

# Cryonics



Volume 13(12) • December, 1992

ISSN 1054-4305 • \$3.50

ALCOR

**History of a Cryonicist**

*Cryonics* Interviews Hugh Hixon

## Feature Articles

- Alcor's Operating Budget for 1993**  
*Carlos Mondragón* 10
- History of a Cryonicist**  
**An Interview with Hugh Hixon — Part I**  
*Ralph Whelan* 11
- Review: *The Whole Truth: The Myth of Alternative Medicine***  
*Thomas Donaldson* 25

## Columns

- For the Record**  
*Mike Perry* 3
- Future Tech**  
*H. Keith Henson* 6
- The Real World Interface**  
*Charles Platt* 7
- Cryonics Forum — Alcor Spinoffs**  
*H. Keith Henson* 19
- Cryonics One Decade Ago**  
*Ralph Whelan* 21

## Departments

- Up Front 1
- Letters to the Editor 2
- Membership Status 18
- Business Meeting Report 23
- Advertisements & Personals 26
- Upcoming Events 29

# Cryonics

Volume 13(12)  
December, 1992  
Issue 149, ISSN 1054-4305



*Cryonics* is the magazine of the Alcor Life Extension Foundation, Inc.

Editor: Ralph Whelan  
Contributing Editor: Hugh Hixon  
Production Editors: Eric Geislinger and Jane Talisman

Published monthly. Individual subscriptions: \$35 per year in the U.S.; \$40 per year in Canada and Mexico; \$45 per year all others. Back issues are \$3.50 each in the U.S., Canada, and Mexico; \$4.50 each all others.

Please address all editorial correspondence to ALCOR, 12327 Doherty Street, Riverside, CA 92503 or phone (800) 367-2228 or (714) 736-1703. FAX #: (714) 736-6917. E-mail: [alcor@cup.portal.com](mailto:alcor@cup.portal.com)



Contents copyright 1992 by the Alcor Life Extension Foundation, Inc., except where otherwise noted. All rights reserved. The opinions expressed herein are not necessarily those of the Alcor Life Extension Foundation or its Board of Directors or management.

### Alcor Board of Directors

Carlos Mondragón, *President*  
Ralph Whelan, *Vice President*  
David Pizer, *Treasurer*  
Keith Henson  
Hugh Hixon  
Brenda Peters  
Steve Bridge  
Mark Voelker  
Allen Lopp



Issue to press: November 11, 1992.

---

*Cover: Hugh Hixon is interviewed by Ralph Whelan in this month's cover story.*

## Read This!

For everyone planning to attend the December 6 Annual Alcor Turkey Roast — and for those who *weren't* planning on it, but just now realized *they just can't miss it* — PLEASE NOTE THE FOLLOWING CORRECTION TO THE PREVIOUSLY PUBLISHED DIRECTIONS:

Take the 405 to the Santa Monica Blvd. offramp and go East on Santa Monica Blvd. to Beverly Dr., in Beverly Hills. Go left (North) on Beverly to Benedict Canyon Dr./Canon Dr. at Will Rogers Memorial Park. Bear left onto Benedict Canyon Dr., with the park on your right (*not left!*), across Sunset Blvd., with the Beverly Hills Hotel on the right (*not left!*). Go up Benedict Canyon Dr. to Angelo Dr., then go left (*not right!*) up the hill on Angelo past Hillgrove Dr. to Sunbrook Dr. Turn right (*not left!*) onto Sunbrook and go about 100 yards to the top of the street. 10106 Sunbrook Drive is on the right, just short of the top.

And of course, this is the last reminder you'll get, so *call your friends*. We'd like to see some more new faces this year. And don't forget that this is a pot luck engagement. Call Alcor to coordinate with us on what you plan to bring, especially if you're planning on bringing a dessert.

The festivities start at 1:00 pm. See you there!

## The Voting's Not Over Yet

Many of you will recall that a couple of months ago, *Cryonics* published Alcor Member Michael Riskin's Letter to the Editor explaining that he is acting as a temporary "Alcor Ombudsman," which means that he acts as a liaison between members and the Alcor Board of Directors. His letter also explained that a permanent Ombudsman would be voted in by the members sometime soon.

The voting *will* be soon, but first comes the call for nominations. This is your chance to put anyone, including yourself, on the ballot for the position of Alcor Ombudsman. Please keep in mind that this position requires the publication of the Ombudsman's phone number in *Cryonics* magazine for general (and anonymous)

contact by members and non-members alike. Call or write in with your nominations by December 7, 1992.

## More Omni Good News

In January of 1992, *Omni* magazine published a one-page article called "Confessions of A Cryonicist," written by Alcor Suspension Member Charles Platt. To date, that article has netted more requests for information about Alcor (over 1400) — as well as more subscriptions to *Cryonics* and more Applications for Suspension Membership — than any other single media event. What could top that? This could: In the January, 1993 issue of *Omni*, due to hit the stands sometime in December of this year, the *cover article* will be "The *Omni*/Alcor Immortality Contest." This contest will encourage *Omni* readers to write a 250-word essay about why they would like to be placed into cryonic suspension by Alcor immediately after death, for potential revival at some future date.

Along with the contest announcement, *Omni* will publish an article by Charles Platt emphasizing that cryonics has "come of age," and that it should be seriously considered by everyone. Our understanding is that in fact *Omni* will emphasize *on the cover* that cryonics has come of age. Also, Alcor's handbook (*Cryonics: Reaching For Tomorrow*) will be described at the end of Charles' article, and the 800-number will be given. And within 12 months of the contest announcement, Alcor will have (as part of the contest agreement) two full-page ads in *Omni*.

*Omni* plans to go "all out" in advertising this contest, so the potential for positive publicity for Alcor is very exciting. It's interesting to note that previous *Omni* contests have brought in hundreds of thousands of entrants. By the time you read this, the contest will be only a couple of weeks from hitting the stands.

## 1993 Is Coming

Which means that 1992 is *going*, which means that there are only a few weeks left to send in that year-end tax-deductible donation. As you can see from the Budget article by Carlos Mondragón elsewhere in this issue, Alcor is closer than

ever before to supporting all of its operations with regular income. But that's with no rocks in the road, a minimalist research projection, and very little room for growth and improvement.

We want better than that. We want more Certified Transport Technicians in every part of the U.S. and the world. We want more input and assistance from professional medical personnel. We want a strong outreach and assistance program for local chapters. We want improvements in the technical state of the art. Then we want 1993 to be Alcor's biggest and most productive year ever! With your help, it will be all of these things and more.

## Presidential Response

At Alcor's September Board of Directors meeting, Carlos Mondragón gave the Directors his written response to *It's Time for a Change*. Anyone who received a copy of that volume and would like to see Carlos' response to the Board should call Carlos at Alcor to request a copy.

## Audit Update

At the November meeting the Alcor Directors authorized a Membership Audit Committee to arrange and oversee the audit of Alcor's 1992 financial records. Committee members are Robert Krueger, Bill Seidel, Courtney Smith, Austin Tupler, and committee chairman Michael Riskin.

Based on quotes received to date, it is expected that the audit plus bonding of Alcor financial officers can BOTH be arranged for a total of slightly over \$18,000. Alcor Director Allen Lopp has been in charge of fundraising for these efforts, and he reports that about \$13,250 have been received or pledged as of CRYONICS press time.

Thanks to each of you who has already supported this effort so generously. And to those of you who haven't responded yet, please consider contributing to this very worthy project. As always, your donation to Alcor is tax deductible.



## Letters to the Editor

Dear Sir,

Your recent article about the survey into members' thoughts about remote standby was very interesting, but to my mind had a major flaw. It was specifically aimed at members in North America. This was not simply because no one responded from anywhere in the rest of the world, but because the original questionnaire specifically excluded those of us "overseas" (from your point of view).

It seems that Alcor's policy is only to *consider* remote standby for those who are not very remote. What should the rest of us do, go on the Walford diet and hope to outlive you?

Yours sincerely,  
Garret Smyth

*The reasons for not including "overseas" members in any near-term remote standby contract plans are not ethical or philosophical, but instead are purely practical. In the interest of not biting off more than we can chew (something we've been known to do. . .), we plan to first work out such a contract for members in the continental U.S., and then work to include European and Australian members as we climb the learning curve. I can only suggest that you continue working to improve your local response capability, while we continue working to improve our overall response capability.*

*And of course, it goes without saying that you should be on the Walford Diet. — Ed.*

Dear Editor:

I have been told that Walt Disney has been cryonically suspended. Is this correct?

Yours Truly,  
J. Mutch  
W. Vancouver, BC

*There is a small list of people — fewer than 15 — who have been cryonically suspended by Alcor, and who have given permission for public dissemination of this fact. Walt Disney is not on that list. — Ed*

The Riskin Report:

As of November 1, 1992 I wear three

Alcor hats: Ombudsman, Internal Auditor, and Membership Audit Committee Chairman. (I am also the self-appointed czar of Relationships Humanistica Alcoris.)

### Hat 1: Ombudsman

I received several inquiries last month. One member expressed interest in promotion of the qualitative human aspects of cryonicists as a complementary and parallel quest to the ever popular biotechnological/forensic/bionomic efforts. It's a bit soon for a "Love-In" — I suggest your basic "Respect-In" as a starter.

I recommend that all Board members be administered a basic qualification examination covering Alcor "operations," and that they be given remedial training if necessary. Questions would cover Alcor history and basic accounting/procedural/statistical knowledge.

### Hat 2: Membership Audit Committee Chairman

We solicited bids from five auditing firms. They are being evaluated. The goal is to obtain a quality audit at a fixed/affordable fee. The audit will also include an internal controls review.

### Hat 3: Internal Auditor

The rules governing the administration of the Endowment Fund are finalized! (See **Business Meeting Report** elsewhere in this issue.) I am pleased with the results. Lessening our exposure to excessive remote standby expenses is also being vigorously pursued by the board.

I recommend that more stringent controls be placed on funds maintained at banks and other financial institutions. These funds can currently be totally withdrawn by two signatures. Carlos Mondragón and myself will work out procedures to reduce this risk.

In addition to a general operating budget, a similar projection is necessary for the Patient Care Trust Fund. Carlos has agreed to present such a projection at the January, 1993 meeting of the Board of Directors.

### Miscellaneous — All Hats At Once

I am following up on several other member concerns:

General lack of clear, consistent communications between members and management

Concerns about California as a place of operation (economically, seismically, etc.)

Administrative items concerning new bracelet requests and dues status

Respectfully,  
Michael Riskin  
Santa Ana, CA

P.S. Don't forget to ask yourself. . . "Is what I am about to do likely to maintain or increase the possibility of life extension?"

Dear Editor/*Cryonics*:

I would like to respond to two reports in the September 1992 issue of *Cryonics*. First, H. Keith Henson's "Research and Development" was very good. Hopefully someday this will be a feature in every issue of *Cryonics*. Cryobiology and organ transplants are growing very fast. Our government is getting more and more involved. I've sent reports on this to Ralph Whelan. This could become our greatest double-edged sword. More pressure on all of us from new laws, states, doctors, hospitals, etc. When young people need organs (lives to be saved) cryonics will really be looked down upon, even more so if we don't get "Research and Development" in high gear! Mr. Henson is right: research and results will do more than all of us could do put together.

The write-up from Charles Platt on "Seven Reasons Why Small is Beautiful" struck me because I've had many talks with Steve Bridge about this. I could be way off base here but I don't think so. Worldwide acceptance and growth is not the answer. "Quality" growth with research development (internally) and results are the winning knock-out punch. Quality for us means new healthy members under the age of 40. A scenario would be of having no "game plan," no targets, and throwing cryonics out to the world. Having a million people sign up with cancer, AIDS, on their third heart attack won't cut it. The door can always be open but we must find new methods and get more "focused," more "fine-tuned." I'm in development of a project in this area now



which I've reported to Carlos Mondragón. Even with total reversible suspensions the bias that keeps people from signing up now could forever be with us. I can only think of the history on gay people. Not

many people thought mass acceptance and growth could be achieved with homosexuality. Yet even today the day-to-day life, laws, and issues are not easy at best. I think the subject of cryonics will be met

with much more resistance if mass growth becomes a major goal for Alcor.

Matt Swanson  
Chicago, IL

---

## For the Record

---

### Winwood Reade's *Martyrdom*

Michael Perry



An article in the September *Cryonics* featured excerpts from *The Martyrdom of Man* by Winwood Reade (1872), a remarkably prescient work. Among other things, the book predicts a technological revolution that will elevate mankind to transhumanity. (The article in turn was based on a *Cryonics* article of ten years earlier.) Here I'd like to take a closer look at *Martyrdom*, to better assess Reade's contribution to pre-cryonics immortalist thinking. The book is Reade's major statement on this topic and also his best-known work and chief claim to fame, though it is not primarily concerned with forecasting the future, but rather with times already past. Nevertheless, in seriously proposing, in a pre-computer era, that man engineer immortality through scientific means, Reade enters a rarified company of seers whose thinking is still too disturbing for most people to accept.

The book, some 350 pages in modern format, is in broad sweep a recounting of world history, with emphasis on Western civilization. Reade imagines three great epochs: an ancient time shaped by warfare, extending into the early centuries A.D., a medieval period dominated by religion — mainly, Christianity and Islam — and a modern era, beginning about 1500, characterized by a struggle for liberty. The fourth and last section, on "the intellect," summarizes man's history in a larger cosmological context, and offers a view of where we ought to be heading.

Something of Reade's background and interests will help in understanding his

views. Born in 1838 to a British family of some means and accomplishments, he led a rather dissipated life as he tried, repeatedly without success, to launch a literary career. Early on he acquired a dislike of various social institutions, including the university system and the clergy, which extended to basic views and practices. The publication in 1859 of Charles Darwin's *The Origin of Species* had significant repercussions. With the possibility of man being descended from apes, interest in such creatures was heightened, and in 1861 stuffed specimens of a reputed large manlike creature were exhibited in London by one Paul Du Chaillu, an African explorer who lacked academic credentials. When a hoax was suspected (today it would be lumped in the "bigfoot" category) Reade determined to settle the controversy himself. In December 1862 he began an African voyage, and soon vindicated Chaillu (his beast was the gorilla). Reade's African explorations continued for a year and included close observation of the slave trade in Portugese-held territory in the Congo. Returning home he published an account of his travels (*Savage Africa*) then suffered more literary failures. A second voyage to Africa was undertaken (1868-70), in which Reade made notable contributions to geography and ethnography at considerable personal risk. (These adventures would be recounted in *The African Sketch Book*.) Then in 1872 appeared *The Martyrdom of Man*, a work destined, unlike his other efforts, to be reprinted often and read by many. But

Reade himself did not live long to enjoy his triumph. Having endured severe bouts of dysentery and malarial fever on his second African expedition, his health was permanently weakened, and he died, aged 36, early in 1875.

On the whole I found *Martyrdom* (which I had no trouble obtaining at a local library) to be quite readable and entertaining, despite its early date (many new archeological discoveries having since been made) and some obvious flaws. Many episodes of history and prehistory are imaginatively reconstructed, for instance, without proper attestation, and probably wouldn't hold much sway with specialists of today. Reade also is somewhat prone to male-caucasian-western-cultural chauvinism, and would surely flunk a modern test of political correctness, but some allowance must be made for the times in which he wrote. (His intentions were not malevolent, racist, or sexist, and I didn't see his excesses in this and other areas as a serious problem.) The style is a bit overblown, but not bad, all things considered, and often packs a considerable punch. As for content, Reade surveys many cultures of different times and places and sees recurring patterns. The myths of one culture, for instance, differ in detail but not in essential nature from those of another. They serve their purpose, then are rightly discarded. Science and technology are of more enduring value, and will yet elevate mankind to godhood.

What most impressed me, aside from the budding immortalism, was Reade's

courageous attack on Christianity, which he firmly believed was among the great detriments to society. (Reade was led in this to positions I don't entirely agree with, but that does not diminish my respect for his undertaking this clearing of the air at a time when it would have been most unpopular and possibly physically dangerous.) A later writer commented: "It is very difficult, perhaps, for any of the present generation to realize the extraordinary reverence with which even the letter

of the Bible was treated in the early [eighteen] seventies, or the indignation with which any attempt to cast doubt on the exact truth of its narrative was repelled. ... The horrors attending the rising and suppression of the Communist Revolution in Paris had confirmed the fear common to most moderate men brought up in this faith that its maintenance was, in some not very clearly defined way, inextricably bound up with the very foundations of society; and the professors of revealed religion took abundant care that the lesson was not lost for want of reiteration. Hence Reade could hardly have chosen a worse time than he did for his assault upon this cherished belief, against which he ran, after his fashion, full tilt."<sup>1</sup> Something of the flavor of Reade's criticism can be gathered from his own words: "... I undertake to show that the destruction of Christianity is essential to the interests of civilisation that the reason shall be sacrificed upon the

altar; it orders civilised men to believe in the legends of a savage race. ... Those who believe in a God of Love must close their eyes to the phenomena of life, or garble the universe to suit their theory. ... God-worship must be classed with those provisional expedients, Famine, War, Slavery, the Inequality of Conditions, the Desire of Gain, which Nature employs for the development of man, and which she throws aside when they have served her turn, as a carpenter changes his tools at the various stages of his work. ..."<sup>2</sup>

What Reade proposes as an alternative is transhumanism: "We can conquer nature only by obeying her laws, and in order to obey her laws we must first learn what they are. When we have ascertained, by means of Science, the method of na-

ture's operations, we shall be able to take her place and to perform them for ourselves. ... Disease will be extirpated; the causes of decay will be removed; immortality will be invented. And then, the earth being small, mankind will migrate into space, and will cross the airless Saharas which separate planet from planet, and sun from sun. ... Finally, men will master the forces of nature; they will become themselves architects of systems, manufacturers of worlds. Man will then be perfect; he

unjust that we also should suffer for the benefit of those who are to come? Famine, pestilence, and war are no longer essential for the advancement of the human race. But a season of mental anguish is at hand, and through this we must pass in order that our posterity may rise. The soul must be sacrificed; the hope in immortality must die. A sweet and charming illusion must be taken from the human race, as youth and beauty vanish never to return."<sup>4</sup>

Reade's alternative, for the there-and-then, was surprisingly not totally anti-religious. Instead he postulated a sort of collective God, a pantheistic entity, "the One of whom we are the elements, and who, though we perish, never dies, but grows from period to period and by the united efforts of single molecules called men, or of those cell-groups called nations is raised towards the Divine power which he will finally attain." This translated to a theology of humanism: "Our religion therefore is Virtue, our Hope is placed in the happiness of our posterity; our Faith is the Perfectibility of Man."<sup>5</sup>

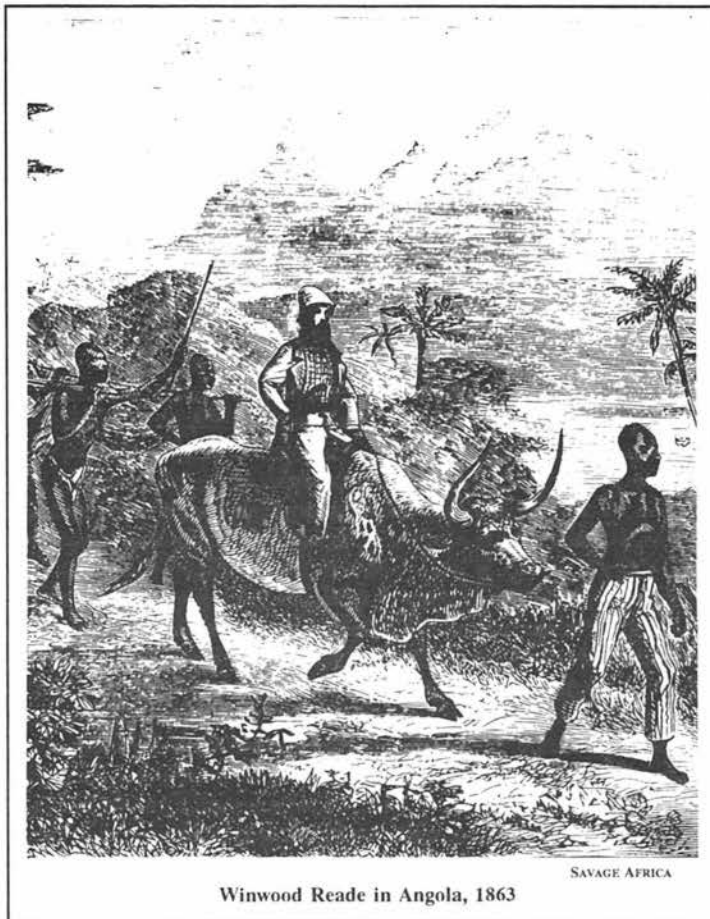
Today, 120 years after the publication of *Martyrdom*, I believe we have

witnessed a remarkable triumph of these views, particularly in industrialized nations around the world. As immortalists, though, we say that there is something better, something also foreseen by Reade, though he knew it would have to wait. Now the

time of waiting is over. For we proclaim *ending* the martyrdom of man, terminating the sacrifice of individuals, first through the holding action of cryonic suspension, and then through the technology that will make us immortal, which even now is beginning to be developed.

Sources: *Cryonics*, Sep. 1992, Jan. 1992, Sep. 1982; *The Martyrdom of Man* by Winwood Reade, 24th ed. intro F. Legge, Dutton reprint, 1926.

Quotations from *The Martyrdom of Man*: 1. pp. xxxiii-xxxiv (introduction); 2. pp. 468-9, 473; 3. pp. 458-60; 4. p. 485; 5. p. 480.



Winwood Reade in Angola, 1863

will then be a creator; he will therefore be what the vulgar worship as a god."<sup>3</sup>

Unfortunately, as Reade well knew, that would not happen anytime soon. The hard facts of reality and his uncompromising logic forced him into a viewpoint (rather like Lucretius some nineteen centuries earlier) that would not please the modern immortalist. Sure, eventually man would engineer his own immortality, but for now we must abandon that hope. To quote the closing lines of the book (which also, incidentally, explains its title):

"I give to universal history a strange but true title — *The Martyrdom of Man*. In each generation the human race has been tortured that their children might profit by their woes. Our own prosperity is founded on the agonies of the past. Is it therefore

Now! *Freely Available To Americans...*

# EUROPEAN SMART DRUGS!

You don't have to wait for the FDA to "approve" of new memory and intelligence enhancing therapies. For your personal use, you can obtain therapies that can:

- Enhance mental function *four times* better than Hydergine!
- Increase mental energy, concentration, and alertness!
- Maximize the ability to memorize facts, figures, and scientific findings
- Increase learning, mental agility, and I.Q.
- Improve test scores leading to higher grades and work productivity!
- Prevent and treat degenerative brain diseases including Alzheimer's Disease, Parkinson's Disease, etc.

The Life Extension Foundation has compiled the sources, the doctors and the information to enable Americans to obtain life extension therapies from around the world. These drugs have been safely used in France, Germany and other countries for years, but until now, have been denied to Americans.

Europeans are using these drugs to improve their mental condition to unprecedented levels. Now Americans can gain access to advanced life extension therapies such as Piracetam, Centrophenoxine, human growth hormone, and a new memory-enhancing product that is *four times* more effective than Hydergine.

As a member of The Life Extension Foundation, you will learn about the scientific basis for using these life-enhancing therapies, their side effects, and how you can get them!

For just \$50.00, you will receive *Life Extension Report* and *Life Extension Update* each month plus:

1. *The Directory Of Life Extension Doctors*. A nationwide directory of doctors who are knowledgeable about these advanced therapies and may be willing to prescribe them for you.
2. *The Physician's Guide To Life Extension Drugs*. The first book ever published to provide American doctors with information about safe and effective "unapproved drugs". This book is referenced to enable the lay person to understand and find therapies for specific purposes.
3. *The Directory Of Innovative Medical Clinics*. If you were told you had an incurable disease would you believe your doctor? A disease your doctor says is "untreatable" may already have a cure that the FDA has not yet "approved" of. There are scientists with impeccable credentials who are effectively treating so-called "terminal" victims of cancer, Alzheimer's Disease, etc. You can now access these advanced research centers with *The Directory Of Innovative Medical Clinics*.
4. *Discounts of 25% to 50%* on your vitamin purchases. Members buy name brand nutrient supplements and advanced life extension formulas at super discount prices.
5. *Discounts of 20%* on all your prescription drug purchases including popular life extension drugs such as Hydergine and Eldepryl. THE MAIL-ORDER PHARMACY saves members hundreds of dollars a year on their prescription drug purchases.

The Life Extension Foundation is the only organization in the world that tells you how to obtain the most advanced life extension therapies in the world...long before they are "approved" by the FDA. You will be the *first* to find out about products that will enhance your life.



Mail to:  
Life Extension Foundation  
P.O. Box 229120  
Hollywood, Florida 33022

To join, use the coupon or call: **1-800-841-5433**

Enclosed is my \$50.00 membership. Please enroll me in your life extension program which includes two newsletters each month and the three directories of life extension doctors, drugs, and clinics and the super discounts on my vitamin and prescription drug purchases. C

Name \_\_\_\_\_

Address \_\_\_\_\_

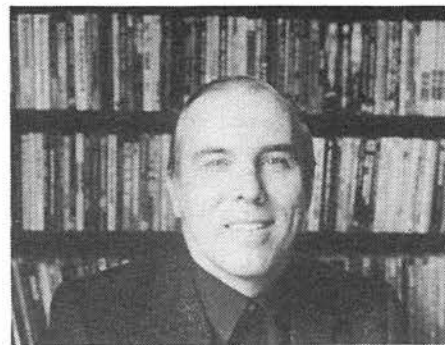
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Credit Card # \_\_\_\_\_ Exp Date \_\_\_\_\_



### Time and Again?

H. Keith Henson



---

The Extropian mailing list is always a source of ideas for these columns — though with the traffic sometimes running to 100 messages a day it can be overwhelming. A substantial percentage of the people on the list are signed up with Alcor or ACS.

Someone posted a speech by Hans Moravec (author of *Mind Children* and well-known robotics researcher) which concluded with a section about a distant and processor dominated future. A list regular picked out this part near the end. .

"If these [future] minds spend only an infinitesimal fraction of their energy contemplating the human past, their sheer power should ensure that eventually our entire history is replayed many times in many places, and in many variations. The very moment we are now experiencing may actually be (almost certainly is) such a distributed mental event, and most likely is a complete fabrication that never happened physically."

. . . and asked if Hans was serious. And if he was, how did he arrive at "almost certainly?"

I replied: "This is one of those, 'Ha, Ha . . . only seems unavoidable.' Chances are he thought it up himself, but I have long expressed (and may have mentioned it to Hans) the concept that our remote decedents will simulate history with many variations just as we have programs today which simulate the early evolution of life, or the Society for Creative Anachronism reenacts Medieval battles. Given a universe almost entirely converted to computational and memory elements, simulating the 20th century down to an arbitrary level of detail (well below that noticeable to the agent/actors inside it) would be a project for the Speilbergs and Lucases of the day.

"In fact, it seems inevitable that they would rerun it more often than we have rerun *Casablanca*. Given a lot of time, they would run it vast numbers of times — making the chance that this is the very first and 'real' running of history negligible.

"To an actor inside such a reenactment, there is no way to tell it from the 'real thing.' I try not to let such a thesis effect my actions, because we have to assume that this may indeed be the first time, and even if it is not, we should do the best we can with the cards we have to play. But it still bothers me when I catch the stage hands out of the corner of my eye changing the scenery. :)"

Another reader took this last line a little too seriously — an ever-present danger in this medium. My reply to him was: "Before this drifts off in a direction where I am accused of being more mystical than is justified, let me repost the sentence:

- > But it still bothers me when I
- > catch the stage hands out of
- > the corner of my eye changing
- > the scenery. :)"

"The grin emoticon [:]) is meant to negate the last sentence! (Emoticon = emotional icon.) Perhaps I should have used an alternate emoticon, :^), tongue-in-cheek, because this is certainly my feeling about this subject. I do find it rather amusing (for all its complete uselessness) that what we see as ultimate high tech folds back on itself to generate such a weird mystical 'inevitable' conclusion. I can take it one step further: If we miss making it to the high tech future (especially if it is for *this* stupid reason) then the reality we have is all we get — and our times will never be played again. So believe in, take care of, and try to improve the reality you have — it may be all there is."

The thread went one more round with someone asking why I consider this a stupid view. My reply was: "The view is not stupid, as I mentioned, it seems sort of hard to avoid. But it is stupid to turn this view into a reason not to work on getting to an interesting future (i.e., because we might already be there)."

Hans also replied to my first posting: "Keith and I were both at the first Alife [Artificial Life] conference in Los Alamos in 1987. I had with me an early draft of *Mind Children*. One of the newest ideas in it (evolved out of some time-travel speculations) was resurrection by future super-archeologists, and the implication that this very moment might be a historical reconstruction. I mentioned this to Keith in passing while we were having a mild argument about something else (maybe the merits of cryonics: it was too low tech for my taste: resurrection by such a crude route was likely to be painful and imperfect, so I was willing to wait, even a long time, for a more sophisticated solution, one that could work from more diffuse data than a frozen body, like the traces you constantly leave as you live — patience comes easy to a dead person!). Anyway, as soon as I described the resurrection idea, Keith said, yeah, yeah, I've always thought this moment exists in millions of instances. Outbid, I quietly nodded my head, with the idea fixed more firmly than before. Since then I've had several interactions with Frank Tipler, whose Omega Point speculations are way beyond my own. He's writing a popular book expounding on it, and its many interesting implications. I use OP, in an agnostic spirit, to finish out my own forthcoming book. — Hans Moravec"

Some of you may recognize these

ideas as rather kindred to those of Mike Perry. I replied: "It is trivial to work up counter-arguments. For example, while our motivations seem to include a strong component of interest in history, this might not be true of our future selves where we have messed with our motivations. Perhaps reconstructions of the past would be so painful to the inhabitants of the future that there would be very strong social pressure not to do it. (See the end section of Marc Stiegler's *Gentle Seduction*.)

"In reference to cryonics being low tech, as one on the 'wetwork' team, this end of it sure *is* painful and imperfect — though certainly no worse than the only available alternatives! There is, however, no reason to believe that the other end of the process should be painful, and it should be perfect to the limit of the available information in the frozen patient.

"As far as working from the traces left behind — well, maybe. I could im-

agine a process where some ambitious grad student was trying to make a minimum error 'reconstruction' of the historical Hans at the point he finished *Mind Children*. So he simulates Hans and the complete environment in which he grew up, does a comparison between the original book and the reconstruction's version and iterates the process till there are few or no text differences. I hope the temporal version of the Humane Society would make the discard process painless, but how many versions of Hans would have to be discarded before this process converged? (Assuming, of course, that it would converge!) Of course, the process would have to be a joint reconstruction of editors, authors, and (in many cases) the typesetters who introduced some of the typos.

"I suspect, however, that the above process is unworkable no matter how many resources are poured into it. Chaos makes it impossible to predict beyond cer-

tain horizons in the future direction. The inverse of this should make it impossible to tell which of a multitude of pasts led up to the present.

"Following [list member] Perry Metzger's lead, I won't preach either. I think our world will be less interesting for the decisions of Heinlein, Moravec, and innumerable others who turn down the cryonics option, but it is their decision. All I can do is be appreciative of those who are trying to make it."

There was lots more to these threads, about 15 times as much material as I have put into this column.

Next time I might report on building and debugging the controlled neuro cooler — especially if we get it working right. And some time I should write a column on reworking big planets, stars, and black holes into habitats.

---

## The Real-World Interface

---

### The Power of the Infomercial

Charles Platt



In a previous issue of *Cryonics*, I summarized the case against growth. I did this partly because I was asked to present the negative viewpoint, and also because I think we should question our preconceptions once in a while.

However, in my opinion, some growth in cryonics is essential. A much larger cryonics organization would have a better chance at eliminating two of the biggest obstacles to a good suspension: ice damage, and the threat of autopsy. Imagine a properly funded laboratory developing superior cryoprotectants; or a paid lobbyist fighting for our right to deanimate where and when we want to — in a purpose-designed health-care facility, for instance. Wouldn't

this make cryonics seem more dependable, more reassuring, and less of a crap-shoot?

The only way these dreams will have a chance of coming true is if we recruit more members to underwrite research and press for legal reform. So, assuming we want some growth, how do we go about getting it?

I've seen it suggested that if each cryonicist signs up two people, and each of them finds two more. . . after a few years of this exponential growth, the entire planet will consist of cryonicists. I agree that personal contact has been an effective recruitment tool in the past, and someone who is good at it (such as Brenda Peters) can achieve a lot. But digging up converts is

like mining any natural resource: the deposits of "pure gold" are quickly found and exploited, after which we have to start refining lower-grade ore. A law of diminishing returns begins to set in, unless we can find ways to reach larger numbers of people more efficiently.

This is why I believe that we need to take advantage of the mass media. We need to spread the cryonics meme where it has not yet been fully heard or understood, so that the few people who are predisposed to cryonics will sign up, and the majority who are wary of it will be influenced just a little bit. Maybe the second time or the third time or the hundredth time they hear about cryonics, they'll start taking it seriously.

How can this actually be achieved?

Consider the following scenario. Some time after midnight, you tune in to a local TV channel and find yourself watching something that looks like a talk show. The host is interviewing a scientist who explains, in very simple language, that life depends on the survival of cells, and if cells are properly preserved, they can be "switched on and off" by lowering and raising the temperature — so long as the correct chemical environment is maintained. It's all explained in a book titled *Life Unlimited*, published by the Alcor Foundation.

The host moves into the audience. He selects people who ask questions. The scientist gives answers.

There's a commercial break. *Life Unlimited* is promoted, here, as a hardcover book and also as a set of audio cassettes. The Alcor 800 number is displayed on the screen.

Now we return to the studio, and the host starts interviewing a group of people who describe how their lives have been changed since they signed up for cryonic suspension. There's a warm, feel-good mood to the whole thing.

Finally, the host himself urges viewers to order the book or the tapes. Once again, the ad appears on the screen.

This kind of format is already being widely used to promote products ranging from get-rich guides to diet aids. The company that's selling the product buys a half-hour segment in an off-peak period when time is cheap, and it airs a show which is really one long commercial.

Should cryonics be merchandised in this way? Let me try to summarize the factors for and against.

### On the negative side:

1. It's expensive. The half-hour show has to be professionally produced, with an audience. It has to be very carefully scripted, and it has to be rehearsed, so that it seems completely professional. Friends of mine in the media tell me that the production could cost between \$50,000 and \$75,000. In addition, Alcor would have to pay for subsequent blocks of air time.

2. It might not work. Cryonics is a notoriously hard sell, and there are many instances where a talk-show appearance or a magazine article has generated virtually zero response.

3. It could cheapen the product. Do we really want cryonics to be presented in the same style as a get-rich guide or a diet aid?

4. It is unselective. We know that some groups, such as computer program-

mers, are more receptive to cryonics than others. Why not concentrate on them?

5. It requires a back-up organization to field phone calls, take credit-card orders, maintain a stock of merchandise, and send it out. Follow-ups will then be needed to answer the questions that prospective members always have before they are ready to sign up.

6. It could draw attention to cryonics in a potentially damaging way. It could, for instance, attract attention from regulators or from law-enforcement agencies concerned about the possibility of fraud. When you start advertising a "cure" for "death," you have to expect attention from the authorities. Of course, Alcor can substantiate its claims — but I doubt that anyone relishes the prospect of new litigation.

### The positive side:

1. Yes, it's expensive to produce a half-hour show. But bear in mind, unlike most forms of PR or advertising, this one is designed to pay for itself. The initial lump of money could be raised from investors by presenting a business plan which would project anticipated revenues from sales of the book and/or audio tapes. Some of these revenues would then be used to pay off the original investment, while the rest would be used to purchase additional TV time. The videotape of the show could be used again and again, on different stations in different areas of the country, to produce a steady stream of income and (we hope) cryonics members.

2. True, it might not generate much response. On the other hand, membership growth since the early 1980s suggests that the public is becoming a little more receptive to cryonics. And the half-hour TV show would not be selling cryonics itself; it would be selling books and tapes *about* cryonics, using testimonials from everyday people who have benefited from the "product." Cryonics has never been presented in this way and yet I think that a sincere, personal testimonial is probably the best tool to use. The single-page article that I wrote for *Omni* magazine was a personal testimonial, and it prompted a greater response than any other media event in Alcor's history.

3. Cryonics would only be cheapened if the show itself was less than honest. If the script was written carefully and with restraint, I see no reason why it should do any harm to the image of cryonics. On the contrary, it would enable us to present whatever image we want.

4. While some special-interest groups

seem predisposed toward cryonics, the fact is, people from all income groups and professions have signed up for it. If we want to work on the general perception of cryonics, ultimately we have to go for the mass audience.

5. Personally, I think the need for a back-up organization is the biggest problem in this plan. There are companies that will handle the chore of receiving phone orders and mailing out a product; that's easy enough. But after that comes the hard part: finding people who are well-informed enough to answer questions from prospective members, while presenting a good telephone personality. This is not easy to arrange. People would have to be specially trained, and perhaps paid on a commission basis.

6. Greater visibility will undoubtedly attract some unwelcome attention. But there's no way around this. It's the price that may have to be paid for growth, regardless of how that growth is achieved.

There's one more positive dividend that I didn't mention above. A project of this kind would reverse Alcor's past history of media involvement. Instead of the media using us, *we would be using the media*.

In the past, as I understand it, Alcor has played a relatively passive role. A TV station contacts Alcor and asks to feature it in a show. Journalists and camera people visit the facility and are shown around. Then the cryonicists wait patiently to find out how the journalists will choose to portray them. In this way, Alcor exerts very little control over the way it is depicted. At best, Alcor's advocates occasionally have a chance to express their points of view in response to questions from interviewers who are always skeptical and sometimes hostile.

Dealing with the media is like dealing with a small child. You can let the child run wild, boss you around, and maybe act spitefully. Or, you can try to set the child's schedule, tempt him with the things he likes, and control his education.

Raising money to buy half-hour blocks of TV time may seem far too ambitious at this point. But there are smaller, quicker, cheaper forms of media control that can easily be tackled right now. First and most basic, Alcor could send out a press release once in a while. When I went through the literature files at Riverside, I found many news clippings, but not one press release. I'll have more to say about this basic media tool in my next column.





## ALCOR FUNDRAISING COMMEMORATIVE

Courage, vision, love of life—all are qualities that make a cryonicist. For that there should be a little recognition once in awhile, especially when you're the first ...

James Bedford was a serious-minded man of pleasant disposition, who made many friends. "Don't be afraid to wear overalls," the practical-minded psychology professor would tell his students. "Dr. Jim" knew many honors, wrote books on vocational guidance, taught for years in Glendale, California schools, and undertook several wilderness expeditions, visiting the Canadian Northwest, Alaska, the Amazon, and the heartland of Africa. He found the journeys fun, despite hardships, and returned with stories and camera slides so others could share his hard-won knowledge. His life was rich and full, and he must have felt regret that it would someday end, though he was not one to air such grievances. After all, what could you do about it, in the mid-twentieth century? As it turned out though, he lived just long enough—and found the right contacts—that he *could* do something, and did.

In 1967 the 73-year-old retired professor became the first person to be cryonically suspended. It wasn't a fancy job, and those who did it weren't quite prepared for all the time it would take before technology might carry out resuscitation. Luckily, however, Dr. Bedford had a son who was doggedly determined to carry out his father's wishes and see that he stayed frozen. The son maintained him for many years, then entrusted him to the care of Alcor. In 1991 Dr. Bedford was transferred to a new, state-of-the-art capsule and found to be in excellent condition. We at Alcor are proud to do our part in helping him and others realize their dreams of a possible life in the future.

As part of a fundraising effort, Alcor is now offering a 1 troy ounce silver proof medallion commemorating the 25th anniversary of Dr. Bedford's historic freezing and his continuing cryonic suspension. (Illustration is actual size.) The design is the work of Michael Perry, who as Caretaker now maintains Dr. Bedford and other Alcor patients.

**Bedford Medallion in transparent plastic case: \$50.00.**

The coins will be struck through the rest of 1992, but only a limited number can be made. Checks should be payable to Alcor Foundation and marked Bedford Medallion. Your contribution is greatly appreciated. It will help Alcor and the cryonics movement, and you'll have a memento of your *own* pioneering involvement in cryonics for the years and centuries to come.

---

### ORDER FORM

Please send \_\_\_\_\_ Bedford Medallion(s)

METHOD OF PAYMENT:  Check  Money Order  Visa  Master Card

Credit Card Account Number \_\_\_\_\_ Expires \_\_\_\_\_

Name \_\_\_\_\_

Street Address \_\_\_\_\_ Apt. No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Telephone Number (\_\_\_\_) \_\_\_\_\_

# Alcor's Operating Budget for 1993

Carlos Mondragón, President

A budget for the General Fund was worked out at a special day-long meeting of staff and directors held on October 3rd. As we reported here last month, that budget was formally adopted by the board at its regular meeting the following day.

The General Fund is one of four funds, each operating as a division and separately accounted for, within Alcor. (The others are the Patient Care Trust Fund, the Research Fund, and the Endowment Fund.) The financial statements for these funds, as well as their consolidated total, are published every April as a special supplement to *Cryonics*.

The General Fund is the most complex and active of Alcor's divisions. Contained in this fund are the day-to-day operations of the organization, including our Emergency Response System and informational programs. In fact, the only expenses which the fund doesn't pay for are those directly related to the care of suspension patients and those that are research related.

Budgeting the General Fund has always been most difficult because so much of its revenue is not fixed, while most of its expenses are. And because of Alcor's rapid financial growth (a ten-fold increase in assets in the last four years), making projections based on past experience isn't as straightforward as one might expect. On top of it all, Alcor has a very long history of operating and providing services to its members at a level far above what would be economically justified based on the number of its members.

Offering greater service than what regular income (dues, fees, etc.) provide for has always been made possible by the generosity (and far-sighted self-interest) of a few members and the staff. The justification for doing so has been that our growth would catch up with our level of sophistication and we'd benefit from economies of scale. An analogy often made is that a new business can't set its prices so as to recover all of its start-up costs from its first few customers. In the past few years, we saw that economies of scale have in fact manifested themselves in our patient care operations. But general operations just aren't there yet.

One very important thing to keep in mind: When we speak of our operating budgets running at "deficits" or of spending more than "regular income," we do not mean that Alcor has ever spent money it didn't have. We have never done so. And we have certainly never put the organization in debt to cover operating expenses. Rather, with the utmost in fiscal conservatism we have been preparing budgets which exclude unpredictable income.

The budget presented below contains a deficit of \$10K. Far less than the \$60K expected for 1992. (Actually, 1992 financial statements will probably show a small surplus due to "non-regular income.") The trend over the past three years is that of increasing "regular income" versus a leveling of fixed expenses. So some

economies of scale are in sight. That's the good news.

The bad news is that since the board adopted this budget, some of us have become more pessimistic about the income side. In particular, we feel that donations may not reach their historical averages. And on the expense side, the "carry-over deficit" from 1992 could be twice what we originally estimated. There is not a consensus on this yet, but the highest total "deficit" prognosticated is about \$50K.

At its November meeting, the board decided to hold another special session on January 3rd. By that time, we will have a much better idea of what our 1992 financial results will be. We will also have a better idea of how much the *Omni* contest, referred to elsewhere in this issue (in the **Up Front** section and in the Business Meeting Report), will affect our revenues. After that meeting, we'll report on our progress, as well as any changes we make to the budget presented here.

One more thing: the footnotes which accompany the figures below are important to an understanding of our premises and operations.

<b>Income</b>	
Emergency Response Dues (1)	\$ 87,408
Sign-up Fees, Subscriptions, and Literature	23,000
Donations (2)	85,000
Endowment Fund Income	32,000
Suspension Income (3)	34,000
Miscellaneous Income	5,000
<b>Total Income (4)</b>	<b>\$266,408</b>
<b>Expenses</b>	
General Operations (5)	\$223,360
Ten Percent Rule (6)	15,000
Capital Acquisitions (7)	15,500
1992 Deficit Carry-over	7,500
Legal Expenses	10,000
Additional Insurance (8)	6,000
<b>Total Expenses</b>	<b>\$277,360</b>
<b>Projected Deficit</b>	<b>&lt;\$10,952&gt;</b>

## Notes

(1) This amount was calculated based on: projected averages of 266 suspension members paying 100% dues; 90 members paying family rate dues; no increase in dues during the year; and a

membership growth rate of 10%. We think this number is conservative because we expect to have a higher growth rate.

(2) This number is less than the total donations received in 1991. If our members are as generous next year (in spite of the weak economy) as they have been in the past, we will do better.

(3) The General Fund bears the cost of maintaining suspension readiness. That cost is reimbursed when we do suspensions, and as per the charges detailed in *The Cost of Cryonics*, there is a markup which reflects the hidden cost of inventory. This number assumes we will do four suspensions.

(4) Only "regular income" is counted. This is revenue which has a reliable and reasonably predictable source.

(5) The detail of General Operational Expenses is as follows:

Advertising	\$ 500
Bank Charges	810
Credit Card Discounts	1,000
Finance Charges	1,700
Insurance	9,200
Equipment Rentals	100
Office Expenses	6,000
Computer Expenses	500
Salaries, Payroll Taxes	70,000
Workmen's Comp. Insurance	13,000
Professional Fees	4,000
Promotion	250
Postage	14,000
Rent	14,000
Shipping	2,500
Taxes & Licenses	4,000
Telephone	14,000

Membership Expenses	300
Member's Archival Storage	100
Travel	1,800
Repairs/Maint. — Equip.	4,600
Repairs/Maint. — Facility	7,500
Utilities	4,000
Educational Literature	7,000
Magazine Expenses	16,500
Ambulance Operating Expenses	1,000*
Emergency Response System	12,000*
Medical Supplies	1,500*
Other E/R System Supplies	1,000*
Training	10,500
Total	\$223,360

\* All figures for the Emergency Response System are for fixed costs only. As suspensions occur, much more will be spent in these areas, but those marginal expenses will be offset by the additional revenue of the suspension funding.

(6) It has long been Alcor's policy to pay 10% of all unrestricted income to the Patient Care Trust Fund in order to strengthen the fund against the unknown costs of emergencies, inflation, revival, etc.

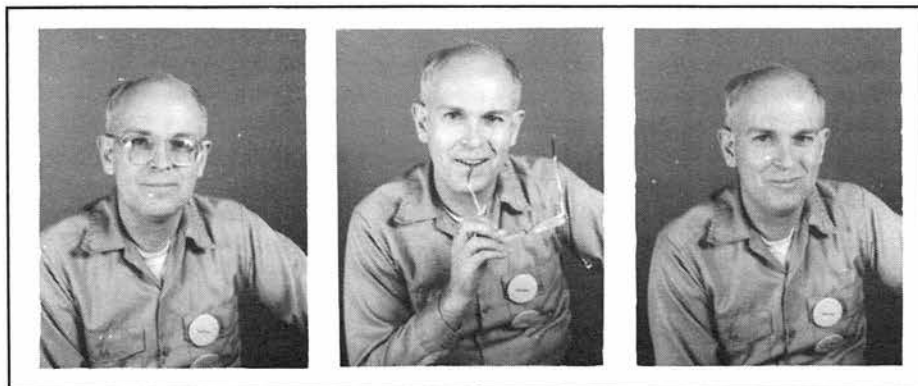
(7) This item is not truly an expense (we are simply converting a cash asset into an equipment asset), but it of course does affect cash flow and must be budgeted for.

(8) We made this provision for the expense of liability insurance, which we might be able to obtain.

## History of a Cryonicist

### Interview with Hugh Hixon, Part I

Interviewer: Ralph Whelan



*Hugh LeRoy Hixon, Jr. first became an Alcor "employee" in 1984. However, his active involvement in cryonics and Alcor (and Cryovita) dates back to 1978, when cryonics was still a "garage" procedure, and Alcor had a whopping 15 Suspension Members. (Not patients — members.)*

*Hugh served as an Air Force Munitions Officer from 1965 to 1972. In 1981, three years after becoming very active (but still very unpaid) in cryonics, he coordinated the suspension of his father, who would soon become Alcor's second patient. He received his Master's Degree in Biochemistry from California State University Long Beach in 1983.*

*Hugh has been an integral part of the suspensions of 22 of the 25 patients Alcor now cares for, as a team member or the team leader. Being a resident employee, he is present virtually every day of the year, tending to myriad aspects of Alcor's day-to-day operations in his capacity as Alcor Engineer. He has served on the Alcor Board of Directors for ten years, longer than anyone else presently on the Board.*



**Cryonics:** Let's start with the Mandatory First Question: How did you first hear of cryonics, and what was your initial reaction?

**Hixon:** When I got out of the Air Force I was interested in going back and eventually getting a degree in something like biochemical gerontology. Laurence Gale was my roommate in college. He was also interested in longevity work, except he had discovered cryonics through the Chamberlains [Fred and Linda, co-founders of Alcor] and he was interested in that, so he was my initial contact with cryonics and with Alcor.

**Cryonics:** This was what year?

**Hixon:** Oh jeez, probably '76, '77, since I think Fred Jr. [Fred Chamberlain, II] had already been suspended.

**Cryonics:** At this point who was president of Alcor?

**Hixon:** I'm pretty sure it was Laurence at that time. In retrospect, Fred and Linda had been pretty well burned out carrying Alcor through Fred Jr.'s suspension.

**Cryonics:** So Laurence Gale introduced you to cryonics?

**Hixon:** Yes. And as to my reaction to it... "Um, why not?"

**Cryonics:** You didn't think it was crazy or even unlikely?

**Hixon:** No. In fact the first thing that I — about the second thing, maybe, I don't recall what the first thing might of been — was to propose some kind of a research plan.

**Cryonics:** Oh? For you finding out more about cryonics?

**Hixon:** No, for [Laurence]. I was going to school at the time, and that wasn't the field that I was working in. [But I said to Laurence,] "if you want to do this, why don't you do this, this, and this?"

**Cryonics:** This was a research plan for...?

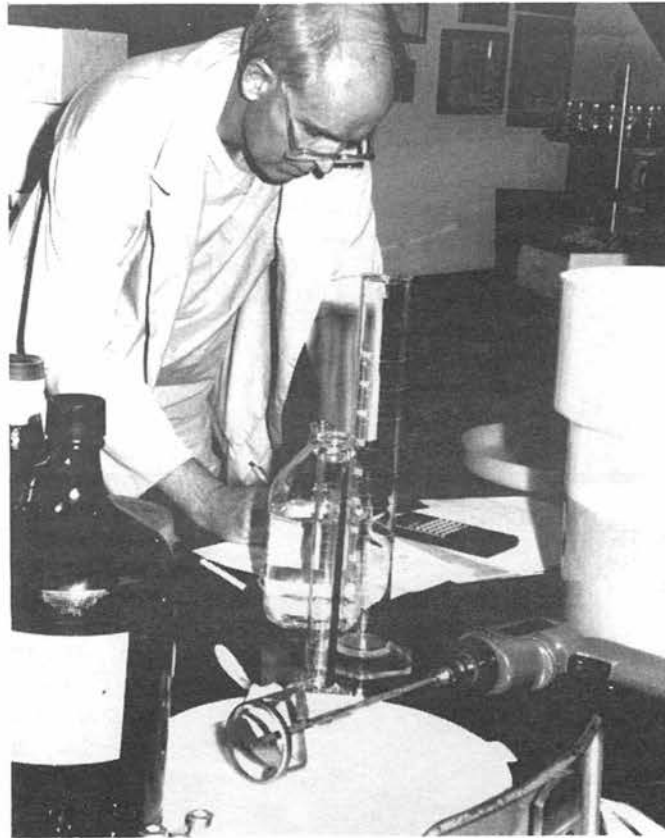
**Hixon:** Using bunnies for cryoprotective conditions. Looking back, it was fairly naive.

**Cryonics:** Was Laurence actively involved in Alcor?

**Hixon:** Oh yeah. By that time Fred [Chamberlain, Jr.] had already been suspended, and my first real involvement with it was when Thomas Donaldson prevailed on Laurence to organize a dog experiment. And TransTime got Laurence in contact with Jerry [Leaf], so I guess that was about the time that a whole bunch of people in Alcor first met Jerry. I wasn't with Alcor at the time, I was just being very curious.

**Cryonics:** This is around when?

**Hixon:** You're going to have look in *Long Life* magazine, but I would say around '77 or so, arbitrarily.



**Cryonics:** Can you possibly give us some idea of why you took the notion of cryonics seriously — or at least didn't scoff at the idea — where someone else in your position most likely would have? What made you different?

**Hixon:** The whole thing seems plausible. And maybe I've read too much science fiction, too. You look at it, you know, and there's no immediate overwhelming objection, except people's personal shibboleths, which they immediately proceed to rationalize.

**Cryonics:** But for most people there is an "immediate overwhelming objection..."

**Hixon:** Well, also it was in line with

other things I was interested in, like living a long time. That was the reason I went back to school when I got out of the service. Like I said, I was going to see if I could go and get a degree in biochemical gerontology. A number of things intervened, so that didn't pan out, but that's okay.

**Cryonics:** Would you say that you were grappling with the notion of immortality at all, or just anti-aging and life extension?

**Hixon:** I didn't segregate it particularly, but certainly I set no limit on it, so I guess you could say "immortal." And of course, if you age you can't do anywhere near as much, so that goes along with it. Basically, once you've decided to live a long life, it isn't much of a step to indefinitely long.

**Cryonics:** So you never had any kind of ethical objection to the notion of unending life?

**Hixon:** No. Why would anybody have an ethical objection?

**Cryonics:** Plenty of people do. It's selfish, Hugh.

**Hixon:** So? I'd already embraced that problem. And besides which, once you get down to the idea of what's selfish, I'm sorry but that leads you down all kinds of paths where you end up biting yourself on the back. Anybody who is totally unselfish is shortly dead.

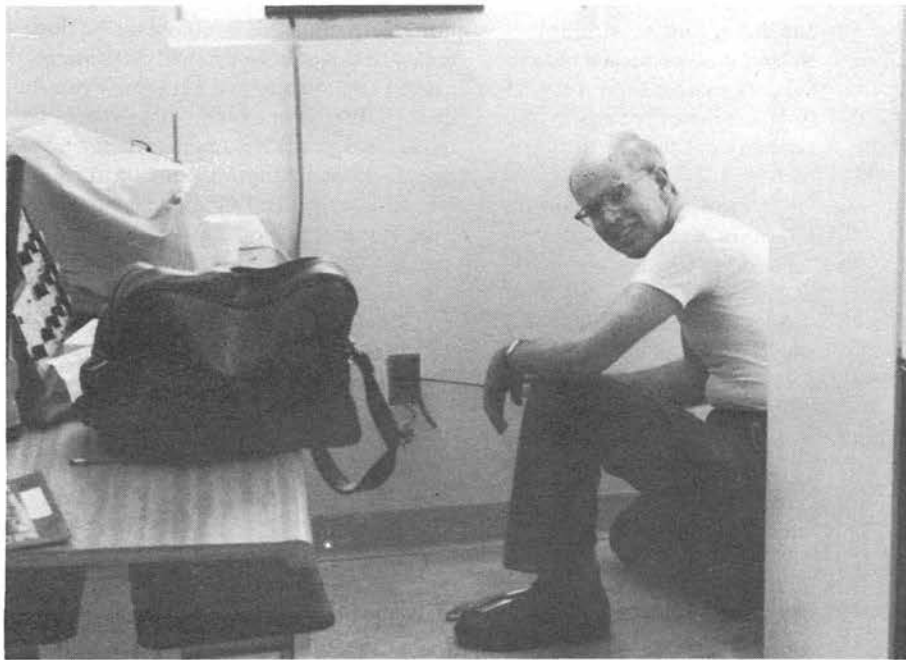
**Cryonics:** Agreed. So tell us how you went from having this fringe interest in cryonics to becoming more actively involved.

**Hixon:** I started attending Alcor meetings on and off because the conversation was very interesting. Eventually, when Jerry Leaf said he wanted to form a suspension team, I said "Why not?" So willy-nilly I became the lab technician for the suspension team.

**Cryonics:** Did you have your degree at this point?

**Hixon:** Yes, I already had a degree in Chemistry. I was still working on my Master's. A rather protracted process.

**Cryonics:** Tell us what it was like to be on the Suspension Team with Jerry Leaf, back before you became an em-



Hugh looks up from his rewiring of the CSSF (Cryonics Society of South Florida) facility.

ployee.

**Hixon:** Well, Laurence had a fair amount to do with it, but didn't take a lead part — or if he did, it still boiled down to we nucleated around Jerry.

**Cryonics:** What about Mike Darwin?

**Hixon:** Mike was not in the picture at all. He was in Indiana.

**Cryonics:** Had you even met him at that point?

**Hixon:** No. It was some years later before I met him. In fact I don't think I met him until he brought a patient out. Anyway, Jerry had over the years collected several garages full of medical equipment, and he finally went out and rented the lab over in Fullerton — Cryovita Laboratories — and he took all the stuff out of the garages and put it in there. The team had met once to talk about what we were going to do, and then our first patient came in, a fellow from New York. He was one of our . . . educational experiences.

**Cryonics:** That was the first suspension you were involved with?

**Hixon:** Yes. It wasn't the first suspension Laurence was involved with, or the Chamberlains, because they'd all been in on Fred Jr.'s (Fred Chamberlain, II) suspension, but it was a whole lot different. The dog experiment was a real revelation for me, and that was back a year or two before. We whipped up this per-

fusate that used DMSO and just ran it in. It was fifteen percent DMSO, and you got real severe osmotic dehydration. That dog's tongue looked like a piece of leather. Fred said, "Gee, that's just what happened to my father." And I was thinking, "Oh my God, haven't you guys ever heard of osmosis?" I mean, why shouldn't it look like leather?

Fred had approached cryonics almost entirely as an engineering problem. He had some grasp of the medical and physiological problems, but it was immediately obvious we were going to have to do better than that. . . use some kind of a ramp. I'm sure Jerry understood exactly what he was looking at, because he had that sort of stuff down cold.

**Cryonics:** So then Jerry, presumably, instigated the ramping procedure for introducing perfusate?

**Hixon:** I don't know who you could point to for that. It's one of those things that are very obvious to anyone with any physiology background at all. At first, we did the perfusions with steps in cryoprotectant con-

centration. I eventually knocked together a kind of ramp generator, but I have to say that in view of what I learned later it was rather naive. Very low budget, some bad guesses on the physical parameters, and no room for evolution. It did work, but imperfectly. And I didn't have a good feel for Jerry's perfusion resources. We now use [a very effective] ramp generator, as implemented by Jerry.

**Cryonics:** Let's get back to your first suspension, the patient from New York. . .

**Hixon:** Berkowitz! That was his name. Joe Klockgether made the funeral arrangements, and one of the neighbors saw the hearse pull up and called the cops. Somewhere there's still pictures that I shot of the local coroner's deputies and the police investigating. And Joe Klockgether got dragged out in his running suit and got everything straightened out.

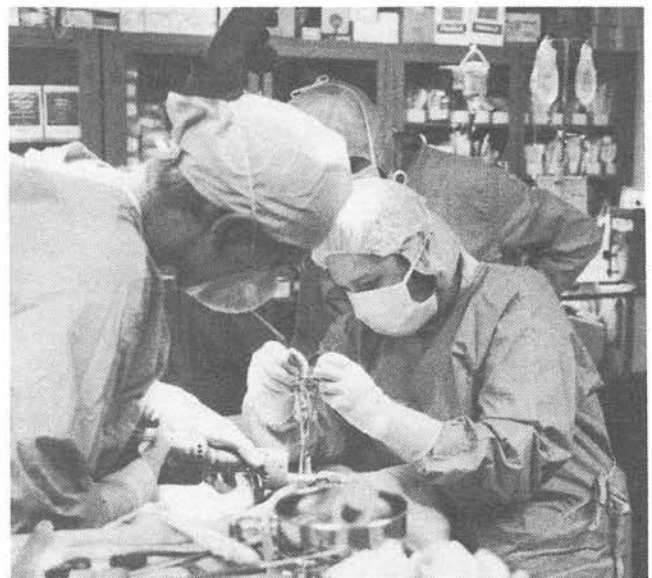
**Cryonics:** This was at your lab in Fullerton?

**Hixon:** This was at Jerry's lab in Fullerton. The place was just full of stuff. This was four or five years before the operating room got built. And we hadn't expected to do a suspension this soon. So Jerry did a M\*A\*S\*H type setup, and curtailed off an area by running rope between the two walls and then just flipping big sterile drapes over them.

**Cryonics:** So this was late seventies, then?

**Hixon:** Mid-1978.

**Cryonics:** Anything of particular note



Hugh and Sherry Cosgrove train as surgical assistants, under the watchful eye of Jerry Leaf.



Hugh saves the day during a momentary crane failure. Mike Darwin and Scott Green look on, stunned. Don't try this at home.

occur between then and when Mike Darwin first arrives on the scene?

**Hixon:** Well yes. Fred and Linda Chamberlain had handed off the presidency of Alcor first to Allan McDaniels, whom I never met, and then to Laurence [Gale]. And they sold Manrise to TransTime and basically. . . Laurence was a vice-president of TransTime, and Alcor was serviced by TransTime. We sent a fair proportion of the dues to TransTime, which turned out eventually to be a point of dissention because we didn't seem to be getting anything back for our money. But in that period, Alcor was. . . "moribund" would probably be a perfectly good term.

**Cryonics:** So were you an Alcor member at this point?

**Hixon:** No, I actually managed to avoid being an Alcor member for quite some time. (Laughs.)

**Cryonics:** So around this time I guess you were working on your Master's?

**Hixon:** For financial reasons I had to take a break, and I went to work up at the USC School of Dentistry as a biochemistry technician for about twenty months. And

somewhere in there I had my one direct contact with Robert Nelson, and we closed out the CSC (Cryonics Society of California) crypt up in the cemetery in Chatsworth.

**Cryonics:** What do you mean in saying that you "closed out" the CSC crypt?

**Hixon:** The guy who owned the Andonian capsule sold it to TransTime, and since Laurence was the local TransTime official, he was in charge of organizing to get it out. So Nelson rounded up a crane and we got the sucker out of the crypt.

**Cryonics:** This was before you got your Master's, and before Mike Darwin moved to California?

**Hixon:** Yes. A number of other things intervened between then and there, for example we froze my father, or rather we put him in liquid nitrogen, since he was already frozen. My sister had died the year before, so that took care of the inheritance problem.

My father had a cardiac arrest in September of 1974, and they'd given him CPR, and instead of living or dying he fell in the crack. No personality observable when he woke up after something like three-and-a-half weeks in a coma. My aunt took him up to Washington, then ended up putting him in a nursing home to care for him. Eventually he died.

**Cryonics:** This was in 1981?

**Hixon:** Yes. And I hadn't really anticipated this... and he died as many people do, early in the morning. My aunt called me and asked what I wanted to do, because she knew I was interested in cryonics. I took

about half an hour, then started getting things organized. It could never be done today, or it would be damned difficult, because I had to convince Art Quaife (president of TransTime) that somewhere the money was available. In the meantime, the people in Washington put him in their freezer and they froze him, which meant. . . the vasculature was not good for much, certainly not a perfusion.

**Cryonics:** Was this being done at TransTime?

**Hixon:** No, this was being done at Cryovita.

**Cryonics:** Was your father stored at TransTime?

**Hixon:** Yes. TransTime was being run on an occasional basis at that time. That is to say, people were only coming in a couple of times a week, maybe once a week. And as it turned out, somewhat later the LR-40 [the storage dewar] failed, and he warmed up. They did something about it immediately when they discovered it, but one of the things they didn't do was *tell me* immediately. I was a little [upset]. I could understand this could happen, because TransTime was not wealthy. They couldn't afford someone there full time. That wasn't what annoyed me. What annoyed me was they didn't tell me. That was a major contributing factor to my helping Alcor and Cryovita get started in patient storage, because I purchased the 2542 [another dewar].

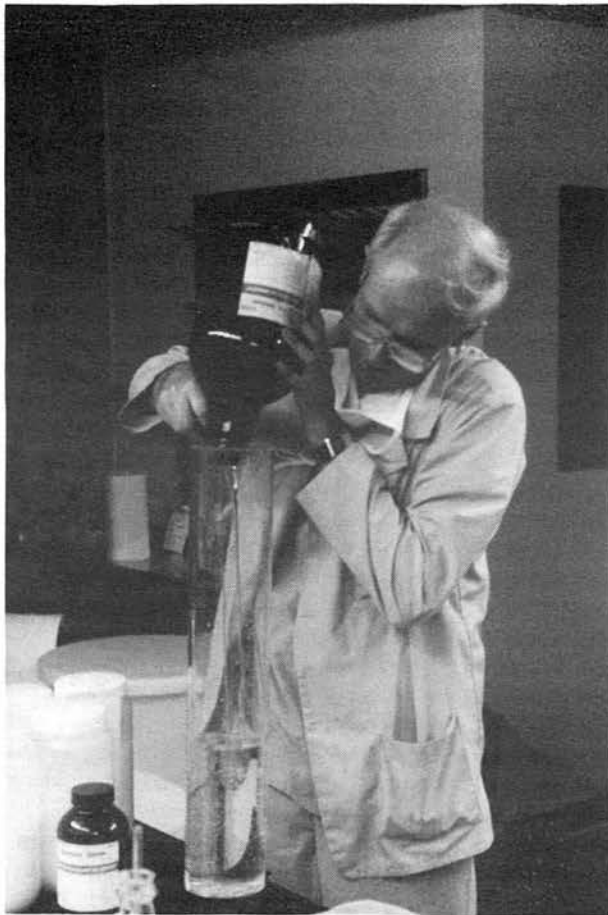
**Cryonics:** How serious was your father's warm-up?

**Hixon:** He got up to about minus fifty. But considering he was straight-



Hugh and Dave Pizer man the Alcor table at the 1986 "Project 2000 Conference."





“One for the road...”

frozen, it probably didn't make a whole lot of difference, except the usual differential contraction problems. It certainly cannot be said to have done him any good, but considering how bad off he was to start with, it's unlikely that it made it a whole lot worse. And I have no idea what I'll get back in terms of Pop. The worst case is I'll get back a little boy who will be related to me the same as a son would be. And my father was by all accounts a good kid.

**Cryonics:** So then clearly you would not term your father a “cryonicist”...?

**Hixon:** No. He did not volunteer for the process.

**Cryonics:** How do you think he's going to react to being revived, should that occur?

**Hixon:** Well, a lot of my opinion in the matter is based on the fact that he is about as like me as anybody I've met. And I thought [cryonics] would be interesting, so I think it very likely he'll be interested and fascinated too. As to other people trying to second-guess me in the matter, my standing answer is, “I'll be interested

in hearing what he has to say, but not you.”

**Cryonics:** So now, you were finishing up your degree, you weren't an Alcor employee yet, but I guess Mike Darwin was around —

**Hixon:** Yes, Mike and Al Lopp had come out and got an apartment about a mile from the Cryovita lab, and Mike got a job out in Lynwood as a dialysis technician. I was coming out to the lab fairly regularly, my intention being — since Mike was being active — that I could be most effective by supporting him in stuff he couldn't do...”

**Cryonics:** This was not financial support...?

**Hixon:** No, it was not financial support. Later on, he actually supported me for a time, and Saul supported him. Saul supported him, he supported me, and then we convinced Saul to support us both. I spent a

lot of time out there. . . over in Long Beach. In fact it got me evicted because the owner drove by when I was doing some welding on the door, and he had the manager throw me out. And I hold his name dear in the hopes that I may meet him some day. Not

so much for what he did to me, but because he damned near kicked the manager out for defending me. So I lived out in Cryovita for about a month, until I got an apartment in Long Beach. And since it was Autumn, toward the end of that month the cold showers were getting rather excruciating.

**Cryonics:** I guess at this point, though, the membership was growing and the dues —

**Hixon:** No, membership was pretty stable. We had a long period after the Chatsworth affair when we just didn't grow at all. You look at the membership figures during that period and they're damned near flat. . . we couldn't — like we can now — take advantage of even adverse publicity. But Mike wound up getting elected Vice President of Alcor and started taking over the administration from Laurence, which wasn't very difficult since Laurence didn't want it, wasn't very good at it, and it was in a horrible mess anyway. And also somewhere along in there — I think the second Tahoe Festival — I made the decision that I was going to buy a 2542, and Alcor was going to go into the storage business.

**Cryonics:** And the 2542, what is that?

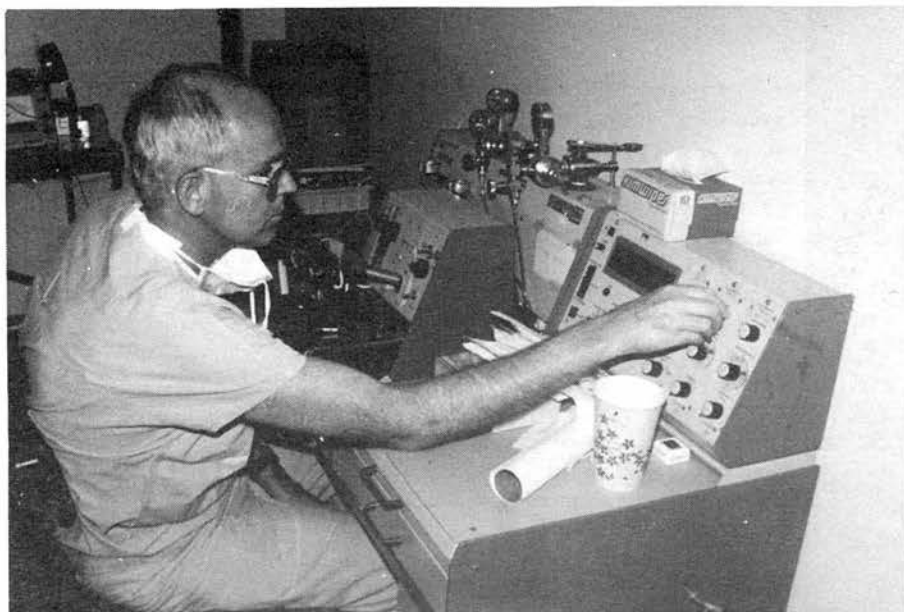
**Hixon:** That is the dewar in vault #1. That's my dewar. In fact, I still have title to it.

**Cryonics:** So then you were only able to store neuropatients?

**Hixon:** Yes, which was okay since really all we had was my father. Jerry,



Getting to the bottom of things.



As always, Hugh puts his biochemist skills to work as the blood-gas and refractometry technician for Alcor research and suspensions.

Mike, and I went up and collected him, eventually. And . . . we started storing somebody at Alcor. Cryovita, actually. I was basically Alcor's entry into the storage business. And one of the other reasons that I wound up coming out there regularly was that, as you know, with liquid nitrogen suppliers when they come is when they come. And you can't spend all day waiting. Or, Mike couldn't afford to, but I could. So I was helping by taking the deliveries out there. And somewhere along the line there, Mike located Bedford [Dr. James Bedford, the first man ever frozen]. Also somewhere along the line there we wound up electing Mike President. I don't know if he wanted the job or not, but he certainly was not reluctant once he got it.

**Cryonics:** What year did Mike become President?

**Hixon:** Probably around '82 or '83. He was Vice President for a while, but I don't recall any timing on it. Even before Laurence went, Mike became influential in Alcor. And people like myself and Anna Schoppenhorst went on the Board. And, in order to do that, that's when I finally signed up for cryonic suspension. I think that was the first major paperwork modification. I would say that we're up to about. signed the old *old* Alcor paperwork. Later, Jerry and I got together and got ours witnessed together for the first big revision, which was based on a lot of work Steve Bridge had done back in Indianapolis. Meanwhile, we were doing the other social things like having Turkey Roasts.

**Cryonics:** It must have been around then that you first met Carlos Mondragón and Arthur McCombs.

**Hixon:** Yes. I guess they were drawn simply by the fact that Mike and Jerry were putting together something that really worked. We only did one suspension in that operating room at Cryovita, and that was Terri Cannon. But we did the dog work, because by that time Bill [Faloon] and Saul [Kent] had come into money, and we did those dogs and then we did Terri Cannon on top of it and that went extraordinarily well because we had accumulated enough skills by that time. The dog work was really grueling because we were asking volunteers to come out for an entire day once a month. This is why I always look askance about doing research on any really heavy level with the number of people we've got, because it is a real burden to do. We had Jerry and myself and Mike, and Betty Leaf, who was Jerry's sister-in-law, and [a few more people]. . .

**Cryonics:** Paul Genteman?

**Hixon:** Yes, Paul Genteman. And Anna Schoppenhorst, and Al [Lopp] was in there. I don't know if Laurence was in that very much. He was peripheral by that time. Anyway we did the dogs, and it worked out. We learned a lot and did a lot. We got a hell of a lot better. Some of the dogs did much better than others. Dixie is still alive; she was one of the firsts.

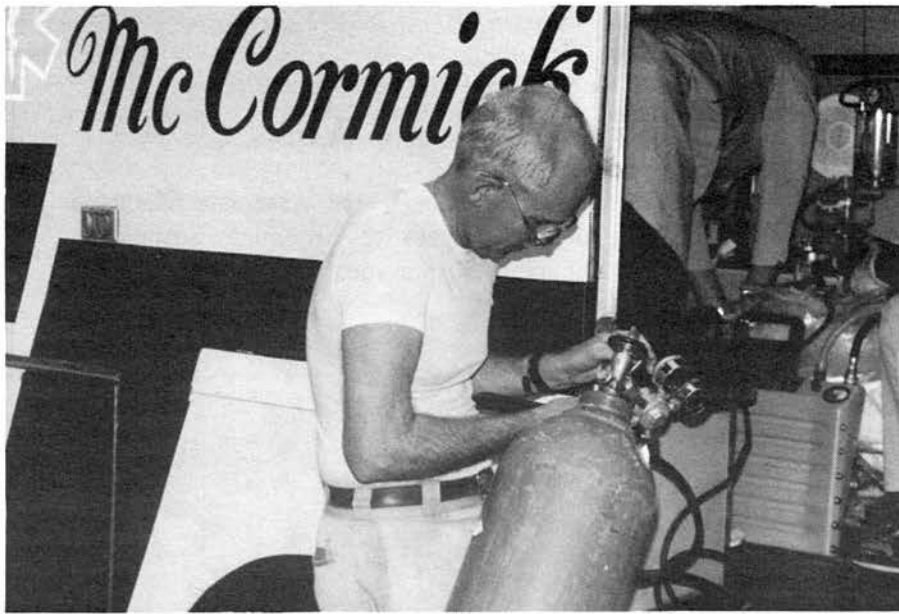
**Cryonics:** What about Star?

**Hixon:** Star. . . Star was *the* first. Mike and I took Star along on a trip to Northern California, and Mike and Star were on the cover of the *Cryonics* magazine. Star ended up going home with Laurence Gale. That was one of our first successes.

**Cryonics:** So what happened when Carlos and Arthur started getting involved?

**Hixon:** They came out here. They'd lived in New York previously. Carlos interested Sherry Cosgrove in cryonics, and Sherry ended up willy-nilly signing up and becoming our Treasurer. And I don't know when Carlos went on the Board, but he helped advise Sherry a lot with the financial stuff even then. Sherry went along for a few years, but her husband was in the





Hugh and Mike Darwin outfit the (then) newly-acquired ambulance.

Marines when she signed up, and he eventually got a job with the Secret Service. I don't know what the in's and out's of it were, but apparently he felt it was inappropriate to have a wife who believed in a crazy thing like cryonics and be involved in the Secret Service. So, she dropped out, or was forced to drop out, whatever.

Anyway, we chugged along, and we did the dog experiments, we built the O.R. . . Well actually we built the O.R. *then* we did the dog experiments. I don't think we ever could've done it without the O.R. As late as '82 or so we still had the same drapes suspended across Cryovita that we'd had to start with, with Berkowitz. Then Jerry and Mike went out on our first remote standby and brought back Terri Cannon, and that went *real* well. They took perfusate with them. This was before Viaspan, so I whipped up some concentrate and sent it out, and there were the usual long phone calls to determine how to do the mixing just right. We got Terri back, and her suspension went real well. Later that year, Joe Cannon had his heart surgery, and all three of us went out to Madison for that. We coordinated the surgery with the Cryobiology '85 [Conference], and we got to hear Greg Fahy talk. . . . Greg was one of the organizers, and brought in some real biochemists like Pierre Douzou, which was a real innovation for a rather ingrown little biology society. I missed Paul Segall's opening remarks. . . sniping at cryonics, and I understand Paul Segall put in a *really* good impromptu presentation for cryonics. And there's no record of it at all.

Then we packed up and went on up to Joe's [Cannon] place up at Hope Knoll, where he built an entire house over a cryonics repository. Saw his condom making machine. French Tickler machine actually, he started with condoms. Had a rather pleasant time.

Anyway, somewhere around late '85 or '86 this liability and insurance stuff started getting really desperate, and the landlord wanted us to get insurance or else, and we couldn't get insurance, so it was *or else*.

**Cryonics:** This was in the Fullerton facility?

**Hixon:** Yes. Reg Thatcher did most of our looking for a site. There was land over by Perris that Saul and Bill bought, and Jerry spent a huge amount of time drafting up plans and so on. He was going to be the General Contractor on it; he brought in an estimate and so on. Mike had the estimate checked by a friend of Bill's down in Florida, and we couldn't all get the same answer. I've never been totally sure of the truth of it, but one night

Mike and I went over and basically killed Jerry's plan, which I know hurt Jerry enormously.

**Cryonics:** What do you mean by saying you "killed" it?

**Hixon:** We just told him we were not going to support building a goddamn facility out in Perris. We deduced all sorts of reasons, only one of which was how much it was going to cost. It was at the end of a long dirt road, and still is. Nothing's changed to speak of. I told him I wasn't going to live out there. Basically, we just clubbed him down. It will always be a painful memory for me. That was sometime in '86. And then Mike threw together the Symbex thing, went through a big learning experience. And so, the place we're at is The House That Mike Built. And so we set up shop here. I crashed up Jerry's van, so Mike went out and bought the ambulance for five thousand dollars. That was before we got the lift gate, but after the MALSS cart was built. The MALSS cart was built over in Fullerton.



In last year's massive patient transfer project, Hugh engineered, organized, and master-minded the operation from start to finish. Here, in the final transfer of the day, are (clockwise, from upper left): Tanya Jones, Ralph Whelan, Hugh, Regina Pancake, Allen Lopp, and Russell Whitaker (obscured by Allen).



**Cryonics:** You must've had fun putting the MALSS cart in the ambulance without the lift gate.

**Hixon:** It was possible.

**Cryonics:** With a patient in it?

**Hixon:** Yes. I think we actually did it once. Anyway, it was possible to get it in by hand, because we did it a number of times for various reasons. That thing weighs about six or seven hundred pounds loaded, and what you do is you lift one end on, then you lift the other end on. *Loads of fun.*

**Cryonics:** So now we're living in the mid- to late-'80s, maybe '87, so give me your perspective on the Dora Kent Saga. Weren't you actually "discontinued" as an Alcor employee somewhere in there, for financial reasons?

**Hixon:** Yes. Early in the whole affair Alcor couldn't pay for me on a regular salary, so I was back to living on what little savings I had, which was *goddamn little*, 'cause Alcor didn't pay very well, and I'd burned through my own reserves a lot earlier working for Alcor. With respect to the Dora Kent affair itself, you have to understand that it *evolved*. What we did was, we committed ourselves and then found out what was going to happen afterwards. It took a lot of work to make it come out right. Jerry was scurrying around undercover for months. It really did evolve, there was very little planning to it. There were a couple of points where if somebody would've said "no," the whole thing would've been different, and they'd have got Dora Kent. She actually went out of the facility twice. And both times, me and Mike looked at each other, and there was instant agreement, and we both grabbed a handle and hauled ass. Second time was the charm. After that, we got into all the fighting with the coroner. It was one of those things where Mike made the move and I was in complete support of him, and if I'd have said "no," the chances are the whole thing would've gone down the drain in some other unpleasant way. So if you have any idea that we started out with some grand scheme in mind, just forget it because that wasn't the way it happened.

*End Part I. Part II of this interview, "Philosophy of a Cryonicist," will appear next month.*

## How Many Are We?

Alcor has 342 Suspension Members, 463 Associate Members (includes 143 people in the process of becoming Suspension Members), and 25 members in suspension. These numbers are broken down by country below.



Country	Members	Applicants	Subscribers
Argentina	0	1	1
Australia	13	1	4
Austria	0	0	2
Canada	11	3	21
Denmark	0	0	1
Estonia	0	0	1
Finland	0	0	1
France	0	0	4
Germany	1	0	1
Holland	0	1	0
Italy	0	2	2
Japan	2	1	0
Lichtenstein	0	0	1
Lithuania	0	0	2
Mexico	0	0	1
Norway	0	0	1
Portugal	0	0	1
Russia	0	0	1
Spain	6	2	0
Sri Lanka	0	0	1
Sweden	0	0	2
Turkey	0	0	2
U.K.	13	5	8
U.S.A.	295	123	286

### Alcor Spin-offs?

H. Keith Henson

---

*While the Cryonics Forum will usually contain two separate contributions on any given topic, this month will be an exception because a) Mr. Henson's article is quite lengthy, and b) the article in fact presents an exchange between Keith Henson and Mark Voelker that occurred electronically. — Ed.*

Those of you who read the minutes (or Business Meeting Report) for October may have noted Mark Voelker's interest in looking into splitting Alcor into two organizations, one involved with patient care, and the other with suspension services, "for reasons of practicality and liability." Perry Metzger has been advocating cryonics "a la carte" on CryoNet; i.e., separate organizations for storage, suspension services, fund investment, revival, etc.

While there may be potential benefits, these proposals are going to get very close scrutiny for any negative side effects we can identify. Even if we conclude that splitting up Alcor is a bad idea, I expect some good to come from this exercise. At a minimum we should be able to identify a few more problems, and implement policies to try to avoid them.

The patient care side of Alcor is sharing the organizational overhead at the moment. I haven't added up the numbers exactly, but the operational budget for patient care is about 1/5th of the operational budget for Alcor. That leaves it quite a bit smaller than is practical for a stand-alone organization. This is not an objection in principle, because (given enough growth) it will eventually get big enough to be viable independent of Alcor.

The strongest argument proposed for splitting off patient storage is reduced liability for the patient care trust fund. (It is only in the last year or so that the fund has grown to a size that makes it a juicy target for legal actions.) If the patient care side of Alcor were a completely separate organization — no overlapping Directors, sharing of physical space, employees, or special relation to the suspension opera-

tion, this should provide near total protection from judgments against the suspension business. This is clearly an up-side to the proposal — how much of an up-side depends on your evaluation of how much danger Alcor is exposed to on suspension operations, how likely a plaintiff would be to obtain a judgment in their favor, and whether a court would view the Patient Care Trust Fund as an appropriate source of funds to compensate a plaintiff.

While it is easy to cook up a scenario where a party — particularly a relative — could *believe* they have cause to file suit against Alcor, winning suits against non-profit organizations is not easy. In addition, Alcor has the carefully-worded contract and many policies in place which have been designed to keep us in the clear. I consider it unlikely that a relative could make a successful case in court that Alcor had (for example) talked an elderly relative into signing up "against their will." They would have to argue that Uncle Charley was bereft of his senses, could not understand the provisions of the suspension contract, and had been coerced into signing the documents. Considering the hoops we make people jump through to get signed up, it would be hard to make the case — and I think nearly impossible in the situations where a patient had been signed up for years.

I know of only one case where some relatives even considered trying to get a patient declared mentally incompetent. The patient [a doctor] was advised by Alcor to jump the gun on them and went in for a psychiatric evaluation, which he passed "with flying colors." This was prior to the patient's signing his paperwork. Had he been declared mentally incompetent, he might have been prevented from becoming an Alcor suspension member, and not suspended. But had that been the case, Alcor would not have been a party to any action.

Still, the case can certainly be made that terminal cases (like the one above, and over 50% of the last dozen or so) entail more legal risk. If anyone can think of

additional safeguards to employ in these cases, please let us know. We have a strong program of trying to identify risks *before* they bite us. In the interest of "pre-crisis management," Carlos taped a discussion with the relatives who came to us recently about a possible post-mortem suspension (a murder case where the victim had expressed the desire that he be suspended in the event of death). A policy of videotaping terminal patients signing the suspension paperwork might provide additional protection for both the patients and Alcor.

In the chain of events leading to loss of some or all of the patient care trust fund due to legal action against Alcor, the last step is the question of how likely it is that the trust fund would be seen as an attachable asset. Legal counsel to Alcor has pointed out that treating it as a trust fund (which we have always done) and calling it a trust fund gives it a considerable level of protection. For example, were a judgment to be awarded against a cemetery, there is little chance that a "perpetual care" endowment trust fund would be seen as a source of funds to pay off the judgment. The reasoning is fairly easy to follow: The people who put money into the fund had no legal connection with whatever action or lack of action was involved in the cemetery's being sued, making it inappropriate for them to pay damages. At one point in thinking about this issue I considered the possibility that the Patient Care Trust Fund might be made more resistant to attack by mingling non-suspension monies (for example those from storing biological samples). But the protection argument is strong enough as it stands that I doubt much would be added by this activity. (It certainly would not hurt though.)

Another argument in favor of splitting up Alcor is that the suspension (and membership side) could concentrate on doing good suspensions better if they did not have to be so wary of exposing the frozen patients to legal risk. Perhaps this is the actual case. However, the patients in suspension are not the only ones at risk if our

suspension organization takes a fall. It might well take some time to reorganize a suspension capability, putting the suspensions of those who deanimate near that time at considerable risk. I don't know how others feel, but I have come to the conclusion that I want a *very* careful suspension organization.

Because the people involved with Alcor — staff and volunteers alike — are highly dedicated, and thus unlikely to take legal action against Alcor, we have seldom considered the most likely source of liability. What liability would Alcor have if someone were injured or infected during a suspension? (Having been there, I can tell you that there certainly are these risks!) It could always be argued that Alcor failed to take adequate precautions, or to give sufficient training. And, while the staffer, volunteer, or signed-up relatives are unlikely to sue, the same cannot be said of all relatives. Most of us have relatives who range from neutral to really hostile on the subject of cryonics. I don't know if it would be worth anything in court, but having the volunteers sign statements that they understand that what they are doing entails risk might be of some use. Other suggestions would be welcome.

There are several arguments against splitting off patient care. One is simply size. The larger Alcor gets, and the more economic power it has through the Patient Care Trust Fund, the harder it becomes to attack it. Another reason to keep it in one piece is the PR aspect. Being able to show the whole works to an interested party instead of sending them to another organization to see the rest of the process is an advantage.

But I think these are minor arguments. My big problem comes from considering: What would happen to a storage company without an active membership if the company got into trouble? Alcor has in the past supported patient care out of general revenues. While the patient care fund is currently fat, and we are billing it at about what it costs to house and service the dewars, we have in the past paid for LN<sub>2</sub> out of operating revenue, not billed the fund at all, and put 10% of unrestricted revenues into the fund (which we still do, though billing the fund for expenses about compensates). If the patient care fund got into trouble — inflated out of existence, embezzled, tied up in a lawsuit, or confiscated by the government — the living members (who empathize with those in the dewars) are a major source of funds to keep the patients frozen. This source is not

so subject to legal judgments, inflation, or other economic upsets. I have observed that Alcor members will give until they bleed if there is great need. (They give of time and money at a high level even when Alcor is not in a lot of trouble.) I don't believe this is a new observation. The early founders of Alcor recognized this and set up for there to be a flow of money from general revenues to the patient care fund.

When I first mentioned these concerns in email traffic to Mark Voelker he wrote back:

- > Keith: Regarding dangers to the
- > patients due to the risk that
- > Storage Co. might fail: How is this
- > different from the present
- > situation, where Alcor might fail?

And I replied:

Perhaps I have a different model of the storage company than you do. It is indeed possible for Alcor to fail, but consider the consequences of just the patient care trust fund going *poof* in each case. Living Alcor member are likely to dig into their pockets for the \$17k/year or so of LN<sub>2</sub> it currently takes to keep twenty-five patients frozen. We could convert all the whole body ones, and reduce this considerably. Even without that step, the cost to keep the patients frozen would be about \$60 per animate member per year.

[Converting all to neuro would reduce the cost to under \$4k/year, or about \$12 per animate member.]

Now think about the storage company. My assumption is that the storage company has no socially coherent support, i.e., active members (or "clients," to use Al Lopp's preferred term). If the organizations really are separate, then the failure of the storage company due to economic fluctuations or other misfortunes does not reflect on the suspension organization — which is focused on suspending patients. In fact, a given suspension and "membership" organization might well be sending patients to several storage companies. I could put real names interchangeably in place of A and B below for this example, but, to avoid being quoted out of context, I will not. Would a suspension/ membership organization be much concerned if one of the places it was sending patients failed? Would they break their necks for a bunch of patients who may have come from several suspension organizations? Or would they just shrug and say "Wasn't *our* fault, the members who picked storage

company A instead of B (which is still doing fine) made the wrong choice. Tuff luck."

Over the long haul, it is hard to beat having a bunch of dedicated, even fanatical, active defenders of the patients. Split the patient storage off, and the *organizational* motivation of the animate ones to keep them frozen come hell or high water goes away.

In a later posting, Mark and I exchanged further thoughts:

- > 1) Keith seems to feel that, because
- > the patients would be under the care
- > of an organization other than the
- > one that performs the suspensions,
- > that the living members would no
- > longer care enough to
- > help the patients if the Storage Co.
- > were to get into trouble. Yet
- > these were the same people who,
- > Keith says, would "give till they
- > bleed" if the combined organization
- > were to fail. Which is it?

There is a difference! The patients we have now are *Alcor's* patients. The entire prestige of the organization, and the honor of the officers and board are at stake, not to mention that letting patients thaw out would get the officers and board tarred and feathered, and run out of town on a rail by the members. A really disconnected storage organization is a different kettle of fish. The suspension organization would have no authority over the storage organization, and no responsibility for their actions. The same would be true in the reverse direction.

- > Furthermore, in my view, the patients
- > would not be shipped off to the
- > Storage Co. and forgotten. The
- > people who have an interest in their
- > welfare (relatives &c.) would have
- > the legal right to monitor the
- > health of the Storage Co. and yank
- > "their" people out of the Storage
- > Co.'s care, if certain well defined
- > warning signs appeared indicating
- > that Storage Co. was not doing its job.

I am only going on what I know of the history of cryonics. Relatives have proved a weak reed in most cases. They reconsider the need to keep Gramps in LN<sub>2</sub> after a few years when they need the money to send a son off to college. This is where the rule of having all the money up front came from. They also have a tendency to *die*. And while there are counter-



examples, I am fairly sure that most of the people who are in suspension are the sole member of their family involved in cryonics. Go back a year or so in *Cryonics* and read about Dr. Bedford. His family faithfully took care of him for over a decade, but they finally put him into Alcor's care. They could see a time coming where there would be no one left to continue to care for him, and none of them became suspension members. In another few decades, I doubt there will be *anyone* outside of Alcor who is willing to check on the conditions of his care.

Take my case, my parents are bitterly opposed to cryonics, and my grown kids don't think much of it either.

- > Assuming that the first such warning
- > sign would be "bad odors coming
- > from the dewars" is
- > unwarranted: regular auditing of
- > the books of Storage Co., and physical
- > inspection of the Patient Care Facility
- > under the terms of the
- > contract between Storage Co. and the
- > patient Reanimation Committee(s)
- > is a more reasonable assumption.

I am sorry to say so Mark, but even the people *inside* a company often do not know when it is about to fail. I recently acquired a huge heap of medical equipment

and supplies for Alcor from a bankrupt chain of clinics. The *employees* had no idea there was trouble brewing until the bank came in and locked them out. (I talked to one who was left answering the remaining phone.) I agree that most of the time there would be warning, but you have to consider how often businesses fail and how little warning they sometimes give of this happening.

- > "Who would want to accept the
- > patients?" The same people in both the
- > bundled and unbundled cases — other
- > cryonicists and relatives of the patients.

My assumption is the patients would come with little or no funding, i.e., the funding being used up would be the primary cause of the storage company failure.

Mark, let us assume there are some frozen patients out there who are funded month-to-month (I don't know if this is actually the case — or not — at the moment, but it has been in the past.) Or let us assume some patients who for one reason or another have had their funds used up. The relatives quit paying, or resent the fact that Aunt Martha used the money which "should" have been willed to them to be frozen, and won't pay. The for-profit storage company is going to thaw them

out. These folks were frozen a decade or more ago, and you never met them. Can I hit you up for the several thousand a year it takes to keep them frozen? Would it be responsible for the Alcor board to allocate resources for this purpose and take these folks in? Even though it reduces the resources we have to keep the patients who have *contracted* with us and paid us to keep them frozen? If we were a suspension-only organization would it be fair to the clients who were signed up with us to use resources (which should go to suspending members) to keep these patients frozen? Want to do some fund raising? I will warn you not to try it from the general public.

This is not an entirely hypothetical issue. I don't know when, and I don't know where they will come from, but I would bet that some unfunded orphan cases will turn up on our doorstep sometime in the next decade or so. (The most likely case would be a new company yet to be formed.) What are we going to do when that time comes? I hope you have a good idea, because *I don't*.

Well, you have my thoughts on this subject to date. I would greatly appreciate hearing yours. If you happen to be on email, you may send them directly to [hkhenson@cup.portal.com](mailto:hkhenson@cup.portal.com) or post them to CryoNet.

---

## Cryonics One Decade Ago *Edited and Abstracted by Ralph Whelan*

---

### From the December, 1982 Issue of *Cryonics*:

#### Cryonics, Earthquakes, and Survival

by Michael Darwin

Earthquake safety and survival is a major problem which confronts cryonics operations in California. Small quakes occur several times a year, while a medium-sized quake causes a fair amount of damage in a small area every few years. However, the true nervousness about earthquakes is due to the predictions by seismologists that major quakes will happen sometime in the next decade or two in Los Angeles or San Francisco or both, causing extensive damage, loss of life, and disruption of services. Frozen patients' bodies are brittle and sensitive to shaking, and they are dependent on the continued availability of liquid nitrogen (LN<sub>2</sub>). The

odds on this disaster occurring are apparently very high; yet, until recently, cryonics leaders have given very little attention to the problem.

Since cryonicists are already confronted with many certain problems which demand immediate action, their reluctance to deal with a problem as seemingly massive and beyond their control as earthquakes is perhaps understandable. The attitude toward earthquake safety among most California cryonicists (as well as among most other Californians) could be characterized as being basically the attitude of most people toward global environmental catastrophe, nuclear war, or other massive disasters over which control is next to impossible: they prefer to remain optimistic, hoping it won't happen, and they try not to spend too much time thinking about it. Perhaps "ignorance is bliss" attitudes are understandable in the large majority of people who are not oriented toward future planning and survival; but

this is the very kind of situation in which cryonicists should be way ahead of the rest of the population. In any case, there is a difference between these other disasters and an earthquake. The former are global and result in the demise of high-technology civilization, while the latter produces only local effects which will eventually be repaired and healed by the rest of the intact "civilization organism." It then becomes a matter of planning to get through the initial event and the social disorder which follows. As it turns out, there are a number of relatively simple things which can be done to minimize the risk of succumbing to a major earthquake or its aftermath.

Perhaps the first consideration in earthquake survival is picking the right location for the storage facility. Clearly, situating your building over or adjacent to a known fault would be a big mistake which might make any subsequent planning nearly worthless. The first and most

obvious place to start then is with the question: how close to a major fault is the site and what will be the expected kind of damage at that location? The three most severe [grades of seismic shock] are: Strong shock — minor damage; Very strong shock — fall of chimneys and cracks in the walls of buildings; Extremely strong shock — partial or total destruction of some buildings, especially in areas of high ground water with high potential for ground failure. This consideration of ground water is just as important as distance from a fault. Areas with high ground water is are subject to a potentially catastrophic phenomenon known as soil liquefaction. This effect occurs when large amounts of mechanical energy are injected into wet soil. The soil is momentarily converted into a semisolid gel which allows structures to collapse, topple, or completely disintegrate. Soil liquefaction is the principle source of both damage to surface roads and of structural collapse during seismic activity. It is extremely important to make sure that your location is not cursed with a high water table.

There are at least three other important considerations in selecting your site. First, are there secondary hazards nearby which could destroy the facility in the event of an earthquake? Obvious candidates for this kind of disaster would be a liquefied natural gas plant or a munitions factory. Second, what is the character and density of the local population? Putting a facility in a heavily urban area would greatly add to its likelihood of destruction from subsequent civil disorder. Locating in an area of primarily single family dwellings or light industry would seem to be a more favorable choice. Finally, it is necessary to select a structure which is solidly constructed with earthquake safety in mind. The use of older brick and cinder-block construction buildings should be avoided if at all possible. The ideal structure would be of steel-reinforced concrete with wooden cross supports in the ceiling and relatively light ceiling and roofing materials to provide a maximum give and minimum weight in the event of collapse.

While the building is of recent, solid construction [Mike is talking about the old Cryovita facility in Fullerton, but in fact his comments apply to Alcor's current facility. — Ed.], it is not equipped with a sprinkler system or elaborate fireproofing. There is a serious risk of fire from electrical and natural gas connections in the case of severe structural damage. The front offices of the laboratory are glass walled and can probably be expected to shatter during

severe seismic activity, which will present a security problem in the post-quake period.

With these risks and strengths in mind, it is now time to consider a plan for dealing with a major earthquake. . .

A factor well worth considering in selecting cryogenic dewars is holding time. It is simplistic to assume that just because a patient and dewar make it through an earthquake the trouble is over. Quite the contrary. Several state studies indicate that a major earthquake of 8.3 magnitude or larger would leave the Los Angeles basin paralyzed and seriously disrupted for as long as several weeks. Electrical power will be available only on a scattered basis and roads may be badly damaged. This means that liquid nitrogen production will grind to a halt locally, and that supplies of LN2 will be difficult or impossible to bring into the city. Having dewars with holding times in the range of months and keeping them topped off regularly will be of critical importance. Cryonics personnel should be mindful of the fact that others will not consider the continued maintenance of frozen "corpses" to be a very high priority when triage is being actively practiced with human being who are still "clinically" alive. We will be on our own, totally on our own without hope of significant help from anyone or any agency outside of our own control We should also remind you that many cryonicists may themselves find cryonics to be their bottom priority in the event of a major disaster. The immediate objectives of staying animate, caring for sick or injured loved ones, and helping friends and neighbors out of the rubble and out of the area will probably be of more pressing concern than the welfare of comparative strangers who are cooling their heels or heads in liquid nitrogen. Dewars with long holding times reduce the pressure to get liquid nitrogen and allow personnel to cope with more immediate problems such as security and personal survival. [Alcor's current storage dewars have holding times of 60 to 90 days or more. — Ed.]

Planning for fire is another important task for any earthquake plan (or indeed for any facility's emergency preparedness), yet it is difficult to have a great deal of confidence in any fire plan unless the building is equipped with an automatic sprinkler system. Unfortunately, Cryovita [Again, these comments apply to Alcor now. — Ed.] does not have such a system or the \$10,000 necessary to install one. Of course, in an earthquake a sprinkler system is only as good as its water supply, and it

is quite possible that underground pipes and pumping stations will be disrupted by seismic shocks. It thus becomes extremely important to have a fire plan which is augmented by regular fire drills.

After danger of fire, security is the next most important issue to consider. Security implies the presence of one or more individuals at the storage facility and the incentive for them to remain there — or for that matter, to come there in the first place. Incentive means that Cryovita must represent a source of at least basic necessities: food, shelter, fresh water, and possibly electrical power.

To assure adequate staffing for the laboratory in the event of a disaster, it is necessary to have concerned and knowledgeable staff members in residence no more than a few miles away or within the facility itself. At this time, three knowledgeable and capable staff members live within several miles of Cryovita, at least one being within easy walking distance. At some time in the future, Cryovita may have a full-time caretaker in residence, which should further strengthen the prospects for good security in the event of an earthquake. [Alcor presently has three live-in employees, including a full-time patient caretaker; the other four employees live within three miles of the facility. — Ed.]

The most immediate and important thing to realize about earthquakes is that they, just like death, are things over which we have more control than we might expect. We may not be able to stop them from happening, but we can greatly affect the outcome for ourselves by confronting the likelihood of their occurrence and preparing accordingly. It is NOT possible to prepare for every contingency. If a large enough quake occurs and luck is not with us, the facility could collapse and burn. The possibility of this is not likely, and it should under no circumstances prevent us from taking action where we can and should.

If we. . . prepare our facility to handle a worst case of extended lack of access to LN2, as well as the possibility of some structural collapse, then we are very likely to make it through "the big one" with both our lives and the lives of our suspension patients intact. To a great extent our survival hinges on an awareness that it is up to us. But then cryonicists have had to deal with that knowledge all along. Now we just have to extend that knowledge into action in more areas of our suspension planning. Something CAN be done.



## Business Meeting Report by Ralph Whelan

The November 1, 1992 meeting of the Alcor Board of Directors — open to the general public — began at 1:08 p.m. at the home of Ralph Whelan.

**Resolved:** *The October Alcor Board of Directors meeting minutes are approved without change. (Unanimous)*

Carlos reported that the Riverside City Council ratified a Conditional Use Permit for Alcor, but that the authorization prohibits animal research. Now that Alcor will be receiving its C.U.P., certain compliance conditions must be met (for instance the creation of a window in the facility crew room). Carlos also mentioned that their prohibition is a form of selective prohibition (i.e., animal research *per se* is not illegal in Riverside), and that we may be able to combat it on that basis.

Keith Henson proposed that we offer to engage in binding arbitration over the resolution of the dispute over the capital stock of One Million A.D. (part of the Dick Jones estate). This would *require* that the family beneficiaries not object to the trustee distributing to Alcor the undisputed current assets (\$85,000) prior to entering arbitration. It would minimize the risk that they could countersue for the whole company.

**Resolved:** *Carlos is authorized to approach Barret McInerney about going to arbitration about the capital stock of One Million A.D., with the proviso that the family beneficiaries not object to a distribution to Alcor by the trustee of the undisputed current assets. (Unanimous)*

Carlos reported that most of the investments authorized at the October meeting have been implemented. On those not implemented, we are awaiting the necessary documents. Courtney advised Carlos that those were "closed end funds," which means that we can buy them right away (i.e., without the applications for which Carlos was waiting).

A Colorado morning show, *Colorado Today*, conducted a poll of the viewers about the workability of cryonics, after showing a segment on cryonics. The call-ins indicated that 61% of the viewers (or at least those that called in) believed that cryonics would work. Also, a sitcom airing on Wednesday nights, *Mad About You*, deals peripherally with cryonics in an

amusing, favorable manner in one episode due to air in the next two or three weeks.

Carlos brought up the overdue bill to Cryovita, and proposed that the Board authorize him to move money from the P.C.T.F. to the Operating Fund, money that is owed to the Operating Fund anyway and would normally be moved at the end of the year.

**Resolved** *The Board authorizes Carlos to move funds presently owed to the Operating Fund by the P.C.T.F. into the Operating Fund at his will. (8 in favor, 1 abstention)*

Michael Riskin pointed out that an additional level of security for P.C.T.F. money can be achieved by establishing "stops" on fund transfers over a certain amount, such stops requiring full Board of Directors authorization to overcome.

Steve Bridge announced that he and Ralph Whelan have been authorized by the Alcor Board (in private session) to meet with Cryovita (Paul Wakfer) in an attempt to work out any aspects of the Cryovita/Alcor relationship that still require attention. Steve then read the following announcement regarding an agreement signed by Carlos Mondragón and Hugh Hixon (then Cryovita President) on May 31, 1992:

"The Board of Directors of the Alcor Life Extension Foundation declares that the Agreement signed on May 31, 1992 between Carlos Mondragón, acting as President of Alcor, and Hugh Hixon, acting as President of Cryovita Laboratories, Inc., is void in its entirety and canceled. The Board of Directors further declares that said agreement was written, agreed to, and signed without the knowledge or consent of the Board of Directors."

**Resolved:** *The Board affirms the above wording regarding the Cryovital Alcor agreement of May 31, 1992. (7 in favor, 2 abstentions (Hugh Hixon and Brenda Peters, Cryovita shareholders))*

Derek reported that we approved 7 members in October, and the present Suspension Membership figure is 338. He also noted that one member has temporarily canceled his membership pending the outcome of the 1992 audit.

Tanya reported that we will probably be incorporating "leukocyte filters" in the suspension protocol. These filters will im-

prove the quality of suspensions by preventing damaged white blood cells from re-entering the body (from the perfusion circuit) and attacking the body.

The September 30, 1992 financial figures were prepared by Joe Hovey and made available at the meeting.

Hugh reported that the contract has been signed for the construction of a new four-person dewar.

Michael Riskin, Alcor's Ombudsman, read a letter by a distant member expressing discontent with Alcor's present location (in California), and complaining about inadequate communication concerning Alcor business.

Michael then announced that his 90-day tenure as Alcor Ombudsman will be over on December 31, 1992, and that we need to initiate an election process for a permanent Ombudsman right away. Michael suggested that Ralph put an announcement in the December issue of *Cryonics* requesting nominations for this position.

**Resolved:** *Michael Riskin will remain as the Alcor Ombudsman until the new Ombudsman election is complete, even if that extends his 90-day tenure. (Unanimous)*

Allen Lopp reported that as of this meeting, Alcor has received \$13,114 in checks and pledges for an audit of Alcor (this includes \$4,000 from Alcor's regular income). Allen said that he is still seeking further donations. Although the firm Arthur Anderson doesn't want Alcor's business for liability reasons, there are reasonable quotes from other firms. Carlos announced that Teri Costello (a previous Alcor accountant) gave a quote of \$6,000 for the audit.

Allen read aloud the following list of audit resolutions:

"Let it be hereby

1. RESOLVED, that it is the united intention of the Board of Directors hereby to cause to be performed a thorough professional audit of all Alcor financial records for the fiscal year beginning January 1, 1992; and

2. RESOLVED, that the Board of Directors hereby establishes a Membership Audit Committee to administer said audit



in the full interest of all Alcor suspension clients and patients in suspension, and that said Committee shall be composed of Alcor suspension clients Michael Riskin, Robert Krueger, William Seidel, Courtney Smith, and Austin Tupler; and

3. RESOLVED, that said Committee is hereby authorized by the Board of Directors to contact professional Certified Public Accounting (CPA) firms for the sake of arranging the professional auditing services desired, and is so authorized to negotiate an agreement with the CPA firm of their choice for such professional services up to a value of 20,000 US dollars, providing that said agreement shall be returned in its final recommended form for approval by the Board of Directors and execution by the President; and

4. RESOLVED, that the Board of Directors has allocated in its FY1993 operating budget the sum of 4000 US dollars to partially cover the expense of this audit, and that it is the desire of the Board that the remaining expense be addressed by an ad hoc fundraising effort; and

5. RESOLVED, that Director Allen Lopp is hereby authorized to perform a mailing to all Alcor suspension clients, associate members, and *Cryonics* magazine subscribers for the purpose of requesting directed donations to fund this audit, and that official Alcor membership information may be utilized for said mailing, and that said mailing shall occur during the month of November 1992; and

6. RESOLVED, that it is the united intention of the Board of Directors that said audit should be completed in a timely fashion, and that the full audit report shall be made available to all Alcor suspension clients without delay once the findings are complete, and that upon completion of said audit and the open release of its findings the Membership audit Committee shall be automatically disbanded and dissolved without further action by the Board of Directors."

**Resolved:** *The Board adopts the above resolutions regarding the audit and audit committee proceedings. (Unanimous)*

**Resolved:** *The Board approves Michael Riskin as the Alcor Internal Auditor, per Carlos' prior appointment. (8 in favor, 1 abstention)*

Saul Kent reported that he has begun preliminary fact- and opinion-gathering regarding potential changes to the Director Election process. He will report further as more information is available.

There was extensive discussion of meeting locations, with persons attending by phone from New York and Chicago expressing a desire for future meetings to be held in New York. There was a clear general sentiment from members and directors that everyone would like to hold meetings in New York, Florida, etc. However, many of the Directors can't afford the trip. Suggestions to facilitate this are encouraged.

Courtney Smith announced that the New York group is trying to arrange a meeting at a convention of Science Fiction Writers held annually in New York.

Keith Henson advocated the patent policy that he has refined via email for the past several weeks. That policy is:

"Alcor recognizes that, with respect to employees, it has more in common with an academic organization than a profit making organization. Thus, it is adopting a liberal patent policy modeled to some extent after the one used by Stanford University.

1) In the case of inventions made by employees which are within the area of cryonics and related fields of interest to Alcor, and where Alcor pays for the development and patent expenses, royalties will be distributed 75% to Alcor and 25% to the employee-inventor until legal and development cost are recovered. After recovery of cost, royalties will be distributed 50% to Alcor and 50% to the employee-inventor. Alcor will be the agent for licensing such patents. Inventors may make arrangements on a case-by-case basis for their share of licensing income to stay within Alcor to fund other developments of mutual interest.

2) For inventions outside of Alcor's field of interest, or in cases where Alcor declines to participate, the employee may develop and patent (on their own time and money) inventions subject only to a royalty-free nontransferable license granted to Alcor. (This provision is sometimes called "shop rights.")

3) Terms for joint development of inventions, or where significant employee paid time is involved, or where outside funding is involved will be negotiated on a case-by-case basis. Unless an exception is

made, Alcor will be the licensing agent for resulting patents.

4) Terms in this policy statement are as defined in the attached Section 5 of the Stanford Research Policy Handbook dated 1989. Invention disclosures will be guided by Section 5(D) as applicable to Alcor. Existing employees will be asked, and future employees required to sign a copy of this policy indicating understanding of the policy.

5) Disagreements which may arise under this policy will be arbitrated using the either the American Arbitration Association (the default) or other arbitrators mutually acceptable to the parties involved."

**Resolved:** *The Board accepts the patent policy detailed above. (7 in favor, 1 opposed (David Pizer), 1 abstention)*

Carlos reported that the son of the donor of the land Alcor owns in Arizona is apparently not interested in buying that land. Carlos will pursue a raffle arrangement for selling the land.

**Resolved:** *That Carlos is authorized to raffle off Alcor's Arizona property. (5 in favor, 3 opposed, 1 abstention)*

Allen Lopp read aloud the following proposed resolution for an Alcor Business Plan:

"In order to establish unified goals for the Directors, officers and staff to work consistently and cooperatively, and to communicate to suspension members and the Alcor community the nature of such goals, let it be hereby

1. RESOLVED, that the Board of Directors hereby calls upon the President/CEO to develop or arrange to have developed a comprehensive Business Plan to outline the major goals and objectives to be achieved in the coming years; and

2. RESOLVED, that said Business Plan should address at least the three-year period from January 1, 1993 to December 31, 1995 and, at the discretion of the President/CEO, may address additional unitary future years, but no time later than January 1, 2002; and

3. RESOLVED, that the President/CEO shall make all efforts consistent with the best interests of Alcor to present his first draft of said Business Plan to each Director no later than January 3, 1993; and

4. RESOLVED, that said Business Plan shall be organized in logically divided units, chapters, parts, or articles, so that the Directors may consider and approve each unit separately if they choose to do so; however, the collection of all such units so approved shall continue to constitute one comprehensive Business Plan; and

5. RESOLVED, that it is the intention of the Board of Directors to have the Business Plan fully developed and approved by March 7, 1993, and shall without further resolution form any necessary ad hoc re-write or study sub-committees as may be necessary to achieve this end.

**Resolved:** *That the Board adopts the above proposed resolution for an Alcor Business Plan. (Unanimous)*

Since it's been unclear over the past few months (since Paul Genteman ceased being a member of the Board of Directors of Alcor) what Paul's status is with regard to his Vice Presidency, it was decided that a clear Chain of Command had to be adopted (since Ralph Whelan is also a Vice President of Alcor).

**Resolved:** *That Paul Genteman is appointed Senior Vice President of Alcor. (Unanimous)*

Ralph Whelan reported on progress in the "Omni/Alcor Immortality Contest." He described the main points of negotiation to everyone present. This will be the cover article of the January, 1993 issue of *Omni* magazine, which will be circulating sometime in early to mid-December. The contest will encourage readers to call a 900-number to receive a contest entry form and an informational brochure about

Alcor, and to write on the entry form a 250-word essay about why they want to be frozen by Alcor immediately after their death. The brochure about Alcor and cryonics will encourage entrants to call Alcor to order *Cryonics: Reaching For Tomorrow*, and/or a subscription to *Cryonics* magazine. The entrants will be judged by *Omni* staff, Alcor staff, Charles Platt, and possibly others.

Keith Ferrell, the editor of *Omni*, informed Ralph that one of their contests had 600,000 entrants. He also said that *Omni* will be stressing throughout the contest and the concomitant articles in *Omni* that "cryonics has come of age," that it is a realistic technology that needs to be looked at more seriously.

Dave Pizer and Mark Voelker both expressed strong concern about potential liability arising from any Alcor Director acting as a judge in the contest.

**Resolved:** *The board approves the contest proceedings contingent on Ralph Whelan's related Memorandum of Understanding being present in contract. The Board acknowledges that two of the points in that Memorandum are still being negotiated. The board authorizes Carlos to sign the contract when it exists. (unanimous)*

Keith Henson read aloud the following proposed Endowment Fund Policy:

"In light of the severely uneven cash flow which is characteristic of cryonics, the board authorizes the C.E.O. to use up to 10% of contributed Endowment Fund Capital for internal loans to the General Fund. Management will report to the board all such internal loan activity at the regularly scheduled meetings of the board, or by email. Debt to the fund will be

reduced to zero at least once in the first quarter of each year (completely paid down). Members who donated under the originally published rules will be offered a return of their donations. Alcor will devote much of one meeting in the next four months to looking at ways to bring income more in line with expenses. Alcor will explore other ways to finance short term cash flow problems over the next two years. Unless extended, this resolution will expire in at the end of the first quarter of 1995."

**Resolved:** *The Board adopts the above Endowment Fund Policy. (Unanimous)*

Brenda expressed her opinion that tours of Alcor should no longer include the Patient Care Bay, due to potential risk to the patients from animal rights activists or others. Carlos made the motion that visitors no longer be allowed into the Patient Care Bay. The motion failed with one in favor, 8 opposed.

After a lengthy discussion in private session, the Board and the members present engaged in another lengthy discussion of the morality/practicality of allowing Carlos to use the Alcor mailing list to distribute his reply to *It's Time For A Change*.

**Resolved:** *The Board rescinds last month's resolution that Carlos be prohibited from using the mailing list to respond to It's Time For A Change. (6 in favor, 3 opposed)*

**Resolved:** *Allen Lopp will arrange for and pay for a hotel conference room for the January meeting. (Unanimous)*

The meeting was adjourned at 6:11 p.m.

---

## Reviews

---

### The Whole Truth: The Myth of Alternative Health

By Rosalind Coward

Reviewed by Thomas Donaldson

---

Sometimes, on entering a bookstore, I scan the books on sale there about health and alternative medicine. Anyone who

does so will note one surprising fact about cryonics and immortalism: their absence, in the midst of many books criticizing con-

temporary medicine and health practices and (of course) proposing others. And anyone who has ever dealt with reporters about cryonics will notice yet another (at least superficially!) surprising fact: I have never, in any interview, had to distinguish cryonics from all the other alternative health movements (homeopathy, herbalism, acupuncture, aromatherapy, T'ai Chi, etc. ...).

A little thought, of course, tells us that both cryonics and immortalism differ widely from other varieties of "alternative medicine": unlike the others, we want to

go *against* Nature and any form of "natural therapy"; cryonics relies on developments in future technology, while many other critiques of medicine want to remove "technology" from health care completely. Other differences follow from these, too.

In *The Whole Truth*, Rosalind Coward presents a book-length analysis of all these *other* alternative approaches to health. Most cryonicists will already know some of the differences; what distinguishes Coward's book is that she carefully examines not only the differences at their most visible level, but their implications and origins as well. Coward is not herself a cryonicist, however. Her opinions, which she does not expound in detail, seem to center on (a bit leftist) political action as a way of improving current medicine. The main points of her book, though, center on analysis of "alternative medicines" for the mythologies universally behind them. Many cryonicists may find her book interesting for that reason alone, even if they strongly disagree with her politics. Moreover, many myths lying behind "alternative medicine" have spread much more widely to influence thinking among people who still dutifully go to their doctors.

Among these myths we have the myth of Nature and the natural as being inevitably balanced and good (notice how health food stores have many shelves of "natural" vitamins, distinct from the "synthetic" vitamins, and more expensive). This idea of the natural slides over into another: that if an idea or therapy is old then it must inevitably be good (many ideas like acupressure or T'ai Chi depend on "ancient Chinese learning"). It also turns into a second idea: that whatever disease we may have or fear we have comes

from an imbalance in the "natural state" of our body (caused, usually, by something modern). In fact, quite often it is our alienation from Nature due to Technology that has produced these problems, together with all the stress, tension, and worries anyone may feel.

And along with these notions of disease as the result of our deviation from Nature, we become personally responsible for our state of health. A healthy individual, so saith these myths, remains so by making the difficult (always difficult!) steps of keeping themselves in touch with their own inner Nature. (Does this say something about jogging and all the other exercises people do now?). To keep in touch with Nature doesn't require constantly visiting wild country; instead it requires constant seeking your own inner Nature. *Not* to do this makes an individual worthy of blame: disease, therefore, is punishment for our sins against our own body. Coward suggests that some of these ideas come ultimately from the same sort of Protestant ethos as the Victorian ideas about sex, but now instead of sex they are transferred to health more generally (we overcome our bodies by strenuous efforts toward health).

Coward devotes an entire chapter to how these ideas envision women (as distinct from men). While quite openly feminist, she criticizes many of the myths that attend these ideas of Nature: that women, somehow, by reason of giving birth, live in much closer touch with Nature, and therefore can tell us more about that Nature, that touching and feeling must be more female than male, that women have some special female knowledge that no man can attain ... and many other such

ideas. And she has a good feminist ground for criticism: to regard anyone as a vessel for Myth (either good or bad) degrades that person as a *person*. S/he is no longer an individual with the abilities and desires of an individual, but a Symbol to be responded to as such.

Finally, it's important to understand that Coward describes myths rather than facts. A myth is an idea unthinkingly accepted because everyone else (who is significant!) believes in its truth. A fact has been established by experience and thought, and can be supported by them. She does not set out to criticize particular health practices so much as to describe a mythology of health. Anyone who reads her book (she cites passages from writers on "alternative medicine" to support her points) will agree that she has distinguished and analyzed a significant mythology.

Unfortunately, her scientific knowledge sometimes does not keep up with the subjects she discusses. At one point, for instance, she criticizes Walford for his book *Live To One Hundred*. It counts, for her, as one more instance of the dream of immortality. She seems quite unaware of McCay's experiments showing that undernutrition in rats prolongs their lifespan. Certainly Walford's book may have sold well exactly because of the myths she ably describes; but that does not mean that its actual content might not have contained some worthwhile insights. Her own educational background (nowhere stated) may have come from politics and philosophy, and so can significantly affect her own ideas.

Still, for following out the implications of all of these health myths, she has written an interesting book.

---

## Advertisements & Personals

---

*The Alcor Life Extension Foundation and Cryonics reserve the right to accept, reject, or edit ads at our own discretion and assume no responsibility for their content or the consequences of answering these advertisements. The rate is \$8.00 per line per month (lines are approximately 66 columns wide). Tip-in rates per sheet are \$200 (printed one side) or \$240 (printed both sides), from camera-ready copy. Tip-in ads must be clearly identified as such.*

MARY NAPLES, CLU and BOB GILMORE — CRYONICS INSURANCE SPECIALISTS. New York Life Insurance Company; 4600 Bohannon Drive, Suite 100; Menlo Park, CA 94025. (800) 645-3338.

J.R. SHARP — INS. BROKER — ALL TYPES OF INSURANCE, ANNUITIES, LIVING TRUSTS and LIFE TRUSTS. Assisting Alcor Officers & Members since 1983. P.O. Box 2435, Fullerton, CA 92633. (714) 738-6200 or FAX (714) 738-1401.

**EXTROPY: The Journal of Transhumanist Thought**, #9. Hans Moravec on Time Travel and Computing. Plus: Persons, Programs, and Uploading Consciousness, Nanotechnology and Faith, Extropian Prin-

ciples 2.0, Exercise and Longevity, Genetic Algorithms, reviews. \$4.50 from Extropy Institute; PO Box 57306; Los Angeles, CA 90057-0306. E-mail info from more@usc.edu.

Do you want to keep up with science and technology bearing on cryonics? **PERIASTRON** is a science newsletter written by and for cryonicists, only \$2.50 per issue. **PERIASTRON**, PO 2365, Sunnyvale CA 94087.

Spread cryonicist & Extropian memes with "Neural Tweaker" greeting card themes! For FREE catalog send SASE to: Neural Tweakers, c/o Kevin Q. Brown; P.O. Box 781; Netcong, NJ 08757 USA

"I'D RATHER BE DEAD THAN READ?" — NO WAY! Read *Venturist Monthly News* — News about various cryonics topics — send for free sample copy — Society for Venturism; 1547 W. Dunlap; Phoenix, AZ 85021.

LIFE EXTENSION FOUNDATION OF HOLLYWOOD, FLORIDA provides members with "inside" information about high-tech anti-aging therapies. for free information call 1-800-841-LIFE.

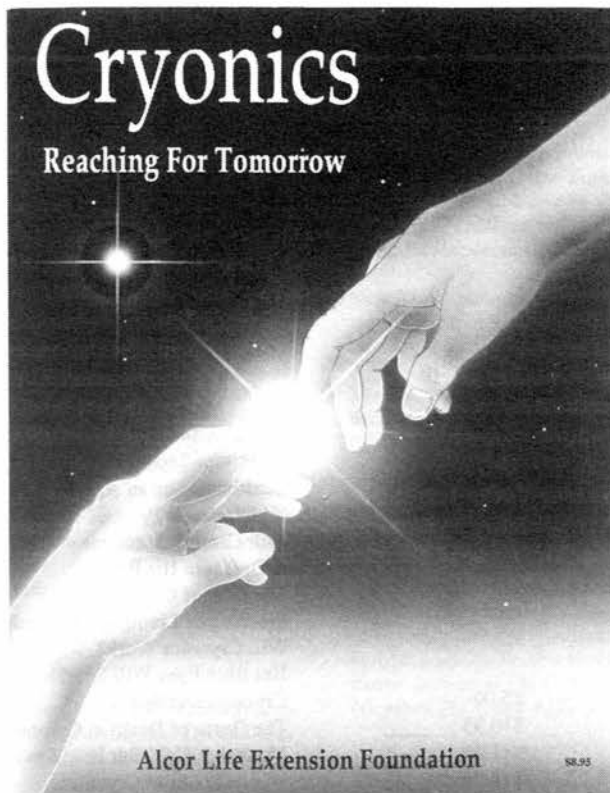


## Cryonics Is. . .

Low-temperature preservation of terminal patients when medicine is unable to heal them. This treatment is called *cryonic suspension*. The goal of cryonic suspension is the transport of today's terminal patients to a time in the future when cell/tissue repair technology is available, and restoration to youth and health is possible — a time when freezing damage is a fully reversible injury and cures exist for virtually all of today's diseases, **including aging**.

It is our belief that if human knowledge and medical technology continues to expand in capability, people with conditions that would cause them to (incorrectly) be considered dead by today's medicine will be routinely restored to life and health. This coming control over living systems should allow us to fabricate new organisms and sub-cell-sized devices for repair and resuscitation of patients who will have been waiting in cryonic suspension.

There is already substantial scientific evidence available that current suspension techniques are preserving memory and personality — and that the repair and resuscitation technologies we envision will be developed within the next 50 to 150 years.



Non-members may call toll-free (800) 367-2228 or write (see reverse for address) and receive the book, *Cryonics - Reaching for Tomorrow* for free (regular retail price: \$8.95, member price: \$5.00.)

## Alcor Is. . .

The Alcor Life Extension Foundation: a non-profit tax-exempt scientific and educational organization. Alcor currently has 25 members in cryonic suspension, hundreds of Suspension Members — people who have arrangements to be suspended — and hundreds more in the process of becoming Suspension Members. Our Emergency Response capability includes equipment and trained technicians in New York, Canada, Indiana, and Northern California, with a cool-down and perfusion facility in Florida and the United Kingdom.

The Alcor facility, located in Southern California, includes a full-time staff with employees present 24 hours a day. The facility also has a fully equipped and operational research laboratory, an ambulance for local response, an operating room and the world's largest and most technically advanced cryogenic patient storage facility.

All Alcor Directors and Officers are required to be full suspension members.

Call toll-free (800) 367-2228 or write (see reverse for address) for the free book, *Cryonics: Reaching for Tomorrow*.

### Table of Charges and Dues

Sign-Up Package: \$100 (certain limitations apply; call 1-800-367-2228 for details)

Whole Body Suspension Minimum: \$120,000

Neurosuspension Minimum: \$41,000

Outside U.S. Surcharge: \$10,000

Annual Adult Dues: \$288.00

Additional Adult Family Member Annual Dues: \$144.00

Additional Family Member Child's Dues (under 15 years of age): \$72.00

Adult Student Annual Dues (must be full time student): \$144.00



You can tour the Alcor facility in Riverside, California under the expert guidance of the Alcor staff. The facility is open to small groups (15 people or less) who wish to learn how terminal patients are placed into suspension and how they are cared for at -320°F.

The Alcor tour also features a discussion of the scientific evidence that patients in cryonic suspension have a realistic chance of being restored to life, health, and youthful vigor as well as a fascinating exploration of the advances likely to come in the 21st century and beyond. The tour provides an invaluable opportunity for you to have your questions about cryonics and the prospect of an extended human lifespan answered.

The Alcor tour is free of charge. If you'd like to make arrangements, call (800) 367-2228.

Yes, I want to make cryonic suspension arrangements with Alcor. Please send me  Sign-Up Package(s).

Name \_\_\_\_\_ Age \_\_\_\_\_

Sign-up fee: \$100 per person.

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Payment enclosed (check or money order).  Bill me.

I understand that an Alcor Sign-Up Coordinator will contact me at the above number.

ALCOR LIFE EXTENSION FOUNDATION  
12327 Doherty Street  
Riverside, CA 92503

Non-Profit Organization  
U.S. POSTAGE PAID  
Permit No. 11  
Portland, OR 97208

**FORWARDING AND RETURN POSTAGE GUARANTEED  
ADDRESS CORRECTION REQUESTED**



**For information on cryonics call Alcor:  
1-800-367-2228 (toll-free, non-members only) or 1-714-736-1703 (members).**