



BREAST CARE

Breast cancer has unfolded into the most common malignancy in women. Approximately 30% of cancers in women are related to the breast, and it is responsible for more than 40,000 deaths annually. Risk factors associated with breast cancer include age, positive family history, early menarche, late menopause, first-term pregnancy after the age of 25 years old, nulliparity, perhaps the use of exogenous estrogens for hormone replacement therapy, and now, we can add antibiotics to the list. Although epidemiologic studies suggest that a diet high in fat increases the risk for breast cancer, traditional orthodox practitioners have been unable to establish any causal relationship to their satisfaction.

Only 5-10% of cases of breast cancer are associated with breast cancer susceptibility genes which are referred to as BRCA1 and BRCA2. Despite all the millions of dollars dedicated to breast cancer research, the understanding of how breast tissue is actually regulated is unknown. Therefore, the actual information necessary to help women prevent the onset of breast cancer is also unknown. There is no question that current understandings related to breast cancer have led the traditional medical system to advocate the use of yearly mammography as a breast cancer screening tool. The idea here is not to prevent cancer, but to actually detect it at a very early stage. The assumption is that if cancer is caught at an early stage, then recovery from the cancer post-therapy should be better than if the cancer had advanced in its disease state when



diagnosed. Several large European studies related to this issue do not support that understanding; however, American studies tend to support it from an outcome perspective. Finding cancer early is not as healthy as preventing it all together.

There is no question that the more we understand about how cells in the breast behave the more likely we will be to understand how we can prevent breast cancer. We know that breast tissue is particularly sensitive to hormones. One of the most important aspects of proper breast care is to perform a regular breast screening to highlight changes in breast condition. The key is for a woman to know what her normal is, so that she may be able to detect changes that would go unnoticed by an uneducated and inexperienced observer. Women should know the outline and shape of their breast; whether or not they have dimpling or puckering of their skin; if there are any lumps or thickening of the breast, even into breast tissue of the armpit; any flaking skin or discharge of the nipple; or certainly, any unusual pain or discomfort. These concerns can be evaluated by women themselves without a physician's intervention or observation.

There are choices of medical screening tests that are available today. For decades, mammograms have been touted as probably the "gold standard" in detecting microscopic changes in the breast. However, there is no secret that breast cancer screening through mammography is not perfect. It's been estimated that 10-15% of patients with breast cancer go undetected using mammography as their screening tool. In recent years, both



contact and infrared thermography have come into mainstream evaluation. Both techniques are very sensitive in identifying changes in temperature of the breasts and therefore uncover the possibility of finding an occult malignancy. Tumors have a higher metabolic rate and therefore produce more heat. Tumor temperatures are warmer than normal breast tissue.

There are two types of thermography that are available today in the United States. One is done using an infrared heat image captured by a camera and displayed on a computer. This test is static, meaning that it is a fingerprint map of the woman's breast at one point in time. An alternative to infrared thermography is contact thermography. This test is dynamic. A probe is used to measure skin temperature as it makes contact to the skin. After the initial readings, the patient is exposed to 10 minutes of cool air. Then the test is repeated. Of the two techniques, Computerized Regulation Thermography (CRT) has been thought to be superior to the static infrared thermography in detecting alterations in breast regulation and tissue inflammation.

Of concern to many women are the detrimental effects of repeated mammograms. Several studies have raised these concerns. Mammograms require approximately 200 newtons of compression on each breast in order to do the procedure properly. The procedure is not only painful, but animal studies show that compression can spread cancer cells to remote parts of their bodies. The CRT is a simple procedure. A



technician measures the skin temperature on approximately 125 different body areas. Each measurement contributes to an overall profile of how the entire body is regulated. This regulation gives a tremendous understanding concerning the physiology of the total health of the person being screened as opposed to just a localized evaluation. Because the thermography is so sensitive to small increments of change, it is not common for women to have a positive thermography and negative mammography. If mammography is negative, there is a possibility we would be able to prescribe or promote a healthy lifestyle that could possibly diminish the likelihood of cancer formation. A Canadian study released several years ago showed that many of the women who develop breast cancer have a several year window of opportunity to regulate breast tissue to avoid the onset of tumor formation. Many of the patients in the study identified some sort of emotional or physical trauma within five years of the formation of their tumors.

In any event, a comprehensive breast wellness program should be practiced by women. There is no question that knowledge about breast health and proper preventive screening (CRT) will help in identifying possible deregulation of the breast tissue by pregnancy, hormone therapies, antibiotic use or dietary imbalances, such as a high fat diet. The rest is up to you. (See Breast Cancer Risk Factors)

If you have any questions concerning your breast health, please feel free to call Missy at The Stone Institute to schedule an appointment for a CRT. You may be very surprised to



find that although you may feel wonderful, your breast tissue isn't regulated as well as it could be.