I can say I’m a product of (rape),” she says. “I’m not less of a person because my biological father did a horrible thing. That doesn’t mean I should have to die for that. I don’t think the baby should be killed just because the father was a horrible person.” ♦

*\*Pseudonyms are used for privacy.*

## Member doctors join growing Direct Primary Care trend

by Kathryn Nielson

The desire to effect positive change in the health care industry drove two Samaritan members, nurse practitioner Karl Lambert and Dr. Robert Berry, to leave their mainstream medical practices and venture out into the world of Direct Primary Care.

### MediRedi Integrative Clinic

“I knew something had to be done to change the landscape of how medical care was delivered,” says Karl Lambert. “There were no more independent practices. I went independent when the trend and tide was very much against going independent.”

Karl worked for about 10 years in a physician-owned and -operated clinic that was becoming too corporate for him. It would eventually purchase every family practice in a 40,000-square-mile area of north central Washington. Karl left in 2006 to start MediRedi Integrative Clinic in Wenatchee, Washington.

He hired Dr. Gillian Shaw and advanced registered nurse practitioner Sarah Foerster to join him in providing a place that would provide a “wholistic and integrative approach to primary care.”

This wholistic approach to care is what sets MediRedi apart from other health care providers. Karl’s goal is to prevent illness before it strikes, and he believes that every part of the person plays a role in overall health.

“We do include all aspects that make up a patient including their spiritual, psych-social, physical, and emotional wellbeing,” he says.

One of his specialties is aiding women in treating the all-too-common polycystic ovarian syndrome, a hormonal disorder common among women of reproductive age. Both he and Dr. Shaw are specially trained in the area of bio-identical hormone replacement therapy.

“It gives me great joy to see the quality of their lives improve dramatically,” says Karl.

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**“Having the ability to text and email your doctor or nurse practitioner is significant. Patients love this convenience, and it often cuts down on the need for an office visit.”**

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Karl also cites communication as one of the advantages of his practice.

“Having the ability to text and email your doctor or nurse practitioner is significant,” Karl says. “Patients love this convenience, and often it cuts down on the need for an office visit. Telemedicine works very well with this model, as I have college students and others (patients) that live in other states, but they have elected to remain as part of our practice.”

Besides access to staff 24/7, 365 days a year, Karl partners with other clinics to offer low-cost, time-efficient imaging and diagnostic care.

They also have freedom to work with the medical tourism industry and organizations like Surgical Center of Oklahoma and Sano Surgery when surgery is necessary. RediMedi itself offers care at two locations.

Prior to becoming a nurse practitioner and opening his practice, Karl worked as a registered nurse at Fred Hutchinson Cancer Research Center for 10 years in Seattle, Washington, after graduating from Seattle Pacific University in 1986. He later went on to earn his ARNP degree in 1997 from the University of Kentucky and became a member of the American Academy of Nurse Practitioners.

Karl and his wife, Marian, live in Washington and have three children.

### DirectMD Greenville

“I was convinced that I was part of a system that was gouging patients, my neighbors, and I figured I could provide 95 percent of the services I was providing in the ER in a high capability urgent care while also taking care of their chronic problems well enough to keep them out of the hospital,” Dr. Robert Berry says.

Dr. Berry’s desire was to provide care for the “undesirable population,” those without insurance. To that end, he opened PATMOS (Paid at The Moment Of Service) Emergiclinic. For 18 years he ran the only insurance-free, fee-for-service practice in northeast Tennessee until he switched over to the Direct Primary Care model just this year, renaming PATMOS to DirectMD Greenville. His prices, often one-fifth to one-half of those of other

practices, are listed on billboards, in brochures, and on signage right in front of their office.

“Since the uninsured have few options, we have provided services most other primary care practices don’t, such as IV therapy for dehydration and mild diabetic keto-acidosis, suturing complex lacerations such as chain saw wounds, and providing the only care for patients with rheumatology disorders until they can obtain insurance through disability,” Dr. Berry says.

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**“Not signing insurance contracts enables us to operate with three fewer employees per physician and one-third of the overhead.”**

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The low monthly membership fee includes chronic disease management, urgent and preventive care, annual adult physicals, and coordination with specialists and hospitalists if needed.

“We can do this, of course, because not signing insurance contracts enables us to operate with three fewer employees per physician and one-third of the overhead,” says Berry.

Affordable health care for the uninsured hasn’t been Dr. Berry’s only goal. Doctors often explore the DPC model because it allows them

to avoid onerous government regulations and paperwork, which results in them being able to give patients more time and personalized care.

According to the DirectMD website, “We don’t allow the insurance/hospital/government/large medical group cartel to enter our exam rooms, and they are not a part of our overhead. Because of this, we are probably the most personal, simple, transparent, and cost-effective primary care medical practice in this area.”

Dr. Berry is board certified in internal medicine and was formerly board certified in emergency medicine. He earned his medical degree in 1989 from the University of North Carolina and completed his residency program in primary care internal medicine from the University of Alabama in 1992. He works with Russell Perry, a board-certified internist who joined the practice part time last June.

Dr. Berry and his wife, Blair, have two daughters and live in Greeneville, Tennessee. ♦

**Editor’s Note:** This article is not an endorsement of a particular medical provider. Members are free to choose their own providers.

Members may be able to have some of their Direct Primary Care membership fees shared when they are receiving treatment for an illness or injury. Contact Member Services for more information and see the “Direct Primary Care” item in Section VIII.B of the Ministry Guidelines.

**For resources to find DPC doctors near you, visit [SamaritanMinistries.org/dpc](https://SamaritanMinistries.org/dpc)**



**Nurse Practitioner Karl Lambert**  
[theredimediclinic.com](https://theredimediclinic.com)

**In his own words:**  
[SamaritanMinistries.org/lambert](https://SamaritanMinistries.org/lambert)



**Dr. Robert Berry**  
[directmdgreeneville.com](https://directmdgreeneville.com)

**In his own words:**  
[SamaritanMinistries.org/drberry](https://SamaritanMinistries.org/drberry)

## **Death by Regulation**

### *How We Were Robbed of a Golden Age of Health and How We Can Reclaim It*

by Dr. Mary J. Ruwart, reviewed by Davis Taylor

**M**ost people believe government agencies like the Food and Drug Administration keep them safe. But a book by Dr. Mary J. Ruwart explodes this myth.

People often argue that, without the protection of government agencies, we would face constant peril. Allegedly, without the FDA, our pharmacy shelves would be lined with unregulated products containing deadly substances, marketed by the unscrupulous.

Of course, this argument rests upon the unspoken assumption that the laws and regulations enforced by the FDA are benign, causing little or no harm, and few, if any, deaths. It also rests upon the assumption that, without government regulation, there are no market-based mechanisms for certifying the safety of drugs and products.

In her important new book, *Death by Regulation: How We Were Robbed of a Golden Age of Health and How We Can Reclaim It*, Dr. Ruwart provides information which thoroughly refutes these assumptions.

Dr. Ruwart holds a B.S. in biochemistry, a Ph.D. in biophysics and spent 19 years as a pharmaceutical research scientist for the Upjohn Company. She has also chaired an IRB (Institutional Review Board), consulted with nutraceutical companies and been an expert witness against the FDA. Therefore, she is intimately familiar with the impact of the FDA and the laws and regulations it enforces. Her easily digest-

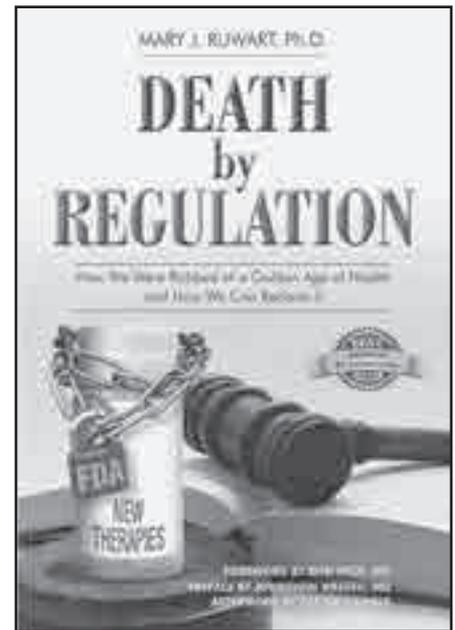
ible book focuses specifically upon the detrimental impact of the 1962 Amendments to the 1938 Food and Drug Act (“the Amendments”).

Dr. Ruwart reviews the burdensome effects of the Amendments, including a lengthening of the average period for new drug development

**Most people believe government agencies like the FDA keep them safe. This book explodes that myth.**

from approximately four years to 14 years. She explains the numerous additional requirements set forth in the Amendments, and the additional development time caused by them and provides heartbreaking examples of the effect of this wait time on those with life-threatening illnesses.

For example, she discusses how, in the early years of the AIDS epidemic, United States AIDS patients often had to travel to other countries with fewer regulatory requirements to obtain new therapies still unapproved by the FDA, sometimes having the drugs confiscated upon reentry to the United States. She further discusses black market AIDS Buyers’ Clubs that quickly formed in response to the need for thera-



Ruwart.com, ISBN-13: 978-0963233615

pies and hired chemists to make drugs undergoing development in violation of pharmaceutical companies’ patents. She also points out that, although making, selling and distributing these drugs without FDA approval violated the law, the FDA often took no action against most violators, “especially those in California who were well organized and vocal,” and that instead “the FDA selectively prosecuted those who were least likely to fight back.” This illustrates that organizing and fighting back against unfair laws can be effective in preventing or reducing their enforcement.

Dr. Ruwart also reminds us of the wholly unseen effect of the Amendments: the drugs that will never be developed, which otherwise likely would have been, due to the burdensome costs added by the Amendments. She shows how signifi-

cantly these costs have increased in the decades since the passage of the Amendments and the unsustainable trajectory of the costs. She further points out the logical conclusion, that, if unabated, these rising costs will result in no new drugs at all. Clearly, pharmaceutical companies will decline to develop drugs with anticipated developmental costs that exceed anticipated profits. Because these undeveloped drugs, which are never pursued by the pharmaceutical companies, are “unseen” by the American public, it fails to grasp the full extent of the harm caused by the FDA and the Amendments.

Dr. Ruwart also describes a paradigm shift, away from prevention and toward treatment, caused by the Amendments.

She reviews the importance of nutrition to health, with illustrations from her own experience in altering laboratory animals’ nutrition in order to create diseases for laboratory study. Ruwart also discusses the seizure of products, and even criminal prosecution, that companies selling nutritional products risk if they claim that their products can treat a disease.

She provides yet another heart-breaking example of harm caused by the Amendments in describing what she refers to as the “American Thalidomide” tragedy, which prevented folic acid manufacturers from advertising the benefits of folic acid, taken early in pregnancy, in preventing neural tube defects such as spina bifida. As Ruwart points out, this tragedy is especially ironic, because the Amendments were purportedly intended to prevent tragedies such as the birth defects caused by the drug thalidomide.

Perhaps the most important chapter in the book is Chapter 50, “Certification is the Alternative to Regulation.” This section may enlighten those who can imagine only state-oriented solutions to problems. The chapter discusses the existence of an effective, private solution for protecting consumers. Dr. Ruwart explains that certification occurs when professional or consumer groups give their “seal of approval” to a product or service and cites as an example the Underwriters Laboratories Inc. (UL), a private certifying agency that tests appliances and electrical hardware and grants, to those that meet its standards, its UL Seal of Approval. Most retailers will not sell appliances without the UL Seal of Approval and Ruwart points out that this voluntary, private certifying agency has been successful in keeping consumers safe for decades. She explains that, if FDA approval became optional, third-party drug testing and certification could become part of the “consumer landscape” to protect consumers.

Dr. Ruwart’s book strikes a solid blow to the myth of government as our protector and illustrates the harmful impact often caused by even well-intentioned laws and regulations. Her book is well-written, well-researched and should be added to the library of those interested in medical freedom. ♦

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## **From Death by Regulation**

“The 1962 Amendments to the Food and Drug Act, which were supposed to keep the American public safe from dangerous drugs like thalidomide, have actually done just the opposite.”

*From the Foreword by Ron Paul*

“(Dr. Ruwart demonstrates) that the Amendment-driven regulatory requirements drive drug prices up about 40-fold. ... Many pharmacists and doctors are concerned the FDA is attempting to destroy compounding pharmacies.”

*From the Preface by Dr. Jonathan Wright*

“Certification is the tried and true way for protecting the consumer. Certification differs from regulation in that consumers, rather than regulators, make the ultimate decision on whether or not to buy and use a product. ... (e)xcess regulation—such as licensing of optometrists, dentists, and electricians—lowers the amount of quality service delivered. By making service providers jump through costly and time-consuming regulatory hoops, the number of service providers is limited, and the service becomes so expensive that many consumers do without, thereby losing their health or even their lives. ... Overall, more quality service is delivered with certification.”

*From chapter 50: Certification is the Alternative to Regulation*

ing with the mother. The mother could not get a phone call returned from an attending physician. Who was the doctor? Apparently, the hospital system.

Recently, a physician called me about her mother, who was seemingly a captive in a world-renowned hospital. She was concerned about her mother's nutritional status and falling oxygen level. She could not speak to the attending physician. "They play musical doctors."

Largely driven by government policy, the System is increasingly in control. A new level of intrusion is being proposed in California in a bill (SB 276) that would outlaw all medical exemptions for vaccines, unless a public health officer approves each one, based on the very narrow list of contraindications accepted by the Centers for Disease Control and Prevention (CDC).

Doctors traditionally swore an oath not to harm patients, and are liable if they do. But government officials are immune from liability,

even if they overrule a physician's judgment that a particular patient faces an unacceptable risk of harm from a vaccine.

## If you disagree with your private doctor, you can fire him or simply decline to follow his advice. But what if the government is your doctor?

If you disagree with your private doctor, you can fire him or simply decline to follow his advice. But what if the government is your doctor?

In Arizona, law enforcement officers in tactical gear broke down the door to a home where children were sleeping, entered with guns drawn, and took three little children away from their parents. The stated reason: The mother had decided not to follow a doctor's advice to take her 2-year-old to the emergency room for a fever, because the fever broke and the child got much better soon after leaving the office. The main concern seemed to be that the child was not vaccinated.

Americans need to defend their

right to have an independent physician, to choose their physician and type of care, and to give or withhold informed consent to medical treat-

ments. Otherwise, their "doctor" will be a protocol in a system staffed by interchangeable automatons. Treatments will be inaccessible or required, tailored to meet the needs

and beliefs of the system.

If the government is the ultimate authority on your "health care," remember that its tools for checking whether a child has a life-threatening disease such as meningitis include battering rams and assault rifles. ♦

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*Samaritan Member Dr. Jane Orient has been in solo private practice since 1981 and has served as Executive Director of the Association of American Physicians and Surgeons (AAPSONline.org) since 1989. She is president of Doctors for Disaster Preparedness. She is the author of YOUR Doctor Is Not In: Healthy Skepticism about National Healthcare, and the second through fourth editions of Sapira's Art and Science of Bedside Diagnosis.*

### Disturbing trends in health care

- For every hour physicians spend seeing patients, they spend nearly two additional hours on paperwork/Electronic Health Records (*Annals of Internal Medicine*: [bit.ly/andoctim](http://bit.ly/andoctim)).
- 67 percent of medical professionals say they are likely to stop practicing within the next five years as a result of burnout (Genia Survey: [bit.ly/geniastud](http://bit.ly/geniastud)).
- 84 percent of physicians say they have witnessed coworkers put patients in danger due to shortcuts (American Association of Critical Care Nurses: [bit.ly/aacnstud](http://bit.ly/aacnstud)).
- The U.S. will face an estimated shortage of 120,000 doctors by 2030 (Association of American Medical Colleges: [bit.ly/AAMcstud](http://bit.ly/AAMcstud)). ♦

and ministries discovered this radio series, it has been translated and recorded into other languages and can now be heard around the world.

“The materials we produce in ROCK International are chronological and aim to give the big picture of God’s plan—from creation to Christ to New Creation,” Paul says. “These resources help people who know little or nothing about the Bible to connect the dots between the Old and New Testaments and see how everything points to Christ and His redemptive work.”

In 2009, Paul was in Egypt teaching a group of Arab believers how to present the Gospel step by step, starting with creation. Paul observed that they did not have any children’s Bible resources that made the Gospel clear by telling and explaining key Old Testament stories that involved animal sacrifices. Also, what they did have presented a blue-eyed, Western-looking Jesus.

“I went home with a burden that day to put together a picture book for all ages and for all cultures, and

out of that came *King of Glory*,” Paul states.

*King of Glory* is a 70-scene picture book that outlines the whole

**These resources help people who know little or nothing about the Bible to connect the dots between the Old and New Testaments and see how everything points to Christ and His redemptive work.**

of Scripture chronologically. After nearly two years of work, just as the book was going to publishing, the Lord put a new idea on Paul’s heart: to turn the book into an animated movie. Paul had made movies as a

hobby while growing up, and now God would use this talent to spread His Word to people and nations around the world. In 2015, Paul and his team released *King of Glory*, a 3-hour, 42-minute production. Today, the film can be viewed in more than 30 languages, with many more in translation and production.

*King of Glory* is broken down into 15 different episodes, averaging about 15 minutes each, viewable at [King-Of-Glory.com](http://King-Of-Glory.com). Paul and his team have also created a curriculum to go with the movie.

ROCK International continues to reach men, women, and children around the world with the Hope of the Gospel.

“Pray for us,” Paul says. “This ministry is growing. With so many resources in so many languages, creating so much opportunity, we need more help.” ♦

## Why SMI?

**The personal aspect** of Samaritan Ministries is what ultimately drew Paul and Carol Bramsen to membership just over three years ago.

“We had been members of another health care sharing ministry for 12 years when we started looking into other options,” says Paul, president of ROCK International. “What appealed to us most was this aspect of sending directly to other members and connecting personally with them.”

Paul says he and his wife were thankful for the years with the other ministry, but it felt too much like insurance, and he wanted something different. After looking into Samaritan Ministries, Paul

was “impressed with the model” and liked how his monthly checks would directly help to bear the burden of other brothers or sisters in Christ.

“When we started looking into Samaritan, we really liked the way it was set up and how Samaritan handles things,” Paul says. “There’s a simplicity to it.”

In the three years Paul and Carol have been members, neither one has submitted a need, but they are thankful to be part of a ministry they can trust should one arise.

“Samaritan seemed to have a good reputation, and I felt it was something that would work well for us in the years to come,” Paul concludes. ♦

## Prayer for the Persecuted Church

*Hebrews 13:3 tells us to*

*“Remember those who are in prison, as though in prison with them, and those who are mistreated, since you also are in the body.”*

*Our brothers and sisters in Christ around the world are being persecuted for the sake of the Gospel. We need to remember them in prayer. Each month, we will provide updates and offer prayer points gleaned from a variety of sources. Please use them in your personal or group prayer time.*

### **China persecution intensifies**

Crackdowns on Christians in China continue to increase.

- Preaching permits of 57 state-sanctioned preachers from Henan Province have been revoked, International Christian Concern reports. While Chinese authorities largely have targeted the underground Church for harassment, it is including state-backed churches more frequently. *Pray that the true Gospel can be preached through these churches and for these pastors to be able to share Christ without hindrance.*
- Local authorities sealed off a house church in Henan province on March 6 for violation of religious regulations, ICC says. Rock Church can be seen emptied out in a video uploaded by church leaders. The power was cut and the doors sealed. *Pray that members of Rock Church will be able to find ways to gather for worship, and that their church will be reopened.*

- Shouwang Church, one of the largest congregations in Beijing, has been officially banned, ICC says. More than 20 police officers and other government officials raided a Bible school class there on March 23 and read a document formally banning the church. They say that the church “has conducted activities as a social organization without registration.” Several others from another location affiliated with Shouwang also were detained and interrogated. The church was also targeted in 2011 for its refusal to become a state-sanctioned church. *Pray that Shouwang Church’s members will find ways to gather for worship and that they will stand strong against unjust government demands.*

### **Ukraine churches threatened**

A compulsory reregistration process for churches in eastern Ukraine has been accompanied by government threats against congregational gatherings, Mission News Network reports. That area of Ukraine has been considered an occupied war zone since Russia occupied the Crimea peninsula. Pastors are being told that meeting for worship could result in raids and fines. *Pray that Christians will be able to navigate the difficult political situations in that region of Ukraine and that pastors will find ways to minister to their flocks.*

### **Nigerian church destroyed**

A church was destroyed in a Nigerian village on March 16, ICC says. Boko Haram insurgents attacked the village of Lassa, burning down six homes besides the EYN Church (Church of the Brethren).

One person was killed and two sisters kidnapped. “These frequent attacks on churches and members are really weighing us down,” a senior church leader said. The March attack followed similar incidents in other Nigerian villages. *Pray for the family of the man who was killed, and for the safe return of the sisters, Stella and Plungwa Ibrahim. Pray also for safety for all innocent citizens in Nigeria.*

### **10 churches destroyed**

Ten churches and everything inside them were burned and destroyed by a Muslim crowd in the town of Halaba Kulito in southern Ethiopia on February 9, leaving about 10,000 Christians without worship homes, ICC reports. There were only a few injuries as the crowd focused on burning Bibles and furniture. Despite the Saturday destruction, the believers gathered the following day for worship under protection of security officers. Several members of the mob were arrested. *Pray for financial and materials provision for the congregations that lost their buildings and resources. Praise God for the strong faith of those Christians affected.*

### **Pastor severely beaten**

A Christian pastor was severely beaten by Hindu radicals in a West Bengal, India, church on March 20, ICC reports. Pastor Anand Hari reportedly took the brunt of the assault, needing hospitalization. Members of the Full Gospel Evangelical Church had gathered in a member’s house for morning prayer led by Rev. Hari. *Pray for the minister’s full recovery from his injuries and protection for Christians in that area.* ♦

*For more on the persecuted church, contact International Christian Concern (persecution.org, 800-422-5441) or World Watch Monitor (worldwatchmonitor.org)*

**The shares that** come in with personal notes expressing prayers and telling tidbits of life are a real encouragement and blessing! We would encourage all members to take the time to write a personal note. It's an important form of fellowship for us as believers.

*Justin & Jaclyn  
Wisconsin*

**Of course, when** I joined Samaritan I did not anticipate having a Need. I was looking forward to being able to help fellow brothers and sisters through health care by sending encouraging notes and my share. This year things changed and I am on the receiving end.

As I opened the letters and read each note, tears filled my eyes. God was blessing me beyond what I can express in words. I am so grateful for the encouragement, love, and support of my Christian family. Thank you!

Please, please share with members how incredibly important it is to receive a note. In some ways, it is more important than the financial need being met. God is so good!

*Jayne  
Minnesota*

**We have been** members now for almost 20 years, and have been blessed through several Needs that were shared. It's also a privilege and joy to be able to help someone with their Need each month.

We appreciate the help and prayers from the staff when we contact them, as well as the notes and prayers of the members who sent us their Share.

Herb was able to celebrate his 90th birthday with family after

getting out of the hospital. There have been some hard times but he is doing well now. We praise God for answers to prayer and the many ways He has met our needs. Samaritan Ministries and the members have been so faithful to us through the years, and we thank God we are part of a truly Christian health sharing ministry. We pray God's blessing on the future of this ministry. Thank you!

*Herb & Jane  
Ohio*

**In light of** all the wickedness and ungodly decisions of state governments with new abortion laws, I am blessed to know I am part of group of people where my monthly shares do not promote the killing of innocent babies and other ungodly behavior. Thank you to the Board of Directors and staff for your stand on the Word of God.

*Jason  
Illinois*

**I'm so thankful** for Samaritan members and the many wonderful staff and resources available to me. After a painful experience with providers on my previous Need, I used Healthcare Bluebook to research quality and price ratings on my current Need. I had to have an MRI on my knee and Bluebook indicated \$750 would be a reasonable price in my area, but I was able to call ahead and get a cash pay rate of \$450. Thank you, Samaritan Ministries.

*Brenda  
Mississippi*

**I am so** thankful for this ministry and the opportunity it provides me to minister to others in the Body of

Christ. Every time I have had a Need, I have been able to pay my bills in full, and I have been encouraged by so many people who I don't even know. I thank God for this ministry as I also use the Prayer Guide to pray each day for the person listed. What a blessing to be able to help others by prayer and sharing each other's Needs.

*Joni  
Montana*

**My husband and** I are both small-business owners and we were being overwhelmed with the cost of health insurance. Two years ago we joined Samaritan and feel so blessed to have found this ministry that feels like a family.

Members ministered to us through our recent Need, and our hearts have come to know the meaning of "Be still and know that I am God." We learned to keep trusting in Him and it will be OK. The caring notes, prayers, and support we received have inspired us to generously share with others. What a blessing!

*Bruce & Susan  
North Dakota*

**When my husband** passed away 12 years ago, I found Samaritan and I'm so thankful I did. I've had two Needs and am very grateful they were both met. I'm also impressed with the staff's kindness.

Both times the providers settled for a third of what they initially billed. The Lord truly does take care of the widow and you are part of that blessing and provision. Thank you!

*Shirley  
Oregon*

Like a muddied  
spring or a polluted  
fountain is a righteous  
man who gives way  
before the wicked.

Proverbs 25:26

Most Christians would agree that our culture is polluted, as we see the evidence in our media, our entertainment industry, and our government. What is the reason for this?

The passage above says that when the righteous give way before the wicked, it is the righteous who are like a muddied spring or a polluted fountain. If we, God's people, do not persist in contending for righteousness, we become useless and repulsive.

By faith, we Christians need to stand together for righteousness in our culture, even if it is inconvenient,

difficult, risky, or seemingly futile. Wickedness should not prevail in our culture because we believers don't care enough to oppose it or have given up.

Do we care as much for Truth as our opponents care for falsehood?

For the Kingdom,



Ray King