

FIGHT NOW UPDATE

Eat & Live Proactively Against Breast Cancer

By Aaron Tabor, MD

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**FIGHT NOW BEFORE BREAST CANCER STRIKES.
PREVENTION IS THE BEST CURE.**

Dietary Pattern Effects Breast Cancer Risk

Research over the last several years has shown us that many individual foods and dietary patterns can impact a person's risk of developing breast cancer or having breast cancer recur. Much of this research has arisen from population differences in breast cancer rates and observed differences in dietary habits. China is one example of a country that historically has had a much lower breast cancer rate than the U.S.; however, it has been reported that breast cancer rates have been rising in China with this increase thought to be partly due to a more 'Westernization' of dietary habits.

To explore the possible effects of dietary patterns on breast cancer risk among Chinese women, breast cancer researchers enrolled 438 women with breast cancer and 438 healthy women without breast cancer in a new breast cancer study (free to download). The women in this breast cancer research study were interviewed using a food frequency questionnaire to determine dietary habits. Based on these interviews, two dietary patterns were identified: [1] a vegetable-fruit-soy-milk-poultry-fish pattern that was characterized by the high consumption of these foods and [2] a refined grain-meat-pickle pattern that was characterized by consumption of refined grains, processed meat, organ meat, beef, pork, lamb and salted/preserved vegetables. After analyzing dietary patterns in relation to breast cancer incidence and adjusting for possible confounding variables, the breast cancer researchers reported that:

- Women with a high intake of the vegetable-fruit-soy-milk-poultry-fish pattern had a low intake of the refined grain-meal-pickle pattern.
- Chinese women adhering the closest to the vegetable-fruit-soy-milk-poultry-fish pattern had a 74% reduction in breast cancer risk compared to women following this pattern but doing so at a low level.
- Following a refined grain-meat-pickle dietary pattern was linked to a nearly 3-fold increase in breast cancer risk among Chinese women.
- These relationships between dietary patterns and breast cancer risk did not change when breast cancer was examined by hormone receptor status.

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- The reduction in breast cancer risk with the vegetable-fruit-soy-milk-poultry-fish diet pattern and the increased breast cancer risk seen with the refined grain-meat-pickle diet pattern was observed in both premenopausal and postmenopausal Chinese women.

This is an interesting case-control breast cancer study that continues to confirm that our dietary habits can have a substantial impact on our risk for breast cancer. In this study, Chinese women who consumed high levels of fruits, vegetables, soy, poultry, fish, and dairy and consumed fewer amounts of refined grains and meats had a substantially lower breast cancer risk compared to women following an opposite dietary pattern. Other studies in different populations have reported similar results with individuals following a prudent dietary pattern (fruits, vegetables, fish) or a Mediterranean diet pattern showing a reduced breast cancer risk. These dietary patterns are typically rich in antioxidants, fiber, and healthy fats. In contrast, these beneficial nutrients are typically lacking in dietary patterns that lean heavily on meats and refined grains. Making appropriate, healthy dietary choices continues to be an important part of reducing one's breast cancer risk.

MRI Breast Cancer Screening Can Save Lives

The current breast cancer screening guidelines from the American Cancer Society recommend that women at high risk for breast cancer (typically greater than a 20% lifetime risk) receive both a yearly mammogram and a yearly magnetic resonance imaging (MRI) scan starting around 25-30 years of age. Women at elevated risk for breast cancer are generally those with gene mutations that increase breast cancer risk or have a family history of breast cancer. While previous research has shown that MRI breast cancer screening can be more efficient and detect breast cancer earlier than mammograms, the impact of MRI breast cancer screening on breast cancer survival has been uncertain.

Recently published results from the Dutch MRISC Screening Study suggest that MRI breast cancer screening might improve breast cancer survival in women at high risk for breast cancer. In this study, 2,157 women were categorized based on their cumulative lifetime risk for breast cancer as [1] moderate risk based on family history (15-30% lifetime risk), [2] high risk based on family history (30-50% lifetime risk), and [3] BRCA1/2 gene mutation carriers (50-85% lifetime risk). All women in the study received annual screenings that consisted of a yearly mammogram, twice yearly clinical breast cancer exams, and a yearly breast MRI and were followed for about 5 years from study entry or breast cancer diagnosis. The breast cancer researchers reported that:

- MRI screenings were slightly more than twice as sensitive at detecting invasive breast cancer than mammograms.
- No differences between MRI and mammograms were evident in the detection of ductal carcinoma in situ.
- The ability to detect invasive breast cancers with mammograms was lower in women with the BRCA1 gene mutation (25%) compared to women in the BRCA2 group (~62%) and women with a family history of breast cancer (~45-47%).

- The proportion of breast cancer tumors detected when still small (less than 1 cm) was lower in the BRCA1 group of women (~21%) compared to the other groups (~40-64%).
- Ductal carcinoma in situ was detected more frequently in women with a family history of breast cancer and in women with the BRCA2 gene mutation than women with the BRCA1 gene mutation.
- Distant metastasis-free survival (84%) and overall survival (93%) of BRCA1/2 gene mutation carriers with invasive breast cancer after 6 years of follow-up was high.
- 100% of women at high risk for breast cancer due to family history survived during the 6 years of follow-up.

These are important results for women at high risk for breast cancer for a couple of reasons. First, it is clear from this study that women carrying the BRCA1 gene mutation generally appear to be at greater risk for the detection of more advanced breast cancer (mammograms were less sensitive and apparently the detected tumors were generally larger) than other women at high risk for breast cancer. This is important when determining appropriate breast cancer prevention strategies for these women.

Second, these study results suggest that the incorporation of MRI as part of a high risk woman's breast cancer screening program might improve survival. While a control group that did not receive MRI screenings was not available in this study for direct comparison since it would be unethical not to provide the screenings for women at high risk for breast cancer, a story in the New York Times indicates that the study authors reported that previous studies in which MRI screenings were not used had a 5-year survival rate of only 74%, much lower than the 84-93% survival seen in this new study. While it has generally been believed that earlier detection of breast cancer with MRI screening in high risk women would lead to improved chances of survival, this is apparently the first study to confirm this belief. It is clear from this study that the inclusion of annual MRI screenings in addition to annual mammograms and clinical breast exams can be an important part of a breast cancer screening program for women at high risk for breast cancer.

Breast Cancer Survival Reduced By Smoking

Research has clearly shown that smoking can increase breast cancer risk and increase a breast cancer patient's risk for recurrence. However, the impact of smoking on the survival of breast cancer patients is less clear.

A new breast cancer study presented at the American Association for Cancer Research's 9th Annual International Conference on Frontiers in Cancer Prevention Research examined the relationship between smoking and mortality in nearly 2,300 women diagnosed with breast cancer between the years 1997 and 2000. The breast cancer researchers assessed death from breast cancer and death from non-breast cancer causes in addition to differences in other characteristics. After 9 years of follow up, the breast cancer researchers reported that:

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- Current or past smokers had a 39% higher rate of death from breast cancer compared to women who never smoked.
- Current or past smokers also were two times as likely to die from non-breast cancer causes compared to women who never smoked.
- The negative effect of smoking on breast cancer survival was greater in women with HER2-negative breast cancer (61% greater risk) and in postmenopausal women (47% greater risk).

This new breast cancer study continues to show us the negative health consequences of smoking tobacco. While previous studies have clearly shown that smoking can increase a person's odds of getting breast cancer, this new study shows that smokers who do develop breast cancer are at a much higher risk for dying from breast cancer as well as from other non-breast cancer causes. This clearly suggests that quitting smoking should be an important part of the breast cancer survival strategy of breast cancer patients who smoke. In addition to the numerous other health benefits linked with giving up smoking, the results of this study indicate that quitting will improve a breast cancer patients chances of long-term survival.



ABOUT DR. TABOR

Dr. Aaron Tabor, MD is the author of *FIGHT NOW*.

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After graduating from The Johns Hopkins School of Medicine, Dr. Tabor devoted his career to helping people live a life they love through medical research. Over 1 million women have already trusted Dr. Tabor for better nutrition and health education. His *prevention through nutrition* research projects with leading hospitals include cancer, weight loss, younger-looking skin, hair, and nails, glycemic-index, cholesterol, pain, and hormonal health. Dr. Tabor educates other doctors about diet and lifestyle research as the Diet & Alternative Medicine Section Editor for *The Journal of Medicine*. He has authored numerous books, papers, and patents in the fields of medicine and nutrition. His recent co-edited book *Nutritional Cosmetics: Beauty from Within* (Elsevier) is the first medical textbook on “inside-out makeover” science—foods and supplements to make you look younger from the inside out. L’Oréal, Nestlé, and others contributed to this cutting-edge work. Dr. Tabor is Founder of Gene Facelift, a Johns Hopkins’ biotech spin-off developing anti-aging and anti-wrinkle gene therapy drugs. Gene Facelift’s drug technology is designed to replace damaged skin DNA in order to heal wrinkles and reverse the aging process.

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