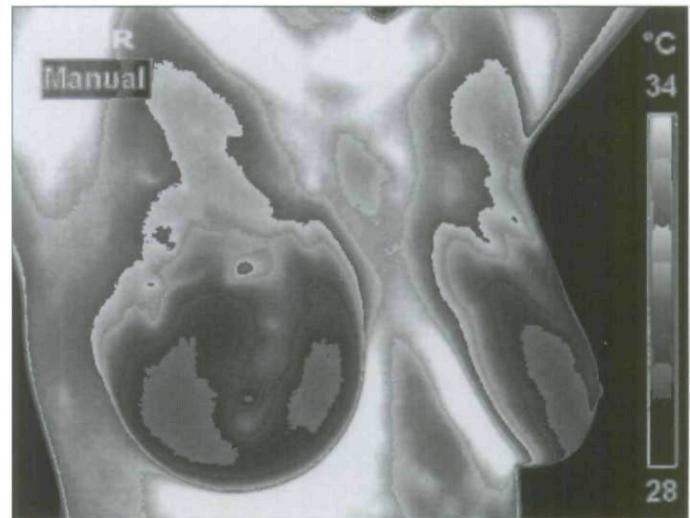


Beating Breast Cancer

by: William Hobbins, MD, FABS, DABCT, FIACT and William Amalu, DC, DABCT, DIACT, FIACT

This year, over 192,000 women will be diagnosed with breast cancer in the US, and 1.2 million worldwide (Source: American Cancer Society and WHO). As shocking as these numbers are, even worse is the number of cancers that won't be detected until it's too late. The consensus among experts is that early detection holds the key to survival. Although this is true, detection is not occurring early enough. Even though women are advised to begin having mammograms at 40, what they don't know is that by the time most cancers are detected they have been growing for 10 years, and that 20% of all cancers can't be seen by a mammogram. It is because of these factors, and others, that the number of women who die from this disease has gone relatively unchanged in the past 40 years.

If a significant change in breast cancer mortality is to be realized, we have to rethink what screening tests truly are. Are we currently providing "screening" or "detection"? A critical look at what we are providing women must be made. A change from sole dependence upon procedures that only provide detection of existing cancers to technologies that reflect the early cancerous process itself would provide women with true screening. If there were a method of very early detection, a procedure that would act as an early warning system, women

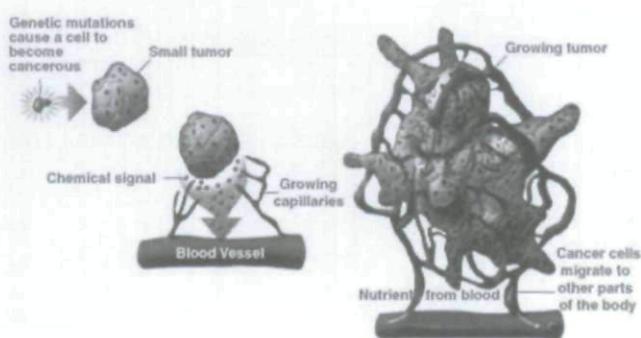


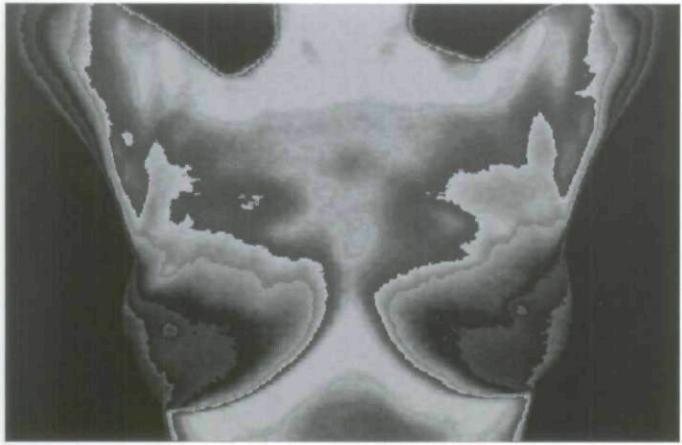
would have the fighting chance they need to win this battle. What is needed is a biological risk marker. A biological risk marker would be able to turn these grave statistics around, as aggressive tissues would be detected before they were able to invade the rest of the body. Women now have access to a unique technology that can give them this early warning; a procedure called Breast Thermography.

Breast thermography is an imaging technology that uses advanced computerized infrared camera systems to detect heat patterns in the breast. When a cancer is forming, it develops its own blood supply in order to feed its accelerated growth (a process known as malignant angiogenesis). Even more important, pre-cancerous tissues can start this process well in advance of the cells becoming malignant. This increased blood supply causes an abnormal heat pattern in the breast. Thermography can detect this abnormal heat pattern by scanning the breasts with a specialized infrared camera and analyzing the information using sophisticated computer programs under the guidance of a doctor who is board certified in the procedure. These abnormal heat patterns are among the earliest known signs of a forming cancer.

An unprecedented level of early detection can be realized when thermography is added to a woman's regular breast health care. It has been found that an abnormal thermographic image is the single most important sign of high risk for developing breast cancer, 10 times more significant than a first order family history of the disease. Studies show that this technology has the ability to warn a woman that a cancer may be forming up to 10 years before any other test can detect it. This gives breast thermography not only the ability to detect cancer at its earliest and most treatable stage, but to also act as a bio-

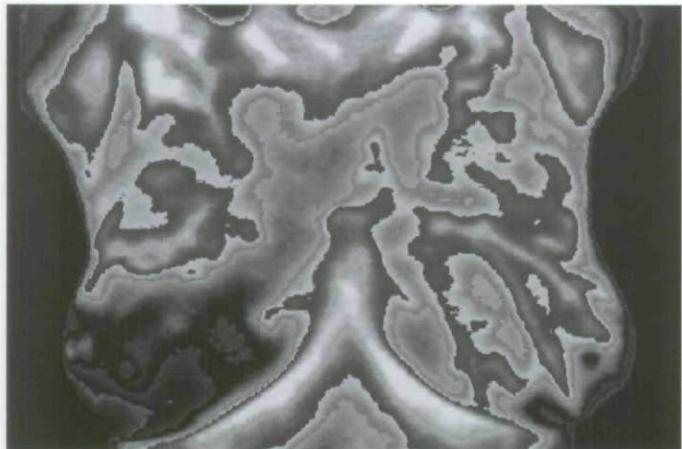
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logical marker, warning a woman about her own unique level of future risk for breast cancer.

Women who undergo the test find it to be fairly uneventful, since the procedure uses no radiation or contact with the breasts. Women with dense breasts, implants, and women who are pregnant or nursing can be imaged without any harm or reduction in the accuracy of the test. Normal images, like the one seen above, show evenly cool inactive breasts (dark colors represent cold areas). Abnormal images, as seen below, show highly active

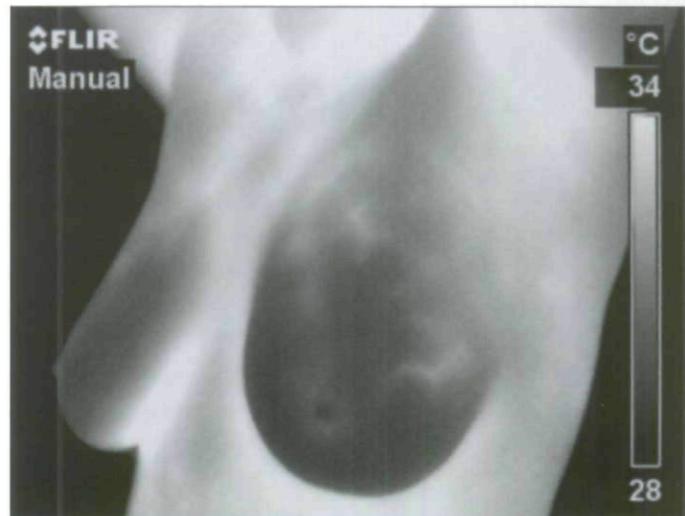


blood vessels giving off heat in one breast. Since the procedure does not pose any harm to the patient, women who are at higher risk can be monitored closely without adverse effects on their health.

Another benefit of this technology is its role in primary breast cancer prevention. Breast thermography has the added ability to observe the influence of hormones on the breasts. Research has determined that the single greatest risk factor for the future development of breast cancer is lifetime exposure of the breasts to estrogen. In which case, controlling the influence of estrogen on the breasts would be the single greatest method of primary breast cancer prevention. When hormone activity in the

breast is dominated by estrogen, a specific type of infrared image is produced; thus, warning the patient of this condition. Once this is identified, a woman can take a significant pro-active role in prevention. With this information in hand, many doctors start their patients on a regimen of progesterone cream applied directly to the breasts. The progesterone enters the breast tissue and counteracts the effects of estrogen. Using follow up infrared imaging, the treatment can be monitored and changed if necessary to meet the needs of each woman's own unique physiology. Once the hormone balance has been restored to the breasts, a woman's overall breast cancer risk is greatly reduced. The lifesaving implication of having this knowledge is incredible.

With the incidence of breast cancer steadily rising in women under 40, an effort to provide some form of accurate screening test is needed in this age group. Very early detection is especially important since breast cancers in younger women are commonly more aggressive resulting in lower survival rates. Current screening procedures have proven to be inaccurate in women in this age group due to breast tissue density and other factors.



These issues, however, do not affect thermography. With this technology, women under 40 now have a safe and objective screening method that they can add to their regular breast health check ups.

Breast thermography is a high-tech non-invasive screening procedure designed to be used by women of all ages. The technology has been thoroughly researched for over 30 years and is FDA approved for use in breast cancer screening. Its unique ability to play a significant role in prevention is an impressive added benefit. Unfortunately, at this time there are too few qualified clinical thermography centers worldwide. However, with the increasing demand for breast thermography, recognized educational organizations, such as the International

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Academy of Clinical Thermology, are actively seeking personnel for training as certified technicians. It is their goal to provide women with greater access to this life-saving technology.

Currently, no single screening procedure can detect 100% of all breast cancers. Thermography is designed to be used with mammography and not as a replacement. Studies show that when thermography is added to a woman's regular breast health check ups (physical examination + mammography + thermography), 95% of all early stage cancers will be detected. This would give the vast majority of women who are diagnosed with this disease the reality of returning to a normal healthy life.

Should we continue to concentrate our efforts on procedures that can only detect an existing cancer, or should we be focusing on true screening methods that can warn of a pending problem far in advance? The number of women who die from this disease will continue relatively unchanged if nothing is done to provide them with a true early warning system. Breast thermography has the unique ability to warn most women far enough in advance to give them a fighting chance. Combined with its ability to play a role in primary prevention, the life-saving implications are incredible. The addition of this technology to every woman's breast health care will make the greatest impact on breast cancer mortality. With breast thermography, women of all ages are given hope and a true early detection edge in the battle against breast cancer.

About the authors:

William Hobbins, MD, a Fellow of the American Board of Surgeons and a board certified clinical thermologist, has been performing thermographic breast imaging for over 35 years. As an internationally recognized authority in this field, he has sat on multiple medical and thermographic boards, authored numerous articles, and has contributed a significant amount of research to the medical database using this technology. He currently practices in Madison, Wisconsin, and can be contacted at 608-273-4274.

William Amalu, DC, a Fellow of the International Academy of Clinical Thermology and a board certified clinical thermologist, has utilized thermography in practice for over 18 years. He is currently the President of the International Academy of Clinical Thermology and practices in Redwood City, California. He can be contacted at 650-361-8908 (www.breastthermography.com). ♦

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PRACTICE

March 27-29, 2009

St. Louis Airport Marriott
See Page 30 for Details

The advertisement features a large, stylized graphic of the Gateway Arch in St. Louis, Missouri, set against a dark background. The arch is depicted in a light color, creating a strong visual contrast. The text "DABCI GETAWAY WEEKEND" is positioned at the top right in a bold, white, sans-serif font. Below it, the subtitle "MARKETING & MANAGING A DIAGNOSTIC PRACTICE" is centered in a smaller, italicized, white serif font. At the bottom, the dates "March 27-29, 2009" are displayed in a white serif font. Further down, the location "St. Louis Airport Marriott" is mentioned, followed by the instruction "See Page 30 for Details".

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