BREAST CANCER OPTIONS, INC. 101 Hurley Avenue Suite 10 Kingston, NY 12401



Changes and choices YOU can make little by little, bit by bit, day by day, to create a healthier environment, bolster your immune system and reduce the risk of breast cancer.

Healthy Lifestyles

2017 Calendar

by Breast Cancer Options

A not-for-profit organization dedicated to supplying information, support and advocacy.

The Ray W. Moody, M.D. Breast Center Has Moved

Now located Inside the new Outpatient Building, on the campus of Orange Regional Medical Center at 707 East Main Street in Middletown, the Ray W. Moody, M.D. Breast Center offers:

- 3D Mammography The only type of mammography utilized by the Breast Center.
- Breast Cancer Patient Navigator
- Breast Ultrasound
- Breast MRI and Breast MRI Biopsy
- Stereotactic Vacuum-assisted Breast Blopsy
- Ultrasound-guided Vacuum-assisted Core Blopsy
- Ductograms

The Ray W. Moody, M.D. Breast Center was designated by the American College of Radiology (ACR) as a Breast Imaging Center of Excellence and Is fully accredited in mammography, stereotactic breast blopsy, breast ultrasound and ultrasound-guided breast biopsy.

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member of the Greater Hudson Valley Health System

LIVING THE PRECAUTIONARY PRINCIPLE Better Safe Than Sorry

Why is the Precautionary Principle important?

There are 85,000 registered synthetic chemicals in the environment. Few have been tested for safety. Combinations of these chemicals have not been tested at all. Precaution is overdue.

Some facts you should remember: Un-studied or understudied chemicals are used in everything from preservatives in our personal care products to flame retardants in our household furnishings, from plasticizers in our water bottles to pesticides on our fruit and vegetables, from household cleaning products to children's toys. In addition, we are constantly exposed to electro-magnetic radiation from cell phones, computers and other devices.

The average American carries at least 116 chemicals in his or her body, yet next to nothing is known about the lifetime effects of this burden. Only 5-10% of breast cancers are due to hereditary factors and only 25-40% are due to hereditary plus other known risk factors. Reasons for the remainder are unclear but are likely due to preventable factors that should be studied.

On average, every 2 minutes a woman is diagnosed with breast cancer and 1 woman will die of breast cancer every 13 minutes

We Need More Attention to Prevention & Risk Reduction: Breast cancer research focuses mostly on better treatments and the hope of an ultimate cure with relatively little directed toward risk reduction and primary prevention. Less than 10% of the money raised for breast cancer goes toward studying primary prevention or the role of cancer-causing chemicals in the environment. After decades of pink ribbons and becoming hyper-aware of breast cancer, we haven't learned that we can't eradicate it by shopping. No amount of money thrown at research is going to stop the epidemic of breast cancer if we don't address the harms from known and suspected toxic environmental exposures and genetic factors.

The development of cancer involves the interplay of genetic and environmental influences. The International Agency for Research on Cancer has linked more than 400 chemicals to increased cancer risk.

We cannot wait for proof of toxicity to protect ourselves from diseases caused by chemical exposures and other environmental pollutants. We must take actions as individuals and as a society to prevent harm to human health and the environment before it happens. Many lives could have been saved if more people had taken the precautionary approach to smoking during the fifty years or more between the time of first suspicions that smoking was linked to incidence and deaths from lung cancer and when it was proven.

Women worry more about breast cancer than any other disease. Everyone either has had the disease, fears she'll get it, or knows someone who has it.



There is a possibility that environmental estrogens might play a role in diseases such as cancers of the breast, uterus and ovaries; uterine fibroids and endometriosis

Additional concerns: Some scientists believe that Electro-Magnetic Radiation(EMR) fits the definition of an endocrine disruptor better than many hormone mimicking environmental pollutants because magnetic fields from cordless or cell phones, digital clocks, CD/radio players, computers and televisions act on and through our hormones leading to increased estrogen levels and reduced levels of testosterone and melatonin.

There is progress. Many states now prohibit the use of certain toxic chemicals in children's products. While it is hoped these actions are indicators of a focus on comprehensive environmental protection policies, they also serve to highlight the exposure and vulnerability to toxicities that we live with daily.

HOW TO INTRODUCE THE PRECAUTIONARY PRINCIPLE INTO DAILY LIVING:

- Become an informed consumer. Look around your environment. Learn how to read
 product labels and don't purchase a product that contains chemicals or ingredients that
 can harm you or your family;
- Select alternatives least harmful to the environment and human health; be particularly vigilant with products for children including toys, food and clothing.
- Place the burden of proof on proponents of an activity rather than on victims or
 potential victims of the activity and work toward goals that protect health and the
 environment
- Part of lowering your risk means being responsible for your health and your health choices: eating a good diet, learning how to deal with stress; integrating exercise into your life, identifying environmental risk factors and advocating for what you believe.

We need to do everything we can NOW to eliminate the chance that our daughters and their daughters will ever get breast cancer.

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LOWERING CANCER RISK AND THE RISK OF RECURRENCE

Every woman wants to know what she can do to lower her risk of breast cancer or breast cancer recurrence. Some of the factors associated with breast cancer - being a woman, age, and genetics, for example - can't be changed. Other factors, which fuel inflammation, - being overweight, lack of exercise, smoking cigarettes, eating unhealthy food and maintaining harmful environmental exposures - can be changed by making healthier choices. These choices can lower your cancer risk and the risk of recurrence. It is thought that up to 70% of all cancers might be prevented if we made healthier choices.

CONTROLLING INFLAMMATION: Chronic inflammation underlies cancer development, and promotion. Chronic, low-grade systemic inflammation – fed by excessive belly fat, poor diet, lack of exercise, disrupted hormones, smoking, and gum disease – may explain why lifestyle-linked diseases have reached epidemic levels in Western countries, while remaining rare in the developing world.

INFLAMMATION CONTRIBUTORS

Physical & Mental Stressors: While acute inflammation is a part of a healthy defense response, chronic inflammation can lead to cancer; and diabetes; as well as cardiovascular, pulmonary, and neurological diseases. The immune system is designed to handle many physical stressors but It is not clear how the immune system reacts to the accumulation of certain other physical stressors — poor nutrition, lack of sleep, stress, food allergies, postural and joint misalignment and foreign substances. When faced with a lot of different stressors the intricately tuned immune system can get caught in a stress hormone-inflammation loop.

Sleep Deprivation: Lack of sleep increases inflammation in the body. Sleep is a time for the body to recover and repair both mentally and physically. Studies indicate that this time period is critical for biochemical balance in substances like GH and cortisol.

Excess Weight: Biochemical imbalances have also been linked to inflammation caused especially by excess visceral abdominal fat. Excessive visceral abdominal fat produces a cortisol response, which tells the body to store fat; this begins a never-ending feedback loop. Elevated cortisol from stress increases insulin and creates abdominal fat. It turns up the production of hormones and pro-inflammatory cytokines (small proteins) and is linked to a number of diseases like heart disease and cancer.

COOLING DOWN INFLAMMATION: The best ways to fight chronic inflammation is to create an active lifestyle with increased exercise, adequate sleep and good nutrition.

Diet: Eat a balanced, whole foods diet high in vegetables, fruits, fresh fish and nuts to get antioxidants and omega-3 fatty acids which help control inflammation.

Stress: It's important to pay attention to decreasing stress. Exercise and meditation reduce stress which reduces inflammation. By making small changes every day, you can create a large impact on fighting chronic inflammation

INSULIN RESISTANCE and BREAST CANCER: Poor metabolic health is associated with increased breast cancer risk and progression in postmenopausal women. Insulin is the hormone that removes sugar from the blood and stores it as energy.

When tissues become resistant to the action of insulin – which occurs often in obese people – a balancing mechanism further increases insulin production leading to hyperinsulinemia-a chronic condition. Such high insulin levels are detrimental to the body because insulin regulates sugar metabolism and has functions such as stimulating cell proliferation and survival.

High fasting insulin levels doubled the risk of breast cancer, both for overweight and normal-weight women. Women who were overweight and insulin-resistant had an 84% greater risk than overweight women who weren't insulin-resistant. After menopause, unhealthy insulin levels may predict breast cancer risk even more than excess weight.

Insulin resistance syndrome can be caused by: eating too many refined carbohydrates; not getting enough sleep; inactivity; weight gain; stress; genetics; exposure to environmental toxins. It may be reversible through adopting a healthy lifestyle. Common symptoms are abdominal obesity, hypertension, high blood sugar, and high blood pressure.

REVERSING INSULIN RESISTANCE:

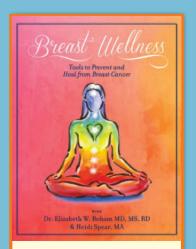
Overnight Fasting: A recent JAMA study showed that breast cancer survivors, who reported consistently not eating for 13 hours or more (overnight), had a 36% lower risk of having a breast cancer recurrence and 21% lower risk of dying from their breast cancer.

Lower Stress: Stress plays a dramatic role in blood sugar imbalances. It triggers insulin resistance, promotes weight gain around the middle, increases inflammation, and ultimately can cause diabetes.

Dlet: A magnesium-rich, high-fiber diet has been shown to improve insulin sensitivity. Foods high in healthy essential fatty acids (EFA) can also help insulin resistance. EFA are found in tuna, salmon, and other cold-water fish; eggs, avocado, and flaxseed; fish oil supplements.

Strength exercise: The more muscle you have, the more sensitive it will be to insulin. 60 minutes of exercise per day increases insulin sensitivity 24%. Herbs & spices: Cinnamon reduces blood sugar levels in type 2 diabetics by improving the ability to respond to insulin. Ginger supplementation improves glycemic indices. Tumeric activates glucose uptake.

845-339-HOPE www.BreastCancerOptions.org hope@BreastCancerOptions.org



In this DVD, Dr. Elizabeth
Boham and Heidi Spear
take you on a journey to
prevent and heal from
breast cancer using a
functional medicine
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DIET: WHAT TO EAT AND WHY

Studies point to the importance of a healthy diet combined with exercise for cancer risk reduction. What you eat—and don't eat—can have a powerful effect on your health, including your risk of cancer. Without knowing it, you may be eating foods that fuel cancer, while neglecting the powerful foods and nutrients that can protect you. The less processed these foods are—the less they've been cooked, peeled, mixed with other ingredients, stripped of their nutrients, or otherwise altered from the way they came out of the ground-the better. Different foods may interact with specific genes to increase or decrease the risk of common diseases such as type 2 diabetes, obesity, heart disease, stroke and

Eat a Plant-based Diet: Fruits, vegetables, whole grains and legumes (beans and peas) provide fiber that breaks down more slowly in your system. Choosing whole foods and complex carbohydrates instead of refined foods improves blood sugar levels, digestion, and decreases the risk of diabetes, heart disease and cancer. Whole foods contain vitamins, minerals antioxidants and enzymes. Refined foods, like white flour and white sugar lack these nutrients, and studies suggest that these simple carbohydrates may increase cancer risk by increasing glucose and insulin levels. High insulin levels have been linked to a higher incidence of certain cancers as well as diabetes and heart disease.

A nice visual reminder is to aim for a plate of food that is filled at least twothirds with vegetables, beans, fruit and whole grains. Dairy products, fish, and meat should take up no more than a third of the plate and should be

While you don't need to go completely vegetarian, focus on adding "whole" foods, which are foods close to their original form. Try to minimize or reduce the amount of processed foods you eat. Eat an apple instead of drinking a glass of apple juice, for example. Enjoy a bowl of oatmeal with raisins instead of an oatmeal raisin cookie.

Eat Some Protein: It is helpful to eat protein with every meal. Organic is preferred because the hormones and antibiotics fed to animals accumulate in the fat. Good sources of protein are Grass fed organic meat, Organic eggs, Organic dairy, Grains + beans, Seafood. NOTE: Seafood can be high in heavy metals and toxins like PCB's. Best choices have the lowest level of mercury and can be eaten more than once a week. (Seafood selector; best & worst choices: www.oceansalive.org)

Consume Healthy Fats: Fats are the building blocks of hormones. They control the balance of inflammatory and anti-inflammatory compounds in the body. Omega 3 fats help to decrease inflammation, which decreases your risk of cancer, heart disease, diabetes, arthritis and neurological diseases. Deep sea fish, fish oils, free range/organic poultry, grass fed meats and flax seeds are high in Omega 3 fatty acids. Avoid transfatty acids and hydrogenated oils. Because pesticides and herbicides are stored in fat, use unrefined, organic oils like olive, flax, coconut and nut oils, and moderate amounts of organic butter.

Nutritional Approaches to Improving Hormone Balance

- Eat more phytoestrogens (flax, 1-2 cups of cruciferous vegetables daily)
- Eat organic foods to minimize intake of xenoestrogens, hormone, antibiotics
- Use filtered water (reverse osmosis) to eliminate xenoestrogens
- Use garlic to help with detoxification
- Consume a high-fiber diet (25-50 grams a day, including legumes, whole grains, nuts and seeds, vegetables, fruit)
- · Increase intake of omega-3 fatty acids (small, non-predatory cold-water fish: wild salmon, sardines, herring) and flax seeds
- Balance glucose metabolism through a low glycemic load, high phytonutrient index

Foods That Cause Hormonal Imbalance

- Saturated and trans fatty acids
- Refined sugars and carbohydrates
- Processed foods
- Artificial sweeteners
- Alcohol
- · Xenobiotics, antibiotics, and hormones in commercially raised livestock (meat & dairy)
- Dairy products

Why eat organic: Many pesticides and herbicides sprayed on fruits, vegetables and grains are "estrogen mimics" and can stimulate the growth of breast tumors. Organic food is grown without chemicals, hormones or antibiotics and has been found to be higher in important nutrients than foods grown in commercially fertilized, nutrient-depleted soil. Organic eggs, dairy products and meats are free of estrogen-like hormones and antibiotics fed to animals and stored in their fat.

HIGH IN PESTICIDES: Avoid these foods unless they are organic and you avoid up to 80-90% of pesticide exposure:
Strawberries, Bell peppers, Cantaloupe, Celery, Cherries,
Spinach, Green Beans, Apricots, Peaches, Apples

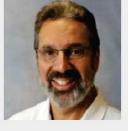
ALERT: Avoid foods high in arsenic. These include: rice; fruit juices such as apple and grape juice. Vegetables accumulate arsenic when grown in contaminated soil. Clean vegetables thoroughly. *To lower arsenic levels in rice: Rinse raw rice thoroughly before cooking, use a ratio of 6 cups water to 1 cup rice for cooking. Drain excess water. *Use grains such as quinoa, barley, couscous, grits/polenta.

845-339-HOPE www.BreastCancerOptions.org hope@BreastCancerOptions.org



Sheldon M. Feldman, MD, FACS Chief, Division of Breast Surgery

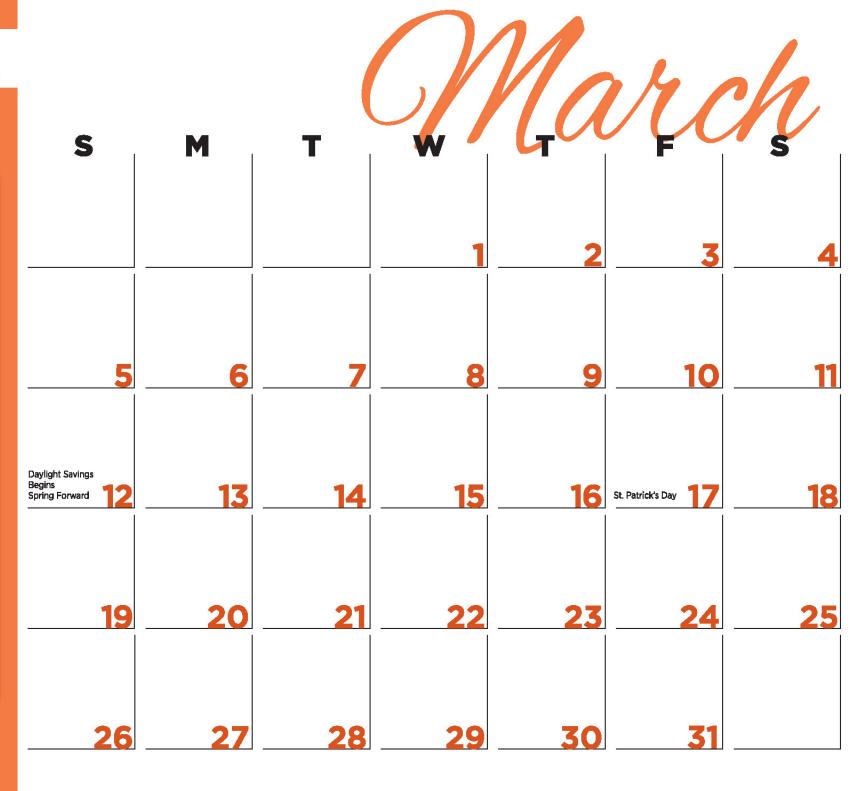
Department of Surgery Vivian L. Milstein Associate **Professor of Clinical Surgery**



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MAKING INFORMED MEDICAL DECISIONS: I've Been Diagnosed With Cancer... What Do I Do?

A breast cancer diagnosis can be confusing and frightening. Should I choose surgery or something less invasive? Is this procedure right for me? Should I watch and wait for now? What are the chances that this treatment will work for me? How will it make me feel? How will it change my life?

The treatment that is best for one person may not be what is best for another. Make your decisions based on evidence-based information. Make sure you understand your options and that all of your questions get asked and are answered. Informed people feel better about the decision process.

Making decisions can be difficult because:

- There is always more than one choice.
- Each choice has good points and bad points.
- There is no "correct" choice.
 What you choose depends on what is important to you.

Breast cancer feels urgent, but most people diagnosed with breast cancer can safely take time to: First of all...Breathe. Give yourself time and space to explore how best to proceed. It's natural to want to deal with it immediately, but breast cancer is usually not an emergency. Most tumors have been growing for years when they are discovered. A few days or weeks generally is not significant to the tumor growth, but can make all the difference in finding the treatments that are best for you.

Gather information and ask questions: Ask your doctor which choices you need to make and when. You don't need to decide everything at once but one choice may affect all your other choices. Write down your questions and bring someone with you to medical appointments for support and to take notes. Your doctor and your healthcare team should be supportive and receptive to open discussion of your options. Get copies of all your records so you have all the information you need to research your case. Find out what tests were used to arrive at the diagnosis and what other tests are planned. When your doctor tells you your treatment options, ask if these are your only choices.

Get second opinions: Get a second opinion about your pathology report. Then get second opinions about your treatment options. This will give you more information and help you choose the best course of care. New developments in cancer treatment are happening so fast that it's practically impossible for every doctor to be aware of all the most up-to-date ways to deal with the disease. The best doctor to see is one who is a specialist and has lots of experience in treating your type of cancer. Studies show that treatment by a specialist resulted in a 33% reduction in the risk of death at 5 years.

You can get second opinions from a:

• Pathologist •• Breast surgeon •• Medical Oncologist •• Radiation Oncologist

Second opinions can help by confirming a diagnosis and providing reassurance that the patient is making a reasonable choice.

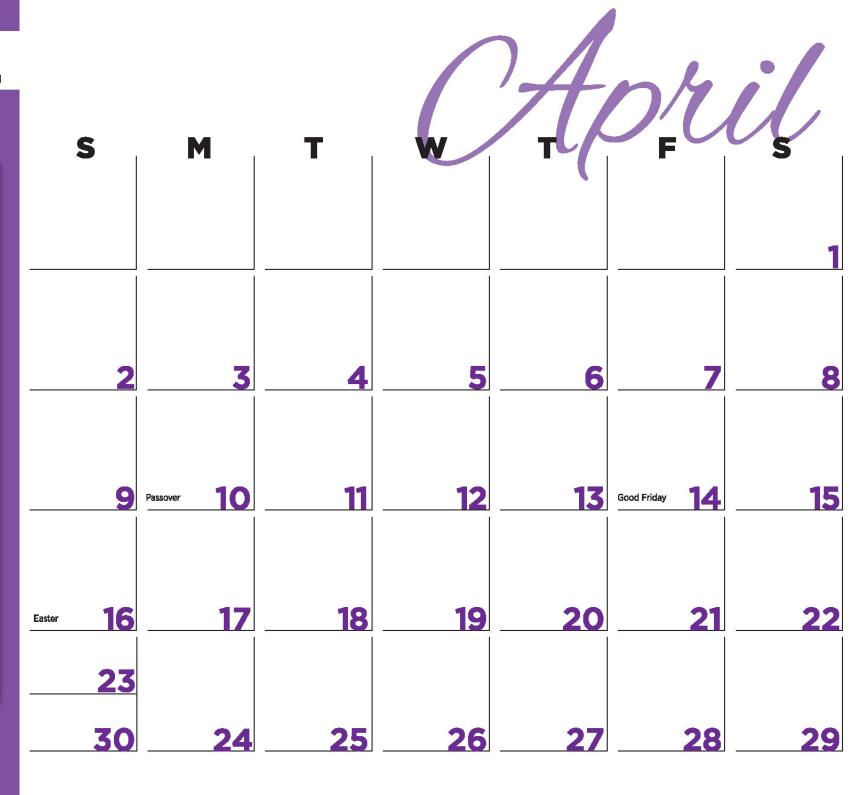
When you go for a second opinion, take all your records and all related test results, tissue slides, x-rays and/or other imaging with you so that they will not need to be redone. The doctor should review your medical records and reevaluate your diagnosis, taking into account the information from the second opinion. If the second opinion mirrors the first opinion you can move forward with treatment, confident that you are doing the right thing.

If the second opinion does not concur with the first, you can opt for a third opinion, or return to your original doctor and request that he or she engage in a constructive dialogue with the doctor who rendered the conflicting opinion. It's possible that after they share the reasons for their opposing opinions, they will find common ground and agree on the best course of action for you. The important thing is that you must be able to trust and believe in the persons charged with your care, so that you can focus your energies on getting better and moving ahead with your life.

Explore the different treatment options: If all the doctors you've consulted with agree on a particular course of treatment, and you feel comfortable with it, your decision should be fairly easy. Sometimes you may be presented with more than one appropriate treatment plan. For example, there may be a nearly equal chance of recovery with a mastectomy or with a lumpectomy plus radiation or chemotherapy. In a case like this, your doctor should discuss with you the pros and cons of each alternative and give you an informed opinion, but only you can make the final decision about which treatment feels right to you.

Get the support you need and ask for help: This can range from support groups or private counseling, to assistance with keeping your life functioning smoothly. While family members and friends can be a tremendous help, sometimes people who are not emotionally involved can offer more objective support. Give yourself a break, and give someone else, a friend, relative, co-worker or neighbor an opportunity to give of themselves. You would do it for them!

If you need evidence-based information call an advocacy organization like Breast Cancer Options.





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To schedule an appointment: 845-334-HAHV (4248)

Oncology Services

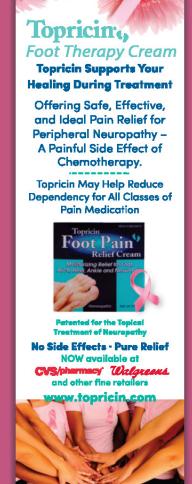
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- Clinical Nutritional Services
- Oncology Support Program 845-339-2071 Psychosocial Support
- Linda Young Ovarian Cancer Support Program
- Breast Education and Breast Outreach Program

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PERSONAL CARE PRODUCTS

A growing body of evidence links synthetic chemicals to the rising incidence of breast cancer. Parabens, phthalates and other hormone disrupting chemicals are ingredients widely used in cosmetics and other beauty products. They are fond in women's bodies. One third of personal care products contain at least one chemical linked to cancer and brands using these chemicals are sold by many of the same companies that raise money for breast cancer awareness. The average person uses 9 personal care products and is exposed to 126 chemicals daily. Women absorb up to 5lbs of damaging chemicals a year from beauty products.

Many women diagnosed with breast cancer take an estrogen blocking drug like Tamoxifen, an estrogen reducer like Femara and/or have ovaries surgically removed for prophylactic purposes. Products containing parabens, phthalates and other estrogen mimicking chemicals may undermine these risk reduction strategies and interfere with treatment.

Remember: The skin is the body's largest organ and very efficient at absorbing and transporting to the blood and cells whatever it comes into contact with. Some substances on the skin are absorbed 10 times more than an oral dose.

CHEMICAL TO AVOID

Phthlates:

Companies are not required to list Phthalates in the ingredients. (They are used as plasticizers in the packaging.)

Check www.breastcanceroptions.org for a phthalate-free List.

Parabens:

Methyl, Propyl, Ethyl, Butyl. (Used to extend shelf life)

Placenta, Estrogen or Hormone:

(Addition of hormones and extracts is advertised to promote growth & thickness of hair.)

Sodium lauryi sulfate (sis):

(cleaning agent, emulsifier, foaming agent)

Cocoamide DEA, TEA, MEA, (MSDS), (solvent, emulsifier, wetting agent)

Synthetic Colors: Labeled FD &C or D&C, followed by color and number. D&C Red 33, FD&C Yellow 5, FD&C Yellow 6

PRODUCTS THAT CONTAIN IT

Hair spray, deodorant, nail polish, hair gel, mousse, lotions, children's toys, perfumes, fragrances, plastics, cosmetics

Shampoos, soaps, shaving gels, cleansing gels, bubble bath, toothpaste, cosmetics, moisturizers, hand and body lotions and beauty creams, skin and hair conditioners, mascara

Shampoos, styling gels, cosmetics and cream rinses, especially those marketed to African-American girls and women but used widely by others

Toothpaste, shampoo, dish and liquid hand soap, bubble bath, degreasers

Shampoos, conditioners, lotions, shaving gels, bubble bath, skin creams Makeup, hair dye

WHY AVOID IT

They accumulate in vital organs; women aged 20-50 have the highest levels in their bodies. Linked in animal studies to birth defects in the male reproductive system. Absorption is by contact or consumption Young children have developed breasts from phthalate exposure.

Parabens are chemical preservatives identified as estrogenic and disruptive to normal hormone function. They mimic the function of the naturally occurring hormone estrogen. Exposure to external estrogens has been shown to increase the risk of breast cancer.

Young girls had early puberty and developed breasts and pubic hair. Early puberty is a risk factor for breast cancer later in life.

This is an endocrine disruptor and estrogen mimic; causes dioxins and carcinogenic nitrates to form.

They are known carcinogens and hormone disrupting chemicals.

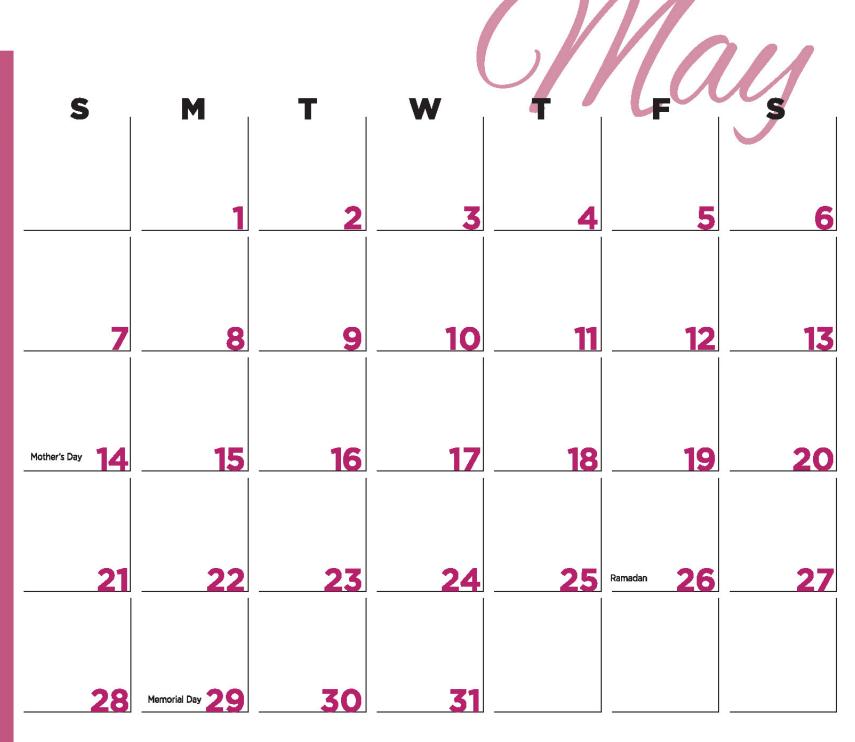
They are coal-tar chemicals and many are carcinogenic. These have been shown to cause cancer when applied to the skin.

SOLUTIONS/ALTERNATIVES

- Use brands that don't use these chemicals: Aubrey Organics, Weleda Dr. Hauschka, Suki's Naturals.
- · Choose natural, ingredients made from vegetable dyes such as henna, annatto, beta carotene, chlorophyll.
- Use pure essential oils instead of products labelled perfume.
- Choose products with safer preservatives: Grapefruit seed extract; phenoxyethanol, potassium sorbate, sorbic acid, vitamin E (tocopherol), vitamin A (retinyl), vitamin C (ascorbic acid)
- Use Mineral based cosmetics and hair dyes with natural vegetable colors.
- Avoid use of paraben-containing preservatives, especially for those breast cancer survivors who are strongly Estrogen Receptor positive.

Note: How to Read Labels

By law all skin care products must be labeled with the ingredients in descending order of their quantity in the product. A good rule of thumb is to divide the ingredient list into thirds. The top third usually contains 90-95% of the product; the middle third usually contains 5-8%; the bottom third contains 1-3%





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DIET AND PHYSICAL ACTIVITY: Studies show that women who eat a minimum of five servings of vegetables and fruit per day combined with regular physical activity roughly 30 minutes of brisk walking daily, reduce their risk of recurrence even if they have the BRCA mutations. Natural plant foods contain a variety of phytochemicals, micronutrients with a variety of anti-cancer effects: anti-estrogenic, anti-proliferative, pro-apoptotic, antiangiogenic, antioxidant and anti-inflammatory effects. Most non-organic foods contain chemicals that can mutate genes and therefore should be avoided when possible.

stress we might prevent 70% of all cancers.

CONTROL YOUR WEIGHT: One of the most important lifestyle practices to improve breast cancer survival chances is maintaining a healthful body weight. Being overweight or obese increases the risk of several cancers, including breast cancers (in women past menopause),

WHAT ARE THE RISKS RELATED TO WEIGHT? Breast cancer risk begins to increase when adult weight gain (since age 18) is more than 20 pounds. Studies show that women who gained 21-30 pounds since age 18 were 40% more likely to develop breast cancer than women who had not gained more than 5 pounds, and women who gained 70 pounds doubled their

WHY DOES OBESITY INCREASE CANCER RISK? Obesity leads to high levels of insulin-like growth factor (IGF-1) in the circulation. This may protect early-stage cancer cells scattered throughout the body from dying, since IGF-1 inhibits the action of cell suicide genes. It also leads to inflammation which may explain the link between obesity and cancer. Inflammation is a normal body process designed to heal the body following injury. When inflammation becomes chronic the injured tissue is constantly bathed in growth-promoting cytokines that tell stem cells in the tissue to begin multiplying, in order to replace the cells that have been injured and destroyed. . The more overweight a person is, the greater the level of inflammatory signals.

good genes, but during the course of our lifetimes, genes become damaged and mutate. HOW MUCH PHYSICAL ACTIVITY IS NEEDED TO LOWER BREAST CANCER RISK? Physical activity affects breast cancer in 2 distinct ways: directly, by influencing circulating hormones, and indirectly, by helping to control weight. It is recommended that women be moderately to

> Activities considered moderate are those that make you breathe as hard as you would during a brisk walk. This includes things like walking, biking, and even housework and gardening. Vigorous activities generally engage large muscle groups and cause a noticeable increase in heart rate, breathing depth and frequency, and sweating.

vigorously active for 45-60 minutes on 5 or more days per week to lower risk.

LIGHT AT NIGHT AND EMR'S: The most overlooked hormone disruptors are exposure to light at night and the electromagnetic energy fields generated from cell phones, night lights and electrical devices. Overnight exposure of women to elevated levels of EMR disrupts melatonin production and increases estrogen levels. Melatonin exerts anti-cancer and antiinflammatory effects. At night, watching TV, sitting in front of computer screens, reading with artificial light into the wee hours, or sleeping with a light on, all contribute to melatonin deficiency. Recent studies show that even exposure to dim light at night may make breast cancers resistant to chemotherapy. Continual cell phone use generates over-exposure to EMR.

WHAT ABOUT ALCOHOL CONSUMPTION? HOW MUCH IS TOO MUCH? Drinking alcohol increases estrogen levels in the body and some experts believe alcohol increases the risk of estrogen sensitive cancers. Beyond the estrogen connection, alcohol itself is believed to be carcinogenic. For ER positive breast cancer survivors, studies suggest risk of recurrence increases when a woman has more than one or two drinks per week. All women, but especially those who drink, should consume folate-rich foods: leafy greens, legumes, and enriched whole-grain products are good sources.

Some Suggestions

- Make sure your room is quiet and dark.
- If possible, complete work during the day; sleep at night.
- Avoid watching TV or using your computer at least an hour or so before going to bed.
- Sleep at least 3-5 feet away from outlets; unplug devices. EMFs can disrupt your pineal gland and melatonin production. Turn off the WiFi at night Avoid light at night. If you need a night light to go to the bathroom use a red bulb which won't suppress melatonin.
- Natural daylight is just as important as nighttime darkness in maintaining a normal circadian rhythm. Try to get outside for 15 minutes each morning. Exercise regularly. Exercise done early in the day may promote better quality sleep. Vigorous exercise just before bedtime may delay sleep.

Managing stress, adopting healthy eating and exercise habits, getting a good night's sleep, and finding good emotional and social support, should be regarded as much a part of cancer treatment as chemotherapy or radiation.

ESTYLE FACTORS THAT CAN

TER GENE EXPRESSIO

We know that lifestyle factors play an important role in cancer development. The good news is that we can do something about it. If we exercise regularly, lose weight, eat diets rich in fruits and vegetables, sleep in darkness and learn how to handle

Proper lifestyle choices can influence a person's risk for cancer by generating growth-promoting signals that affect cells primed to become cancerous, or that already are cancerous. Cancer is ultimately a disease of malfunctioning genes. Only 10% of all cancers occur in people at high risk of developing cancer because of inherited genetic defects. Most of us are born with

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VITAMINS, HERBS & SUPPLEMENTS

Eating a well-balanced diet is the preferred way to get a wide variety of antioxidants, vitamins and enzymes, but many health professionals agree that some supplements are now necessary to counteract exposures to toxic chemicals in our air and water; pesticides and herbicides in our food; soil depletion; and the depletion of nutrients caused by stress. Supplements should be tailored to an individual's needs which can be determined by testing.

Consult with a knowledgeable practitioner to determine your specific needs.

THE FOLLOWING ARE POPULAR SUPPLEMENTS:

Curcumin – Exerts its biological influence through epigenetic modulation. Helps repair DNA that has been damaged by radiation.

Has several cancer-fighting properties. Anti-inflammatory. Curcuma longa is a promising anticancer agents. Epidemiological evidence demonstrates that people who incorporate high doses of this spice in their diets have a lower incidence of cancer.

Ave ULTRA – A wheat germ extract that helps to promote immune system balance by promoting optimal Natural Killer immune cell targeting ability and the coordinated response of macrophages, B-cells and T-Cells. It shows great efficacy in reducing treatment side effects, supports healthy cell metabolic regulation and induces cell apoptosis.

Medicinal Mushrooms – Mushrooms have been shown to reduce cell proliferation and also have aromatase-blocking activity. They can stimulate components of cellular immunity such as T cells, B cells, macrophages and natural killer (NK) cells, demonstrate anti-tumor activity and may restrict tumor metastasis.

CoQ10 – Clinical trials have shown that coenzyme Q_{10} helps protect the heart from the damaging side effects of doxorubicin.

lodine – Iodine, a trace mineral concentrated in thyroid and breast tissue, helps to normalize the impact of estrogens on the breast and turns off the estrogen receptor sites. Consumption of Iodine has dropped 50% since the 1970's, An iodine loading test should be done to assess levels. Iodized salt can be purchased in most health food stores.

Green Tea—Chemicals in green tea called polyphenols appear to inhibit two proteins that promote tumor cell growth and migration—namely, the vascular endothelial growth factor (VEGF) and the hepatocyte growth factor (HGF). Exhibits pro-oxidant abilities and can induce apoptosis (programmed cell death) in cancer cells. *Use organic green tea to avoid pesticide contamination*.

Calcium D-Glucarate – Helps the body eliminate many harmful substances like abnormally high levels of steroid hormones including estrogen, testosterone, and progesterone.

Vitamin D — Higher levels of vitamin D are associated with reduced incidence rates of breast cancer worldwide. Vitamin D (calcitriol) is a hormone that promotes normal cell growth and cell differentiation, calcium absorption and helps to maintain hormonal balance and a healthy immune system. Vitamin D3 deficiency can lead to insulin resistance and elevated levels of inflammatory markers such as hsCRP, IL-2, IL-6. Testing vitamin D3 level is recommended. The 25-hydroxy vitamin D test can be done at many labs.

Vitamin D is absorbed by exposure of skin to the sun. Because we also need to limit such exposure, most people should supplement with Vitamin D3 daily. Note: Sunblock with an SPF of 15 or higher will block 100% of vitamin D production.

DIM (3,3'-dlindolylmethane) – A phytonutrient found in cruciferous vegetables including cabbage, broccoli, brussels sprouts, kale, cauliflower, and turnips. Bodies of women with breast cancer produce too little of the 2-hydroxy or "good" metabolite of estrogen and too much of the 16-hydroxy or "bad" variety. This dangerous form of estrogen dominance can result from inheritance, diet, or exposure to environmental chemicals. DIM supports a healthy estrogen balance by increasing beneficial 2-hydroxy estrogens and reducing the unwanted 16-hydroxy variety.

AHCC – Shows a protective effect on the liver and other areas of the body against chemotherapy drug damage. Helps counteract free radical damage to cell DNA and prevent cell oxidation, both thought to cause cell mutations.

Natural Aromatase Inhibitors – Aromatase inhibitors are used to stop the production of estrogen in post-menopausal women who have estrogen receptor positive breast cancer. The three aromatase inhibitors commonly used are Arimidex, Aromasin and Femara, but these medications can produce problematic side effects.

Natural aromatase inhibitors include flavones, resveratrol (found in grapes and red wine); oleuropein (in olive leaf) and Chrysin, (found in Passiflora incarnate, aka passion flower). Green tea and black tea (200microL/mL) also decreases aromatase activity. Ellagic acid found in pomegranates inhibits aromatase. Its metabolite, Urolithin B, significantly inhibited cell growth and has the potential to prevent estrogen-responsive breast cancers. Studies are ongoing.

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NON-TOXIC LIVING AT HOME AND WORK

The average household and workplace contain about 62 toxic chemicals that are used on a daily basis. We are exposed to phthalates in synthetic fragrances, noxious fumes in oven cleaners, BPA in plastics and register receipts and a host of chemicals in cleaning and personal care products. The ingredients in common household products have been linked to cancer, asthma, reproductive disorders, hormone disruption and neurotoxicity. They get into our bodies through inhalation, ingestion and absorption. Below are the common causes of some of many of the problems.

CANNED FOODS: The epoxy resin lining in canned foods contains bisphenol A, or BPA, which leaches into food and then into us. Studies have shown that the amount leached is enough to cause breast cancer cells to proliferate in the lab.

Solution: Avoid all canned foods. Choose fresh and frozen over canned foods.

CASH REGISTER RECEIPTS: Bisphenol A (BPA) is used in cash register thermal paper receipts. It's a hormone disruptor.

Solution: Do Not take a cash register receipt if you don't need to.

PLASTICS: Many plastics contain hormone-disrupting phthalates, especially polyvinyl chloride, or PVC (usually recycling code 3). Avoid clear, shatterproof plastic that contains BPA (usually code 7). Safer plastics are coded 1.2.4 and 5.

Solution: Choose stainless steel, glass and ceramic. Buy PVC free shower curtains.

DON'T MICROWAVE IN PLASTIC: Even "microwave safe" plastic can leach BPA and other chemicals into your food when heated.

Solution: Choose glass or ceramic containers. Cover your food with a ceramic plate or an unbleached paper towel instead of plastic wrap.

CLEANING PRODUCTS: Many cleaning products contain harmful chemicals. They contain the sudsing agents diethanolamine (DEA) and triethanolamine (TEA). They form nitrosamines – which are carcinogens and penetrate the skin.

Solution: Make your own. Use baking soda for scouring; vinegar to clean glass.

WATER BOTTLES: Bisphenol A (BPA) is used in polycarbonate plastic reusable water bottles. It's found in rigid plastics, the lining of food cans, and other products, BPA is a hormone disruptor.

Solution: Use non-toxic, reusable stainless steel bottles or BPA free plastics.

PESTICIDES, FUNGICIDES, HERBICIDES, AND FERTILIZERS: They are neuro-toxins and they don't know the difference between the BUGS and YOU!

Solution: For fleas, roaches, ants, etc., use diatomacious earth, boric acid, and nematodes. Avoid all other pesticides.

FRAGRANCE: Fragrance can contain dozens of chemicals—including hormone-disrupting phthalates and synthetic musks. Used in almost all cleaning, laundry, and personal-care products, fabric softeners, perfumes, scented detergents, etc. The chemicals go directly into the bloodstream when applied to our skin and are absorbed into the skin from our clothing.

Solution: Avoid synthetic fragrance and buy fragrance-free products or purchase natural fragrances like essential oils.

AVOID DRY CLEANING: Conventional dry cleaning uses perchloroethylene (PERC), formaldehyde, napthaline, benzene. In addition to long-term effects on health, including cancer, short term exposures to airborne PERC can cause skin irritation, dizziness and headaches.

Solution: Hand wash with unscented fabric detergent for delicates or use dry cleaners that clean with the ecofriendly CO2 process.

PRODUCTS WITH CHLORINE: Women with breast cancer have 50-60% higher levels of organochlorines in their breast tissue than women without breast cancer. Chlorine is found in many city water supplies, paper products, coffee filters, tampons and swimming pools. Harmful effects are intensified when the fumes are heated, as in the shower or dishwasher.

Solution: Use non-chlorine alternatives to bleach for household cleaning, laundry; use unbleached toilet paper and tampons; use natural coffee filters; use a household water filter; swim in salt water pools.

AIR FRESHENERS AND SCENTED CANDLES: These contain phthalates and benzene. Women who use solid air fresheners are at higher risk of having breast cancer. (Silent Spring Institute 2010)

Solution: Use beeswax candles scented with essential oils. Use odor absorbers made with Zeolite. Fill a small spray bottle with a mixture of four teaspoons baking soda and four cups of water. (You can add essential oils, vanilla, etc) Spray it in a fine mist to neutralizer odors.

HUMIDIFIERS OR DEHUMIDIFIERS: Standing water can encourage mold growth.

Solution: Empty water after each use.

NON TOXIC HOUSEHOLD CLEANERS:

MIX: ¼ c. baking soda; ½ c. vinegar; ½ c. borax; 1 gallon water *surfaces that need scouring, use salt or dry baking soda.

WINDOW CLEANERS:

MIX 2 tsp. vinegar; 1 qt. warm water

DRAIN CLEANER:

POUR 1/2 c. borax in drain followed by 2 c. water

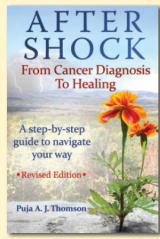
AIR CLEANER:

Houseplants can remove toxins from the air, such as formaldehyde, benzene etc. The best plants for removing toxins are spider plants, philodendrons, aloe vera, English ivy, Boston fern.



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MYTHS AND REALITIES ABOUT BREAST CANCER

Compiled by Breast Cancer Options from a variety of sources.

Myth: Breast cancer is the second leading killer of women.

Reality: Breast cancer is 6th, killing 40,000 women a year in the U.S., far behind heart disease, stroke, lung cancer, chronic lower respiratory disease, and Alzheimer's disease, which each kill many more women annually.

Myth: Women have a 1-in-8 chance at any age of getting breast cancer. Reality: Most people think they have a higher risk of breast cancer than they actually do. Estimates are that a woman age 20 has a 1 in 2,000 risk of developing breast cancer in the next 10 years; at age 40, 1 in 100; age 60, 1 in 28; age 85, 1 in 8. About 50% of breast cancer occurs among women age 62 or older.

Myth: Men don't get breast cancer.

Reality: About 1% of all new breast cancers annually are diagnosed in men. Though rare, male breast cancer is often aggressive. The lifetime risk for men is about 1/10th of 1%.

Myth: Most breast lumps are cancerous.

Reality: Roughly 80% of lumps in women's breasts are cysts or other non cancerous conditions, but it's still important to report all lumps to your doctor.

Myth: A diagnosis of breast cancer means I'm going to die from it soon. *Reality:* 85-90% of women diagnosed with breast cancer survive at least 10 years after treatment and most of those eventually die of something else. Breast cancer that has metastasized, or spread to other parts of the body, poses the greatest challenge, although women with metastatic breast cancer often live for years with their disease. Breast cancer death rates remain higher for African-American women than Caucasian women.

Myth: I'm too young to worry about breast cancer.

Reality: After adolescence, you're never too young to get breast cancer. While a lump in a younger woman is much less likely to be cancer than a lump in an older woman, it can be cancer and needs to be checked out. 5% of women diagnosed breast cancer are younger than 40.

Myth: Antiperspirants increase your risk of getting breast cancer.

Reality: We don't know. Because of their weak estrogen-like properties, parabens — used as preservatives in some antiperspirants - are possibly carcinogenic. Studies found parabens in 18 of 20 samples of tissue from human breast tumors. However, this does not prove that parabens cause breast tumors. More research is needed. In the meantime avoid parabens in any product for use especially in the breast and armpit area.

Myth: Overweight women have the same breast cancer risk as other women. Reality: Weight gain after the age of 18 is associated with a 45% increase in breast cancer risk as well as higher rates of recurrence and mortality in both premenopausal and postmenopausal breast cancer patients. Weight Gain Affects Survival, especially if you gained the weight later in life. Myth: If your mammogram is negative, there is nothing to worry about.

Reality: Mammograms fail to detect as much as 20% of breast cancer in women over 50, and as much as 40% in younger women. Younger women at increased risk should talk with their doctor about the benefits and limitations of starting mammograms when they are younger, using other technologies or having more frequent exams. Clinical breast exams and knowing what is normal for your breast are also crucial pieces of the screening process.

Myth: Being called back for "extra views" after my mammogram means I have cancer.

Reality: Mammograms often detect images in the breast that may or may not be real changes (such as a fold of the breast tissue). Extra views may be needed to help determine if these areas are real problems. The vast majority of women who have extra views do not have cancer.

Myth: Mammograms prevent breast cancer.

Reality: Mammography is a screening test to detect cancer already present in the breast. It does not prevent cancer, nor will it always detect the disease. Breast cancer awareness campaigns urge women to have annual mammograms so that breast cancer can be found early and "cured." Regardless of how small a tumor is when it is detected, some cancers are so aggressive that they are not easily treated with current available therapies.

Myth: After I've survived 5 years, my breast cancer won't return.

Reality: Breast cancer can recur at any time, although 75% of recurrent

Reality: Breast cancer can recur at any time, although 75% of recurrences occur within five years. 25% can recur any time after five years.

Myth: A diagnosis of breast cancer is an emergency and treatment decisions have to be made immediately. informed

Reality: It may feel like an emergency but most breast cancers have been present for 8 to 10 years by the time a lump is detected. It's important to take time to gather information and get second opinions in order to make decisions about treatment.

Myth: Most women with breast cancer have a family history of the disease. **Reality:** 85 -90% of women who develop breast cancer do not have an affected mother, sister or daughter.

Myth: If you have a family history of breast cancer you will definitely get the disease.

Reality: Most women with a family history of breast cancer will never get breast cancer. If a first-degree relative (a parent, sibling or child) has or has had breast cancer, your risk of developing it doubles. (see myth 2) Two first degree relatives with the disease further increase your risk. Your father's family history is as important as your mother's. The inherited mutations (BRCA1 and BRCA2) are not always passed on.

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THERMOGRAPHY

SCREENING GUIDELINES

Do screening mammograms save lives? Ask two different experts and you will get two different conflicting answers. Some research shows that screening mammograms save lives; other evidence shows they do not. With so much conflicting scientific evidence it's likely that both experts are right; screening mammograms do save some women's lives but they do not save other women's lives. Mammograms find cancers that would have caused death or harm during an individual's life, so over-diagnosis has become a concern. Breast cancer is the 4th leading cause of death in women, killing about 40,000 each year. Any decline in the breast cancer mortality rate is likely the result of improved treatments rather than screening. Evidence also shows that breast cancers are missed on screening mammograms about 20-30% of the time. A British study concluded that for every life mammograms save, three other women are unnecessarily treated for a cancer that would never have threatened their lives. Screening mammography is associated with an increased incidence of small cancers but not with decreased incidence of larger cancers or significant differences in mortality. Screening mammograms should not be confused with diagnostic mammograms, which investigate symptoms like a lump, breast pain, nipple discharge or an abnormal area found on a screening mammogram.

The U.S. Preventive Services Task Force (USPSTF) has recommended changes in its breast cancer screening guidelines:

- Routine screening of average-risk women should begin at age 50, instead of age 40. Decisions under age 50 should be individual.
- Women at average risk should get screening mammograms every two years instead of every year from age 50-74.
- Benefit vs risk of routine screening over age 74 is inconclusive.

Women who have a mother or sister with breast cancer may benefit by beginning routine screening in their 40s.

For women with a lifetime breast cancer risk of more than 20% or who have BRCA mutation, screening of some kind should begin at 25 years of age or at the age that is 5 to 10 years younger than the earliest age that breast cancer was diagnosed in the family.

Risk of overtreatment is a concern because screening mammograms cannot tell the difference between

- Slow-growing cancers that would be found and successfully treated with or without screening.
- Innocuous cancers that would never have amounted to anything. When these are treated, it amounts to over diagnosis and unnecessary treatment leading to potential harm from the screening.
- Aggressive cancers, so-called bad cancers, are generally deadly whether they are found early by screening, or late because of a lump or some other symptom. A fraction of these deadly cancers, when found at just the right moment, can have their courses changed by treatment. Women with these cancers are definitely helped by mammograms, but we don't know how to clearly identify them. Clinical trial data states that 1 woman per 1,000 healthy women screened over 10 years falls into this category.

Detection methods are used to detect cancer as early as possible. Techniques other than mammography may be used when women are considered at high risk.

Digital vs. 3D Mammograms: 3D mammograms have been found to correctly identify cancers 4-5% more often than regular 2D digital or film mammograms. *Women who undergo screening with 3D mammography are 15% less likely to be called back for more testing due to a suspicious finding that turns out *not* to be cancer. Two recent studies show that 3D mammography finds significantly more invasive cancers.

Ultrasound: About 40% of women, usually younger patients, have dense breast tissue and ultrasound can determine if a suspicious area is a non-cancerous cyst or solid tissue (dense mass).

Thermography: A non-invasive imaging test that uses an infrared camera to read temperature patterns in the body which indicate abnormality. It looks for signs of tumor formation in the breast, rather than trying to detect a tumor once it is already established. This allows you to make lifestyle adjustments to reverse these changes and possibly prevent a tumor from forming. If Thermogram is used with ultrasound or mammogram, 95% of cancers are detected. There is no radiation or contact with the body during this test.

Magnetic Resonance Imaging: MRI is used if a breast problem is detected using mammography, other imaging or physical exam. MRI offers better sensitivity for detection of breast cancers for women who carry a BRCA-1 or BRCA-2 mutation.

Breast Self Exams (BSE): 40% of breast cancers are discovered by women or their partners. Noticing slight changes can send women to the doctor for further testing. Checking one's breast can help detect breast cancers that mammograms miss.

Timing of Mammograms: For pre-menopausal women mammography is the most accurate on days 1-9 of the menstrual cycle. This is a low-estrogen, low-progesterone phase and breast tissue tends to be less dense. Mammograms are more apt to spot small, hard-to-see tumors.

Detection is Not Prevention! Never rely on any technology as your sole method of surveillance



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USING COMPLEMENTARY THERAPIES WITH CONVENTIONAL TREATMENTS

The terms "complementary medicine" and "alternative medicine" often are used interchangeably. However, though they sometimes refer to the same modalities, the two are very different.

Complementary medicine is used together with traditional Western medicine. Alternative medicine is used in place of conventional medicine.

Many patients integrate conventional treatments and complementary therapies. There is no scientific evidence that these therapies can cure cancer but they can help with side effects and optimize immune function. Complementary therapies work best as part of your total treatment plan, combined with your medical treatments. They focus on areas often neglected by conventional medicine that may improve overall health and survival.

COMPLEMENTARY THERAPIES CAN:

- · Help you feel better and improve your quality of life
- · Improve your general health & immunity
- · Give you a sense of control over what is happening
- · Reduce stress, tension, sleeplessness, anxiety and depression, and make you feel more relaxed
- · Help reduce the symptoms of cancer, such as pain, feeling sick, breathlessness, constipation, diarrhea, tiredness and poor appetite
- Help reduce the side effects of cancer treatment such as nausea, joint pain, fatigue, sexual side effects

QUESTIONS TO ASK:

- What do you expect to gain from a complementary therapy?
- How do you choose a complementary therapy?
- · How do you know if a therapy is working for you?
- · Can the therapy interfere with conventional treatment?
- Is the therapy covered by insurance?
- Is the therapy safe or can it cause harm or interfere with conventional treatments?
- Are there side effects?
- Are there established standards for the therapy? Is the therapist qualified?
- Has research been done about the effectiveness of the therapy?
- · Are there medical records or clinical trials offering scientific support of treatment?

COMPLEMENTARY THERAPIES INCLUDE:

- Alternative medical systems (Traditional Chinese Medicine, Ayurveda, homeopathy, naturopathy)
- Mind-body interventions (biofeedback, hypnosis, mindfulness meditation,
- yoga, guided imagery)

 Biologically based therapies (supplements, herbals, vitamins, detoxification, elimination)
- Manipulation and body-based methods (massage, chiropractic, osteopathy, Feldenkrais, Stress reduction/relaxation, Alexander
- Energy therapies (acupuncture, Reiki, magnets, therapeutic touch)

AS WELL AS:

- Dietary modification
- Exercise (3-4 hours per week)
- Sleep (at least 7-8 hours per night in darkness)
- · Elimination of hormone disrupting chemicals
- Art or Music TherapySupport groups/Counseling/Therapy

IN EVALUATING A THERAPY:

Be open-minded, but cautious.

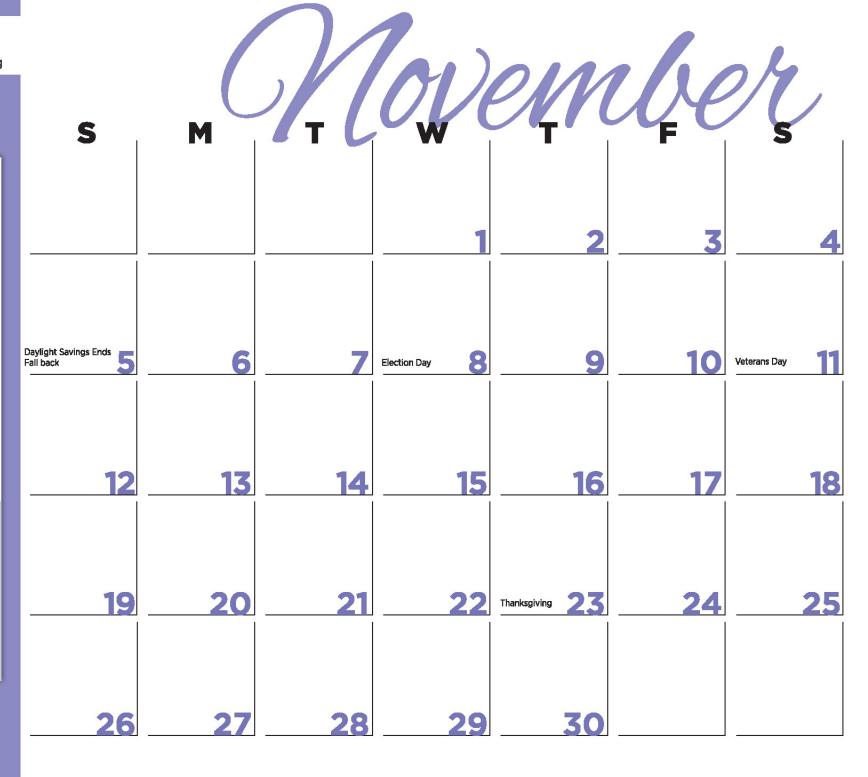
- ASK QUESTIONS and ALWAYS do your own research.
- Learn about the potential benefits and risks.
- - ✓ The types and number of studies done
 - ✓ The consistency of findings

HOW TO KNOW IF A COMPLEMENTARY THERAPY IS WORKING FOR YOU: SUBJECTIVE VS. OBJECTIVE

Subjective responses include improved energy, appetite and well-being. Do you feel any different? Objective data would include testing to see if there is a change.

TESTING BEFORE & AFTER: There are a number of tests that are not normally done for routine cancer testing that may give patient information on immune status, hormone balance, chemical exposures, and nutrient status. These tests can be useful to evaluate if something is working for you, but are not always covered by insurance.

YOU CAN TEST FOR: Vitamin D levels; Toxic exposures and chemicals; Hormonal Balance; Nutritional Status; Digestive Function, etc. LABS THAT DO SPECIALIZED TESTING: AIT Laboratories-www.aitlabs.com; Genova Diagnostic/Metametrixs- www.gdx.net





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BREAST CANCER ADVOCACY: **MAKING A DIFFERENCE**

Advances in science and technology have increased options for treating breast cancer, but it is advocates that have changed the way people deal with this disease. Women are no longer simply passive patients, but rather they are survivors, informed consumers, advocates and activists who are speaking up for themselves and others and speaking out for issues relevant to the treatment and prevention of breast cancer. Becoming an advocate helps them get through their breast cancer experiences and gain a feeling of control over their lives.

Advocates have become educated in the science of breast cancer and now have a seat at the table with scientists when decisions are made about research and policy. They have a unique contribution to make to cancer research and play an important role in the cancer care setting giving a "face" to the disease, reminding researchers of the human element. They provide input that strengthens research projects, assist in clinical trial design, help develop patient materials and facilitate community outreach and education.

As the discoveries of basic science have been translated to better clinical treatment, a new sense of hope has emerged. Quality of life now shares the spotlight with quantity of life as breast cancer has shifted from an acute to a chronic condition and as the numbers of long-term survivors has increased. Advocates express concerns about issues affecting their lives beyond treatment. These include, accurate diagnosis, the complexity of treatment decisions, access to quality cancer care, informed consent, privacy issues, availability of supportive care treatments, effective doctor-patient communication skills and the long term side effects of treatments. Survivors are also concerned about the impact of their disease on spouses and family, on fertility and sexuality, on employability and on their longterm survival. The identification of these issues has given rise to a movement that has shifted away from powerless victim to empowered survivor.

Political advocacy has helped breast cancer patients in numerous ways. Women now have more access to screening, earlier diagnosis and better treatments. Breast cancer advocates have been instrumental in increasing federal funding for breast cancer research and have helped to pass laws that provide cancer treatment coverage to low-income, uninsured women. Advocates work with their Legislators on the gaps in patient care, the needs of underserved populations and what research should be funded because Legislators need to understand the issues patients are facing. Sometimes they need prodding from concerned

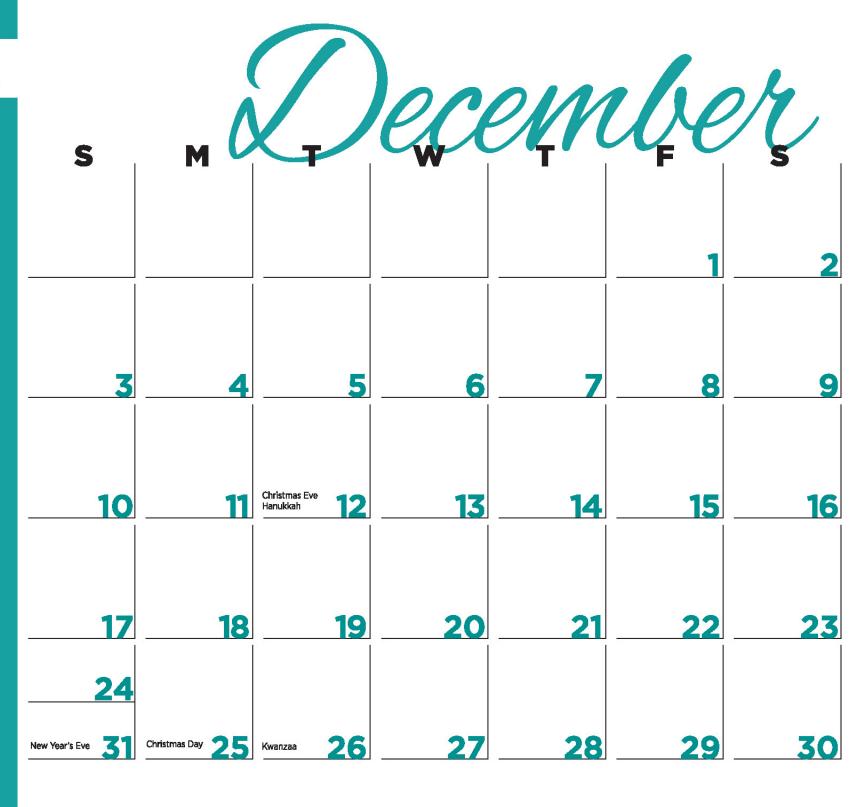
Advocacy can also include caring and support at the individual level. Bring a meal, do an errand, help with chores, or drive a cancer patient to an appointment or as someone who has "been there," provide personal emotional support and knowledge for those newly diagnosed.

PINKWASHING-Most people are aware of the message "early detection saves lives" and the month of October's staggering array of Pink Ribbon "cause marketing" promotional campaigns and company tie-ins labeling every conceivable consumer item "for the Cure". When these companies use known or suspected cancer causing ingredients in their products, which many - if not most - do, the practice becomes "pinkwashing". These companies need to decide if they want to be part of the problem or part of the solution. Their supported research focuses primarily on detection and treatment with less than 10% of research dollars invested in a goal of prevention of breast cancer.

YOU CAN MAKE A DIFFERENCE! Ask questions before you buy products with pink ribbons. Advocacy is a tool for change. Early detection and better treatments are not enough! Despite all of our advances, about 25% of the women who are diagnosed and treated for early-stage breast cancer will later learn that their cancer has spread to other organs. Learning to treat early breast cancer so that it doesn't spread and to manage advanced breast cancer is essential, but, we must understand and eliminate what causes breast cancer in the first place.

Advocates have changed the conversation, challenging corporations; the pharmaceutical industry; local, state and federal legislators; healthcare institutions and providers; health agencies and the media. Advocacy organizations such as The New York State Breast Cancer Network, Breast Cancer Action, Breast Cancer Fund, the National Breast Cancer Coalition, and Silent Spring Institute, among others, have waged many effective awareness campaigns and have been instrumental in changing business practices and helped the passage of legislation to protect the public from toxic exposures and inequities in medical care. Some examples: the banning in New York State of endocrine disrupting Bisphenol-A (BPA) in infant and baby toys, bottles and feeding products and the reduction nationally of recombinant bovine growth hormone (rGBH) in dairy products...

Join with others through local organizations, such as Breast Cancer Options; state organizations or national organizations, such as those mentioned here to work with community leaders and elected officials at all levels to advocate for regulations and laws that benefit cancer patients.



If you have breasts or know someone who does... Please show your support.

BREAST CANCER OPTIONS

is a grassroots, nonprofit organization and the largest provider of peer support, advocacy and education services in the Hudson Valley. Diminishing foundation and government funding threatens our services

We need contributions more than ever from individuals like you to accomplish our work.

Please send a check payable to

Breast Cancer Options 101 Hurley Avenue, Suite 10 Kingston, NY 12401

> ...or make a credit card donation online on our web site

www.breastcanceroptions.org

...or call us at

845-339-HOPE (4673)

Thank you

Breast Cancer Options is a non-profit, tax exempt 501(c)3 corporation.

All donations are taxdeductible and truly appreciated!

All of our services are free.

ABOUT BREAST CANCER OPTIONS

BREAST CANCER OPTIONS (BCO) is an organization of breast cancer survivors, advocates and healthcare professionals who understand that when you are diagnosed with breast cancer, you are suddenly faced with some of the most Important decisions you will ever make about your own healthcare. When you explore your options, we want you to understand:

- You do not have to face all this, including physician visits, by yourself.
- You are important and deserve answers. We will help you get them.
- What information and sources are credible and reliable.
- Which lifestyle changes and complementary therapies can be integrated in treatment.

SUPPORT

- Companion/Advocate Program Trained, knowledgeable and sympathetic breast cancer survivors can accompany newly diagnosed patients to medical visits.
- Peer-led support groups Community-based in Ulster, Dutchess, Greene, Columbia, Sullivan and Orange counties. See our web site or call for locations and times.
- Camp Lightheart A free sleepover camp for children who have or have lost a mom with breast cancer.
- Retreat for women with metastatic breast cancer.
- Massage Clinics Held in conjunction with our support groups.
- Telephone and e-mail consultations Questions are answered with information from reliable sources.
- Peer-to-Peer Mentoring Talk to someone who has gone through the same experience.

EDUCATION/INFORMATION

- · Annual Healthy Lifestyles Calendar
- BCO News e-mail updates: Disseminated weekly to Breast Cancer Survivors and Healthcare Professionals all over the world.
- Breast Cancer Options web site offers a variety of up-to-date information and resources.
- Annual Complementary Medicine Conference: Top professionals in complementary and integrative therapies speak and present workshops on the most current modalities.
- Healthy Lifestyles Program: A series of workshops to look at the ways we can make small, easy changes in our daily lives to improve our health after a cancer diagnosis.

ADVOCACY

- BCO is an advocate for breast cancer patients at the regional, state and national levels.
- We can help with referrals for insurance and legal problems.
- BCO is a member of the New York State Breast Cancer Network.

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16 STEPS TO A HEALTHIER LIFE FOR YOU AND YOUR FAMILY

A growing body of evidence shows that healthy lifestyle factors like a good diet and regular exercise provide significant benefits, possibly offering protection against cancer recurrences about on a par with chemotherapy and the newer hormonal and drug treatments. If you combine these risk-reducing habits and also limit your exposure to toxins you will benefit even more.

to die from the disease than sedentary women if they exercise on a regular basis. Women undergoing treatments for breast cancer benefit from moderate intensity, regular aerobic activity.

Control your weight. Weight is a bit confusing. If you are overweight before menopause, your risk of breast cancer is lower than average. If you are overweight after menopause, your risk of breast cancer is higher than average.

Spend eight hours a night in darkness to encourage normal melatonin levels. The hormone Melatonin is released at night and has cancer-fighting properties. It's the reason you get sleepy when it's dark and research indicates that melatonin also puts cancer cells to sleep. Make sure you get regular exposure to bright light during the daytime.

. Cut down on EMR Exposures. Exposure to the energy fields generated from cell phones, night lights and electrical devices disrupt hormones. Sleep at least 3-5 feet away from outlets; unplug devices. EMFs can disrupt your pineal gland and melatonin production. Turn off the WiFi at night

possible. Your diet should contain fruits and vegetables, complex carbohydrates, organic protein and healthy-fats. Breast cancer has been linked to some pesticides used on nonorganic fruits and vegetables and estrogen-like hormones used in raising livestock.

Avoid bleached products, i.e. coffee filters, paper, napkins, toilet tissue and tampons. Using bleached coffee filters alone can result in a lifetime exposure to dioxin that exceeds acceptable risks. The FDA detected dioxins and dozens of other substances in conventional tampons.

Avoid carrying your cellphone anywhere on your body. When your phone is on it emits radiation intermittently even when you are not making a call. Wearing a cellphone tucked into your bra or in your pocket for hours a day gives those areas of your body continuous radiation exposure.

There are ongoing studies.

Drink filtered or bottled water, not city water that contains chlorine and fluoride. A simple water filter can now serve as a valuable safeguard against toxic substances and cancer.

Do not use pesticides or herbicides on your lawn or garden. They mimic estrogen, a known breast cancer risk factor. A cup of salt in a gallon of vinegar will kill weeds.

Use wet cleaning rather than dry cleaning which contains PERC (perchloroethylene). If you must use traditional dry cleaning, open the plastic bags on your clothing and air them out before putting them in a closet or on your body.

Use personal care products without chemicals like parabens or phthalates. They disrupt normal hormone function and are found in many personal care products. By law all skin care products must be labeled with the ingredients in descending order of their quantity in the product

Avoid alcohol. Regular, moderate use of alcohol affects the levels of important female hormones. Two to five drinks per day may be associated with a 40% higher rate of breast cancer than in non-drinkers. Women who choose to drink can lower their risk of developing breast cancer by taking 400 mcg. of folic acid or eat a folate rich diet.

Reduce or eliminate purchase of plastic products. Some plastics leach hormone-disrupting chemicals into whatever they come in contact with. Polyvinyl chloride (PVC) plastics are dangerous and used in toys that children put in their mouths, so keep an eye out for nontoxic toys.

Avoid PBDE s (polybrominated diphenyl ethers) found in electronic equipment and furniture. They are endocrine disruptors linked to reproductive damage, affect thyroid hormones and may cause cancer. They are flame retardants often added to polyurethane foam, various plastics, and electronics equipment. Choose carpet pads, bedding, cushions, and upholstered furniture made from natural fibers including wool, cotton, and hemp.

Learn how to handle stress. Levels of the stress hormone cortisol rise with increased stress. High cortisol levels suppress immune response by reducing natural killer cell activity. These cells are important in surveillance against malignant cells and for destroying viruses and tumor cells.

16 Learn to read labels; become an informed consumer.