



Women's Hormone Center of Northern Virginia, PC.

Donna G. Hurlock, M.D.

Gynecologist, NAMS Certified Menopause Practitioner

Letter from Dr. Hurlock to the founder of the North American Medical Society in support of breast cancer *prevention* instead of just *early detection*.

Dear Dr. Utian,

First I would like to thank you for your marvelous "Mea Culpa" editorial and also thank my friend Jim Simon for writing his tremendously witty Letter to the Editor about your editorial which was printed in the current issue. When I first read his letter I was rolling on the floor, but sad at the same time because what both of you had said was so true. The biggest crime is that the public is still not aware of the truth. God I wish you guys could get the media to print the truth sometime. I know that Jim has been trying for years.

Anyway, this letter is actually about the Breast Screening article by Dr. Quinn et al. I found a big problem with this article. Specifically once again, PREVENTION of breast cancer was shoved off to the side or to some elusive point in the imaginary future; we're certainly not going to talk about it today. "Prevention is still in the future.....Until such time that preventive measures offer reliable reduction in incidence, early detection... offers the promise..."...blah, blah, blah..." The old "early detection" routine once again surfaces. When are we ever going to approach the PREVENTION of breast cancer as adults instead of avoiding the topic like it's some dirty word or like the plague? I mean, just think about plague for a minute. Do you really think that "early detection" for plague would be adequate? How about for polio? Then why is "early detection" always considered adequate for breast cancer?

Data linking the etiology of breast cancer with multiple environmental toxins like dioxin, PCBs, DDT, DDE, etc, have been available for at least the last several decades. Greenpeace published an excellent review of the literature on this topic way back in the early 90's. In fact, all one really has to do to figure out what is likely causing breast cancer is to look at the NIH/NCI breast cancer mortality statistics for various areas in the country. You will see that most breast cancer death is concentrated in the northeastern areas of the US, particularly heavy in New Jersey (Cancer Alley), and Long Island, extending up into the paper mill states, and then wraps over to the industrial areas surrounding the Great Lakes. There is also a big pocket of breast cancer death that has just appeared in the past 25 years in Nevada, where nuclear testing was done years ago. There is also a bit of breast cancer death down in the wheat belt where ladies involved with agricultural have pesticides falling on their heads regularly. Of interest also is that the rate of breast cancer death in Alaska has skyrocketed over the past 25 years, I suspect due to the higher concentrations of toxic residues found in those delicious big salmon and Halibut that are a dietary mainstay up there. Epidemiologic data also show that women in certain professions, (chemists, farming, textiles), have higher rates of breast cancer than others. Years ago Mary Wolf, PHD in New York showed that women who have the highest concentrations of DDT in their fat tissues have a four-fold greater rate of breast cancer than those with the lowest concentrations. That makes any alleged effect of HRT on breast cancer look like a breath of fresh air.

In her new book "The Secret History of the War on Cancer", Devra Davis PhD, MPH, now the Director of the Center for Environmental Oncology at Univ. of Pittsburgh Cancer Institute, writes:

"For much of its history, the cancer war has been fighting the wrong battles, with the wrong weapons, against the wrong enemies. The campaign has targeted the disease and left off the table the things that cause it...the effort has focused on defeating the enemy by detecting, treating and curing disease. Overlooked and suppressed was any consideration of how the world in which we live and work affects whether we get cancer."

She goes on to suggest that the leadership of the war on cancer (mostly those who gain financially from either manufacturing carcinogens or from treating cancer or both), "acted to downplay research on prevention, and kept research on environmental causes from gaining wide-spread circulation or benefiting the general public."

So what else is new? Certainly Jacques Rossouw and his version of the WHI have taught us a lot about how various people's agendas can dramatically distort the truth, much to the detriment of our innocent patients.

So once again, I call on you, as our beloved and respected Executive Director of NAMS, to speak up about this pressing issue that desperately needs to be brought out into the light of scientific and public scrutiny. I would encourage you and all your readers to visit www.breastcancerfund.org and www.devradavis.org to find out just what has been hidden from the general medical community for so long. It is time to stop settling for "early detection" as Quinn's article suggests.

Donna Hurlock, MD
Alexandria, VA
Certified Menopause Practitioner
NAMS Member