



TheElite Training Group track club

Expanding the area of what is possible

In Track & Field Distance Running & Competent Self-Care in medicine and psychology

www.theetgtrackclub.com

TheETG cancer repair

A major part of TheETG mission is to expand the area of what is possible in competent self-care in medicine and psychology. TheETG's primary method of achieving that is to proliferate applied science based information by way of \$free packets containing plain language info for anyone seeking to move themselves or others forward in these areas.

As you continue to acquire and apply more information you continue to expand the area of what is possible. Data-less conclusions founded upon faulty assumptions are the mother of all screw-ups. They lead to human belief systems that quickly get set in stone. Put data ahead of dogma. Follow the data -not- the crowd.

TheETG packets attempt to address the following:

".....the benefits that US health care currently deliver may not outweigh the aggregate health harm it imparts."
[Journal Of The American Medical Association...Volume 302 #1..July 1, 2009...page 89 - 91]

"Not enough doctors adapt appropriately to new scientific findings.....An insufficient number of medical faculty members are well prepared, effective educators, and too few medical schools prepare their students for a lifetime of learning and change."
[J.Hilliard,et al. -- The Lancet -- Volume 385 #9969 -- February 21, 2015 -- page 672]

".....takes an average of 17 years to translate 14% of original research into benefit.....average of 9 years for interventions recommended as evidence-based practices to be fully adopted."
[M.Tinkle, et al -- Dissemination and Implementation -- Nursing Research and Practice -- Volume 2013]

".....1.5 million U.S. residents are harmed or killed each year because of medication errors, according to an Institute of Medicine report."
[Nature Medicine -- Volume 12 #9 -- September 2006 -- page 984 - 985....News In Brief]

"It is estimated that more than 700,000 individuals are seen in hospital emergency departments for adverse drug events each year in the United States."
[Centers For Disease Control -- 2015]

"Most drugs are only effective for a small percentage of people who take them."
[Michael Leavitt -- U.S. Secretary of Health & Human Services 2005 - 2009]

".....A recent study for example, found that only half of all cardiac guidelines are based on scientific evidence."</p>
[President Barack Obama -- Speech to the American Medical Association -- June 15, 2009]

"All the good things....they don't teach us in medical school, because the drug companies pay for our education."
[Dr. John Sessions M.D.]

You may copy any and all contents of this packet, with exception and exclusion of using such copies for purposes of producing revenue, profit, or any direct or indirect compensation.

Cancer cause basics

You've worked a job/career for 2 to 4 decades where the nature of the beast is that you've had your non-masked nose and mouth inside low ventilation rooms of the houses you've been painting. Worked in a science lab or hospital with your non-gloved hands dipping into fluids containing formaldehyde or other DNA strand breaking oxidants. Worked in office buildings and houses laying carpets that off-gas into your non-masked nose and mouth. You've worked 2 to 4 decades in any job/career in America from a suit & tie office to a coal mine that exposes you to DNA strand breaking stuff.

Added to this load there's the stuff you drink/eat/do every weekend or everyday since you were a teenager [alcohol, caffeine, cigarettes].

2 to 4 decades of stuff going into your blood stream and onward to various tissues comprising various organs, eventually to a location that happens to be your weakest link. Eventually the volume of it all surpasses the volume of anti-oxidants you receive from your food, supplements, and exercise [a.k.a. "you eat right and exercise"]. Line of defense #1 of 3 lowered against cancer cell production and growth in whatever tissue/organ happens to be your weakest link.

The oxidants become able to initiate the rate and magnitude of DNA strand breaks necessary to become a problem. Eventually some of those DNA strand breaks are on genes that code for one or more tumor suppressors. Now you have a major problem. Line of defense #2 of 3 lowered against cancer cell production and growth in whatever tissue/organ happens to be your weakest link.

Add in the American norm of living immune system suppressing stress as a lifestyle, the over-consumption of immune system suppressing foods and substances [sugar, alcohol, etc], or simply the standard day to day house/car, bills, kids, job, dysfunctional family-coworkers-boss-marriage, test taking and term paper deadline types of stressors that perhaps the unaddressed experiences in your childhood and teenage years cause you to approach with more dysfunction than other folks do. Over time these collectively lower long term immune system functioning. Line of defense #3 of 3 lowered against cancer cell production and growth in whatever tissue/organ happens to be your weakest link.

At that point the status of things enters into the basic math equation.

The rate of cancer cell production exceeds the rate of cancer cell destruction.

Here you officially begin the lengthy journey down the path towards the day of diagnosis in your doctor's office.

After the day of diagnosis you pursue the standard traditional treatment approach, then get branded as being "cancer free".

You're -not- told that there may be cancerous stem cells that went somewhat untouched by the chosen standard traditional treatment approach. Told nothing about how line of defense number 1, 2, or 3 were compromised thus you're -not- empowered to take action accordingly. You go back to your life, business as usual. Nothing caused your cancer. Stuff happens. Nothing to see here, move along.

From here the cancer patient population self-separates into 2 groups.

Those that wanna know stuff and those that don't.

You live in a country where seeking what caused your cancer is -not- viewed as applied knowledge acquisition and subsequent self-empowerment. It is instead viewed as a highly aversive blame game where the words "it's your fault" and the phrase "don't blame the victim" are the weapon of choice.

The medical community lives by "treat and release". Teach nothing.

The fundraising community engages in the emotionalization of disease. Teach nothing.

Psychological norms teach you to "fight cancer" by learning nothing and doing nothing other than showing up for your scheduled appointments, endure the aversive "side effects" of standard traditional treatment approach, or start a non-profit organization number 5,529 to fund people's careers in never ending research.

Resist the norm. The norm is -not- normal.

Know stuff. To "get cancer" the following --has to-- happen very early on in the process that follows initial damage to DNA that precedes cancer cell growth and spread.....

1 --- Cell must lose ability to repair damaged DNA

2 --- cell must lose ability to commit suicide once damaged DNA is detected

3 --- normal functioning immune system must lose ability to kill cancer cells at a rate that exceeds cancer cell production

4 --- this situation must persist for years or decades

"The existence of a gap between science and practice is universally recognized."

"It is estimated that it takes an average of 17 years to translate 14% of original research into benefit for patients and an average of 9 years for interventions recommended as evidence-based practices to be fully adopted."

M,Tinkle, et al.

Dissemination and Implementation Research Funded by the US National Institutes of Health, 2005 - 2012

Nursing Research and Practice...Volume 2013, 2013

To "get cancer", the following ---**has to**--- happen very early on in the process that follows initial damage to DNA that precedes cancer cell growth and spread.....

- 1 --- Cell must lose ability to repair damaged DNA
- 2 --- cell must lose ability to commit suicide
- 3 --- immune system must lose ability to kill cancer cells at a rate that exceeds cancer cell production
- 4 --- this situation must persist for years or decades

The point of posting this information is that in the context of prevention and cure.....

- 1 --- one can prevent the loss of and/or restore a cell's ability to repair damaged DNA
- 2 --- one can prevent the loss of and/or restore a cell's ability to commit suicide
- 3 --- one can prevent the loss of and/or restore the immune systems ability to kill cancer cells at a rate that exceeds cancer cell production
- 4 --- one can prevent the loss of and/or restore this situation to persist for years or decades

Most importantly, if you "get cancer" its unlikely that you'll be told any of this or offered a treatment that takes this approach.

The “Cure” For Cancer

Definition of the term "cure for cancer".....

--- A state of the body in which the diagnosed clump of cancer cells have been destroyed

--- along side a state of the body in which they cannot return....meaning, the various abilities of the cells to re-grow to their previous status has been removed

--- the ability of the cells to evade destruction has been removed

.....all creating a state in the body where the **rate of cancer cell destruction**, permanently exceeds the **rate of cancer cell production** and proliferation [metastasis]

What Would I Do If I “Got Cancer”

By Marshall Burt

I would take a look at the "ETG Health Repair" list and consider seeing one of the physicians on that list for assistance.

However, I would rely predominantly, on myself.

My first objective would be to figure out how it happened, and rather aggressively address that aspect of reversing my illness [something that doesn't happen with Traditional Medicine, since they claim that they don't know what causes cancer].

Three things I would already know on the front-end is that.....

1 ----- my immune system failed to destroy the cancerous cells [something they are supposed to do.....and I'd want to figure out why they didn't do their job.....and then take the necessary steps to correct that situation]

2 ----- my previously healthy cells failed to destroy themselves prior to becoming cancerous [something they are supposed to do.....and I'd want to figure out why they didn't do their job.....and then take the necessary steps to correct that situation]

3 ----- and I was exposed to something [oxidants (the opposite of "anti-oxidants) radiation, etc] that caused breaks in the DNA strands of my previously healthy cells that became cancerous, and those cells failed to shut-down cell replication and repair those DNA strand breaks [something they are supposed to do.....and I'd want to figure out why they didn't do their job.....and then take the necessary steps to correct that situation].

Since all of these are behavior and diet-supplement related, the power to deal with them is completely within my control. I'm not willing to allow a comfort zone, fear, or the hypnosis of social conditioning to be my cause of death.

Fix The Problem, Do The Work

Survival is a math equation. When the rate and magnitude of cancer cell destruction exceeds the rate and magnitude of cancer cell production and spread.....you survive.

Make it happen!!!

Our cells have the ability to regenerate themselves, to build new cells or parts of cells. Construction workers need a set of blue prints in order build a new building or part of a building. Our cells need a set blueprints also. We call those blueprints genes, or DNA. For the building, the blueprints are written on paper. For our cells they're on strands of DNA.

Lots of stuff can tear the paper that the blueprints are on. Trying to build something using damaged blueprints can result in mistakes like making a staircase leading into a wall. If the paper tears, we can stop building and get some tape and repair the damage so that the blue prints are readable again. In the body, we refer to a staircase leading into a wall as "cancer". Building lots of staircases in a building leading into a wall eventually makes the building unusable by businesses and the entire building, not just use of the upper floors eventually dies. A tear in a DNA strand is referred to as a DNA strand break. Our cells can stop building and engage in DNA repair.

Problems result when our cells aren't functioning properly and fail to stop building and engage in DNA repair.

No worries, a company of construction workers that builds buildings that have staircases leading into walls will go out of business, essentially committing business suicide. Cells that fail to stop building and engage in DNA repair will commit cell suicide, referred to as apoptosis.

Problems result when our cells that are using damaged blueprints fail to stop building, fail to engage in DNA repair, and fail to commit suicide.

But no worries. We have immune system cells that patrol around looking for stuff to kill, including cells that should have committed suicide but didn't. We refer to the most lethal group of these cells as "Natural Killer Cells", or NK cells for short. Lots of stuff improves their function. Sleep, relaxation exercises, and various supplements in nutrition medicine. Lots of stuff kills them off or lowers their functioning ability. Chronic stress, low nutrient intake, lack of sleep, long term low or no exercise.

Problems result when our immune system cells go multiple years being unable to have a sufficient number of them and level of function necessary to kill off cells that are using damaged blueprints, that fail to stop building, fail to engage in DNA repair, and fail to commit suicide.

The check list of things to do....

1. restore the function of your immune system via mind-body medicine activities [ie autogenic relaxation, biofeedback, meditation, etc]
2. drive up your pH via mineral supplements and vegetables
3. restore the function of malfunctioning tumor suppressor genes via gene therapy
4. engage in non-immune system suppressing chemo or surgery to reduce tumor load to give your immune system time to catch up and overtake the rate of tumor growth.

Faulty assumptions are the mother of all screw-ups.

Faulty assumptions.....

- medical guidelines are research based
- most doctors read research
- your treatment is based on the latest research

Deadly faulty assumptions.....

Because medical guidelines are based on research, and most doctors read research, and treatment is based on the latest research, if people are losing limbs, organs, and lives due to cancer its because nothing could be done.

"Anything and everything we need to know about cancer, we know it."

Bharat Aggarwal PhD. [MD Anderson Cancer Center] Lecture at the University Of Texas at Austin....March 3, 2011

"How cancer develops is no longer a mystery."

"Last year more people suffered and died needlessly than ever before."

Dr. John Seffin [CEO American Cancer Society] National Press Club October 16, 2003

The Bad News: We All Have Cancer

"The truth is that all of us have microscopic cancers growing in our bodies all the time."

"Our immune system usually roots out and destroys microscopic cancers when they are spotted. Healthy tissues also contain a wealth of natural anti-cancer substances that make it very difficult for microscopic cancers to grow."

Secret Weapon to Fight Cancer [www.doctoroz.com]

Mind-body Medicine 101.....

"Although the last decades have provided ample evidence for deleterious effects of stress on immunity and on cancer development and suggested mediating mechanisms, **no psycho-neuro-immunology related intervention has become a standard of care** in conventional cancer treatment."

Shamgar Ben-Eliyahu, et al

"Stress, NK cells, and cancer: Still a promissory note"

Brain, Behavior, and Immunity.....volume 21 #7, October 2007....page 881 - 887

"It is important to consider **stress-related DNA repair deficits** in light of the previously discussed stress-related decrements in Natural Killer cell activity. Taken together, these data suggest that stress might have direct effects on carcinogenesis through alterations in DNA repair..."

J.K Kiecolt-Glaser, et al

Psychoneuroimmunology And Cancer: Fact Or Fiction

European Journal Of Cancer.....Volume 35 #2....October 1999....pages 1603 - 1607

"Stress is associated with increased production of sympathetic and other adrenal hormones."

"....cortisol are produced during psychological stress and may affect many cells directly. These effects....can have more long-lasting consequences, such as permanent DNA damage which may result in increased cell transformation and/or tumorigenicity."

"...cortisol...interfered with repair of DNA damage in cells exposed to UV and resulted in an increase in the transformed phenotype.

"Taken together, these data show that stress hormones can increase DNA damage and transformation and alter transcriptional regulation of the cell cycle."

M.S. Flint, et al

Induction of DNA damage, alteration of DNA repair and transcriptional activation by stress hormones

Psychoneuroendocrinology.....Volume 32 #5....June 2007....age 470-479

"Significant differences in the distributions of....survival according to the presence or absence of intra-tumor T cells...."

"...survival rate was 73.9% among patients whose tumors contained T cells and 11.9% among patients whose tumors contained no T cells."

L.Zhang, et al

Intratumoral T Cells, Recurrence, And Survival In Epithelial Ovarian Cancer

New England Journal Of Medicine...Volume 348 #3...January 16, 2003...page 203

"...the **immune system eliminates many cancers at an early stage** and slows down the progress of others."

"...patients with ovarian carcinoma can expect to have much longer....survival if the tumor is infiltrated by T cells than if it lacks infiltrating T cells."

"Similar observations have been reported for several other types of cancer."

"...to succeed...a considerable proportion of human tumors have to resist immune rejection during their development."

T.Boon, et al

Immunosurveillance Against Cancer and Immunotherapy--Synergy Or Antagonism?

New England Journal Of Medicine....Volume 348 #3....January 16, 2003...page 252 - 253

--- T cells = your immune system cells that kill cancer cells

"Significant differences in the distributions of....survival according to the presence or absence of intra-tumor T cells...."

"...**survival rate was 73.9% among patients whose tumors contained T cells** and 11.9% among patients whose tumors contained no T cells."

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New England Journal Of Medicine...Volume 348 #3...January 16, 2003...page 203

mind-body mechanisms of cancer metastasis.....

"The Epithelial-Mesenchymal Transition is a key process in cancer metastasis...."

".....epithelial cells lose their.....cell-to-cell adhesion.....undergo morphologic changes, giving them a mesenchymal phenotype.....migrate and invade other tissues."

"Our previous research has shown that beta-adrenergic signaling stimulates pathways involved in ovarian tumor progression...."

".....advanced stage ovarian carcinomas from 98 patients and compared those above versus below the median split on tumor norepinephrine level."

"High-norepinephrine tumors showed increased expression of 694 genes by at least 25%, and 124 genes by at least 50%. These included multiple genes related to Epithelial-Mesenchymal Transition, as well as decreased expression of a variety of anti-metastatic genes."

"In ovarian cancer cell lines exposure to stress-concentrations of norepinephrine increased transcription of SNAI2 and IL6, both of which regulate Epithelial-Mesenchymal Transition."

"These results identify an additional pathway by which beta-adrenergic signaling can promote ovarian cancer progression by stimulating Epithelial-Mesenchymal Transition gene expression programs that mediate metastasis."

S.K. Lutgendorf, et al
Beta-adrenergic activation of Epithelial-Mesenchymal Transition in ovarian cancer
Brain, Behavior, and Immunity....Volume 49....October 2015....page e1–e2
PsychoNeuroImmunology Research Society's 22nd Annual Scientific Meeting
Abstract # 1511

Whether the subject is children or adults, you can't go back to business as usual after getting your miracle cure for cancer via chemo and radiation. You have to restore to full functioning your brain cells, immune system cells, avoid living stress as a life style, etc etc. Otherwise.....

"Survivors of childhood cancer are at increased risk of premature mortality compared with the general population...."

"....17,981 5-year survivors of childhood cancer diagnosed with cancer before age 15 years....."

".....3049 deaths were observed, which was 11 times the number expected....."

".....excess mortality from second primary cancers and circulatory diseases continued to occur beyond 25 years from diagnosis."

R.C.Reulen, et al

Long-term Cause-Specific Mortality Among Survivors of Childhood Cancer
Journal Of The American Medical Association.....Volume 304 #2.....page 172

"It is now clear that damage to the organ systems of children caused by chemotherapy and radiation therapy may not become clinically evident for many years."

"....cohort study that tracks the health status of adults who received a diagnosis of childhood cancer between 1970 and 1986 and compares the results with those of siblings."

"Among 10,397 survivors, 62.3% had at least one chronic condition; 27.5% had a severe or life-threatening condition"

"Among survivors, the cumulative incidence of a chronic health condition reached 73.4% 30 years after the cancer diagnosis, with a cumulative incidence of 42.4% for severe, disabling, or life-threatening conditions or death..."

K.C. Oeffinger, et al

Chronic Health Conditions in Adult Survivors of Childhood Cancer
New England Journal Of Medicine....Volume 355 #15.....October 12, 2006.....page 1572-1582

"....'Cancer survivor' is a new chronic illness. We currently have no good way for following those people".

"Cancer survivors are not entirely 'normal'..."

"They have increased risk of a second cancer, and risk of late side-effects of their treatments."

"There are currently, for example, two million breast cancer survivors in the USA. We need some sort of 'step down' oncology programme for these people, whereby they are followed for the special problems to which cancer survivors are uniquely susceptible."

D. Lawrence

Cancer Incidence In The USA Could Double By 2050, Report Predicts
The Lancet.....Volume 359 #9319.....May 18 2002.....Page 1755

".....approximately half of all patients with cancer eventually die of their disease, and one-third of cancer deaths happen within 6 months of diagnosis."

D.Hui, et al

Availability and Integration of Palliative Care at US Cancer Centers
Journal Of The American Medical Association.....Volume 303 #11.....March 17, 2010....page 1054

"Breast cancerFor patients with metastatic disease, chemotherapy.....does not, with rare and anecdotal exceptions, cure."

"....reductions in relative hazard for relapse and death typically range from 10 - 30%."

J.Crown

Chemotherapy Dose And Schedule In Adjuvant Treatment Of Breast Cancer: Phoenix, Turkey, Or Dodo?
The Lancet.....Volume 362 #9385.....August 30, 2003

Mechanisms Of Cancer

"In this country, breast cancer has been reduced to a pink ribbon and a mammogram."
Fran Visco [National Breast Cancer Coalition]

"How cancer develops is no longer a mystery."

"2/3 of all cancers are preventable."

"Last year more people suffered and died needlessly than ever before."

Dr. John Seffrin.....CEO, American Cancer Society
Speech to the National Press Club.....October 16, 2003

What is Cancer ? -----

Cancer cells are cells that have been altered from the original, such that they have a reduced or destroyed ability to function like normal cells. Accumulation of too many abnormal cells can shut off blood flow to vital organs or take over vital organs resulting in death.

Our bodies are constantly building new cells (cell replication) to replace old ones in most tissues of our bodies. Our cells make use of a set of instructions (DNA, sections of are called genes) of how to build new cells, which are stored in strands in a specific area of each cell (nucleus). The DNA/genes, are instructions of which building materials (amino acids) are to be placed together and in what order, to build specific cells or parts of cells.

If the instructions (genes, DNA) are damaged, and the cell replication process uses these damaged instructions to build new cells, production of cells that don't work or have reduced function, will be the net result. Formation of a clump of these cells is called a tumor, or more generally...cancer.

The damage is caused by "reactive oxygen species" (ROS), perhaps known more popularly as "free radicals", or "oxidants". They "oxidize" membranes of cells as well as cell DNA. They are the reasons we need "antioxidants" produced in our bodies (glutathione)....and in our diets (Vitamins C, E, selenium and beta carotene). Oxidative damage to DNA is the cause of nearly all cancers in humans (men and women). Other causes of damage to DNA are radiation, ultra-violet radiation from the sun, X-rays, electromagnetic waves from power lines, MRI machines, or cell phones, etc., viruses that substitute their DNA into portions of your own, and exposure to chemicals/pollutants that induce DNA strand breaks [If you lived through the 1960's and 70's you should be familiar with many examples of this].

The Calamity Of Errors That Must Occur Before You Can "Get Cancer"-----

The cause of cancer in 80 to 90% of the 300,000 - 500,000 people who die of cancer each year is the calamity of errors;

1 ----- You were exposed to something such as oxidants (the opposite of "anti-oxidants) radiation, ultra-violet radiation from the sun, etc. that caused breaks in the DNA strands of your previously healthy cells, those cells failed to shut-down cell/DNA replication to provide time to repair those DNA strand breaks, and those cells failed to repair those DNA strand breaks. [A small portion of the total number of people who "get cancer" have inherited defective tumor suppressor genes, and are thus unable to adequately shut down cell/DNA replication or repair DNA strand breaks]

2 ----- Your previously healthy cells failed to destroy themselves [cell suicide – apoptosis] once they started to become cancerous.

3 ----- Your immune system was prevented from functioning at a sufficient level to destroy the cancerous cells.

Since all of these “calamity of errors” are to a significant degree behavior and diet-supplement related, the power to deal with them is to a large degree, within your control. **The goal of any and all cancer treatments should be to restore the function on one’s cells, such that they do the work that they’re designed to do.**

Do The Math -----

Dealing with cancer comes down to a mathematical equation. When the rate of cancer cell production and proliferation, exceeds the rate of cancer cell destruction, you are in trouble. When you restore or create the situation where the **rate of cancer cell destruction**, greatly **exceeds** the **rate of cancer cell production** and proliferation, you restore your health. If you choose to do the things necessary to maintain this status, you have your “cure” for cancer.

“Better health care will depend, not on some new therapeutic standard, but on the level of willingness and competence to engage in self care.” [Dr. I. Illich....1978]

“All.....the good things.....they don’t teach us in medical school, because the drug companies pay for our education.” --- John Sessions M.D.

“We don’t have the best health care system. In fact, what we have is a very expensive sick-care system. If we’re going to improve health care, we’re going to have to start with keeping people healthy.”

--- Jocelyn Elders [former United States Surgeon General]

Reversing The Calamity Of Errors: Restoration Medicine -----

1 ----- Provide “anti-oxidants” and reduce exposure to radiation, and other things that may cause breaks in the DNA strands of your previously healthy cells

2 ----- Restore the ability of your previously healthy cells [now cancer cells] to destroy themselves [cell suicide – apoptosis]

3 ----- Restore the ability of your immune system to function at a sufficient level to destroy the cancerous cells, and overcome the cancer cells ability to avoid immune cell induced destruction

DNA Repair & Cell Suicide [Apoptosis] -----

In most people who “get cancer”, the cells fail to function properly to repair the DNA that had been damaged, and the cell’s built in cell-suicide mechanism (apoptosis) also fails to work when there is a failure to repair the damaged DNA. Many people who “get cancer” tend to be sedentary or have low or no levels of high intensity—low volume aerobic exercise that increase levels of the substances [DNA Repair enzymes] that repair damaged DNA. All cells have a certain genes [ie. p53 gene] that are known as tumor suppressor genes. They are responsible for producing a protein which is capable of halting DNA replication and/or inducing cell suicide. In most cancers, the DNA of the p53 gene, for example, has been damaged and is incapable of functioning properly to halt tumor growth. In some women with Breast Cancer or Ovarian Cancer, an inherited BRAC gene [a tumor suppressor gene] is mutated. BRAC-1 and BRAC-2 are called the “breast cancer genes”.

“It is important to consider the stress-related DNA repair deficits in light of the previously discussed stress-related decrements in Natural Killer activity. Taken together, these data suggest that stress might have direct effects on carcinogenesis through alterations in DNA repair....”

J.K. Kiecolt-Glaser, R. Glaser
Psychoneuroimmunology And Cancer: Fact Or Fiction
European Journal of Cancer.....Volume 35 #2.....October 1999.....pages 1603-1607

Major Stressors Are Immune Suppressors -----

If you grew up in the United States, you may want to consider the possibility that the amount of stress you consider to be “normal”, is not “normal”. Many people who “get cancer” tend to maintain high basal levels of stress in their day to day lives, thus they have high cortisol levels (stress hormone). In living stress as a lifestyle, the cortisol reduces immune cell production and activity in their role as a cancer cell destroyer. Thus immune cells such as Natural Killer Cells are reduced in function, allowing tumor growth to go unchecked [stress also impairs DNA repair processes]. Women who’s cancers spread quickly (metastatic breast cancer) have the highest levels of cortisol. During stress, the brain/nervous system also produces a substance called Interleukin-10. This substance can decrease the function of Natural Killer Cells. This situation, added to the ability of tumor cells to produce interleukin-10, creates the dangerous and potentially deadly scenario where tumor cells can avoid being destroyed by the immune system. This scenario is a common one, where cancer cells are free to grow and spread [metastasis] without a fight, overwhelming and eventually, killing the patient.

“....the immune system eliminates many cancers at an early stage and slows down the progress of others.”

“....patients with ovarian carcinoma can expect to have much longer.....survival if the tumor is infiltrated by T cells than if it lacks infiltrating T cells.”

“Similar observations have been reported for several other types of cancer.”

“....to succeed.....a considerable proportion of human tumors have to resist immune rejection during their development.”

T.Boon, N. van Baren
Immunosurveillance Against Cancer And Immunotherapy -----Synergy Of Antagonism?
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“Significant differences in the distributions of....survival according to the presence or absence of intra-tumoral T cells....”

“.....survival rate was 73.9 percent among patients whose tumors contained T cells and 11.9 percent among patients whose tumors contained no T cells....”

L.Zhang, et al.

Intratumoral T Cells, Recurrence, And Survival In Epithelial Ovarian Cancer

New England Journal Of Medicine.....Volume 348 #3....January 16, 2003.....page 203

“.....the interactive relation between psycho-social stressors.....and tumour progression in patients with breast cancer appears to be important for clinicians.”

“Several components of the immune system are related to the course of disease in breast cancer patients.”

“Psycho-social stressors influence.....cortisol....and immunological functions.”

M.A. Boermeester, R.M. Butzelaar

Interaction Between Breast Cancer, Psychosocial Stress And The Immune Response

Nederlands Tijdschrift voor Geneeskunde.....Volume 143 #16.....April 17, 1999.....page 838-842

“These observations may reflect the immunosuppression characteristic of some breast cancer patients, which may contribute to tumor growth.”

T.A.Simao, et. al.

Detection And Analysis Of Apoptosis In Peripheral Blood Cells From Breast Cancer Patients

Brazilian Journal of Medical & Biological Research.....Volume 32 #4.....April 1999.....page 403-406

Survival & Immortality Of Cancer Cells -----

The antigens (attractors of immune cells) on the outer membranes of tumor cells are attractors of immune cells. Any significant level of immune system suppression can result in the rate of tumor growth exceeding the rate of tumor destruction achieved by the immune system. Immune suppression can be caused by stress (high cortisol and/or adrenalin levels) and/or long term intake of drugs (stimulants such as caffeine, or depressants such as alcohol). The process of cell replication in normal cells tends to wear down the ends of each DNA strand over time. This eventually results in the inability of cells to continue replicating themselves (aging). An enzyme (telomerase) prevents this wearing away of DNA. After birth, the production of telomerase decreases substantially. However, cancer cells are able to produce significant amounts of telomerase (85-95% of cancer cells have substantial telomerase activity), thereby insuring their ability to continue cell replication indefinitely.

Tumors Can Avoid Natural Killer Cells -----

Our immune systems have cells called Natural Killer cells (NK cells), that have the ability to destroy cancer cells. They do this by dumping a chemical (Tumor Necrosis Factor... TNF) on cancer cells. The TNF released by the NK cells are able to bind to receptors on the membrane (outer covering) of cancer cells, and induce a process called apoptosis (cell suicide/cell death). Cancer cells can protect themselves from this type of destruction by releasing substances that cause various cells of the immune system [ie. Suppressor Cells] to suppress the function of the Natural Killer Cells. Cancer cells can protect themselves from destruction by also by causing some of the receptors for TNF (TNF Receptor Type 1...TNFR1) on their cell surface, to be released. When the TNF binds to TNFR1, the TNFR1 is not attached to the cancer cell in any way. Thus TNF can have no effect on the cell. If the cancer cells are able to release TNFR1 from their cell surfaces at a rate similar to the release of TNF by NK cells, the NK cells will generally be ineffective at killing cancer TNFR1 levels have been found to be extremely elevated in cancer patients. People aid this process by regularly consuming the drug, caffeine, which activates a chemical (called Cyclic AMP) in NK cells. This chemical causes inhibition of NK cell function, and decreases the number of NK cells. The stress hormone (Cortisol), which is increased in response to stress, also causes inhibition of NK cell function, and decreases their number as well.

Tumor cells can produce a substance called interleukin-10. This substance can decrease the function of Natural Killer Cells, allowing the tumor to grow and survive unchecked. Tumors can also produce a substance called Transforming Growth Factor-beta [TGF-beta] that induce immune system cells called “Suppressor Cells” to prevent other immune cells from attacking the tumor.

“The immunosuppressive activity of tumor cells may be mediated by tumor-derived cytokines.....interleukin-10 (IL-10).

N.LHarthun et. al

Activated Alpha 2-macroglobulin Reverses The Immunosuppressive Activity In Human Breast Cancer Cell-Conditioned Medium By Selectively Neutralizing Transforming Growth Factor-Beta In The Presence Of Interleukin-2.

Journal of Immunotherapy....Volume 21 #2....March 1998....page 85 - 94

"We showed statistically higher serum concentrations of.....and IL-10 in breast cancer patients in comparison with healthy women, which also correlated with clinical stage of breast cancer."

L.Kozlowski, I. Zakrzewska, P. Tokajuk, M.Z. Wojtukiewicz

Concentration Of Interleukin-6 (IL-6), Interleukin-8 (IL-8) And Interleukin-10 In Blood Serum Of Breast Cancer Patients
Roczniki Akademii Medycznej W Bialymstoku.....Volume 48....2003...page 82 - 84

"Interleukin-10 is known to suppress the functions of both T lymphocytes and macrophages, working as a general dampener of the immun and inflammatory responses. The observation of increased circulating levels of interleukin-10 in cancer patients may have importar implications for future investigations, immunological monitoring and therapeutic intervention on neoplastic patients, and suggests mechanism for tumour cells escaping from immune surveillance."

C. Fortis, et. al

Increased Interleukin-10 Serum Levels In Patients With Solid Tumours
Cancer Letters.....Volume 24 #104.....June 1996....page 1 - 5

"These lymphomas often show an aggressive clinical course."

"We investigated the expression of human leukocyte antigen G (HLA-G) and interleukin 10 (IL-10)..."

"Together with the expression of IL-10, HLA-G might be one of the factors accounting for the evasion of immuno-surveillance, thu contributing to aggressive phenotype of these lymphoma entities."

M. Urosevic, et. al

Primary Cutaneous CD8+ And CD56+ T-cell Lymphomas Express HLA-G and Killer-Cell Inhibitory Ligand, ILT2.
Blood....Volume 103 #5.....March 1, 2004....page 1796 - 1798

".....IL-10 overexpression was found in certain tumors as melanoma and several lymphomas and is considered to promote further tumor development."

"Systemic IL-10 release is a powerful tool of the central nervous.....following acute stress reactions."

K. Asadullah, W. Sterry, H.D.Volk

Interleukin-10 Therapy--Review Of A New Approach
Pharmacological Reviews.....Volume 55 #2....June 2003...page 241 - 269

"Elevated serum IL-10 in transfused patients may play a role in the disregulation of lymphocyte function, in particular, the depression of Natural Killer Cell - and T-cell cytotoxicity. Investigation of alternatives to blood transfusion during RT that do not diminish host immunit is warranted."

A.D. Santin, et. al

Effect Of Blood Transfusion During Radiotherapy On The Immune Function Of Patients With Cancer Of The Uterine Cervix: Role Of Interleukin-10.
International Journal of Radiation Oncology, Biology, Physics....Volume 54 #5....December 1 2002....page 1345 - 1355

Cancer Cells Can Kill Natural Killer Cells -----

Some cancer cells are able to produce a Cell Surface Death Receptor (specifically, Fas Ligand), such that NK cells will be destroyed if/when they attempt to attach to the cancer cell surface to attack.

Cell Death Suppressor -----

About 90% of cancer cells that spread to other parts of the body (metastasis) produce elevated levels of Survivin, a Cell Death Suppressor (made from a gene called bcl-2) that inhibits the chemical reactions that cause apoptosis (cell suicide/death).

Cancer Cells Can Survive Chemotherapy -----

Cancer cells can survive chemotherapy by use of a Multi-Drug Resistance gene (MDR-1). The presence or absence of this gene is an accurate predictor of how effective chemotherapy will be in cancer patients (ask your doctor to test for it prior to blindly pursuing chemo-therapy). The gene has the instructions of how to build a protein (P-Glycoprotein) which acts as a pump in the cancer cell, thus pumping out harmful chemicals used in chemotherapy.

Cancer Cell Destruction -----

Our cells have the ability to stop the process of cell replication when damage to our DNA has occurred. We have Tumor Suppressor genes (p40, p51a, p51b, p53, p73) that yield proteins that allow DNA repair enzymes to repair the DNA strands. If too much damage has been done, the tumor suppressors will induce cell suicide. Damage to the genes of the Tumor Suppressor proteins occurs in about 95% of all cancer and results in unchecked cancer cell growth. "Antioxidants" are able to take up "oxidants", to prevent damage to DNA. People prevent this process by regularly consuming the drug, Alcohol. When alcohol is converted to a toxic substance (Acetaldehyde) that prevents the production of an anti-oxidant (glutathione) inside cells by inactivating an enzyme (methionine synthase) necessary for its production.

"The tumor suppressor p53 inhibits tumor growth primarily through its ability to induce apoptosis [cell suicide]. Mutations in p53 occur in.....at least.....50% of human tumors. "

".....reactivation of mutant p53 in such tumors should trigger massive apoptosis and eliminate the tumor cells."

"This molecule, named PRIMA-1, restored sequence-specific DNA binding and the active confirmation to mutant p53 proteins in vitro and in living cells."

V.J.N.Bykov, et. al.

Restoration Of The Tumor Suppressor Function To Mutant p53 By A Low-Molecular Weight Compound

Nature Medicine.....Volume 8 #3.....March 2002.....page 282

Prevention Of Blood Vessel Formation -----

Shutting down blood flow to cancer cells results in their death. Production of blood vessels is called Angio-genesis. Cancer cells produce an enzyme called cyclo-oxygenase-2, which causes the production of substances (prostaglandins), which in turn cause angio-genesis around cancer cells. Production of cyclo-oxygenase-2 is elevated substantially in cancer cells. Several anti-angio-genesis substances block the production of cyclo-oxygenase-2 (cyclo-oxygenase-2 inhibitors). Among them is a chemical in the skin of grapes, called reseratrol, is a potent cyclo-oxygenase-2. Retinoic acid, a substance produced in our bodies from vitamin A or Beta Carotene, is also a potent cyclo-oxygenase-2 inhibitor.

"Tumor angiogenesis [blood vessel production] promotes cancer progression and metastasis [spread]. "

"Inhibition of tumor angiogenesis suppresses tumor growth.....and is currently considered a promising new therapeutic approach to treat human cancer. Many anti-angiogenic agents have been reported and several of them are currently being tested in clinical trials."

"Cyclooxygenase-2 (Cox-2).....is overexpressed in many cancers. Inhibition of Cox-2.....reduces the risk of cancer development in humans and suppresses tumor growth....."

"The anti-cancer effect.....seems to involve suppression of tumor angiogenesis."

O.Dormond, A.Foletti, C.Paroz, C.Ruegg

NSAID's Inhibit alphaVbeta3 Integrin Mediated And Cdc42/Rac-dependent Endothelial Cell Spreading, Migration, And Angiogenesis

Nature Medicine.....Volume 7 #9.....September 2001.....page 1041

Alzheimer's, Heart Disease, Cancer.....

Medically the 3 big ticket items in America.

Fewer than 10% of people that get these are in an "its genetic" situation.

Medically the 3 big ticket items in America all have the immune system in common.....

--- In Alzheimer's....macrophages are a specific type of immune system cell that are supposed to remove beta-amyloid plaques from brain blood vessel walls, preventing beta-amyloid's continued accumulation and toxicity to brain cells, especially those in the memory areas of the brain called the hippocampus.

--- In Heart Disease....macrophages are a specific type of immune system cell that are supposed to remove cholesterol plaques from blood vessel walls, preventing their continued accumulation and significant blocking of blood flow through blood vessels.

--- In cancer..."Natural killer cells" are a specific type of immune system cells that are supposed to kill cancer cells, preventing their continued growth and spread.

At autopsy, many Americans that died of Alzheimer's were developing heart disease and cancer.

At autopsy, many Americans that died of Heart Disease were developing Alzheimer's and cancer.

At autopsy, many Americans that died of cancer were developing Alzheimer's and cancer.

--- In the brain, when rate of beta-amyloid deposits exceeds the rate of removal, and does so for years or decades, this is what Alzheimer's looks like.

--- In the blood vessels around the heart, legs, neck, etc, when rate of cholesterol deposits exceeds the rate of removal, and does so for years or decades, this is what Heart Disease looks like.

--- In the body in general, when rate of cancer cell production, growth, and/or spread exceeds the rate of cancer cell death, and does so for years or decades, this is what Cancer looks like.

To be a good doctor one must -first- be a good physiologist.

Physiology is -not- pharmacology.

You can't drug your way to a fully functioning immune system.

You can't drug your way to restore an immune system to full functioning.

Rather than focus on the removal of beta-amyloid plaques in the brain by macrophages, the Traditional Medicine approach is to drug their way to artificially upping neurotransmitters related to memory and thinking ability to help people 'live with' beta amyloid continuing to kill off their brain cells.

Rather than focus on the removal of cholesterol plaques by macrophages, the Traditional Medicine approach is to drug [via statin drugs....Lipitor, Crestor, Pravastatin, etc] their way to slowing the rate that cholesterol plaques continue to accumulate on blood vessels walls, continuing to close off the blood vessel and kill patient.

Rather than focus on the killing of cancer cells by Natural Killer cells, the Traditional Medicine approach is to drug and radiate their way to temporarily killing some cancer cells while also killing off the body's main killers of cancer cells, sending the patient on their way with a low functioning immune system and the likelihood of recurrence in spite of the "cancer survivor" mantra.

--- Relatively modest levels of immune system suppression maintained over years or decades can have major effects. It can be enough to create a situation where....beta amyloid's binding of a small amount of a substance called "macrophage-inhibitory factor" can be all that's necessary for Alzheimer's progression across years and decades.

--- Relatively modest levels of immune system suppression maintained over years or decades can have major effects. It can be enough to create a situation where....a small amount of cholesterol causing engorgement of macrophages rendering them useless can be all that's necessary for Heart Disease progression across years and decades.

--- Relatively modest levels of immune system suppression maintained over years or decades can have major effects. It can be enough to create a situation where....cancer cell production of a small amount a substance called "Inter-Leukin-10", preventing Natural Killer cells from killing them off can be all that's necessary for Cancer progression across years and decades.

To be a good doctor one must -first- be a good physiologist.

Physiology is -not- pharmacology.

Mind-Body Medicine is all but exclusively about using the brain to increase immune cell number, immune cell activity, and restore immune system functioning. Through published research, Nutrition Medicine has identified several individual nutrients that can be consumed in supplement form to increase immune cell number, immune cell activity, and restore immune system functioning.

The immune system.....Chronically elevated levels of stress, levels maintained for years or decades chronically reduces immune cell number, immune cell activity, immune system functioning. Stress leads to increased production of beta-amyloid, increased deposits of cholesterol on blood vessel walls, increased production of cancerous cells.

Through published research, Nutrition Medicine has identified several individual nutrients that can be consumed in supplement form that interfere with beta amyloid production or its continued existence. Such as resveratrol. Such as curcumin. Such as N-Acetyl-L-cysteine. Such as L-Carnitine.

Through published research, Nutrition Medicine has identified several individual nutrients that can be consumed in supplement form that interfere with cholesterol getting deposited on artery walls or aid in its removal. Such as Vitamin K2. Such as Allicin [Kyolic]. Such as Resveratrol.

Through published research, Nutrition Medicine has identified several individual nutrients that can be consumed in supplement form that can increase Natural Killer Cell activity and function in killing cancer cells. Such as liquid colostrum. Such as very long chain plant sugars [organic Aloe Juice]. Such as nucleotides.

To be a good doctor one must -first- be a good physiologist.

Physiology is -not- pharmacology.

"All the good things....they don't teach us in medical school, because the drug companies pay for our education."

[Dr. John Sessions M.D.]

".....the benefits that US health care currently deliver may not outweigh the aggregate health harm it imparts."

[Journal Of The American Medical Association...Volume 302 #1..July 1, 2009...page 89 - 91]

"In the United States, 50% of people over age 85 will develop Alzheimer's disease"

[CEO of the Alzheimer's Foundation Of America]

Meditation or relaxation exercises.

The memory, thinking, and reasoning areas of the brain are no different than muscle. Decades of stress and overwork will present its bill at some point.

Exercise the brain.

The memory, thinking, and reasoning areas of the brain are no different than muscle. Atrophy due to disuse will eventually create a breeding ground for oxidants and pro-oxidants that will attack tissues and DNA, leading to several disease processes, from clogged blood vessels [stroke] to altered cell production [cancer]. This is more than "use it or lose it". You'll not only lose it if you don't use it, but you'll contribute to disease if you don't use it.

Exercise the brain.

The brain controls muscle. Walking, running, lifting weights, ect, don't just exercise muscles and heart, they exercise the brain cells as well. Atrophy due to disuse [ie. lack of exercise] will eventually create a breeding ground for oxidants and pro-oxidants that will attack tissues and DNA, leading to several disease processes, from clogged blood vessels [stroke] to altered cell production [cancer]. This is more than "use it or lose it". You'll not only lose it if you don't use it, but you'll contribute to disease if you don't use it.

Breast Cancer -----

Nearly all breast cancers are caused by damage to the DNA of cells in the breast by reactive oxygen species (ROS), perhaps known more popularly as "free radicals", or "oxidants". They are the reasons we need "antioxidants" produced in our bodies (glutathione) and in our diets (vitamin C, vitamin E, selenium and beta carotene). In most people who "get cancer", not only are they unable to prevent the disease through the antioxidant defense mechanism, but their cells also fail to repair their damaged DNA, and fail to destroy themselves if/when replication of mutated DNA gets out of hand. They simply continue to replicate themselves. This is what initially allows tumor formation. In Breast Cancer, since these women tend to be sedentary, tumor growth is aided by estrogen that would ordinarily act as growth factors in tissues which are active during exercise, but which ends up acting as a growth factors for tumor cells in the breast. This is the mechanism by which sedentary women, women with high estrogen levels, and women undergoing "estrogen replacement therapy" end up with accelerated tumor growth which the immune system is unable to cope.

"In the last decade, an estimated 26,700 new cases of ovarian cancer were diagnosed per year, with approximately 14,800 women dying of this disease per year."

J.A.Drisko

The Use Of Antioxidants With First-Line Chemotherapy In Two Cases Of Ovarian Cancer

American College Of Nutrition.....Volume 22 #2.....2003.....page 118

Prostate Cancer -----

Nearly all prostate cancers are caused by damage to the DNA of cells in the prostate gland by reactive oxygen species (ROS), perhaps known more popularly as "free radicals", or "oxidants". They are the reasons we need "antioxidants" produced in our bodies (glutathione) and in our diets (vitamin C, vitamin E, selenium and beta carotene). In most people who "get cancer", not only are they unable to prevent the disease through the antioxidant defense mechanism, but their cells also fail to repair their damaged DNA, and fail to destroy themselves if/when replication of mutated DNA gets out of hand. They simply continue to replicate themselves. This is what initially allows tumor formation. In Prostate Cancer, since these men tend to be sedentary, tumor growth is aided by testosterone that would ordinarily act as a growth factor in tissues which are active during exercise (ie. muscle), but which ends up acting as a growth factor for tumor cells in the prostate. This is the mechanism by which sedentary men, as well as men with high testosterone levels, and men undergoing "Testosterone replacement therapy" end up with accelerated tumor growth which the immune system is unable to cope.

"....prostate cancer mortality rates are three times higher in developed countries than in developing countries."

"....the variation in international prostate cancer rates is not due to genetic differences."

M.J.Messina

Emerging Evidence On The Role Of Soy In Reducing Prostate Cancer Risk

Nutrition Reviews.....Volume 61 #4.....April 2003.....page 117

"Poor diet and lack of exercise, is responsible for just as many cancer deaths as tobacco smoking."

Dr. John Seffrin.....CEO, American Cancer Society

Speech to the National Press Club.....October 16, 2003

"The number of people diagnosed with cancer within the next few decades is expected to double.

There will therefore be increased demand for novel diagnostic and medical therapies that use new non-traditional sources."

"The American Cancer Society predicts that.....in the United States [555,500] will die of cancer in 2002."

E.G.de Mejia, et al.

The Anticarcinogenic Potential Of Soybean Lectin And Lunasin

Nutrition Reviews.....Volume 61 #7.....July 2003.....page 239

Prostate cancer.....

Your prostate. Use it or lose it.

Men that died of something other than prostate cancer;
-- in their 50's at autopsy....10 percent had prostate cancer
-- in their 80's at autopsy....70 percent had prostate cancer

The 2 situations you'll want to address throughout your life, especially as you age.....

1. The prostate is among the "use it or lose it" types of tissues in the human body. If you stop using it, you're gonna have issues from benign "hyperplasia" [tissue growth and proliferation] causing problems with urination, bladder control, etc.....to full scale prostate cancer. This is a "use it or lose it" situation, so standup comedy jokes aside, continue having ejaculations throughout your life especially as you age or prepare yourself to be among the 70% of men in their 80's with prostate cancer. Your doctor is unlikely to ask you..."are you masterbating regularly?".

2. Testosterone is an anabolic steroid. Give it some place to go throughout your life or it'll go places and bind to things that you'll eventually come to regret. Muscle is a sink for testosterone. Lift weights and exercise throughout your life, especially as you age, or just as with women, estrogen and breast tissue, testosterone will go places and bind to things that you'll eventually come to regret.

On the prevention end, there are several Nutrition Medicine related things one can consume that help one to avoid having prostate issues. Lycopene, Zinc, Selenium, Vitamin E, plant polysaccharides [aloe juice].

On the treatment end the research in this area has issues as the pro-drug pro-surgery and anti-drug anti-surgery folks work to undermine each other's approach. The waters have been intentionally muddied. Things will clearup eventually.

Prostate Cancer

Screening.....

- every 6 monthscolor dopplar ultra-sound
- once each year.....contrast dye MRI
- once every 2 – 3 years.....PSA blood test
- once every 2 – 3 years.....Transrectal ultrasound
- once every 2 – 3 years..... thermal imaging [thermagraphy]

Evidence of prostate cancer in men.....

- 30% more than 50 years of age
- 70% more than 80 years old.
- 10% will have a clinical diagnosis of prostate cancer in their lifetime
- 3% will die from malignancy

Prostate Cancer

Inducing destruction (apoptosis) of prostate cancer cells.....

"....dietary sterols. This study was undertaken to compare the effect of two dietary sterols on prostate cancer cells in vitro. beta-Sitosterol the most common plant sterol, and cholesterol, an animal sterol, were compared for effect on LNCaP cell growth, differentiation, apoptosis....."

"Cells were treated for up to seven days with sterols....."

"Compared with cholesterol, beta-Sitosterol decreased growth by 24% and induced apoptosis fourfold....."

"No effect was observed on differentiation as measured by prostate-specific antigen....."

"The results suggest that the decrease in cell number and increase in apoptosis associated with beta-Sitosterol treatment are mediated by activating the sphingomyelin cycle.

R.L.von Holtz, et al
beta-Sitosterol activates the sphingomyelin cycle and induces apoptosis in LNCaP human prostate cancer cells
Nutrition and Cancer.....Volume 32 #1.....1998....page 8 - 12

"....we purified Saw Palmetto....and found that Saw Palmetto induced growth arrest of prostate cancer LNCaP, DU145, and PC3 cells....."

"Saw Palmetto induced apoptosis of LNCaP cells in a time- and dose-dependent manner..."

"Saw Palmetto increased the expression of p21waf1 and p53 protein in LNCaP cells."

"In addition, we found that Saw Palmetto down-regulated DHT- or IL-6-induced expression of prostate specific antigen in conjunction with down-regulation of the level of androgen receptor in the nucleus...."

"These results indicate that Saw Palmetto might be useful for the treatment of individuals with prostate cancer."

Y.Yang, et al
Saw Palmetto induces growth arrest and apoptosis of androgen-dependent prostate cancer LNCaP cells via inactivation of STAT 3 and androgen receptor signaling.
International Journal Of Oncology....Volume 31 #3....September 2007....page 593 - 600

The types of supplements that contain the plant sterols, including beta-sitosterol.....

Saw Palmetto
Aloe Juice

Prostate Cancer

"A 3 to 1 cancer detection advantage of transrectal ultrasound over digital rectal examination was shown. Transrectal ultrasound and prostate-specific antigen each detected 92% of the proven cancers..."

"32% of all cancers were detected by digital examination, with digital exam having no predictive power after two study years."

L.F.McHugh, et al

Transrectal ultrasound, digital rectal examination, and prostate-specific antigen: preliminary results of an early detection program for prostate cancer.

Scandanavian Journal Of Urology and Nephrology Supplement....Volume 137.....1991....page 101 - 105

Early Detection of Prostate Cancer: American Urological Association Guideline

Guideline Statement 5:

"The Panel does not recommend routine PSA screening in men age 70+ years or any man with less than a 10 to 15 year life expectancy.

guideline statements listed in this document target men at average risk, defined as a man without risk factors, such as.....African American race."

"Some men with high risk aggressive prostate cancers with a life expectancy less than a decade, may benefit from the diagnosis and treatment of their disease. Thus, the goal should be to identify these men while avoiding the associated overdiagnosis and over treatment of those with lower risk disease that occurs with opportunistic screening."

[excerpts].....

Prostate cancer prognosis remains poor for patients who have a prostate-specific antigen (PSA) level 100 ng/mL at discovery, a review of cancer registry data showed.

"Our study confirms poor survival and significant morbidity in men initially presenting with PSA 100 ng/mL," he said. "It stresses the vital role of PSA and the need for improved access to screening, which would have detected these cancers at earlier stages.

Reese added that many of the patients in the study may have gone without PSA screening because they were underinsured.

"Our underinsured patient population presented with advanced prostate cancer at a rate of at least 3.6 times the national average of 4%, and survival was substantially less than the national 71% 5-year survival for metastatic disease," Reese said.

To examine the potential consequences of not screening for prostate cancer, investigators searched medical records of all men with newly diagnosed prostate cancer from 1998 to 2008....

"Despite modern therapy, survival is poor for advanced prostate cancer associated with PSA levels of 100 ng/mL or greater," Reese concluded. "In the absence of screening, 14% of prostate cancer patients are diagnosed with PSA levels of 100 ng/mL or greater at presentation. Our results suggest a role for continued PSA screening."

What happens when we do not screen for prostate cancer? The fate of men presenting with PSA over 100 ng/mL.....Presented at: Annual Meeting of the Oncology Live [OncLive]....Thursday June 27, 2013

Lack of PSA Screening Leads to Poor Prognosis in Prostate Cancer

from the presentation made by W.Adams, C Elliott, and J Reese titled....

American Urological Association; May 4 - 8, 2013; San Diego, CA. Abstract 1484

Prostate Cancer

"African American men have a two- to three-fold greater incidence of newly diagnosed metastatic prostate cancer compared to white men, which contributes to a similarly increased mortality rate."

"A greater effort is needed to eliminate disparities in prostate cancer..."

Prostate Cancer Survival Rates Improved Since Introduction of PSA Testing

Science Daily....Aug. 23, 2012

[Cedric M. Bright, M.D., President of the National Medical Association]

"The National Medical Association is committed to decreasing health disparities in African Americans; this includes disparities in prostate cancer. As a national organization, comprised of the nation's leading experts in minority health, we support the American Urological Association's best practice statement regarding the PSA blood test to detect prostate cancer at its earliest stages. As a primary care physician, I have been testing African American males with PSA screening starting at age 40, and in my 20 years of practice I have detected prostate cancer in men as young as 42. With the prevalence of prostate cancer disproportionately affecting our men, we must be vigilant to ensure aggressive testing continues for this most vulnerable population,"

".....African-American males should be told about screening tests available for prostate cancer earlier in order to increase the likelihood that if they do develop cancer it might be diagnosed at an early stage while it is still curable."

"When doctors fail to act in accordance with the guidelines for cancer screening and their patient is subsequently diagnosed with advanced prostate cancer that physician might be liable for medical malpractice."

J.Hernandez

Article Sphere

Jury Finds Against Doctor In Delayed Diagnosis Of Cancer Medical Malpractice Matter

annual thermography --vs-- annual mamogram

1. many if not most women that --will-- get breast cancer have increased or increasing breast tissue density
2. mamograms do poorly at detecting tumors in women that have increased or increasing breast tissue density
3. mamograms increase incidence of breast cancer in women with a family history of breast cancer and in some with no family history
4. mamograms miss cancers in --the-- most vulnerable, susceptible, and most likely women to get breast cancer as well as increase the incidence of breast cancer

Thermography

Tumors need a blood supply in order to grow. With blood comes heat. As blood supply increases and tumor size increases, heat increases. Hence the potential of thermography to detect tumors prior to their reaching the necessary size to be detected via mamogram.....and without the same level of annual radiation exposure.

In place of annual breast mammography, it may be helpful to use thermography, starting with one to create a baseline, a 2nd for another baseline done about 3 months later. Then [1] annually to compare to the baseline one's, looking for changes or increased size of "hot spots" in the breast.

protocol.....

- day 1 = thermography [to establish a baseline for comparison to future images]
- 3 months later = thermography [to establish a baseline for comparison to future images]
- 1 per year.....compare annual image to the 2 baseline images

Breast Thermography [use of thermal imaging]
<http://www.breastthermography.com/>

[several years ago stand alone use of thermography [ie. thermography without a mamogram] in the United States lost a 5 - 4 vote by an FDA panel where 3 of the 5 no votes had a financial conflict of interest]

Pap smears for women that don't have a cervix [total hysterectomy].....

Why Doctors Hate Science [Newsweek...Feb 27, 2009].....

"And those Pap tests? Total hysterectomy removes the uterus and cervix. A Pap test screens for cervical cancer. No cervix, no cancer.

"Yet a 2004 study found that some 10 million women lacking a cervix were still getting Pap tests."

"It's hard not to scream when you see how many physicians, pharmaceutical companies, medical-device makers and, lately, hysterical conservatives seem to hate science, or at best ignore it."

"Current evidence does not support an annual screening physical examination for asymptomatic adults....."

"Respondents.....Primary Care Physicians."

"65% of 664 agreed that an annual physical examination is necessary."

"55% of 712 disagreed with the statement that national organizations do not recommend an annual physical examination...."

".....641 (88%) of 726 perform such examinations."

"Despite contrary evidence, most Primary Care Physicians believe an annual physical examination detects subclinical illness, and many report performing unproven screening laboratory tests. Primary care providers do not appear to accept recommendations that annual physical examinations be abandoned in favor of a more selective approach to preventing health problems."

A.V. Prochazka, et al

Support of evidence-based guidelines for the annual physical examination: a survey of primary care providers.

Journal Of The American Medical Association.....Volume 294 #7.....August 17, 2005.....page 778

"The money saved by not inappropriately performing Pap tests on low-risk women would pay for the cost of screening the 17 million women in the United States who are currently underscreened for cervical cancer...."

Journal Of Family Practice.....Volume 53 #9.....September 2004

18 hours ago · Like

"Screening is not advised in women who have had a hysterectomy with removal of the cervix and who do not have a history of high-grade precancerous lesion or cervical cancer, the task force said."

News in brief

American Medical Association

March 26, 2012

"If you had your uterus and cervix removed for a noncancerous condition, you may be able to stop having Pap smears."

S.Pruthi, M.D.

Pap smear: Still necessary after hysterectomy?

Mayo Clinic

"....U.S. Preventive Services Task Force is announcing new recommendations for Pap tests to screen women for cervical cancer. The American Cancer Society (ACS), the American Society for Colposcopy and Cervical Pathology (ASCCP) and the American Society for Clinical Pathology (ASCP) have also teamed up to publish screening recommendations."

"For women 30 and over, Pap tests should be done every three years. The guidelines recommend against annual or more frequent Pap testing for this age group."

CNN

No more annual Pap smear: New cervical cancer screening guidelines

By Otis Brawley MD

Anabolic steroids as contraception.....

"Combined oral contraceptives are classified by the International Agency for Research on Cancer as a cause of cervical cancer."

"As the incidence of cervical cancer increases with age, the public-health implications of this association depend largely on the persistence of effects long after use of oral contraceptives has ceased. Information from 24 studies worldwide is pooled here to investigate

the association between cervical carcinoma and pattern of oral contraceptive use."

"Among current users of oral contraceptives the risk of invasive cervical cancer increased with increasing duration of use...."

"The risk declined after use ceased, and by 10 or more years had returned to that of never users."

"The relative risk of cervical cancer is increased in current users of oral contraceptives and declines after use ceases."

"10 years' use of oral contraceptives from around age 20 to 30 years is estimated to increase the cumulative incidence of invasive cervical cancer by age 50....."

J. Green, et al

Cervical cancer and hormonal contraceptives: collaborative reanalysis of individual data for 16 573 women with cervical cancer and 35 509 women without cervical cancer from 24 epidemiological studies

The Lancet.....Volume 370 #9599....November 10 - 16, 2007.....page1609

National Cancer Institute.....Oral Contraceptives and Cancer Risk: Questions and Answers

".....women who were current or recent users of birth control pills had a slightly elevated risk of developing breast cancer. The risk was highest for women who started using oral contraceptives as teenagers. "

"Evidence shows that long-term use of oral contraceptives (5 or more years) may be associated with an increased risk of cancer of the cervix (the narrow, lower portion of the uterus).

No egg = no pregnancy, no sperm = no pregnancy. Egg can survive for about a day, sperm can survive in the uterus for about 6 days. Thus knowledge of the day of and the days leading up to ovulation is a reasonably effective form of empowerment in implementing contraception. Without use of anabolic steroids, increasing incidence of cancer and heart disease.

Clear Blue Ovulation Kit

Identifies the 6 days of possible fertility.

<http://www.clearblueeasy.com/clearblue-easy-fertility-monitor.php>

The “Cure” For Cancer

Definition of the term "cure for cancer".....

--- A state of the body in which the diagnosed clump of cancer cells have been destroyed

--- along side a state of the body in which they cannot return....meaning, the various abilities of the cells to re-grow to their previous status has been removed

--- the ability of the cells to evade destruction has been removed

.....all creating a state in the body where the **rate of cancer cell destruction**, permanently exceeds the **rate of cancer cell production** and proliferation [metastasis]

The Cure For Cancer & The Prevention From “Getting Cancer” -----

The most effective treatment is rather simple, which is to focus on ---reversing the causes and mechanisms--- of the disease and situations that assist cancer cell survival, growth, and proliferation [metastasis].....by addressing the causes and mechanisms.

Address The Causes & Mechanisms -----

----- High stress = high cortisol —Interleukin-10 = low immune function.

Do things that improve/maintain high level immune function and lead to an increase in the number and function of Natural Killer cells of cell of the immune system that destroys cancer cells.

--- Establish down time during the day for engaging in autogenic relaxation, meditation, napping, massage, prayer, or hot bath/jaccuzzi.

--- Watch standup comedy live or on TV, often.

— “Enriched” physical and social environments improve immune function. Colorful furniture - mobiles - plants - walls - posters, as music, lamps w/dimmer switches, extracts from aroma therapy shops, post affirmations/goals on a wall.

--- Develop the major life skills of being solution, logic, and mastery oriented. Establish rational thought and pro-activity as major v life. These skills remove and prevent destructive aspects of stress rather than simply managing it. They produce high levels competence and self-efficacy, which lead to self-mastery. This reduces chronic exposure of brain cells and body tissues to elevated levels glutamate (a brain neurotransmitter), cortisol (stress hormone), Interleukin-10, and adrenaline, which induce brain cell destruction, immune system suppression, and tumor growth.

--- Deal with all major “inner-child” wounds (see John Bradshaw’s book “Homecoming”) and issues thus creating changes in brain function and basal stress levels which directly affect immune cell function.

--- Establish a strong support group of “functional” friends to spend time with in all major areas of your life.

-- Get a well mannered, lovable, huggable pet [get dog training video made by [the best dog trainer](#)see store section www.unclematty.com].

“Patients with metastatic breast cancer whose diurnal cortisol rhythms were flattened or abnormal had earlier mortality. Suppression of Natural Killer cell count and Natural killer cell function may be a mediator or a marker of more rapid disease progression.”

S.Esephton, R.M. Sapsolsky, H.C.Kraemer, D.Spiegel
Diurnal Cortisol Rhythm As A Predictor Of Breast Cancer Survival
Journal of the National Cancer Institute.....Volume 92 #12.....June 21, 2000.....page 994-1000

“This study investigated the relationships between a mindfulness-based stress reduction meditation program for early stage breast and prostate cancer patients.....and cytokine production.”

“Forty-nine patients with breast cancer and 10 with prostate cancer participated in an 8-week mindfulness-based stress reduction program that incorporated relaxation, meditation, gentle yoga, and daily home practice.”

“.....NK cell production of IL-10 decreased....”

“This study is also the first to show changes in cancer-related cytokine production associated with program participation.”

L.E. Carlson, et. al
Mindfulness-Based Stress Reduction in Relation to Quality of Life, Mood, Symptoms of Stress, and Immune Parameters in Breast and Prostate Cancer Outpatients
Psychosomatic Medicine.....Volume 65 #4.....July-August 2003.....page 571 - 581

12
"Reduced NK cells [Natural Killer Cells] may present a significant problem inasmuch as these cells play an important role in antican defense by lysing tumor and virus-infected cells, as well as monitoring and combating neoplastic (new and abnormal) growth"

"Research also reveals that breast cancer patients have reduced NK cell number and that stress increases tumor development by decrea NK cell activity."

"Because psychological stress has been shown to negatively impact immune response, reducing stress would be expected to positively im the immune system."

"Studies on psychological interventions for boosting the immune response of cancer patients reveal positive effects from hypnosis, sti management intervention, and cognitive behavioral therapies. The positive effects from these interventions might relate to reduced cor stress hormone level, which would indicate healthier neuroendocrine functioning."

"Massage therapy may provide another treatment for reducing psychological stress and enhancing immune function for the breast ca patient in that massage has been shown to (1) increase NK cell number and NK cell activity in men and adolescents with HIV and attenuate psychological stress and neuroendocrine (stress-related) levels in varying conditions."

"One mechanism underlying the enhanced immune function from massage may result from the relaxing effects of massage as eviden decreased stress hormone (cortisol) and catecholamine (norepinephrine, epinephrine) levels reported in other massage therapy studies."

"The immediate massage therapy effects included reduced anxiety, depressed mood, and anger. The longer term massage effects incl reduced depression and hostility and increased urinary dopamine, serotonin values, NK cell number, and lymphocytes."

"Women with Stage 1 and 2 breast cancer may benefit from thrice-weekly massage therapy for reducing depressed mood, anxiety, and a and for enhancing dopamine, serotonin, and NK cell number and lymphocytes.'

M. Hernandez-Reif, et.al
Breast Cancer Patients Have Improved Immune And Neuroendocrine Functions Following Massage Therapy

Journal of Psychosomatic Research.....Volume 57 #1.....July 2004.....Pages 45 - 52

Address The Causes & Mechanisms -----

----- Low intake of vitamin C, E, selenium, and beta carotene = high oxidative damage to cell DNA.

----- sedentary life style = low glutathione (antioxidant produced by the body) = high oxidative damage to cell membranes and cell DNA.

--- Increase intake of vitamin C, E, selenium, and beta carotene.

--- Engage in high intensity, low volume, aerobic exercise to raise glutathione and other antioxidants the body produces for itself [super-oxide dismutase, etc.].

Address The Causes & Mechanisms -----

----- Sedentary life style = poor cellular function = poor DNA damage repair function, and poor immune system function = cancer cell production and unchecked growth and proliferation.

--- Restore function of the p53 (tumor suppressor) gene and restore DNA repair function of cells through engaging in high intensity, low volume, aerobic exercise to create normal cell function (humans cells....sedentary is not "normal"....creates abnormal function).

--- Seek out gene therapy specialists that insert functioning p53 and other tumor suppressor genes into tumor cells to induce cell suicide.

--- Seek out doctors who have identified substances that restore p53 function.

Address The Causes & Mechanisms -----

----- Sedentary life style = increased estrogen to breast/ovarian cancer cells = tumor growth.

----- Sedentary life style = increased testosterone to prostate cancer cells = tumor growth.

--- Engage in high intensity, low volume, aerobic exercise to raise glutathione and other antioxidants the body produces for itself [super-oxide dismutase, etc.].

In Plain English -----

One must get the immune system functioning to the point where the **rate of tumor destruction exceeds the rate of tumor production** and/or proliferation (metastasis).

In other words, one will need to stop behaving in ways [living stress as a lifestyle] and consuming things that decrease immune function and/or enhance cancer cell formation. One will need to start behaving in ways [down time, meditation, etc] and consuming things that

increase immune function. And one will have to train muscularly (high intensity aerobic training) and cerebrally (guided imagery to increase immune cells attack on tumor) to get one's own body functioning in the manner in which it was designed to function, to destroy the cancerous cells and reverse the disease process. Once the rate of cancer cell destruction begins to exceed the rate of cancer cell production.....you will be effectively reversing the course of the disease.

Common Sense -----

There is a minimum threshold of these activities necessary to reach prior to seeing results. Allow no doctor to claim these activities (addressing the mechanism of a disease) will not work.

Traditional Medicine's Drugs & Radiation Approach -----

Its referred to as a "risk--benefit ratio", or a "risk--benefit analysis". As long as you're still alive 5 years after diagnosis, that's all that counts.

The drug culture that is Traditional Medicine, is a culture oriented toward "deferred death", rather than well-living. One is considered to be offering -----"false hope"----- [that tried and true phrase Traditional Medicine uses to shout-down their enemies] if one suggests that a logical, cheap, non-destructive alternative exists.

"Before we became a mechanized society, the concept of exercise for its own sake was all but unknown since everyday life contained an enormous amount of physical activity. Advising a farmer's wife to take up aerobics would have been laughable." -----[Dr. Deepak Chopra MD]

"To determine the effect of hypnotic-guided imagery on immune function and psychological parameters in patients being treated for Stage I or II breast cancer."

"Many studies during the last 15 years have demonstrated interactions between the central nervous and the immune systems. While a negative effect of stress on immune responses has been demonstrated, there have also been published reports that psychological treatments can positively alter the immune system."

A.Bakke, M. Z. Purtzera, P. Newtonb

The Effect Of Hypnotic-Guided Imagery On Psychological Well-Being And Immune Function In Patients With Prior Breast Cancer

Journal of Psychosomatic Research...Volume 53 #6.....December 2002....page 1131-1137

"....most anti-cancer drugs have several toxic side-effects that may produce a poor quality of life for patients and considerable cost in supportive care."

R.Beliveau, D. Gingras

Green Tea: Prevention And Treatment Of Cancer By Nutraceuticals

The Lancet....Volume 364....September 18, 2004.....page 1021 - 1022

"Cancer survivor' is a new chronic illness. We currently have no good way for following those people", says James Goodwin (Sealy Center on Aging, Galveston, TX, USA).

"Cancer survivors are not entirely `normal'."

"They have increased risk of a second cancer, and risk of late side-effects of their treatments.

There are currently, for example, two million breast cancer survivors in the USA. We need some sort of `step down' oncology programme for these people, whereby they are followed for the special problems to which cancer survivors are uniquely susceptible."

D.Lawrence

Cancer Incidence In The USA Could Double By 2050, Report Predicts

The Lancet....Volume 359, Issue 9319.....May 18, 2002.....Page 1755

"[Breast cancer].....For patients with metastatic disease, chemotherapy.....does not, with rare and anecdotal exceptions, cure."

".....reductions in relative hazard for relapse and death typically range from 10% - 30%."

J.Crown

Chemotherapy Dose And Schedule In Adjuvant Treatment Of Breast Cancer: Phoenix, Turkey, Or Dodo?

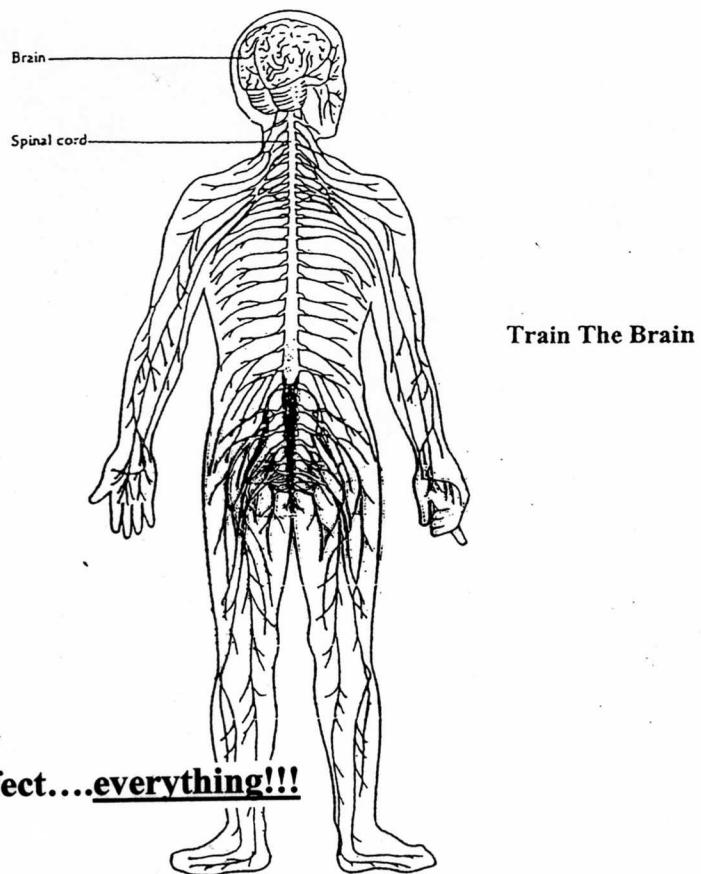
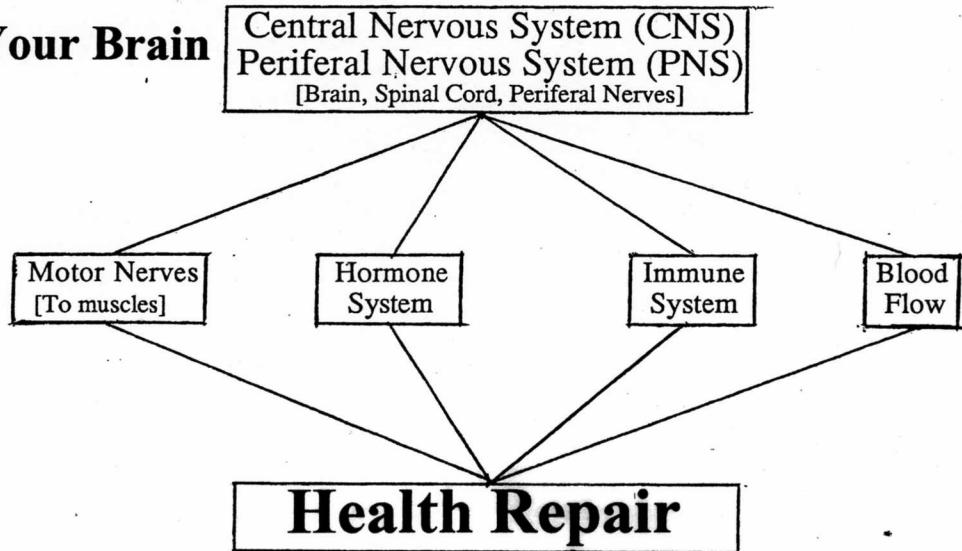
The Lancet.....Volume 362 #9385.....August 30, 2003

Mind-Body Medicine

[21rst century Health Repair]

ETG

Use Your Brain



The Brain;

--- Branches out to the body

--- Thus it can control or effect...everything!!!

Psycho---neuro---immunology

Around the mid-1980's, early 1990's it was discovered that visualizations and guided imagery can be used to direct the immune system to increase cell number and killing capacity of cancer cells. This area of science is called Psycho-neuro-immunology. Or "mind-body medicine" for short.

After the study of Psycho-neuro-immunology proliferated in the United States, several Universities around the country opened departments at their medical schools for specializing in Psycho-neuro-immunology. From **University of Rochester [New York] and Ohio State University in the east, to UCLA** in the west, patients who choose to do their homework and invest themselves in saving their own lives can now go to several University hospitals to get the most up-to-date mind-body medicine treatment protocols.

Mind-body medicine is founded on the basic principle that the brain controls or influences the function of all cells in the body by direct connection to them via the nervous system, or via chemical interaction via release of hormones or substances called neuro-peptides. Hence the importance of and awareness of the existence of mind-body medicine. And the importance of utilizing mind-body medicine and integrating into the practice of medicine in the United States.

an animation of what happens with immune cells killing cancer cells.....

<http://www.youtube.com/watch?v=-sJXAS3luwc>

[<http://www.cancervisualization.com>]

"This pilot study.....28 breast cancer patients, aged 25 to 75 years..."

"The effects of the intervention on immune function were measured by natural killer (NK) cell cytotoxicity...."

"These findings suggest that a relaxation intervention such as guided imagery could have an effect on NK cell cytotoxicity and NK cell cytotoxicity...."

C.A. Lengacher, et al

Immune Responses to Guided Imagery During Breast Cancer Treatment
Biological Research For Nursing.....Volume 9 #3....January 2008....page 205 - 214

Resources to help you

Best Answer For Cancer

<http://www.bestanswerforcancer.org/>

low dose chemotherapy to give your immune system a chance to catch up.....

<http://www.iptforcancer.com/>

Kostanis Institute

<http://kotsanisinsititute.com/credentials-of-dr-kotsanis>

The brain controls your immune system, in much the same way as it controls the muscular movements of your arms and legs.

The development of skillful control over the muscle movements of your arms and hands, such as with making 90 out of 100 free throws in basketball, or playing the piano, can be trained.

Likewise, the development of skillful control over immune system function, can be trained.

Just as failure to train, fails to result in a high level of control in making free throws in basketball, the same holds true for controlling immune function.

The Role Of pH

The body's pH level is a critical aspect of the ability of cells to adapt to stress, prevent and/or recover from illness or injury, adapt to exercise and sport training, etc..

The environment in which your cells operate in can change day to day, and for many if not most Americans, get into a level that is well below optimal. Keeping your body's pH level in an optimal range is to put the environment inside your body in a state where it can quickly repair itself, build tissue, adapt to and recover from high level stressors, slow aging, boost the immune system, prevent illness, etc.

To put your body in a high state of health you must not only ingest protein in your diet, provide yourself with rest, relaxation, and sleep, but you must also provide the food/nutrients that put and keep your body's pH level in the necessary range, and consume the essential gene level nutrients that assist the body to repair itself.

Life Long Status: Choose Foods That You Like Or Can Tolerate

Creating the best environment inside your body is helpful over the long term.

The use of the pH paper can help you use trial and error to get your diet to a point where things are approaching the ballpark of being optimal and staying that way for most of the day. Generally, most vegetables are alkalizing foods.

Choose alkalizing foods that you like.

What you're out to do is to establish the efficacy of your diet and supplement intake as it impacts the status of the environment inside your body that your cells operate in.

For a list of foods that can help you get some idea of what foods can make your pH more alkaline see a general list; www.energiseforlife.com/list_of_alkaline_foods.php

Testing Your pH If you'd like to test your urine pH, you can buy pH paper for about \$10.00

Keep in mind that you are looking at the pH of urine. How you choose to do that is up to you. You can do the "stream of flow" method of placing a strip of pH paper in a given position. Or you can choose a less potentially messy method by using a dixie cup to collect a small amount, then dipping the pH strip in to cup.

Many Americans are reported to be between 5.5 - 5.8. For them the paper won't change color. You'd like it to turn green to be 6.8 - 7.0 range both in the morning and in the evening. Keep in mind that even though you're looking at urine pH, what you're really out to measure is the efficacy of your diet and supplement intake, and thusly, the status of the environment inside your body that your cells operate in. .

Essential Fatty Acids and Cancer.....

Cells put essential fatty acids [ie. fish oil, etc] into their outer shell covering a.k.a cell membranes.

The type of fat in the cell membrane can alter cell health and cell function. In women that includes cells in the breast.

The fat in cell membranes periodically get attacked by things called oxidants. Anti-oxidants lessen those attacks.

When essential fatty acids in cells are attacked by oxidants, that initiates an immune cell response that is unlike that of an attack on other types of fat in that it can inhibit tumor growth, such as in breast cancer.

----- levels of essential fatty acids measured in breast tissue is a predictor of metastatic breast cancer potential

----- the greater the level of essential fatty acids the lower the potential for metastatic breast cancer

----- levels of essential fatty acids is a predictor of tumor size

----- the greater the levels the smaller the size

----- diets high in fats from corn oil, safflower oil, etc tend to aid tumor growth

"Let food be thy medicine and medicine be thy food"

[Hippocrates]

Protect your immune system.....

"A unique opportunity to eradicate cancer is presented immediately after the excision of the primary tumor, but surgical procedures often induce the release of immunosuppressing factors that render cell mediated immunity ineffective.

Here we tested the hypothesis that integration of peri-operative immunostimulation and blockade of immunosuppression could synergistically improve post-operative anti-metastatic immunity and long-term survival."

"The blockers prevented this suppression per lung and per single NK cell. Conclusions: Immunostimulation could be rendered ineffective post-operatively due to immunosuppression; therefore integrating endocrine-blocker therapies into the realm of peri-operative immunotherapy could optimize immune control over residual disease, potentially improving clinical outcomes."

R. Avraham, et al

Synergism between immunostimulation and prevention of surgery-induced immune suppression: An approach to reduce post-operative tumor progression

Brain, Behavior, and Immunity....Volume 24 #6.....August 2010....pages 952 - 958

The combo of vitamin C and Vitamin K3 being used to kill cancer cells in breast cancer, prostate cancer, bladder cancer, etc, etc,. Human clinical trials have been underway in several areas.

The study below is about bladder cancer.

Journal of Cancer Science & Therapy [2013, 5:325-333].....

Vitamin C and Vitamin K3 Combination Causes Enhanced Anticancer Activity against RT-4 Bladder Cancer Cells

James M. Jamison, Ph.D

St. Thomas Hospital, 444 N. Main Street, Akron, Ohio 44310, US

“.....Henryk Taper and coworkers for the treatment of liver and other cancers by using a combination of vitamin C and vitamin K3 (VC:VK3) in a 100:1 ratio.

Taper showed that vitamin C reactivated DNase II, while vitamin K3 reactivated DNase I with the combination synergistically causing tumor cell death.”

“These results have been extended into the clinical setting with a phase I/IIa clinical trial for end stage prostate cancer which demonstrated both safety and efficacy.”

“Vitamin C, Vitamin K3 and the combination were evaluated against human bladder cancer cell lines RT-4 and T24 to evaluate their synergistic anticancer activity.”

“....combination Vitamin C and vitamin K3 was able to cause autoschizic cell death through oxidative stress, thiol depletion, lipid peroxidation, modification of ATP levels and calcium regulation.”

“Because of these results, combination Vitamin C and vitamin K3 was granted orphan drug status for the treatment of metastatic or locally advanced, inoperable transitional cell carcinoma of the urothelium (stage III and IV bladder cancer).”

“Efforts are underway to conduct a phase II clinical trial for this indication.”

Coley Fluid....65% remission rate

documented by MD Anderson Cancer center [Galveston Texas]

Coley Fluid stimulates an immune response that can be sufficiently powerful to induce the regression of cancer.
MBvax Bio Science [Dr Don MacAdam]

February 2, 2011

"Dr. William Coley developed Coley Fluid in 1893. The first immune therapy for cancer became a mainstream treatment manufactured and distributed worldwide by several pharmaceutical companies."

"After Dr. Coley's death in 1936, the use of Coley Fluid and the number of commercial suppliers declined."

"The decline of Coley Fluid coincided with the continued development and increased use of radiotherapy and chemotherapy."

"In 2002.....Science published Polly Matzinger's...."The Danger Model" that laid the essential groundwork to understanding the mechanism of action of Coley Fluid."

"MBVax Bioscience has developed an optimized version of Coley Fluid and an administration protocol based on a modern understanding of cancer immunology."

"....Coley Fluid may be available in countries that allow late-stage cancer patients no longer responsive to existing therapies access to experimental drugs, in countries with "Therapy Freedom" laws where physicians have the right to prescribe experimental drugs, in countries that authorize certain clinics to treat cancer patients with experimental drugs, and health regulators in some countries have granted physicians permission to import and administer MBVax Coley Fluid."

"Of cancer patients receiving at least four weeks Coley Fluid therapy, physicians report these results.....70% of patients have achieved confirmed regression of cancer. Twelve patients have achieved complete remission....."

"Physicians have reported confirmed regressions in 17 different types of advanced cancer: breast, brain, cervical, colon, esophageal, liver, lung, lymphoma, melanoma, multiple myeloma, ovarian, pancreas, prostate, rectal, sarcoma, stomach and tongue."

effect of exercise during cancer treatment.....

"These findings provide conceptual support for the clinical observations that controlled physical activities may be a therapeutically important approach to preventing cancer --progression-- and may improve outcome of cancer treatment."

"The tumor volume and weight were, respectively, ~270% and 280% greater in the sedentary mice than in trained mice."

"....the amount of tumor cells was reduced in trained mice."

**P.W.M.Almeida, et al
Swim Training Suppresses Tumor Growth In Mice
Journal Of Applied Physiology....Volume 107 #1.....July 2009....page 261**

"Weight lifting has generally been proscribed for women with breast-cancer-related lymphedema, preventing them from obtaining the well-established health benefits of weight lifting....."

"The proportion of women who had an increase of 5% or more in limb swelling was similar in the weight-lifting group (11%) and the control group (12%)....."

"As compared with the control group, the weight-lifting group had greater improvements in self-reported severity of lymphedema symptoms.....and a lower incidence of lymphedema exacerbations as assessed by a certified lymphedema specialist (14% vs. 29%). There were no serious adverse events related to the intervention."

In breast-cancer survivors with lymphedema, slowly progressive weight lifting had no significant effect on limb swelling and resulted in a decreased incidence of exacerbations of lymphedema, reduced symptoms, and increased strength.

**K.H. Schmitz,
Weight Lifting in Women with Breast-Cancer-Related Lymphedema
New England Journal Of Medicine.....Volume 361 #7.....August 2009....page 664 - 673**

Repair your DNA, or else.....

The human body is a construction site. Our cells contain construction workers, called ribosomes. Our genes are instructions or blue prints the construction workers [ribosomes] use to build certain items needed for normal and/or improved cell function. This process causes specific genes to get copied a.k.a. gene transcription. The copies of the genes go to the construction workers [ribosomes] and they use those blue prints to build required items a.k.a translation. Hence the term gene transcription and translation.

When the construction workers are given damaged blue prints a.k.a damaged genes, damaged DNA, they may build some problematic stuff. We call that cancer.

The blue prints get damaged by stuff called oxidants a.k.a. free radicals. Anti-oxidants that we eat [Vitamins C, E, A, etc] or anti-oxidants our cells produce [ie glutathione, melatonin, etc] lessen those attacks. Oxidants come from stuff in the air we breath a.k.a. air pollution. Oxidants come from the breakdown of stuff we eat or drink a.k.a. alcohol, caffeine. Oxidants get created by stuff we're exposed to such as radiation, etc. Most importantly, oxidants get created by a series of events that take place due to long term elevated levels of stress.

Cells have an outer shell covering a.k.a. cell membranes. The fat in cell membranes periodically get attacked by oxidants causing damage to our cells. Inside our cells, oxidants attack our DNA. They break our strands of DNA. We call that "DNA strand breaks". Thus our blue prints get damaged. When the construction workers [ribosomes] receive damaged instructions or blue prints [damaged genes] they may build a bunch of stuff that doesn't work well. We call that cancer.

Damage to the instructions or blue prints is the initiating event that requires several more preventable steps to take place before cancer cells are created, grow, and proliferate to become a tumor.

Our cells have the ability to repair the instructions or blue prints. We call that DNA Repair. We have genes for things called DNA Repair enzymes. High intensity exercise optimally causes the blue prints [genes] for DNA Repair Enzymes to be copied and sent to the construction workers [ribosomes]. The construction workers then build the DNA Repair enzymes.

Low or no high intensity exercise a.k.a. sedentary life style.....

= low or no DNA Repair enzyme production

= low or no DNA repair abilities

Chronic stress results in production of a stress hormone called cortisol. Cortisol suppresses DNA Repair.

Long term stress and/or sedentary life style can become problematic by themselves and in combination with one another.

To "get cancer", the following ---has to--- happen very early on in the process that follows initial damage to DNA that precedes cancer cell growth and spread.....

1 --- Cell must lose ability to repair damaged DNA

2 --- cell must lose ability to commit suicide once damaged DNA is detected

3 --- normal functioning immune system must lose ability to kill cancer cells at a rate that exceeds cancer cell production

4 --- this situation must persist for years or decades

"Anything and everything we need to know about cancer, we know it."

Bharat Aggarwal PhD. [MD Anderson Cancer Center] Lecture at the University Of Texas at Austin....March 3, 2011

".....too many doctors and patients are making decisions without the benefit of latest research....."

President Barack Obama...Speech to the American Medical Association [June 15, 2009]

Knockout:

Interviews with Doctors Who Are Curing Cancer --And How To Prevent Getting It in the First Place

by Suzanne Somers

<http://search.barnesandnoble.com/Knockout/Suzanne-Somers/e/9780307587466>

Immuno-therapy-----

“A total of 43 T cell infusions were administered to 10 patients with metastatic melanoma.”

“All 10 patients presented with stage IV disease. Only after failing conventional therapy (as documented by disease progression) did pa proceed to adoptive T cell therapy.”

“We demonstrate that the adoptively transferred T cell clones persist in vivo in response to low-dose IL-2, preferentially localize to 1 sites and mediate an antigen-specific immune response characterized by the elimination of antigen-positive tumor cells, regressi individual metastases, and minor, mixed or stable responses in 8 of 10 patients with refractory, metastatic disease for up to 21 months.”

“Although some clinical responses have been observed in vaccine trials, the magnitude of the induced T cell response has been generall or undetectable and has correlated poorly with clinical responses.”

“In contrast to vaccination strategies, adoptive therapy strategies can overcome the in vivo constraints that influence the magnitud avidity of the targeted response.”

“All patients in this study had, at the time of the first T cell infusion, progressive metastatic disease refractory to conventional the Adoptive T cell therapy resulted in disease stabilization in 5 of 10 patients.....and minor or mixed responses in an additional 3 patient periods up to 21 months.”

“Historically, patients presenting with advanced melanoma failing conventional therapy experience continued progressive disease median survival duration of 4 months or less.”

“Although the number of patients in this study is small, the outcomes suggest a favorable progression-free duration.”

“In this study, the in vivo persistence of transferred CD8+ CTLs was prolonged by low-dose IL-2.”

C.Yee, J.A.Thompson, D.Byrd, S. R. Riddell, P. Roche E.Celis, P.D.Greenberg
Adoptive T cell Therapy Using Antigen-Specific CD8+ T cell Clones For The Treatment Of Patients With Metastatic Melanoma: In Persistence, Migration, And Antitumor Effect Of Transferred T cells
Proceedings of the National Academy of Sciences of the United States of America.....Volume 99 #25.....December 10, 2002.....
16168 - 16173

Immuno-Nutrition...&...Natural Chemo-therapy-----

“....most anti-cancer drugs have several toxic side-effects that may produce a poor quality of life for patients and considerable cost in supportive care.”

“Green tea and other diet-derived compounds, such as curcumin, phyto-estrogens, and carotenoids, offer several advantages as anti-cancer products, because these compounds are non-toxic, produce few side-effects, are widely available, and are cheap.”

R.Beliveau, D. Gingras
Green Tea: Prevention And Treatment Of Cancer By Nutraceuticals

The Lancet....Volume 364....September 18, 2004....page 1021 - 1022

"Early delivery of immuno-nutrition [pre-operatively in surgical patients with cancer] might be particularly beneficial."

"the most popular formulas that have been studied.....are Impact [Novartis Nutrition, Minneapolis, Minnesota] and Immun-Aid [B Braun, Irvine, California]."

"Activated T lymphocytes.....and Natural Killer cells were increased in patients treated with immune-enhancing formula compared to control formula"

"The importance of the duration, quantity, and timing of immuno-nutrition is similarly emphasized in 2 large studies....."

"In general, the greatest flaw in most of the published trials has been underfeeding."

K.C. McCowen, et al

Innuno-nutrition: Problematic Or Problem Solving?

American Journal of Clinical Nutrition.....Volume 77....2003.....page 764 - 770

"Inadequate intake of several vitamins has been linked to chronic diseases, including coronary heart disease, cancer, and osteo-porosis."

K.M.Fairfield, et al

Vitamins For Chronic Disease Prevention In Adults

Journal Of The American Medical Association.....Volume 287 #23.....June 19, 2002

"....selenium..."

".....lower intakes....experimental studies suggest that they might contribute to reduced immune function, increased cancer incidence, and increased susceptibility to viral disease."

"Selenium supplements augmented the cellular immune response.....an earlier peak T cell proliferation, and an increase in T helper cells."

C. S. Broome, et.al

An Increase In Selenium Intake Improves Immune Function And Poliovirus Handling In Adults With Marginal Selenium Status

American Journal Of Clinical Nutrition.....2004.....Volume 80....page 154

"Zinc deficiency was associated with increased tumor size, overall stage of cancer and increased unplanned hospitalizations."

"It has been obsevered that radiation and chemotherapy are better tolerated by cancer patients and may be even more effective in nutritionally adequate individuals. It is previously reported that pretreatment correction of nutritional deficiencies improved operative morbidity in patients with gastrointestinal malignancies."

A.S. Prasad

Nutritional And Zinc Status Of Head And Neck Cancer Patients: An Interpretive Review

Journal Of The American College Of Nutrition.....Volume 17 #5.....1998.....page 409

"alpha-tocopherol succinate was the most effective form of vitamin E.....in inducing.....inhibition of proliferation and apoptosis in cancer cells. During the last two decades, several studies have confirmed this observation in.....human cells."

K.N.Prasad, et.al

Alpha-Tocopheryl Succinate, The Most Effective Form Of Vitamin E For Adjuvant Cancer Treatment: A Review

Journal Of The American College Of Nutrition.....Volume 22 #2.....2003.....page 108

Tamoxifen....."breast cancer prevention drug" -----

Tamoxifen is a drug that blocks receptors for estrogen which are located on cells in the breast. Estrogen acts as a growth promoter in cancer cells in the breast, thus by blocking estrogen receptors on these cells, estrogen is not able to have its growth promoting effects in breast cancer cells. Sounds like a great idea, but lets consider the obvious. If tamoxifen keeps estrogen off cells in the breast, where does the

estrogen go? It has to go somewhere, it doesn't just disappear. It goes to the ovaries....as in ovarian cancer. Women who take tamoxifen, some point, end up with an enhanced ability to develop ovarian cancer.

"The National Institutes Of Health has added steroidal estrogens and oral contraceptives to its list of known human carcinogens."

B. Vastag

Some Estrogens Carcinogenic

Journal Of The American Medical Association.....Volume 289 #3.....January 15 2003.....page 290

"Hormone-replacement therapy places a woman in double jeopardy in terms of breast cancer. First, such therapy increases breast density many women and can lead to impaired sensitivity of mammographic screening. Second, long-term hormone-replacement therapy increases the risk of breast cancer."

D.Thurfjell

Breast Density And The Risk Of Breast Cancer

New England Journal Of Medicine.....Volume 347 #12.....September 19, 2002.....page 866

"Estrogen plus progestin does not confer cardiac protection and may increase the risk of Coronary Heart Disease among generally healthy postmenopausal women, especially during the first year after the initiation of hormone use."

J.E.Manson, et al

Estrogen Plus Progestin And The Risk Of Coronary Heart Disease

New England Journal Of Medicine.....Volume 349 #6.....August 7, 2003.....page 523

".....data from the Women's Health Initiative, in conjunction with data from several other trials.....suggest that hormone therapy may even increase cardiovascular risk."

D.M.Herrington, et al

From Presumed Benefit To Potential Harm ---- Hormone Therapy And Heart Disease

New England Journal Of Medicine.....Volume 349 #6.....August 7, 2003.....page 519

"Relatively short-term combined estrogen plus progestin use increases incident breast cancers, which are diagnosed at a more advanced stage compared with placebo use, and also substantially increases the percentage of women with abnormal mammograms. These results suggest that estrogen plus progestin may stimulate breast cancer growth and hinder breast cancer diagnosis."

R.T.Chlebowski, et.al

Influence Of Estrogen Plus Progestin On Breast Cancer And Mammography In Healthy Postmenopausal Women

Journal Of The American Medical Association.....Volume 289 #24.....June 25, 2003.....page 3243

"These data suggest that use of combined estrogen and progestin hormone replacement therapy is associated with an increased risk of breast cancer.....whether the progestin component was taken in a sequential or in a continuous manner."

C.I.Li, et.al

Relationship Between Long Durations And Different Regimens Of Hormone Therapy And Risk Of Breast Cancer

Journal Of The American Medical Association.....Volume 289 #24.....June 25, 2003.....page 3254

"Current Use Of Hormone Replacement Therapy is associated with an increased risk of incident and fatal breast cancer, the effect substantially greater for estrogen-progestagen combinations..."

V.Beral

Breast Cancer And Hormone-Replacement Therapy In The Million Women Study

Journal Of The American Medical Association.....Volume 290 #13.....October 1, 2003.....page 1685

Tamoxifen

To be a good doctor one has to --first-- be a good physiologist.

Tamoxifen blocks estrogen receptors.

The advocates of tamoxifen need to ask themselves where does the estrogen go.

Its an anabolic steroid. It doesn't just disappear, it has to go somewhere. If you block it from binding to one tissue, it has to go to another.

What tissue might that be.

The uterus and ovaries, which is why studies published from 2000 onward on tamoxifen have shown a doubling in ovarian cancer and endometrial cancer.

A study reported on the evening news, funded in part by a drug company that makes tamoxifen, did not report on what happens to the ovaries or uterus....and did report only a 3% reduction in breast cancer. The study was funded in part by AstraZeneca, a company that over the past decade has paid our government nearly \$1 Billion in fines for various felonies related to marketing or research issues.....and the study was presented at a cancer conference --not-- a medical journal [The Lancet hasn't yet published the study], and the bottom line is that....."In absolute terms, continuing on tamoxifen kept three additional women out of every 100 from dying of breast cancer within five to 14 years from when their disease was diagnosed."

That, placed up against over a decade of non-drug company funded researchers and research.....

"Tamoxifen is a candidate drug for prevention of breast cancer, although findings from trials have not been consistent. In our extended follow-up [median 81.2 months] of the Italian Tamoxifen Trial, this drug did not significantly protect against breast cancer in women at usual or slightly reduced risk of the disease. Use of hormone replacement therapy increased risk of breast cancer, and users of such treatment who were randomly allocated to tamoxifen had a rate of breast cancer that was close to that of never-users. So far, no woman has died from breast cancer in this study. Decisions about introduction of tamoxifen to reduce risk of breast cancer remain important and open questions."

U.Veronesi, et al

Tamoxifen for breast cancer among hysterectomised women

The Lancet....Volume 359 #9312.....March 30, 2002.....page 1122 - 1124

"Adjuvant hormonal therapy reduces this risk, but preliminary data indicate that it may also increase risk of hormone receptor-negative contralateral tumors."

"Compared with women not treated with hormonal therapy, users of adjuvant tamoxifen for >or = 5 years had a reduced risk of estrogen receptor positive contralateral breast cancer but a 4.4-fold increased risk of estrogen receptor negative contralateral breast cancer."

"This is of clinical concern given the poorer prognosis of estrogen receptor negative compared with estrogen receptor positive tumors."

C.L. Li, et al

Adjuvant hormonal therapy for breast cancer and risk of hormone receptor-specific subtypes of contralateral breast cancer

Cancer Research....Volume 69 #17....September 2009.....page 6865 - 6870

AstraZeneca Pleads Guilty In Cancer Medicine Scheme

[New York Times....June 21, 2003....by Melody Petersen]

"AstraZeneca, the large pharmaceutical company, pleaded guilty today to a felony charge of health care fraud and agreed to pay \$355 million to settle criminal and civil accusations that it engaged in a nationwide scheme to illegally market a prostate cancer drug."

"The government said the company's employees had given illegal financial inducements to as many as 400 doctors across the country to persuade them to prescribe the drug, Zoladex."

We know how to reduce estrogen levels without tamoxifen or any other drug, methods that carry greater efficacy and zero downside relative to tamoxifen and any other drugs.

We know how to reduce recurrence of breast cancer without tamoxifen or any other drug, methods that carry greater efficacy and zero downside relative to tamoxifen and any other drugs.

None involve causing a....."4.4-fold increased risk of estrogen receptor negative contralateral breast cancer".

"In our extended follow-up of the Italian Tamoxifen Trial, this drug did not significantly protect against breast cancer in women at usual or slightly reduced risk of the disease. Use of hormone replacement therapy increased the risk of breast cancer,....."

U.Veronesi, et. al.

Tamoxifen For Breast Cancer Among Hysterectomised Women

The Lancet.....Volume 359 #9312.....March 30, 2002.....page 1122 - 1124

"The effects of tamoxifen are complex: the drug is an antagonist and an agonist. The agonist properties may be beneficial (protection of bone mass in postmenopausal women), but can result in adverse events such as endometrial cancer and increased risk of thrombotic events. But there is troubling evidence that in some cases changes in control mechanisms allow tamoxifen to become an agonist in breast cancer cells, which can become tamoxifen-dependent and show tamoxifen-stimulated growth."

P. Ravdin

Aromatase Inhibitors For The Endocrine Adjuvant Treatment Of Breast Cancer

The Lancet.....Volume 359 #9324.....June 22, 2002.....Pages 2126-2127

Don't Use drugs...Caffeine & Alcohol....are.....Drugs -----

Immune suppression can be caused by stress (high cortisol and/or adrenalin levels) and/or long term intake of drugs (stimulants such as caffeine, or depressants such as alcohol).

"Sobriety....can't open the gates of heaven to let you in. But it can open the gates of hell to let you out."

There are 180,000 new cases of prostate cancer diagnosed each year. It is believed that around 75% (yes...75%) of men in the United States may get prostate cancer at some point in their lives.

Effects Of Caffeine -----

Caffeine is an extremely powerful stimulant that has receptors for it on all major cells of the body. Immune cells have beta adrenergic receptors on their cell surface. Activation of the receptors leads to production of a substance called cAMP [cyclic adenosine monophosphate] which is a signal that inhibits the function and activity of immune system cells. It can reduce their ability to adhere to other cells, such as tumor cells, a necessary ability if they are to destroy cancer.

Caffeine & Immune System Function -----

Caffeine contributes to cancer and heart disease by decreasing the number and working capacity of immune cells. It increases production of the stress hormone called cortisol [250mg can elevate cortisol for 12 hours] which in turn can downregulate production and function of natural killer cells which are one of the major tumor killers. It decreases immune cell production of TNF-alpha [Tumor Necrosis Factor-alpha], a substance immune cells use to destroy cancer cells. Caffeine decreases production of IL-1 [interleukin-1], the primary substance produced by nerve and immune system cells that activate other immune system cells. Caffeine may contribute to or exacerbate conditions such as arthritis and asthma. It decreases production of IL-10 [interleukin-10], the substance produced by command and control immune cells allowing them to regulate immune function by being able to "turn-off" other immune cells.....a function that is lost in the "auto-immune diseases" such as arthritis and asthma, where IL-10 levels are low, and immune cell attack on joint and lung tissues goes on uncontrollably.

Caffeine & Cancer -----

When oxidants attack and damage the DNA of a cell, the cell's DNA repair functions are activated. If this repair function fails, the cell can commit cell suicide. If this function fails, the cell will replicate using damaged DNA [a damaged set of instructions of how to build more cells], thus creating cancer cells. Caffeine inhibits DNA-repair. It does this by inhibiting a delay at various checkpoints where DNA damage is detected during the cell replication process.

Caffeine & Brain Cell Aging & Death -----

Caffeine accelerates the aging process within the brain. Caffeine causes blood vessel constriction within the brain, which can potentially decrease oxygen delivery to brain cells, leading to brain cell damage and cell death, the mechanisms of accelerated aging. Caffeine causes the inhibition of SOD-1 [superoxide dismutase], the brain cell anti-oxidant. This increases oxidant induced damage of brain cells, leading to cell death, thus accelerated aging.

Caffeine & Brain Cell Function -----

Caffeine is the most widely consumed psycho-trophic drug. Caffeine can decrease the conversion of the precursor [tryptophan] of the major neurotransmitter called serotonin. This can lead to any of the various so-called "mental illnesses" that involve lowered serotonin production. Chronic caffeine consumption causes a down regulation [decrease] of beta-receptors on brain cells in similar manner as antidepressant drugs used in psychiatry.

Caffeine & Pregnancy -----

Consumption of only 300mg [1 – 2 cups of coffee] per day before or during pregnancy is sufficient to cause a dramatic increase in the incidence of spontaneous abortion. This level of consumption can also cause low birth weight infants by retarding the growth of the infant within the uterus. This happens by way of caffeine causing constriction of the blood vessels in the placenta that brings nutrients and oxygen from the mother to the developing fetus. Caffeine interferes with cell division and metabolism within the fetus. It also crosses the placenta and enters the gonads of the fetus [testicles, or ovaries] where it interferes with anabolic [growth promoting] hormone production, effectively reducing growth and development processes.

Psychological Issues of Selfworth, Esteem, & Value --vs-- Sociological Norms of Our Society -----

The hypnosis of social conditioning which takes place at early ages leads to extreme levels of collective denial later in life. Depending on where you are at any given time of day, the thing you are likely to be offered more often than a handshake, is a cup of coffee. We formally and legally recognize cigarettes as a "nicotine delivery system", however we do not consider coffee to be a "caffeine delivery system", and many people consume those beverages inspite of the taste, rather than because of it. Some coffee, beer, and soft drink producers have increased the levels of caffeine in their products just as the tobacco industry increased the level of nicotine in their cigarettes. We'll never see anyone in congress asking a coffee producer the question, "do you believe that your product is addictive"? We'll never see a congressional hearing on television, where the producers of coffee, etc are all at a table with their right hands raised, stating that their product is not addictive, and that they have not manipulated any of the ingredients. We set a legal age for people to reach before they can consume a beer, but we gladly serve those same people a cup of coffee containing a drug we already know to be as addictive as most illegal drugs. There are people who will refuse to eat a Hostess Twinkie or a few cookies for health reasons, but will gladly chug down several cups of coffee. The contradictions run deep in our society. A drug, is a drug, is a drug. Caffeine, alcohol, nicotine, heroine, cocaine....people play many games with this belief system. Americans die in highly painful, medically expensive, and emotionally costly ways. Approximately 40% of "all" deaths each year in the United States are due to Heart Disease. 25% are due to cancer. Thus nearly 65% of all deaths in our country, are caused by diseases one must basically give to oneself.

"You can narcoticize your body, you can distract your brain, but one day your body will produce its bill." --- [Alice Miller]

"Consumption of coffee and caffeine was associated with increased risk for ovarian cancer....."

"We conclude that coffee and caffeine consumption may increase risk for ovarian cancer...."

H.Kuper, I Titus-Ernstoff, B.L.Harlow, D.W.Cramer
Population Based Study Of Coffee, Alcohol And Tobacco Use And Risk Of Ovarian Cancer.
International Journal of Cancer.....Volume 88 #2.....October 15, 2000.....page 313-318

"Acute caffeine administration increases cortisol....."

M.A. Lee, et al.....April 1988
Chronic Caffeine Consumption And The Dexamethasone Suppression Test In Depression
Psychiatry Research.....Volume 24 #1.....April 1988.....page 61 - 65

".....caffeine use during periods of increased occupational stress may enhance the cumulative stress response."

G.A.Pincomb, et al.....1987
Caffeine Enhances The Physiological Response To Occupational Stress In Medical Students.
Health Psychology.....Volume 6 #2.....1987.....page 101 – 112

".....this study supports the hypothesis that cumulative exposure to cortisol over the life span may contribute to age-related loss of neurons in the hippocampus, and that prolonged stress or exposure to cortisol accelerates this process."

The Journal Of Neuroscience.....Volume 5 #5.....May 1995.....page 1222

"Caffeine is consumed daily by an estimated 85% of adults in the United States....."

".....caffeine can raise plasma levels of the major stress hormones, including.....cortisol."

The stimulatory effects of caffeine are similar to the physiological responses that are associated with the experience of stress, and the experimental evidence suggests that caffeine itself might act like a stressor when coffee and caffeinated beverages are consumed in everyday life."

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"These results suggest that caffeine consumption may exaggerate the deleterious effects of stress in daily life and aggravate the damage to health that stress can cause."

J.D.Lane, et. al.

Caffeine Affects Cardiovascular And Neuroendocrine Activation At Work And Home
Psychosomatic Medicine.....Volume 64.....2002.....page 595 - 603

".....the importance of caffeine in inducing migraine attacks and thwarting treatment efforts. Variations in caffeine levels, which are inevitable in persons with substantial intake of caffeine, often induce withdrawal or rebound migraine headaches. The elimination of dietary caffeine frequently results in much greater responsiveness to treatment or even makes long-term pharmacologic intervention unnecessary."

A.Werner

Treatment Of Migraine

New England Journal Of Medicine.....Volume 347 #10...September 5, 2002.....page 764

Effects Of Alcohol -----

Alcohol consumption causes cancer and heart disease. Following consumption of alcohol, it is broken down into acetaldehyde, a highly toxic compound. Acetaldehyde is alcohol, minus ... hydrogen. Acetaldehyde (AA) is generally broken down further into acetate by an enzyme called acetaldehyde dehydrogenase. Unfortunately, when presentation of alcohol exceeds quantities and rate of function of the acetaldehyde dehydrogenase enzyme, significant amounts of AA will not get broken down. AA causes an alteration of cell membranes that result in serious injury to cells. AA has cancer and heart disease promoting effects. AA causes depletion of the antioxidant called Glutathione. This antioxidant functions inside our cells to protect our DNA from damage by "oxidants". Antioxidants are able to take up "oxidants", to prevent them from causing harm to our cells and/or cell DNA. AA prevents this function by inactivating the enzyme called methionine synthase, an enzyme necessary for the production of glutathione.

AA inhibits the function of enzymes inside the nucleus of cells in the body that repair damage to our DNA. These DNA repair enzymes are generally referred to as "tumor suppressors", because they can stop the production of tumor cells (cancer), and repair the damage/mutations in our DNA that create those cells. AA inhibits the function of these DNA repair enzymes, thus facilitating tumor growth. AA suppresses Tumor Necrosis Factor (TNF) alpha production by immune system cells called "Natural Killers". TNF-alpha is a substance that tells tumor cells to commit suicide, thus allowing our immune system cells to kill cancer cells. AA's suppression of TNF-alpha production facilitates cancer cell growth. Alcohol consumption leads to relatively high levels AA in the colon as compared to other tissues. Approximately 136,000 new cases of colon cancer are diagnosed each year.

In cancer cells, the production of an enzyme called cyclooxygenase-2 is increased substantially. The enzyme causes production of substances that stimulate blood vessel formation around the tumor, thus contributing to growth of the tumor. The enzyme is inhibited by substances called Retinoids that are produced from vitamin A or beta carotene (retinol). Retinoic acid causes dose-dependent inhibition in growth and increase in cell suicide of breast cancer, leukemia, and Epstein-Barr. AA inhibits production of retinoic acid from retinol (vitamin A or beta carotene).

Alcohol increases estrogen production substantially (as much as 300%), allowing estrogen to act as a growth promoter of cancer cells in women's breasts.

AA destroys folate, a B vitamin necessary to convert an amino acid called "homocysteine" into methionine, and onward to the antioxidant glutathione. The subsequent accumulation of homocysteine induces the production of oxidants that will attack blood vessel walls as well as LDL, the carrier of cholesterol. This results in clogging of the arteries and blood vessel degeneration (heart disease).

"The association of alcohol consumption with increased risk of breast cancer has been a consistent finding in a majority of epidemiologic studies during the past 2 decades."

"Increased estrogen and androgen levels in women consuming alcohol appear to be important mechanisms underlying association."

K.W. Singletary, S.M. Gagstur

Alcohol And Breast Cancer

Journal Of The American Medical Association.....Volume 286 #17.....November 7, 2001.....page 2143

"The present findings regarding female sex steroids may be of relevance in the association between moderate to heavy alcohol consumption and the development of breast cancer."

T.Sarkola, H.Makisalo, T.Fukunaga, CJ.Eriksson

Acute Effect Of Alcohol On Estradiol, Estrone, Progesterone, Prolactin, Cortisol, And Luteinizing Hormone In Premenopausal Women
Alcoholism: Clinical & Experimental Research.....Volume 23 #6.....June 1999.....page 976 - 982

".....findings on MRI of the brain are associated with poorer cognitive and neurological function among older adults. We sought determine how alcohol consumption is related to these findings."

"As part of the Cardiovascular Health Study, 3660 adults aged 65 years and older underwent MRI of the brain from 1992 to 1994."

"We assessed self-reported intake of beer, wine, and liquor at the annual clinic visit closest to the date of the MRI....."

"Moderate alcohol consumption is associated with.....a dose-dependent higher prevalence of brain atrophy on MRI among older adults."

K.J. Mukamal, et.al.....September 2001

Alcohol Consumption And Subclinical Findings On Magnetic Resonance Imaging Of The Brain In Older Adults: The Cardiovascular Health Study

Stroke.....Volume 32 #9.....September 2001.....page 1939 - 1946

"Patients treated with human pituitary growth hormone had significantly raised risks of mortality from cancer overall, colorectal cancer, at Hodgkin's disease. Incidence of colorectal cancer was also greatly raised."

A.J.Swerdlow, C.D.Higgins, P.Adlard, M.A.Preece
The Lancet.....Volume 360 #9329....July 27, 2002.....Page 273-277

Cell Phones & Cancer -----

All of the network nightly news reported [Tuesday Dec.19, 2000] about studies that conclude that cell phones don't cause cancer [an eve that was repeated in April, 2005]. Checking people over the course of a couple years to see if they have brain tumors, probably isn't the most effective study one can do. Looking at the mechanism of cancer cell production is probably a little wiser way to go about it.

Cancer occurs when the DNA strands of a cell are broken or damaged. The level of electro-magnetic waves produced by cell phones cause breaks in the DNA strands in human cells. There is a 100% chance of this if the amount of time of exposure to the waves is whatever amount is necessary to cause the breaks. With some phones it can take 20 minutes, others, a few hours.

There are over 1000 studies on this. This part of the issue is no longer open to opinion or debate.

When the broken DNA is used by the cell as a blueprint or set of instructions on how to replicate itself, the cell will produce a broken cell that does not work properly. We call a clump of these broken cells a tumor. All cells have a DNA Repair process, that can stop replication and allow time for repair of the breaks in the DNA strands. However, about 60-70% of our population does not exercise or eat in ways that yields "normal" cellular function. Their DNA repair ability is insufficient to keep up with the rate of DNA strand breaks. Thus they can get tumors.

Our immune system cells can destroy tumor cells.

However, about 60-70% of our population does not exercise or keep their stress levels low enough to allow "normal" immune cell function. Their cancer cell production will exceed the rate of cancer cell destruction by the immune system. Thus their tumors will grow to a sufficient size to be diagnosed as a "brain tumor".

These are the people who, at some point in time --- will --- "get" cancer.

There is a 100% chance of this. The physics of the electro-magnetic waves and the laws of nature that govern human cell function make this issue.....no longer open to opinion or debate.

"The truth will either set you free, or make you mad." --- Donald Whitaker M.D.

"Oxidative stress in brain is emerging as a potential causal factor in aging and age-related neurodegenerative disorders."

"To the extent that the animal models faithfully mirror their respective disorders, and based on the totality of the studies, it is apparent that oxidative stress, the excess of free radicals over the means of scavenging these harmful agents, may play critical roles in the molecular basis of accelerated aging, Alzheimer's disease, and Huntington's disease."

D.A. Butterfield, B.J. Howard, M.A. LaFontaine.....June 2001

Brain Oxidative Stress In Animal Models Of Accelerated Aging And The Age-Related Neurodegenerative Disorders, Alzheimer's Disease And Huntington's Disease

Current Medicinal Chemistry.....Volume 8 #7.....June 2001.....page 815 - 828

"Glutamate neurotoxicity has been implicated in stroke,.....multiple sclerosis and neurodegenerative diseases."

"Gliomas are the most common tumors on the central nervous system."

"Glioblastoma.....is a highly malignant almost uniformly fatal brain tumor. It is based on the cancerous transformation of astrocytes.....cells that are abundant in the brain that send out fine process encircling neurons."

"Gliomas release glutamate....."

"....the more glutamate tumors release, the larger the tumor mass."

J.D. Rothstein, H Grem

Excitotoxic Destruction Facilitates Brain Tumor Growth

Nature Medicine.....Volume 7 #9.....September 2001....page 994

"Women with extracapsular silicone (silicone gel outside of the fibrous scar that forms around breast implants) were more likely to report having fibromyalgia or other connective tissue disease....."

"These data suggest an association between extracapsular silicone from ruptured silicone breast implants and Fibromyalgia."

S.L.Brown, et.al.

Silicone Breast Implant Rupture, Extracellular Silicone, And Health Status In A Population Of Women

Journal Of Rheumatology.....Volume 28.....2001.....page 996 - 1003

"The risk of implant rupture increases with implant age. A minimum of 15% of modern implants can be expected to rupture between the third and tenth year after implantation."

L.Holmich

Incidence Of Silicone Breast Implant Rupture

Journal Of The American Medical Association.....Volume 290 #16.....October 22/29, 2003.....page 2104

Vitamin D is a major player in the function of the immune system. Generally speaking, having low levels tends to lead to out of control immune cells attacking some part of the body that you'd prefer to be left alone. Called a "vitamin", it is a hormone that regulates lots of stuff in the body, the immune system being one of them.

As Americans, our excessive use of sun screens is creating problems, since sun light causes the skin to produce vitamin D.

The study shown below focuses on its role in Multiple Sclerosis, which is a situation where out of control immune system cells attack the nervous system, gradually killing off your cells along your nerve fibers, reducing and/or destroying nerve function.

The study was published in 2006, so a lot has been learned since then. The question is no longer "can low vitamin D levels lead to something bad". The answer is yes. The question now is, how come some people get MS, while others get rheumatoid arthritis, while yet others get some other immune system related malady.

Like all issues related to problems involving immune system function, there is a chronic stress component to these issues that go along with and/or lead to the nutrient deficiency issues that may exacerbate a problem.

Vitamin D supplements should be in the form of D3 [ie. vitamin D3].

Journal Of The American Medical Association.....Volume 296 #23....December 20, 2006

K.L.Munger, et al

Serum 25-Hydroxyvitamin D Levels and Risk Of Multiple Sclerosis

"Epidemiological and experimental evidence suggests that high levels of vitamin D, a potent immunomodulator, may decrease the risk of multiple sclerosis."

"....the risk of multiple sclerosis significantly decreased with increasing levels of 25-hydroxyvitamin D...."

"The results of our study suggest that high circulating levels of vitamin D are associated with a lower risk of multiple sclerosis."

"Prevailing thought is that MS is an autoimmune disorder whereby an unknown agent or agents triggers a T cell-mediated inflammatory attack, causing demyelination of central nervous system tissue. A striking feature of the global distribution of MS is a multifold increase in incidence with increasing latitude, both north and south of the equator."

".....the change in MS risk with migration among people of common ancestry strongly supports a role for environmental factors. One potential factor may be vitamin D, a potent immunomodulator that in its hormonal form can prevent experimental autoimmune encephalomyelitis (EAE), an animal model of MS."

"Because food provides little vitamin D, the major source for most people is through skin exposure to sunlight. At latitudes of 42° or more (eg, Boston, Mass), in winter most UV-B radiation is absorbed by the atmosphere, and even prolonged sun exposure is insufficient to generate vitamin D. As a result, seasonal vitamin D deficiency is common."

"A protective effect of vitamin D on MS is supported by the reduced MS risk associated with sun exposure and use of vitamin D supplements...."

"In this large prospective study, we found that the risk of MS decreased with increasing serum levels of 25-hydroxyvitamin D."

"Although this association was not seen among blacks, their smaller sample size and substantially lower 25-hydroxyvitamin D levels may have reduced the power to detect an association in this group."

"Our results converge with a growing body of evidence supporting a protective role for vitamin D in MS development."

"Of interest, regulatory T cells have been shown to be suppressed in individuals with MS."

"If sufficient 1,25-dihydroxyvitamin D is produced, it may exert paracrine effects on surrounding T lymphocytes, thereby regulating the tissue-specific immune responses. Some support for this hypothesis comes from recent experiments showing that mice fed diets high in vitamin D had significantly fewer clinical and pathological signs of EAE than mice fed a vitamin D-deficient diet. Central nervous system levels of 1,25-dihydroxyvitamin D, but not blood levels, were higher in supplemented mice than in vitamin D-deficient mice and correlated inversely with disease severity."

"....our previous finding of a lower MS risk among women taking vitamin D supplements supports a specific role for vitamin D."

"These results suggest that vitamin D levels earlier in life may be critical in conferring protection for MS and our finding of a strong protective effect of 25-hydroxyvitamin D levels of 100 nmol/L or higher before age 20 years supports this view. Vitamin D supplementation in infancy seems to exert a strong protective effect against the autoimmune disease type 1 diabetes, and vitamin D levels in early childhood could also have an impact on the risk of MS. Although there are no data on vitamin D levels earlier in life and risk of MS, the strong inverse association between MS risk and 25-hydroxyvitamin D levels at ages 16 to 19 years suggests that levels in late adolescence are likely to be important."

"Almost half of white and two thirds of black adults in the United States have 25-hydroxyvitamin D levels below 70 nmol/L.²⁸ Although levels above 25 nmol/L have traditionally been considered normal and almost everyone in this study had measurements above this level, much higher levels may be required for bone mineralization and prevention of fractures. According to a recent review, the best serum 25-hydroxyvitamin D concentrations are between 90 and 100 nmol/L. Adolescents have somewhat higher levels than adults, but few have levels higher than that associated with a reduced risk of MS in our study. If the association reported here reflects a true protective effect of vitamin D, increasing the vitamin D levels of adolescents and young adults could result in an important reduction in MS incidence."

"Such an increase could be achieved by using vitamin D supplements. Although the current Institute of Medicine adequate intake of vitamin D is 200 U/d for adults younger than 50 years, and the highest dose that is considered safe is 2000 U/d, adverse effects have been reported only at intakes several-fold higher."

They told you you're "Cancer free" Are you sure???

When taking the traditional medicine route, diagnoses skills and knowledge tend to be far ahead of treatment skills and knowledge.

Also worth paying attention to what happens after tissue or lump is removed. Especially if a post surgery biopsy shows the cells were benign. You'll observe that the conversation ends there.

No discussion about how did these cells fail to kill themselves the way they're supposed to when cell growth goes awry. Why didn't the immune system kill them off the way it's supposed to. What can be done to help cellular function so that cell suicide occurs the way its supposed to if there is a "next time". What can be done to help the immune system prevent a "next time".

Note how the sentence always ends with....."good news, the cells were benign and not cancerous, see ya and have a good life".

There usually is a "next time". Mainly because the "this time" didn't get fully addressed. That's why the conversation should not end after the good news is delivered. That should mark the beginning of the conversation, not the end.

If the tissue or lump wasn't benign, the Q & A had better begin immediately after the words....."I think we got it all, see ya and have a good life".

Mammography Controversy

Thermal imaging and digital mammography emerging as helpful in the early diagnoses of breast cancer. They help to side step the controversy over regular mammograms. They do fail though, to resolve the controversy over what treatment to pursue when small cells are detected. Those cells may or may not become something to be concerned about anytime soon, thus chopping off the breast or going invasive to remove tissue could be unnecessary.

Highlights the importance of making choices founded on information and reason rather than out of fear. Can also provide space and time to engage evidence based, research based supplements, mind-body medicine, and lifestyle changes for both treatment and prevention of the further growth of those cells.

Adding to fear are the limited options and choices offered by the standard oncologist. Not because that's all that's available but because that's all the oncologist knows about or practices. Something that often goes unmentioned to the patient.

Buyer beware.

What's wrong with chemotherapy.....

Alan Nixon, former president of the American Chemical Society

".....it is incomprehensible to me that physicians can ignore the clear evidence that chemotherapy does much, much more harm than good."

Ralph Moss, former assistant director of public affairs at the Memorial Sloan-Kettering Cancer Center

"In the end, there is no proof that chemotherapy actually extends life in the vast majority of cases, and this is the great lie about chemotherapy, that somehow there is a correlation between shrinking a tumor and extending the life of a patient."

Alan Levin, University of California Medical School

"Most cancer patients in this country die of chemotherapy. Chemotherapy does not eliminate breast, colon or lung cancers. This fact has been documented for over a decade. Yet doctors still use chemotherapy for these tumors.....Women with breast cancer are likely to die faster with chemo than without it."

Eulogy for Glenn Warner, MD [Townsend Letter for Doctors and Patients]

January 2001 by Patrick McGrady

"He used biological response such as the interferons and interleukins and vaccines early on, too. So early on that a powerful clique at the University of Washington condemned immunotherapy as nonsense and set out to disenfranchise him by prodding the then State Medical Disciplinary Board (now the oxymoronic Medical Quality Assurance Commission [MQAC]) to remove his license."

"The estimated 1,400 surviving cancer patients at the time of his disenfranchisement in 1996 testified to the success of his holistic approach."

"He sensed that there was more to improving the lot of the cancer patient than by killing cancer cells. He sensed that beyond those cells was a human being who needed help with his or her stresses, who could benefit from religion, Eastern meditation, immune system stimulation, proper nutrition, exercise, and a positive attitude."

What's wrong with chemotherapy.....

"It is now clear that damage to the organ systems of children caused by chemotherapy and radiation therapy may not become clinically evident for many years."

"....cohort study that tracks the health status of adults who received a diagnosis of childhood cancer between 1970 and 1986 and compares the results with those of siblings."

"Among 10,397 survivors, 62.3% had at least one chronic condition; 27.5% had a severe or life-threatening condition"

"Among survivors, the cumulative incidence of a chronic health condition reached 73.4% 30 years after the cancer diagnosis, with a cumulative incidence of 42.4% for severe, disabling, or life-threatening conditions or death..."

K.C. Oeffinger, et al
Chronic Health Conditions in Adult Survivors of Childhood Cancer
New England Journal Of Medicine....Volume 355 #15.....October 12, 2006.....page 1572-1582

"Breast cancer drug trials supported by pharmaceutical companies tend to be simplistically designed and produce more favorable results than do publicly funded trials..."

Nature Medicine.....Volume 13 #4.....April 2007.....page 394 - 395...[News In Brief]

"We examined the effect of physician reimbursement on chemotherapy treatment of Medicare beneficiaries over age 65 with metastatic lung, breast, colorectal, or... other gastrointestinal cancers between 1995 and 1998 (9357 patients)."

"Providers who were more generously reimbursed, however, prescribed more expensive chemotherapy regimens to metastatic breast, colorectal and lung cancer patients."

M.Jacobson
Does Reimbursement Influence Chemotherapy Treatment for Cancer Patients?

What's wrong with chemotherapy.....

"...the 5-year relative survival of childhood cancer survivors (diagnosed before age 15 years) increased from 58% in 1975 to 82% in 2000."

"But one group has not experienced a steady increase in 5-year survival rates during the past several decades: cancer patients diagnosed as older adolescents or young adults. "The survival today is worse if you're diagnosed between 15 and 40 than if you're younger or older than that," said Archie Bleyer, MD, of the St Charles Medical Center, in Bend, Ore. In fact, since the 1960s, there has been a decline in 5-year survival for these individuals."

"a 26-institution cohort study led by Kevin Oeffinger, MD, of the University of Texas Southwestern Medical Center, in Dallas, found that compared with a healthy sibling, an individual treated for cancer in the 1970s or 1980s was four times more likely to have a moderate, severe, life-threatening, disabling, or fatal health problem today."

"The work builds on research indicating that cancer survivors are significantly more likely to report adverse general health, mental health, activity limitations, and functional impairment compared with siblings."

"Oeffinger's latest data, from 10 397 adults who had been diagnosed with pediatric cancer and 3034 of their healthy siblings, show that radiation or chemotherapy can cause moderate health problems, including lung scarring, congestive heart failure, blood clots, cirrhosis of the liver, and ovarian or testicular failure. Severe problems include second cancers, heart disease, and paralysis of an arm or leg."

"By age 45 years, 57.1% of the survivors and 18.2% of the siblings reported moderate health problems and 37% of survivors and 4.6% of siblings reported severe problems."

"....66% of survivors will have some type of physical health condition by the time they're 30 years post their cancer diagnosis," said Oeffinger."

"radiation-induced second cancers are the leading cause of death in long-term survivors (Boice. J Natl Cancer Inst. 1993;85:4-5; Mauch et al. Cancer J Sci Am. 1995;1:33)."

"....many cancer survivors struggle with financial and employment issues."

"A retrospective analysis of 12 709 patients diagnosed with one of seven types of cancer looked at costs (including deductibles and copayments) for patients and their caregivers."

"mean monthly costs ranged from \$2187 for prostate cancer to \$7616 for pancreatic cancer (Chang et al. J Clin Oncol. 2004;22:3524-3530)."

. T. Hampton

Cancer Treatment's Trade-off: Years of Added Life Can Have Long-term Costs

Journal of The American Medical Association.....Volume 294 #2....July 13, 2005..... page 167-168.

My people perish
from a lack of
knowledge

Emotionalization of disease

Pink ribbons, Yellow wrist bands

Raising awareness, fund raising rather than reversing and curing disease

August 12, 2014.....The American Prospect

by Paul Waldman

Any time you see a campaign about "raising awareness," it probably means next to nothing is actually being accomplished.

With regard to some diseases, "raising awareness" has almost become an entire industry.

Not only are there charlatans who use it to scam people, there are also a lot of efforts that use up people's time and money and accomplish nothing more than creating a self-sustaining cycle: We have to raise money to raise awareness so we can keep raising money and raising awareness.

data from Avon Products Foundation

[Avon Walk for Breast Cancer]

2013.....

-- raised \$40 million

-- of that \$40 million.....\$20 million went to breast cancer

-- of that \$20 million.....37% went to scientific research

-- of that 37%.....??? went to clinical trials

At \$14 million, their costs are about double the amount given to "research".

American Institute of Philanthropy.....

"It is not as common, however, for a corporation to be intertwined with a charity to the degree that Avon is with its related foundation. This type of relationship can prove problematic in situations where the best interests of a charity and its related for-profit company conflict."

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"Every great cause begins as a movement. Becomes a business. And eventually degenerates into a racket."

[Eric Hoffer]

".....too much is spent on awareness campaigns, walks, races, rallies at the expense of research."

"Breast cancer has made a lot of people very wealthy. The fact is, thousands of people earn a handsome living extending their proverbial pink tin cups, baiting their benefactors with the promise of a cure...."

"Though breast cancer researchers and advocates perpetually plead for more money, the disease is, in fact, awash in it."

"All told, an estimated \$6 billion is raised every year in the name of breast cancer. And the money keeps pouring in."

[Marie Claire, Sept 14, 2011....The Big Business Of Breast Cancer]

"Any time you see a campaign about 'raising awareness' it probably means next to nothing is actually being accomplished. With regard to some diseases, "raising awareness" has almost become an entire industry. Not only are there charlatans who use it to scam people, there are also a lot of efforts that use up people's time and money and accomplish nothing more than creating a self-sustaining cycle: We have to raise money to raise awareness so we can keep raising money and raising awareness."

Paul Waldman [The American Prospect, August 12, 2014]

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"The Susan G. Komen for the Cure charity defines its mission as finding a cure for breast cancer.....it has cut by nearly half the proportion of fund-raising dollars it spends on grants to scientists....."

".....it has not kept pace with the surge in donations Komen has received, a Reuters analysis of the group's financial statements shows."

"What they're best at is awareness, which you could also call publicity," she said. "Getting out the word that breast cancer exists is what they excel at - that and raising money. But if your mantra is 'end breast cancer,' screening isn't going to do it."

Sharon Begley, Janet Roberts [Reuters, February 8 2012]

".....Komen is part of a larger breast cancer culture that emphasizes optics over integrity, crass commercialism and the infantilization of the female experience into something fashionable, cheerful or sexy."

[by Gale Sulik, The Emperor Has No Clothes, KomenWatch.....February 20, 2012]

"....we estimated that breast cancer was overdiagnosed [i.e., tumors were detected on screening that would never have led to clinical symptoms] in 1.3 million U.S. women in the past 30 years."-----"We estimated that in 2008, breast cancer was overdiagnosed in more than 70,000 women; this accounted for 31% of all breast cancers diagnosed."

A.Bleyer, et al

Effect of Three Decades of Screening Mammography on Breast-Cancer Incidence

New England Journal of Medicine.....Volume 367 #21....November 22, 2012....page 1998 - 2005]

About the "Race For The Cure"

Prior to the start of these races, someone from the Komen Foundation usually gives a brief speech. The entirety of what follows below is what I would like one of them to say to the people gathered for this race.....

"Following this morning's race, we will be changing the name of the race. Starting tomorrow the new name will be.....The Race To Read & Apply Cancer Research."

"We have several reasons for changing the name of the race. The main ones are that we only put about 25% of the money we raise toward researching a cure for cancer, so the current name of our race has mislead thousands of our participants over the years. Though we put about 25% of the money we raise toward researching a cure for cancer, only a small fraction of the work that's done and published in reputable research journals either gets read or applied. Thus we want to call attention to that. We want our pink ribbons to become a symbol that raises awareness of the existence of billions of dollars of cancer research that has already been completed and published and is waiting to be applied by practitioners of traditional medicine."

"We have recently become aware that ---a cure--- for cancer won't look like a pill, but instead, will look like a step by step protocol of moving the patient through a series of behavioral, nutritional, and immune-therapies that sufficiently alter the status and function of the patient's immune system and nervous system."

"A large number of previously "terminal" cancer patients saved their own lives through stumbling upon a haphazard mix of self-care modalities that reversed the course of their disease and put them into what Traditional Medicine refers to as 'Spontaneous Remission'."

"Our goal in changing the name of our race is to have our pink ribbons raise awareness of the existing research on these modalities in hopes that no patient will ever again have to go it alone, haphazardly stumbling upon these therapies by experimentation or by accident."

Be careful with that which you believe

--- "Risk factors" --- "raise awareness" --- "we don't know the cause" --- "there is no cure" --- "false hope". Words and phrases that have become clichés in human health we should all despise in this day and age. The phrase "we don't know the cause" would be more accurately stated if the word "we" was removed from the sentence and the person making the statement were to use a more restrictive term.



TheETG Exercise Program

Begin this exercise program at where-ever your fitness level happens to be today, progress from there!

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Workout #1		Workout #2		Workout #3		

Tuesdays/Thursdays/Saturdays = walk 100 yards, jog 100 yards. Do 8 repetitions of this, walking faster and jogging faster as you go.

Workout #1 = Fast walk or run up a large hill

The distance.....1/2 mile split into uphill repetitions of 100 yards to 200 yards in length.

Where.....a very- large hill

The workout.....run or walk uphill at a pace that is fast for you. At the top of the hill, do a slow walk rest period to the bottom of the hill.

Workout #2 = Strength Day & Stretch Day

Strength Day.....start conservatively in weight you lift in each exercise.

Progress over time to working with weights you can't lift more than 6 repetitions.

For all exercises do 4 repetitions.

jump exercise.....stand on a stool, stair, bench, etc....jump down from that height to the floor, then immediately jump up in the air.

strength exercise.....do a squat [go no more than one-quarter of the way down]

strength exercise.....do a calf raise

strength exercise.....do a arm curl [hold a weight in your hand, curl it upward toward your shoulder]

strength exercise.....do one-leg jumping [lift one leg off the ground, then jump up.....or jump onto a small box, stair,etc]

strength exercise.....do a pull-up [go up as far as you can. Over time as you get stronger, go up further until you can get all the way up.

strength exercise.....do a wall handstand [push-up in a hand-stand position]

[put your back to a wall, put your hands on the floor and walk your feet up the wall, then do a push-ups. Over time as you get stronger, walk your feet further up the wall. When you can go close to vertical, turn around facing the wall, use the wall as a backstop and do a pushup in the full hand-stand position]

Stretch Day

pictures of the stretches.....see the next page

Hold each stretch.....for 4 minutes

The stretches.....hip flexor muscles, hamstrings muscles, calf muscles

Workout #3 = Fast walk or run on a track

The distance.....1 mile split into 4 repetitions of 1/4 mile [400 meters], 1 lap of the track in length.

Where.....on a track [perhaps at a high school or middle school track in your area]

The workout.....walk or run at a pace that is fast for you. Take lots of rest in between each.

Optional Supplement Exercises a couple days each week

1 ---- Repetitive motion exercise for the neck

-- start with your head in a level position

-- motion = tilt the head back to look straight up at the ceiling, then return to being level

-- do 20 repetitions of that tilting your head back to look at the ceiling

2 ---- Retraction of shoulder girdle

-- start with your arms straight and out in front of you, elbows locked

-- motion = pull your shoulders back, then return

-- do 20 repetitions of that pulling your shoulders back

3 ---- Floor press-ups

-- start with laying face down on the floor, hands under your shoulders like a "push-up" position

-- motion = push --only-- your chest off the floor, then return to the ground

-- do 20 repetitions of that pushing your chest off the floor

So called "performance enhancing drugs" are prescription drugs.

Some examples of the effectiveness of prescription drugs in sport.....

"The drug erythropoietin, often called EPO.....a new systemic review of existing research reveals that there is no scientific evidence that it does enhance performance, but there is evidence that using it in sport could place a user's health and life at risk."
EPO [erythropoietin] doping in elite cycling: No evidence of benefit, but risk of harm
Science Daily.....December 5, 2012.

"....there is no scientific basis from which to conclude that rHuEPO has performance-enhancing properties in elite cyclists. ""The use of rHuEPO in cycling is rife but scientifically unsupported by evidence, and its use in sports is medical malpractice."
J.A.Heuberger, et al
Erythropoietin doping in cycling: lack of evidence for efficacy and a negative risk-benefit.
British Journal Of Clinical Pharmacology.....Volume 75 #6....June 2013...page 1406

"The over-exaggeration of the effects of growth hormone in muscle building is effectively promoting its abuse...."
"....there is the question of disinformation on rhGH....Part of this problem may, paradoxically, derive from the anti-doping authorities themselves. By ignoring the evidence the rhGH does not work in normal healthy subjects, the athletic establishment could be accused of effectively promoting its use."
"We must tell athletes the truth: growth hormone does not 'work' or at least not as they think it does and that its is associated with all kinds of immediate and long term hazards----everything from decreased performance to cancer."
"....none of us scientists, doctors, coaches, or sports bodies should continue to suggest that this dangerous doping practice works."
M.J. Rennie
British Journal Of Sports Medicine.....Volume 37 #2....April 2003...pages 100-103

"**Testosterone prohormones** such as androstenedione, androstanediol, and dehydroepiandrosterone (DHEA) have been heavily marketed as testosterone-enhancing and muscle-building nutritional supplements for the past decade."
"Contrary to marketing claims, research to date indicates that the use of prohormone nutritional supplements (DHEA, androstenedione, androstanediol, and other steroid hormone supplements) does not produce either anabolic or ergogenic effects in men. Moreover, the use of prohormone nutritional supplements may raise the risk for negative health consequences."
G.A.Brown, et al
Testosterone Prohormone Supplements.
Medicine & Science in Sports & Exercise.....Volume 38 #8....August 2006.....pg 1367-1537

So called "performance enhancing drugs" are prescription drugs.

Some examples of the effectiveness of prescription drugs in American medicine & health care.....

"Most drugs are only effective for a small percentage of people who take them."
Michael Leavitt [U.S. Secretary of Health & Human Services 2005 - 2009]

".....the benefits that US health care currently deliver may not outweigh the aggregate health harm it imparts."
Journal Of The American Medical Association.....Volume 302 #1..July 1, 2009...page 89 - 91

"It is estimated that more than 700,000 individuals are seen in hospital emergency departments for adverse drug events each year in the United States."
[Centers For Disease Control....2015]

"106,000 deaths/year from non-error, adverse effects of medications"
B. Starfield
Is US Health Really the Best in the World
Journal of The American Medical Association.....Volume 284 #4....July 26, 2000....page 483 - 485

".....1.5 million U.S. residents are harmed or killed each year because of medication errors, according to an Institute of Medicine report."
Nature Medicine.....Volume 12 #9....September 2006.....pg 984 - 985....News In Brief

Pursue becoming a

Master Of
Sport