

BREAST CANCER

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Case Report

One of our patients had her breast cancer removed at age 64 by a simple mastectomy along with removal of the first lymph nodes in the axillary area. She refused any other kind of standard treatment — radiation or chemotherapy. Her cancer was two centimeters in diameter, and one axillary lymph node contained a metastatic cancer. Instead of other standard treatments, she began to study and instituted every possible means of treating herself with natural or alternative methods. She quit work for five months to do her treatments. She was about 30 pounds overweight, and immediately lost about 20 pounds. She was very involved in her son's family business, but although her life was very busy, never did she allow any vacation from her cancer routine. Five years later she had a recurrence at the scar just under the location of the cancer in the breast. It seemed probable that the cancer had been removed everywhere except for a small focus on the deepest side of the cancer. The recurrence was slow growing, requiring almost three months to become evident that it was not simply a scar blemish. It was removed by simple surgery and local anesthesia, and she renewed her original strong attempts to treat herself with alternative therapies, and added some herbs she had recently heard had anti-cancer properties. She lost some more weight, went on a juice fast of all raw juices, and felt good and hopeful about herself.

Three more years passed. She suddenly died, having been feeling quite good with no developing weakness, and no indication of tumor recurrence. At autopsy it was discovered that her body was entirely free from cancer except for a small focus in her brain. This focus was apparently also very slow growing, but had some blood vessels which stretched from the tumor to the membrane covering the brain. This group of blood vessels had ruptured producing a massive hemorrhage in her brain causing her death. While she did not actually die of cancer with its gradual weakening and toxicity, indirectly her death was caused by cancer through the rupture of one group of the cancer's blood vessels. This cancer may have been present from the beginning, or may have been a recurrence. Had it been in the skin or lymph nodes, it might have again been treated by surgery and she might not have died, at least for several more years. Nevertheless, the recognition that she had so successfully slowed the growth of her cancer and controlled metastases, friends and family felt very good about her treating herself using alternative therapies. Had she been treated to the maximum extent of standard treatment, it would probably not have been as good, or certainly no better, than with the alternative therapies she chose at a fraction of the cost, and no loss of quality of life.

Incidence of Breast Cancer

Breast cancer is now developing in one out of every seven women, a steady increase since 1960 (about the time birth control pills became widely used). Heredity and lifestyle are involved in the great increase. Fibrocystic breast disease has slightly increased in incidence during the same years. Over 50 years of age, one is more susceptible to breast cancer. We now have in America more women over age 50. This is one factor in the increase in incidence. Death rates from

cancer of the breast are increasing at a rate of 1.7 percent every six years despite all the research money poured into studying drug treatment for cancer. Perhaps we can now say this money is being misspent! It should be spent on research to prevent cancer, not on pharmaceutical treatment of cancers already acquired. The American Cancer Society reports that 182,000 women are diagnosed with breast cancer in the United States each year, and 46,000 (about 25 percent) die.—*Associated Press*, April 13, 1994

A study may have turned up new evidence of a link between environmental pollution and breast cancer according to the New York State Health Department. The study began in 1991 on 17,059 women living on Long Island for at least 20 consecutive years before 1985 who had developed breast cancer between 1984 and 1986. Women who had lived near the chemical plants on Long Island in 1965 had a higher rate of post menopausal breast cancer than did women who lived in those areas after 1975 when federal efforts to curb air pollution went into effect.

Breast Cancer Risks

Item	Higher Incidence	Lower Incidence
1. Sex	99% Female	1% Male
2. Age	75% over 40	Under 40
3. Race	Caucasian	Oriental
4. Number of pregnancies	None	Several
5. Number of abortions	More than one	None
6. Age at time of first birth	Over 25	Under 21
7. Previous breast disease	Yes	No
8. Family history	Positive	Negative
9. Rauwolfia or resperine medication	Yes	No
10. Climate	Cold	Warm
11. Iodine deficiency	Yes	No
12. Selenium deficiency	Yes	No
13. B-vitamin deficiency	Yes	No
14. Overweight before puberty	Yes	No
15. Weight	Obese	Lean
16. Religion	Jewish	Other
17. Socioeconomic	High	Low
18. Age of beginning menstruation	Early	Late
19. Age of natural menopause	Late	Early
20. Wet ear wax	Yes	No
21. Nipple secretions	Yes	No
22. Heavy use of meat or fats	Yes	No
23. Height	Tall	Short
24. Thyroid activity	Low thyroid	Normal thyroid
25. Thyroid supplements	Long time	None or short time
26. Breast-feeding infants	No	Yes
27. Viral particles in cow's milk	With	Without

28. Breast trauma

Yes

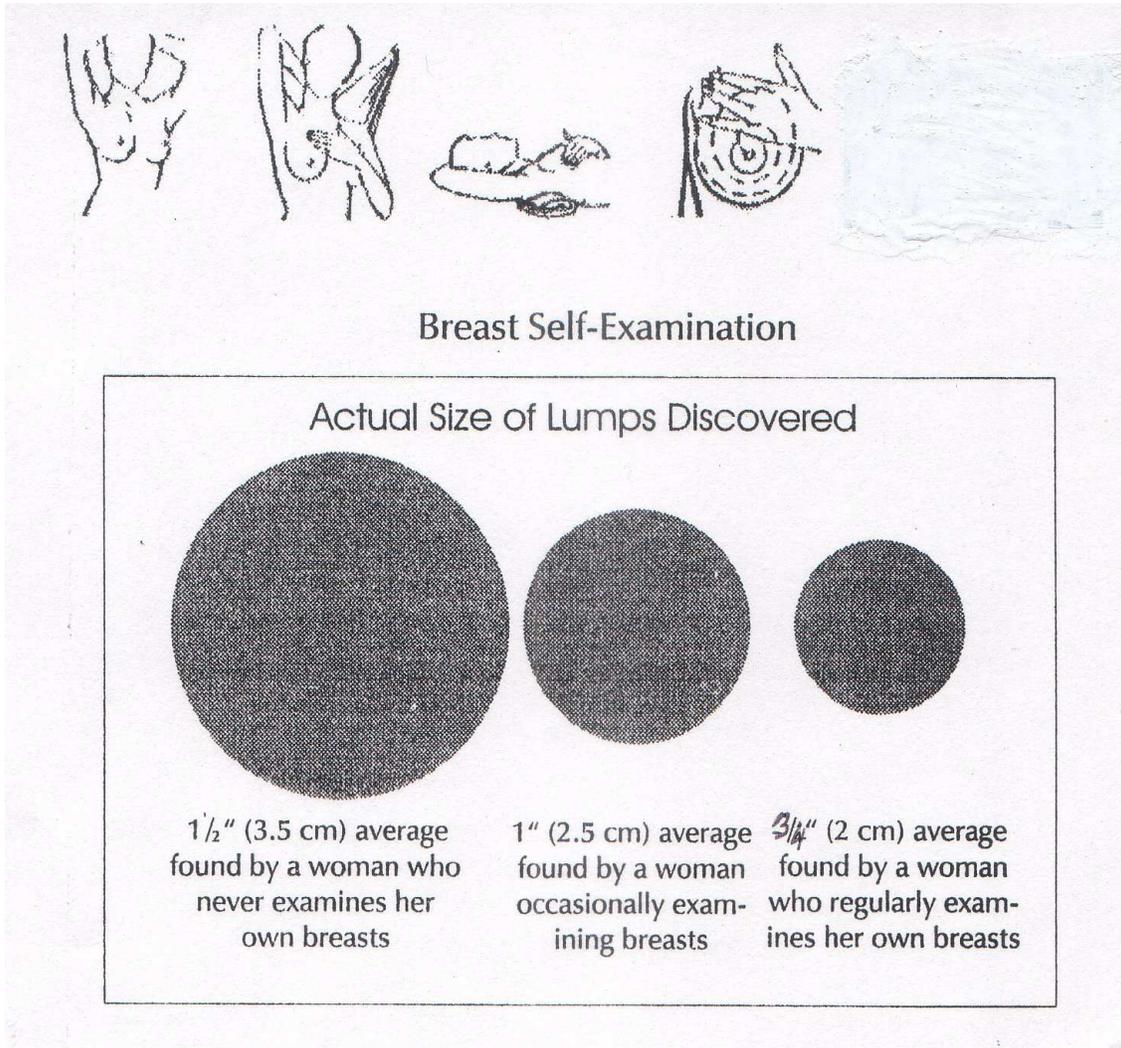
No

Breast Self-Examination

Lumpiness or discreet lumps in the breast usually turn out to be fibrocystic breast disease as it is the commonest form of breast disease. A woman should learn to examine herself for lumps and to distinguish clearly between benign and suspicious lumps. See below for method of breast self-examination. We recommend a breast examination at the turn of the seasons — first day of spring, first day of summer, etc. If you find a lump not there before that does not get smaller in two or three weeks, you should get professional help.

About one-fourth of all women have irregular areas in their breasts at some time. Just before menstruation, irregularities may occur. These feel grainy or finely lumpy and usually occur in the upper quadrants. Some women have persistently irregular breast tissue that feels grainy or plaque-like between periods. Such irregularities are not true tumors and are usually bilateral and do not increase in size, or consolidate. On the other hand, true tumors do not vary in size except perhaps to grow, and are only on one side.

Breast Self-Examination



After the inspection and the palpation of the breasts have been completed, the nipples should be squeezed to see if a drop of secretion can be expressed from the nipple. To do this, grasp the nipple back a way and then strip it out to see if you can express a small drop. The presence of milk may only signify normal secretion, but can represent an overactive endocrine system. Blood may indicate a lesion.

Origin of Lumps

Breast cysts are often caused by a food sensitivity, especially foods containing methylxanthines (caffeine, theophylline, theobromine) which are found in coffee, tea, colas and chocolate. Nicotine stimulates the growth of breast tissues and should not be taken in any form. Vitamin E can also cause breast cysts and tenderness in some women, but in others it may actually help to resolve fibrocystic disease. Drugs containing methylxanthines may promote fibrocystic disease: asthma medications, Anacin, Mycol, Dexedrine (an amphetamine), Dristan, Empirin, Excedrin, No-Doz, pain relievers, cold and sinus preparations, appetite suppressants, and hormones (birth control pills, estrogens, etc.). Allergies and food sensitivities represent one of the important causes of fibrocystic disease, and the Elimination and Challenge diet will often reveal the offending foods. (See our book *Food Allergies Made Simple*.) It has been observed that the same things that cause acne can cause breast cysts, such as wheat, citrus fruits and juices, the nightshades, and eating mixtures of free fats and free sugars.

A localized area of bruising will sometimes occur in the breast because of some trauma, a bump, a fall, leaning against a sharp object, a mammogram, or the blockage of a duct. Every woman should examine the breasts regularly; in the shower is a good time, and at any time the breasts are touched. .

Treatment for Benign Lumps

Treatment of benign lumps may cause them to disappear in a few weeks.

1. Apply fomentations daily, a series of four hot compresses alternating every four minutes with a cold compress for 30 seconds.
2. Simplify the diet, using only fruits, vegetables, and whole grains, with a few nuts. For resistant cases or multiple lumps, you may wish to try the same diet and general program we use for acne as the conditions have similarities. See our book *Natural Remedies*.
3. If tenderness is present, wear a charcoal compress (see method in our book *Rx Charcoal*) every night until it goes away.
4. If the lesion is a cyst, it can be emptied usually with a Vacutainer setup such as is used for drawing blood from the arm. Any nurse or phlebotomist can easily puncture the cyst using an 18 gauge Vacutainer needle.

Why Not Use Hormones

The two principal reasons for offering hormones to women are the hope of preventing osteoporosis, and to help menopause symptoms. For osteoporosis we use a very effective program with herbs, diet, and exercise. For menopausal symptoms we successfully treat women

using diet and other treatments. To give estrogen treatment in menopause treats menopause as a disease, not a normal physiologic process. That there are symptoms associated with it in a certain percentage of women, should bring us to search for physiologic and natural remedies rather than pharmacologic remedies. An increase in breast, ovarian, and endometrial cancer has been associated with the use of female sex hormones.

If a woman takes estrogen for five years, she increases her risk of getting cancer of the breast measurably, and if she takes it for 15 years the risk of breast cancer increases by 30-35 percent.—*Centers for Disease Control*, 1992 Taking synthetic Progesterone also increases her risk of getting cancer of the breast.—*McDougal's Medicine* by Dr. John McDougal Taking Progesterone also increases the likelihood of getting gallstones, hypertension, and intravascular blood clotting.—*Annals of Internal Medicine*, May 1, 1992

Some research has been published in the *Journal of the American Medical Association* indicating that Premarin is principally converted to estrone which is the major stimulator of breast cancer. It was recommended by some researchers that a formula of 80 percent estriol, 10 percent estrone, and 10 percent estradiol be given to women to protect against breast cancer. Estriol is the major protective estrogen fraction against breast cancer. Thirty-seven percent of a group of breast cancer patients got a benefit taking a formula with these proportions. Several groups of compounding pharmacists in the United States can compound the mixture.

1. College Pharmacy, in Colorado Springs, Colorado 800-888-9358
2. Women's International Pharmacy, Madison, Wisconsin 800-279-5708
3. Women's International Pharmacy, Arizona 800-699-8143
4. Apothecure, Dallas, Texas 800-969-6601
5. Belmar Pharmacy, Colorado Springs, Colorado 800-525-9473.

Standard Treatment for Breast Cancer

Standard treatment for breast cancer is constantly changing. Much more conservative breast cancer treatment began to be developed spearheaded by Dr. George Crile of the Cleveland Clinic. Conservative treatment advanced until recently some physicians have begun to say that doing natural and alternative treatments are as effective as any kind of standard treatment. It is certainly true that constant changes are being made in treatment for breast cancer, in the hope that an effective procedure will be discovered.—*New England Journal of Medicine* 334:1356,1397;1996 and *Journal of Clinical Oncology* 14:1558;1996 These changes reflect a basic dissatisfaction doctors have with the standard treatment.

As with risks for breast cancer, there are many avenues of treatment. While there is no treatment at present that can be said to be a cure, the person with breast cancer should institute as many of those remedies known to be helpful for breast cancer as possible so that with the combined force of these agencies, the most favorable position may be held in relation to preventing recurrence, preventing metastases, and slowing down any growth of residual tumor. Some breast cancers have been put in remission (still present, but not active) for years by natural treatments. This is always the hope. It has seemed to us that the likelihood of remission is at least as great with natural treatment as with standard. We feel that the patient herself should be satisfied with the treatment and allowed to choose for herself which of the two routes she will take.

Prevention

There are many factors being learned as time goes by, showing either a positive or negative influence on the risk a woman has of developing cancer of the breast. Quite a long list of these has been discovered now, and these will be listed without a great deal of comment, but a reference to medical journals will be given in some instances so that a further study may be done if an interest beyond what is mentioned here develops.

Vegetables of the brassica (cabbage) family, because of nutrient indole-3-carbinol, reduce the risk of breast cancer. This appears to be due to occupying estrogen receptors in breast cells so that naturally occurring estrogens cannot stimulate the cells to produce a breast cancer. Naturally occurring plant estrogens have dramatic effects on various target organs in female physiology.—*Journal of the National Cancer Institute* 86:1758;1994 There is an anti-estrogenic quality in broccoli which alters the way the body metabolizes that form of estrogen produced by the ovaries which has been linked to cancer of the breast. It is this factor that makes broccoli an anti-cancer food.

The more a woman weighs, the greater her risk for getting cancer of the breast.—*American Journal of Clinical Nutrition* 63:437S; 1996 Furthermore, the larger the breasts, and especially the larger the waist circumference, the greater a woman's risk of getting cancer of the breast.—*Breast Cancer Research and Treatment* 34:55;1995 Dense firm breasts in women are more likely to develop cancer than soft fatty breasts.

Overeating has been shown to contribute to the development of several types of human cancer — colon, breast, and prostate. It is the caloric excess as well as the increased quantity of fats (such as margarine and fried foods) that cause the increased risk. An insulin-like growth hormone is an important marker in identifying pre-menopausal women at risk for developing breast cancer in later years. This insulin-like growth factor (IGF) is known to be increased in those having high levels of blood insulin. Overeating and the use of dairy products increase the level of insulin in the blood. These women are four to five times as likely to develop cancer compared with women of the same age with low levels of insulin-like growth factor.—*Lancet*, 351:1393;1998; *Medical Tribune*, June 18, 1998, p.29

Early onset of menstrual periods increases the risk of breast cancer. The greater the total number of menstrual periods a woman has during her reproductive years, the greater the likelihood of postmenopausal breast cancer. The more children a woman gives birth to, and especially if she nurses, the less the likelihood of breast cancer.

It is not possible to rule out a modest increase in risk of breast cancer with the use of oral contraceptives.—*Cancer Causes and Control* 6:485;1995 Birth control pills before her mid-twenties greatly increases the risk a woman has of breast cancer. Young women who take birth-control pills for four plus years have a much higher breast cancer risk than women who never take birth-control pills. Several reports indicate that women on long-term oral contraceptives, greater than four years, have adenomas of the liver, some of which end fatally because of rupture and massive hemorrhage of these adenomas.

Induced abortions in women showed in one study a 50 percent higher incidence of breast cancer than among women who had not had induced abortions. The prior history of a completed pregnancy did not alter the risk. The highest risks were observed when the abortion was done when the woman was younger than age 18 years, and even more risky if the abortion took place after 8 weeks gestation, or if the induced abortion took place after the woman was 30 years of age. The very young and the older women were more at risk. There was no increased risk of breast cancer associated with a spontaneous abortion.—*Journal of the National Cancer Institute* 86:1584;1994 One in 100 women develops breast cancer by age 45. But, in women who have had induced abortions, 1.5 women in 100 will develop breast cancer by that age. One in four US women under age 45 has had an abortion.—*US News and World Report*, November 7, 1994

Both a lower incidence of breast cancer, as well as better survival in those who develop breast cancer, has been associated with low fat diets, and in women who have less body fat. Additional confirmation of this came from a study of 698 post menopausal breast cancer patients; those who ate the least fat had only half the risk of dying, compared to those who ate the most fat, and the slimmer women had a substantially lower mortality than heavier women.—*Cancer* 76:275-83; 1995 Even after the cancer is diagnosed, if a woman promptly loses weight, her chances of long-term survival are better.

Pre-menopausal women who take five or more servings of fruits and vegetables daily have 23 percent lower risk of breast cancer.—*Journal of the National Cancer Institute*, 91:547;1999

Women who smoke have an average of 25 percent greater risk of dying from breast cancer than women who do not smoke.—*Science News* 145(23):367 1994

There are statistics that strongly indicate a link between electromagnetic fields and breast cancer. Women electrical workers are 38 percent more likely than women in other trades to get breast cancer.—*The Journal of the National Cancer Institute* 86:921;1994

Annual mammograms are probably not in a woman's best interest before menopause, and are of questionable benefit even after. Double the risk of breast cancer has been found for women who get annual mammograms under the age of 50. A Canadian study of 90,000 women at 15 hospitals from 1980-1985 showed that about 75 percent of women over 40 have had at least one mammogram. Not only did the Canadian researchers say that their study showed that women under age 50 don't benefit from mammograms, the study concluded that women under 50 are actually more likely to die of breast cancer when they receive these common tests.—*Prodigy* May 4, 1992 A large study from Sweden recently showed no decrease in cancer mortality with the use of mammograms.

Breast cancer has been linked with routine chest x-rays for women who are carriers of the A-T gene. As many as 10,000 women per year may develop breast cancer because of routine chest x-rays according to a study reported by the *New England Journal of Medicine*—*Prodigy* 12-27-91.

Interesting and Perhaps Helpful Testing for Breast Cancer

A study of 66 patients having either breast or lung cancer were studied and compared with 66

control patients without breast or lung cancer. In the group having breast cancer there was a significant decrease in hair selenium compared to controls, although plasma selenium was only slightly decreased. Zinc and copper were normal in both hair and plasma. Subjects with lung cancer had significantly lower hair zinc and copper than controls, although there was no difference in selenium.—*Biol Trace Element Res.* 51:23;1996

If, under the microscope, a cancer of the breast has more than 100 blood vessels in a low power microscopic field, there is a 100 percent chance of recurrence of the cancer within 33 months. By contrast, a breast cancer is expected to recur in only five percent of women who have 33 or fewer blood vessels per low power microscope field. Since cancers often spread by means of blood vessels, the more blood vessels in a tumor, the greater the likelihood of spreading.—*Science News* 142:421;1992

Breast cancer is more likely to occur in women who have previously had gallstones. The same can be said for cancer of the pancreas, small intestine, and colon, and that gallstones are more often found in their history than in women who do not have these cancers.—*Gut* 39:439;1996 A diet high in fats and low in fiber, and a high blood cholesterol level are linked with gallstones. Another study showed that a high fiber diet with lots of green leafy vegetables were protective factors preventing breast cancer.—*International Journal of Cancer* 44:770;1989 A combination of soluble and insoluble fiber intake may be more effective in reducing the risk of breast cancer than the use of just one type of fiber. A wide variety of high fiber foods will provide both types of fiber.—*Journal of National Cancer Institute* 88(13)899-907, July 3, 1996 Soluble fiber is digested; insoluble fiber passes through the body without being digested.

Xeno-estrogen is significantly increased in women who have breast cancer.—*Clinical Pearls News*, March 1999, vol.9, No.3 Xeno-estrogen can be tested for in many laboratories. These substances are found widely in the environment today. From a library, you can get a list of areas of contamination, and try to protect yourself from exposure if yours is a high contamination area.

Natural Treatment for Breast Cancer

Try to eliminate all factors that constitute risks for the development of breast cancer. Then enter a program of study. First investigate standard treatment. We usually recommend the tumor be removed by a wide lumpectomy, having wide margins of normal tissue on all sides of the tumor. Women who have very early breast cancer (stage one or two cancer), should be treated with a lumpectomy instead of mastectomy. Lumpectomy alone is just as effective as mastectomy.—*Journal of the American Medical Association; and Prodigy* 12-27-91 Choose a day for surgery which would fall in the last half of your menstrual cycle, if you are still having periods.

Performing surgery during the second half of a patient's menstrual cycle dramatically improves her chances of survival.—*Annals of Internal Medicine* October 1991 Then the program of natural treatments must begin. One study showed women undergoing breast cancer surgery on days 3-12 of the menstrual cycle had a 54 percent chance of surviving another ten years, compared to 84 percent chance of ten year survival in those whose surgery occurred days 13-2.—June 8, 1991 *Science News*, p. 365

Following is a listing of things one can do for breast cancer:

1a. Become a total vegetarian, leaving off any food known to increase the risk of breast disease. Milk and dairy products have high estrogen levels, and often detectable xeno-estrogens from pesticides and herbicides, all of which increase the risk for both fibrocystic disease and breast cancer. Dairy products should be eliminated even in cooking. Fats in foods are known to increase the risk of breast disease, particularly animal fats and partially hydrogenated vegetable fats like margarine and shortening, which contain trans-fatty acids.

1b. Curcumin from turmeric has a suppressive effect on human breast cancer cells in vitro. It would be well worth a trial of taking one to two teaspoons of turmeric in water daily for breast cancer.—*International Journal of Cancer* 98(2):234;2002

1c. If you have a family history of breast cancer you should consider taking some garlic every day, as the organosulfur components of garlic are important dietary factors having anti-cancer activity. S-allylcysteine and related compounds in garlic are anti-proliferative to human breast cancer cells.—*Breast Cancer Research and Treatment* 27:152;1993

1d. Inositol hexaphosphate (INS P-6) and inositol, both of which are contained in plants, have been demonstrated to have an anti-cancer and an anti-cell proliferative action. Female rats given these purified substances by mouth showed a significant reduction in the likelihood of getting cancer.—*Carcinogenesis* 16:1055;1995

1e. A large study showed that prevention of breast cancer could occur from a diet rich in vitamin A. Women consuming the greatest amount of vitamin A in the diet have a 20 percent lower risk of breast cancer than women who take the smallest amounts of this vitamin in their diet. The comments were based on studies done on 89,494 women studied in The Nurses Health Study. The *Science News* article pointed out that vitamin A supplements are not as important as eating such foods as spinach, sweet potatoes, carrots, squash, and other yellow or dark green fruits and vegetables. Not just breast cancer is discouraged on this kind of diet, but a variety of diseases can be prevented by a diet low in fat and rich in fruits and vegetables.—*Science News* 144:52;1993

2. Keep the weight as low as is feasible since the large breast is more likely to develop cancer, and more likely to conceal a small lump. Research indicates that women who weigh less than 140 have fewer cancers and less breast disease than women who weigh more than 140. It is of interest that women who are less than five feet six inches in height also have less tendency to breast malignancy. If you stand taller than five feet six inches you must be more careful with other features of prevention. The vegan diet alone will help with weight control, and the elimination of free fats will go far toward weight reduction. The free fats are margarine, mayonnaise, fried foods, cooking fats, salad oils, and nut butters such as peanut butter.

3. Warm trunk and chilled extremities promote breast disease by causing congestion of the breasts due to imbalanced circulation. On cold days wear tights, long johns, and short johns with socks or leg-warmers — clothing sufficient to keep the limbs toasty warm.

4. Keep well hydrated so that breast secretions are thin and easily expelled. Basic hydration calls for eight glasses of water daily if you are under 50 years of age, and 10-12 if you are over 50.

But when cancer is discovered, extra water is needed. Add this extra water in the form of herb teas.

5. Because of its effects on the immune system CoQ-10, 300-1000 milligrams per day, may be quite helpful in cancer patients. Two women with breast cancer showed shrinkage of their tumors within three months using these doses.—*Biochem Biophys Res Commun* 199:1504-1508; 1994 “Partial and Complete Regression of Breast Cancer in Relation to Dosage of Coenzyme Q-10” by Lockwood, K.; and *Ibid.* 212(1):172-7; July 6, 1995 The best way to use CoQ-10 is to obtain the bulk crystals; one supplier is found on the internet at www.arkopharma.com Put a teaspoon of coconut oil in a cup of hot herb tea, then add the crystals. They will dissolve readily.

6. Flavonoids, naturally occurring chemical compounds found in fruits, vegetables, nuts, and seeds are a valuable weapon against cancer. These should be emphasized in the diet. Both estrogen responsive cancers, and those that are not estrogen responsive, will respond to flavonoids. Oranges and grapefruit possess flavonoids that are very effective at inhibiting the growth of breast cancer cells in culture. Modified citrus pectin obtained from peel and pulp of citrus fruits, being rich in galactoside residues has an affinity for certain types of cancer cells including melanoma, prostate, and breast cancers.

7. Reducing total dietary calories by 20 percent enabled rats to resist breast cancers injected into their bloodstream.—*Medical Tribune News Service* 1996 The person in whom cancer is discovered should eat only enough food to barely maintain an ideal weight. You should weigh no more than figured by the formula, “100 pounds for your first five feet in height, and five pounds per inch thereafter for women, and six to seven pounds per inch thereafter for men,” depending on how muscular he is.

8. Flaxseed proves to be an effective fighter against breast cancer in animals. It acts not only to prevent cancer, but also as a chemotherapeutic agent to curb the growth of existing breast cancers according to researcher Lillian Thompson at the University of Toronto. In rats flaxseed produced a reduction by 50 percent in growth rate of breast cancers. Flaxseed contains a type of fiber called lignins which has anti-estrogenic activity, tying up the kind of estrogen which increases the risk of cancer of the breast.—*Nutrition Review* 47:301-313, 1989; Herbert Pierson, Ph.D., National Cancer Institute Supplementing the diet with flax oil may help prevent breast cancer tumor invasiveness and metastases according to studies done by Dr. Bougnoix.—*British Journal of Cancer* 70:330;1994

9. Omega-6 polyunsaturated fatty acids stimulate the growth and metastases of transplantable breast cancers in rodents.—*Journal of the National Cancer Institute* 85(21):1743;1993 and *Nutrition and Cancer* 21(2):103;1994 It is not known what these fatty acids will do in humans, but it seems prudent to identify the highest sources of these fats and eliminate them. Omega-6 is high in evening primrose oil, ground flaxseed, walnuts, pumpkin seeds, ground unsweetened coconut, sunflower seeds, and soybeans.

10. Breast feeding during infancy decreases the risk a woman has of developing breast cancer in adult life.—*Epidemiology* 5:324;1994

11. It is important in dealing with cancer of the breast that the cancer not be rubbed vigorously, pushed strongly, or squeezed. Observations reveal that women who were given the classical vigorous surgical scrub using large steel sponge forceps, rapidly and vigorously rubbing, shaking, pulling and scrubbing the breast containing cancer, suffered more recurrences and metastases than did women who had a gentle surgical scrub simply anointing the skin, gently rinsing without great pressure or pulling of the tissues. One of the problems with mammograms is their squeezing of the breast, which might contain a cancer.

12. The use of electric blankets has been both implicated and exonerated in various studies. Even those studies that exonerated the blankets when used all night, stated the women had a twofold increase in risk of cancer compared with persons who only used the blanket to warm the bed.—*American Journal of Epidemiology* 142:1344;1995

13. Certain pets, especially sick pets; monkeys, chickens, cats, dogs, horses and cattle have all been implicated as cancer virus carriers. We recommend that these animals, if kept at all, be separated some distance from the house and have their own housing. Hands should be washed after touching or feeding them.

In addition to exercise, spiritual support, the natural laws of health, herbs and hydrotherapy, we use a very simple vegan vegetarian diet, without free-fats, irritants such as vinegar, alcohol, hot spices, or free-sugars (sugar, syrup, molasses, etc.). We have used special diets in certain cases with very good results, such as the all grape diet (grapes of any available kind on the market, raisins, grape juice, etc.), or the all greens diet (cooked greens, salad greens, avocados, cucumbers, green barley powder, etc.). Additionally, if the patient is strong, exercise should be encouraged to easy tolerance. The exercise should be described as vigorous but not violent. It has been shown that the greater the physical fitness, the less rapidly cancer will spread.

Tamoxifen

Tamoxifen, a pharmaceutical used as a form of chemotherapy in certain breast cancers, is a risky treatment for breast cancer as there are significant problems with its use. It is given because of its anti-angiogenic and anti-estrogen effects, but causes an increased risk in the development of uterine cancer (15-22 percent of patients on Tamoxifen develop uterine cancer). Liver cancer is also significantly increased by Tamoxifen. Irritating vaginal discharges occur in one-third of women on Tamoxifen, as well as pain on marital relations. Tamoxifen significantly increases the incidence of blood clot embolisms. Furthermore, after five years of use any supposed hope of reduced breast cancer recurrence ceases, and continued use appears to actually increase recurrence.—*Women's Health Letter*, 3(3):3, March 1999

It is of interest that foods and herbs work similarly to Tamoxifen, but without side effects. Ginseng works to tie up estrogen receptors in much the same way as Tamoxifen, to prevent estrogen from binding to breast cells to stimulate cancer.—*Breast Cancer Research and Treatment* 40:264;1996 The isoflavones in foods protect against breast, prostate and colon cancer. Genistein, an isoflavone in soybeans, inhibits blood vessel growth (angiogenesis) in the same manner as shark cartilage, famed for inhibiting cancer growth. Forming new blood vessels is a major factor in many forms of disease like rheumatoid arthritis, diabetic retinopathy, and solid cancers.

About 60 percent of women with breast cancer were given Tamoxifen in 1994. It was believed at that time that these women had about a 38 percent better chance of living disease free for five years, than breast cancer patients who did not take the drug. But later studies questioned whether Tamoxifen is helpful for breast cancer patients. One such study, done on 3,538 breast cancer patients, found that those who received Tamoxifen after surgery were not only as likely as those who did not receive Tamoxifen to suffer a relapse, but they were also more than three times as likely to develop endometrial cancer within the next eight years. —*Journal of the National Cancer Institute* July 1991

A 49-year-old patient with breast cancer had very rapid enlargement of a fibroid shortly after she started taking Tamoxifen.—*American Journal of Obstetrics and Gynecology* 166(1):167;1992

Soy sauce, weight gain soy drinks, and soy based baby formulas, have almost no isoflavones or phyto-estrogens, whereas, tofu and soy flour are good sources. Whole, dry, soybeans are the best source, and contain phyto-estrogens that bind to receptor sites for estrogen in the breast, a feature which helps prevent breast cancer. At first phyto-hormones were thought to be a single kind of hormone, but 15 different estrogen-like plant compounds have been found in human urine. They fall in two major categories — lignins, and isoflavones. Lignins are found in oats, barley, wheat, lentils, sesame seed, and flaxseed; flax is the most concentrated source. High levels of lignins inhibit both the synthesis of estrogen and estrogen stimulated breast cancer growths. Kudzu also contains phyto-estrogens. It is of incidental interest that 150 milligrams daily per kilogram of body weight of kudzu suppresses the desire for alcohol. In women who increase their breast cancer risks by drinking alcohol, eating kudzu would have double benefit.

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