Still Getting **Mammograms?** **Check Out** This Surprising **NEW** Data[1]

Radiologists often rely on specialized "CAD" computer software to find suspicious areas in mammograms.

But a large new study showed that the technology has failed to improve breast cancer detection. In fact, it increases a woman's risk of getting a "false positive" result and being told she had an abnormal mammogram when she's actually cancer-free.

The study analyzed 1.6 million mammograms taken between 1998 and 2006. Some experts say that in light of the new evidence, radiologists should use more discretion in interpreting CAD results. According to CNN:

> *"CAD is now used in roughly three of every four screening mammograms ... The detection rate for noninvasive breast abnormalities improved at radiology facilities that adopted CAD technology, but, crucially, the rate did not improve for invasive breast cancers, the dangerous type that invade healthy tissue in the breast or other parts of the body."*

Updated Federal Advisory Board Recommendations

You have to wonder why--when science clearly confirms that a conventional recommendation is useless-- it receives virtually no exposure in the media to inform the public of this change. This is precisely what happened with the recommendation of routine mammography, which was conclusively shown to be useless in most women under the age of 50.

As of November 2009, routine mammograms are no longer recommended across the board for all women starting at the age of 40. Citing ineffectiveness and increased risk of harm in premenstrual women, the U.S. Preventive Services Task Force, a federal advisory board, changed their recommendation from annual to bi-annual mammography screenings, and raised the recommended starting age to 50. Since then, the use of mammography has begun to drop.

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[1] Article taken from http://www.mercola.com/

However, not everyone agrees with the Preventive Services task force recommendation, and a few organizations have banded together to condemn the revised guidelines. Last month, the American College of Obstetricians and Gynecologists (ACOG) issued their breast cancer screening guidelines, recommending:

- Mammography every 1-2 years for women aged 40-49 years,
- Annual mammogram for women age 50 or older,

Still, these squabbles aside, there are serious questions about whether mammography should be the preferred screening method at all. I personally do not recommend it. Dr. Virginia A. Moyer, chair of the Preventive Services task force, according to CNN, responded by saying:

> *"... the recommendation was based on a recognized modest benefit shown by studies in human subjects. Recommendations from other organizations are based on evidence of lower quality, and the task force is extremely strict about the level of evidence it can accept..."*

Concerns about Lack of Safety and Effectiveness of Mammograms Continue

Time and again, studies published in prestigious medical journals have shown that mammography isn't all it's cracked up to be. The federal task force indicated that this was their impression as well; hence the shift in their recommendation in 2009. For example:

- Mammograms miss up to a third or more of all breast cancers, as reported by Medscape, depending on the composition of your breast tissue and the type of cancer.
- Mammography and its subsequent tests, such as MRIs and stereotactic biopsies, may actually cause cancer.
- False positives (a diagnosis of cancer when it turns out to be non-cancerous) are notorious in the industry, causing women needless anxiety, pain and, often, invasive and disfiguring surgical procedures. This is the MAJOR danger of mammography, as it radically increases the number of women who will be misdiagnosed and plugged into a system designed to cut, poison, and burn them unnecessarily without addressing the underlying reasons of what caused the cancer.
- CAD computer software used as an aid to locate suspicious areas in mammograms has been shown to be ineffectual for improving breast cancer detection, and increases your risk of getting a "false positive" result.

The final insult to injury is the latest in a long row of blows against the cancer detection industry. In the featured study above, 1.6 million mammograms from 90 radiology facilities across the US were analyzed. It was determined that the use of computer assisted software, which should be helpful in the detection of breast cancer, was not helpful after all. As reported by CNN:

> *"The detection rate for noninvasive breast abnormalities improved at radiology facilities that adopted CAD technology, but, crucially, the rate did not improve for invasive breast cancers, the dangerous type that invade healthy tissue in the breast or other parts of the body. Moreover, in facilities that began using CAD the percentage of women with abnormal mammograms who were accurately diagnosed (a measure known as "positive predictive value") dropped, from 4.3% to 3.6%. Rates of false-positives and "recalls" -- being called back for further testing -- increased slightly after facilities implemented CAD."*

These results echo those from a study published in 2007, which also concluded that:

> *"The use of computer-aided detection is associated with reduced accuracy of interpretation of screening mammograms. The increased rate of biopsy with the use of computer-aided detection is not clearly associated with improved detection of invasive breast cancer."*

Mammography Is a Source of Radiation-Induced Damage

Another recent study further fuels concerns about the use of mammography, especially in women predisposed to breast cancer, and strengthens the recommendation to avoid mammograms if you're under the age of 50. The study assessed the radiation-induced DNA damage in epithelial breast cells in women with high- and low risk of breast cancer. The results showed that women with a family history of cancer, placing them at high risk, were at significantly greater risk to suffer irreparable double-strand DNA breaks from mammography, and the effect was exacerbated with dose repetition. The authors concluded that:

> *"This study highlights the **existence of double-strand breaks induced by mammography** and revealed by γH2AX assay with two major radiobiological effects occurring: a low-dose effect, and a Low and Repeated Dose (LORD) effect. **All these effects were exacerbated in high-risk patients.**These findings may lead us to re-evaluate the number of views performed in screening using a single view (oblique) in women whose mammographic benefit has not properly been proved such as the 40-49 and high risk patients."*

This isn't the first time scientists have come to the conclusion that using mammography as a tool for early detection and "prevention" of lethal cancer may in fact, in many cases, do far more harm than good. Yet you don't see major warning about the risks in the media, nor do any mammography centers provide information on these risks, so the women are not given full disclosure, making it impossible for them to give any type of valid informed consent for this procedure.

According to the Cancer Prevention Coalition, radiation from routine mammography poses a *significant cumulative risk* (over time) of *causing* breast cancer. And according to the BreastCancerFund.org, lower-energy X-rays provided by mammography result in substantially greater damage to DNA than would be predicted, and suggests that risk of breast cancer caused by exposure to mammography radiation may be greatly underestimated.

Dr. Samuel Epstein, probably the leading scientist in the world who truly understands this issue, has been warning people for years about the dangers of mammography, explains:

> *"The premenopausal breast is highly sensitive to radiation, each 1 rad exposure increasing breast cancer risk by about 1 percent, with a cumulative 10 percent increased risk for each breast over a decade's screening..." "The high sensitivity of the breast, especially in young women, to radiation-induced cancer was known by 1970. Nevertheless, the establishment then screened some 300,000 women with X-ray dosages so high as to increase breast cancer risk by up to 20 percent in women aged 40 to 50 who were mammogramed annually."*

Does Mammography Save Lives?

The reason why women are urged to get regular mammograms is to catch the cancer early enough to deliver life-saving treatment. But research shows that mammography fails at this mission as well... A recent article in the prestigious British Medical Journal compared breast mortality rates in a variety of different countries before and after the introduction of routine mammography screening, demonstrating that the screening has had virtually nothing to do with the reductions in breast cancer mortality. The authors write:

> *"From 1989 to 2006, deaths from breast cancer decreased by 29% in Northern Ireland and by 26% in the Republic of Ireland; by 25% in the Netherlands and by 20% in Belgium and 25% in Flanders; and by 16% in Sweden and by 24% in Norway. The time trend and year of downward inflexion were similar between Northern Ireland and the Republic of Ireland and between the Netherlands and Flanders. In Sweden, mortality rates have steadily decreased since 1972, with no downward inflexion until 2006.*
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> *Countries of each pair had similar healthcare services and prevalence of risk factors for breast cancer mortality but differing implementation of mammography screening, with a gap of about 10-15 years.*
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> ***The contrast between the time differences in implementation of mammography screening and the similarity in reductions in mortality between the country pairs suggest that screening did not play a direct part in the reductions in breast cancer mortality**."*

This is quite noteworthy! Rather than falling for claims that mammography is responsible for reduced breast cancer mortality, one should begin to look around for the *real* cause behind this across-the-board drop—because teasing out whatever *that* is, would be quite helpful—as opposed to pushing mammography, which has been shown to have little or no impact on mortality rates.

Unfortunately, the industry is extremely reluctant to accept this fact. As a perfect example, CNN recently reported Apparently they did not review the above results, which completely negate the claim that mammograms play a direct role in reducing mortality...on this very issue, stating that:

"While breast care experts acknowledge that mammography is imprecise and can lead to false positives, undue anxiety and overtreatment, they say it is the best tool they have for detecting breast cancer and that the benefits far outweigh any potential harms. Mammography has helped reduce breast cancer mortality in the United States by nearly one-third since 1990, according to the American College of Radiology."

The Profit-Driven Motives of Mammography Recommendations

In a previous article, published in the International Journal of Health Services in 2001, Dr. Samuel Epstein wrote:

"Mammography screening is a profit-driven technology posing risks compounded by unreliability… Mammography is not a technique for early diagnosis. In fact, a breast cancer has usually been present for about eight years before it can finally be detected. … In striking contrast, annual clinical breast examination (CBE) by a trained health professional, together with monthly breast self-examination (BSE), is safe, at least as effective, and low in cost."

According to a 2008 report by market analysts Medtech Insight, breast cancer screening is a $2.1 billion-a-year business, centered around mammography, magnetic resonance imaging (MRI), and ultrasound. Unfortunately, when something is this profitable, the concern and emphasis when evaluating safety and efficacy tends to center on loss of income rather than on what best serves the patient. When it comes to business decisions, it seems the patient's best interest nearly always is factored *out* of the equation, and this seems to be the case with mammography ...

Mammography-Related Devices Approved Without Valid Scientific Evidence

You might be surprised to learn that many mammography-related devices have been approved without any scientific evidence to back up their safety and effectiveness. In a 2009 article posted on HealthCentral.com, Terry Matlen reported that nine FDA scientists had raised the red flag and shared their concerns in a letter to the then president-elect Obama, alleging that "'gross mishandling' by FDA managers was putting the country at risk," and asking for a restructuring of the agency. Matlen writes:

"[T]he scientists cited a breakdown of the independent scientific review process at the FDA as far back as 1998, when Tom Daschle, Mr. Obama's choice to head the Department of Health and Human Services, wrote about the issue in his book, "Critical: What We Can Do About the Health-Care Crisis." In that book, Daschle described how mammography computer-aided detection devices were not appropriately approved, thus setting into motion a chronic breakdown of the FDA's system.

> *Daschle noted that these devices were not backed by clinical evidence showing they were effective in detecting breast cancer, thus causing undue biopsies for thousands and thousands of women. For the past three years, FDA scientists and physicians have recommended five times that these mammography devices not be approved without valid clinical, scientific evidence."*

This seems to fly in the face of an industry that prides itself on adhering to science-based medicine, doesn't it? Of course, many mammography proponents will argue that any drawbacks are "theoretical." But the bottom line is they're really just trying to protect *their* bottom lines by denying the truth as evidenced by the many studies indicating that mammography is both risky and ineffective. The price you pay for being misled is your health; perhaps even your life, if you're one of the women whose mammograms miss the cancer, or if you end up being one of those whose cancer might be the result of the procedure itself.

Take Control with Regular Self-Exams

Breast self-exams have long been recommended as a simple way for women to keep track of anything unusual in their breasts. However, after studies indicated that this too, in and of itself, does not reduce breast cancer mortality rates, many experts began recommending a more relaxed approach known as "breast awareness."

Breast awareness is really self-explanatory. It means you should regularly check your breasts for changes, but you can do so in a way that feels natural to you. In other words, you don't have to do it on the same day each month, or using any particular pattern. Instead, simply be aware of *what's normal for you* so you can recognize anything out of the ordinary. Changes to keep an eye out for include:

A new lump or hard knot found in your breast or armpit	Change in the size, shape or symmetry of your breast	Redness or scaliness of the nipple or breast skin	Any suspicious changes in your breasts
Dimpling, puckering or indention in your breast or nipple	Swelling or thickening of the breast	Nipple discharge, especially any that is bloody, clear and sticky, dark or occurs without squeezing your nipple	Changes in your nipple such as tenderness, pain, turning or drawing inward, or pointing in a new direction

What Can You Do to Actually PREVENT Breast Cancer

While it is certainly helpful to identify cancers as soon as possible, even better would be to engage in lifestyle changes that would dramatically reduce or virtually eliminate your risk of developing breast cancer to begin with. This includes:

- **Optimize your vitamin D levels**. Vitamin D influences virtually every cell in your body and is one of nature's most potent cancer fighters. Vitamin D is actually able to enter cancer cells and trigger apoptosis (cell death). When JoEllen Welsh, a researcher with the State University of New York at Albany, injected a potent form of vitamin D into human breast cancer cells, half of them shriveled up and died within days. It was as effective as the toxic breast cancer drug Tamoxifen, without any of the detrimental side effects and at a tiny fraction of the cost. If you have cancer, your vitamin D level should be between 70 and 100 ng/ml. Vitamin D works synergistically with every cancer treatment I'm aware of, with no adverse effects.
- **Normalize your insulin levels.** A primary way to accomplish that is to avoid sugar, especially fructose, as well as grains (including organic ones). Aside from causing insulin resistance, all forms of sugar also promote cancer. Fructose, however, is clearly one of the most harmful and should be avoided as much as possible. Also make sure to exercise regularly, especially with Peak 8, as exercise is one of the best ways to optimize your insulin levels.
- **Get plenty of natural vitamin A**. There is evidence that vitamin A also plays a roll in helping prevent breast cancer. It's best to obtain it from vitamin A-rich foods, rather than a supplement. Your best sources are organic egg yolks, raw butter, raw whole milk, and beef or chicken liver. Beware of using oral supplements as there's some evidence that vitamin A can negate the benefits of vitamin D. Since appropriate vitamin D levels are crucial for your health in general, not to mention cancer prevention, this means that it's essential to have *the proper ratio* of vitamin D to vitamin A in your body. Ideally, you'll want to provide all the vitamin A and vitamin D substrate your body needs in such a way that your body can regulate both systems naturally. This is best done by eating colorful vegetables (for vitamin A) and by exposing your skin to safe amounts sunshine every day (for vitamin D).
- **Avoid exposure to xenoestrogens, such as phthalates and BPA**. These chemicals mimic natural estrogen, which is a breast cancer promoter.
- **Avoid charring your meats**. Charcoal or flame broiled meat is linked with increased breast cancer risk. Acrylamide—a carcinogen created when starchy foods are baked, roasted or fried—has been found to increase breast cancer risk as well.
- **Avoid unfermented soy products**. Unfermented soy is high in plant estrogens, or phytoestrogens, also known as isoflavones. In some studies, soy appears to work in concert with human estrogen to increase breast cell proliferation, which increases the chances for mutations and cancerous cells.
- **Maintain a healthy body weight.** This will come naturally once you cut out sugar, fructose and grains, and start to exercise. It's important to lose excess body weight because fat produces estrogen.
- **Drink a quart of organic green vegetable juice daily.** Please review my juicing instructions for more detailed information
- **Get plenty of high quality animal-based omega-3 fats, such as krill oil.** Omega-3 deficiency is a common underlying factor for cancer.
- **Take curcumin.** This is the active ingredient in turmeric and in high concentrations can be very useful in the treatment of breast cancer. It shows immense therapeutic potential in preventing breast cancer metastasis. It's important to know that curcumin is generally not absorbed that well, so I've provided several absorption tips here.