Mammograms – Are They Worth It?

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American women are bombarded with dire warnings that they must get mammogram s for early cancer screening. Some suggestions are to start as early as age 40 and, by age 50, most women should be getting one each year. Other women may have multiple mammograms per year recommended to them by their doctor. For instance, one woman was told to get mammograms 4 times every year because she had a bad case of fibrous cysts in her breasts that her doctor was monitoring.

But there is a controversial debate about the safety of mammograms that has been going on for many years. Mammograms are basically x-rays to the breast involving ionizing radiation. (Nuclear bombs also emit ionizing radiation.) This procedure also involves severe compression to the breast tissue each time a film is taken. Both these aspects of mammography are very dangerous.

For screening purposes, it is common for a woman to receive a total of four x-ray films taken per visit to a mammogram clinic. This involves two angles of each breast filmed, resulting in a total of four films typically taken per visit. But, if something suspicious shows up, it is not uncommon to have extra films taken for clarification, resulting in more ionizing radiation administered to the breast tissue and more physical and potentially damaging compression.

If mammography were a screening method with a high accuracy rate, then the dangers of exposure to radiation and severe tissue compression might be worth it. However, the accuracy rate of mammography as a screening tool is really quite bad, as you will see later in this article.

The simple overview is this. There are three main reasons NOT to get mammograms for early cancer screening purposes:

(1) The Radiation Reason

(2) The Compression Reason

(3) The Ineffectiveness Reason

The Radiation Reason

Most official sources on breast mammography assure women that the level of radiation administered in a mammogram procedure is perfectly safe. You will commonly read that it involves less radiation than a dental x-ray, and some sources say less than a chest x-ray. This is misleading and inaccurate information.

Looking at two different ways of measuring radiation, for example, mammograms definitely involve MORE radiation than common chest x-rays. There are numerous ways of measuring radiation. One way is to measure "rads," which reflect the amount of radiation absorbed by the tissue being targeted. You could look at this as the intensity of the radiation, so-to-speak. An average chest x-ray delivers only .00007 rads. A single mammogram film, on the other hand, delivers .1 – .2 rads. If you round these figures and say that a chest x-ray is approximately .0001 rads, and you consider that two mammogram films are usually taken of each breast (i.e., the same tissue gets radiated twice), then that means that a breast would receive about one-thousandth of a rad during a chest x-ray as opposed to about one-quarter to one-half a rad during a mammogram. Therefore, a mammogram procedure can be 250 to 500 times more intense than an x-ray. And if extra films are requested for clarification, a woman could be looking at receiving the equivalent number of rads as she would if she subjected herself to 1,000 chest x-rays each time she goes in for a mammogram!

However, rads may not always be the best way to measure the dangers of radiation. The size of body area radiated must also be taken into account. For instance, it is true that dental x-rays are particularly intense, but they only target a very small area of the body. (And much of that area involves tooth enamel, which is not as likely to develop into diseased tissue as other areas of the body.) Chest x-rays typically involve a larger body surface area than mammograms. Thus, another way to measure radiation is in terms of "mrems," or millirems. Mrems refer to the total whole-body exposure to radiation involved in any given procedure. This appears to be a more accurate way of understanding the radiation issue, and when we look at mrems, we see mammograms to involve more radiation exposure than chest x-rays. The average chest x-ray measures between 6 and 18 mrems, while the average mammogram film measures between 40 and 80 mrems. (One official source says the

average chest x-ray is 10 mrems and the average mammogram is 30 mrems, so different quotes vary.) But even given conservative estimates and taking into account that 4 mammogram films are typically taken, that means that a woman would usually receive 120 mrems when she receives mammography for screening purposes, while she would only receive about 10 mrems from a procedure to check out her lungs with a chest x-ray.

Some scientists are now reporting that there is NO safe level of radiation, and when we must deal with extra sources of radiation blowing in the wind from the Fukushima disaster as well, we are looking at higher and higher levels of radioactive substances building up in our bodies.

Plus, there are two OTHER important considerations that are usually ignored by sources claiming mammography to be safe: 1) The first ignored issue is that, next to fetal tissue, breast tissue is the most radiosensitive tissue in the body. In other words, for any adult, their breast tissue is the one part of their body that is most easily damaged by ionizing radiation. 2) The second ignored issue is that chest x-rays and dental x-rays are not usually recommended on a yearly basis ¾ whereas mammograms ARE routinely recommended annually for women over a certain age.

The damaging effects of radiation to the body are known to be cumulative over time. Thus, with women being told to get mammograms annually, one can't just look at whether the amount of radiation per mammogram procedure is safe. One must also look at what kind of damage might be caused by a build-up of radiation to the breast tissue over a 10 or 20-year period through this common screening tool. Many researchers believe that the radiation exposure from mammograms can actually CAUSE breast cancer, just as frequent chest x-rays or frequent dental x-rays may cause cancer of various types. This thesis is hard to prove in studies, but it reflects common sense and what we have known about radiation since the early 1900s. One cancer specialist, Charles B. Simone, M.D., who trained in radiation oncology and worked as an investigator for the National Cancer Institute, stated that "By some estimates one in 10,000 women screened get breast cancer as a result of mammography." And this is simply an estimate of the *average* risk. For those women who have continued to receive mammograms over many years, the risk of causing breast cancer in themselves is bound to be higher.

The Compression Reason

Another raging debate is over *how* mammograms are administered, which is a very important issue but rarely talked about. In order to get a clear picture of inner breast tissue, a technician must position the patient's breast in a vise-like device, then squeeze the breast to an almost inhuman degree. Make no mistake, the physical compression is severe. The breast is first compressed in one direction, then for the second angle, it is compressed in another direction. The main concern over this is that some medical experts believe the compression force may rupture any existing cancer cells that are contained in a localized mass, and cause some malignant cells to be released into the woman's bloodstream, thereby promoting metastatic cancer. For any woman this might happen to, it would be a disaster. A localized tumor that grows over time to where a woman can detect it through self-examination, but stays contained, is much more easily cured than a mass caught earlier but caused to spread throughout the body due to compression.

The Ineffectiveness Reason

Last but not least, mammograms are simply not very good at what they are supposed to do. They are supposed to be able to detect cancer. They are touted as the BEST early detection test available. One would think that a good early detection test might be at least 80% accurate. But mammograms are more than 80% INACURATE! First of all, they can't detect cancer at all ¾ never could and never will. They can only "suspect" it. What I mean by this is that mammograms are only able to detect dense tissue. (This is because they are just x-rays.) If an area of dense tissue is detected, the mammogram cannot indicate whether that dense tissue is a malignant mass, a benign mass, fibrous tissue, a calcium deposit, or scar tissue. Thus, the woman who gets a positive reading on her mammogram must always be sent to an oncologist for follow-up testing to determine if she actually has cancer or not. The main way an oncologist then determines if she has breast cancer or not is by an invasive and often extremely painful surgical procedure such as a needle biopsy.

Now, one might think that the above is all very acceptable that is, until one hears the actual accuracy figures. Only about 5% of all mammogram procedures done for screening purposes show up positive results. Out of those 5% positive results, about 80% are false positives! This means that about 80% of the woman sent to an oncologist for follow-up needle-biopsies find out they don't have cancer at all. They were scared to death and put through great pain for nothing. Moreover, about 10-15% of all mammograms done for screening purposes produce false negative results. (Meaning they don't find anything to suspect as cancer.) This means that about

1 in every 7 women who get a screening mammogram are told they are "clear" of anything suspicious looking in their breasts while they actually have malignant breast cancer growing inside them that the mammogram they just took couldn't see!

Given that repeated exposure to radiation may actually *cause* breast cancer in some women, and given that the severe compression may cause cancer caught early to *spread* in some women, as well as given that the detection accuracy of mammography is fairly dismal, more and more women are choosing to decline the routine yearly mammograms their doctors are recommending. Another procedure called "thermography," is becoming more and more prevalent in cities around our country, and many women are choosing to utilize that instead. Thermography is totally safe, non-invasive and appears to be much more accurate at detecting the likelihood of breast cancer than mammography is. Many sites on the Internet explain the procedure and clinics offering it can be searched for.

http://www.greenmedinfo.com/blog/confirmed-more-mammograms-you-get-more-harm-they-do

Confirmed: The More Mammograms You Get The More Harm They Do

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Written By: Sayer Ji, Founder, GreenMedInfo.com

Mammograms are in the news again, and it doesn't look good for those who continue to advocate using them to "detect cancer early" in asymptomatic populations. The science increasingly runs directly counter to the screening guidelines produced by both governmental and nongovernmental health organizations claiming to be advocates for women's health.

Remember that only last November, the *New England Journal of Medicine* published a shocking analysis of the past 30 years of breast screening in the US, finding that 1.3 million women were over-diagnosed and over-treated for breast cancer – euphemisms for **mis**diagnosed and **mis**treated.[1]

This finding, released cunningly from scientific embargo to the media on the eve of Thanksgiving, was so devastating in its implications that many either did not understand its meaning, or could not bear to accept the truth that the quarter of a century clarion call of breast cancer awareness month – *get your annual mammogram or lose your life!* – caused more unnecessary suffering, pain and harm to women than it is possible to calculate. The only calculable dimension of this world-historical failure is the billions of dollars that were made in the process of converting healthy, asymptomatic women into "patients", and, if fortunate enough to make it through treatment, "survivors".

Now, a new study published in the *Journal of the National Cancer Institute,* finds that those women who follow the American Cancer Society's guidelines for the early detection of breast cancer, namely, annual screening for women 40 or older, are not only receiving no additional protection against aggressive breast cancer, but are experiencing greater harm through increased rates of false positives and unnecessary biopsies.

Researchers examined the records of over 140,000 women ages 66 to 89 who had mammograms between 1999 and 2006. They found that women who had more frequent mammograms (every year versus every two years) **did not** have a reduced risk of being diagnosed with aggressive breast cancer, as would be expected if mammograms actually were working to "find deadly breast cancer early" as widely claimed. Even after researchers adjusted for confounding factors such as age, place of residence and race, they found no benefit to more frequent screenings.

More concerning, the researchers found that the more times women were screened the greater their odds of getting "false positives" on mammograms. As reported by the LA Times:

> For example, among women between the ages of 66 and 74 who already had health problems, **48% of those who had annual mammograms had at least one false-positive reading during a 10-year period.** But among those who were screened every other year, only 29% had a false-positive result.
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> And among women between the ages of 75 and 89 with preexisting health problems, **48.4% of those screened every year had at least one false-positive reading during a 10-year span, compared with only 27.4% of those who had less frequent tests.**"

The *LA Times* article went on to estimate that if all American women between 66 and 89 had annual mammograms instead of biannual ones, **this would result in 3.86 million more false-positives and 1.15 million more recommendations for biopsies.**

These statistics obviously do not account for how many of these over-diagnosed and over-biopsied women in this study ended up being unnecessarily treated for abnormal breast findings such as ductal carcinoma in situ, which would never have progressed to cause them harm. It does, however, show just how dangerous and inaccurate breast mammography can be.

Another "invisible" problem is the fact that the so-called "low-energy" radiation wavelengths used in breast mammography are far more carcinogenic than "high energy" waves to which they are compared. This means that x-ray mammography is planting the seeds of future radiation-induced breast cancer into millions of women, all in the name of "prevention" and "awareness."

The time has come for folks to look deeper into the true causes of cancer, as well as the research indicating that natural breast cancer solutions (many of which are empirically-confirmed) abound.

Resources

[1] GreenMedInfo.com, 30 Years of Breast Screening: 1.3 Million Wrongly Treated

Sayer Ji is the founder and director of GreenMedInfo.com and an advisory board member at the National Health Federation, an international nonprofit, consumer-education, health-freedom organization. He co-authored the book Cancer Killers: The Cause Is The Cure, and is working on another one with Tania Melkonian titled EATomology: An Edible Philosophy of Food.