



Call Toll Free: **877-985-2695**

## Abolishing Mammography Screening Programs? A View from the Swiss Medical Board

April 30, 2014 | 86,132 views

---

**By Dr. Mercola**

Last year, the Swiss Medical Board, an independent health technology assessment initiative, was asked to prepare a review of mammography screening. The team of experts on the board included a medical ethicist, a clinical epidemiologist, a pharmacologist, an oncologic surgeon, a nurse scientist, a lawyer, and a health economist.

After a year of reviewing the available evidence and its implications, they noted they became "increasingly concerned" about what they were finding. The "evidence" simply did not back up the global consensus of other experts in the field suggesting that mammograms were safe and capable of saving lives.

On the contrary, mammography appeared to be preventing only one death for every 1,000 women screened, while causing harm to many more. Their thorough review left them no choice but to recommend that no new systematic mammography screening programs be introduced, and that a time limit should be placed on existing programs.

In their report, made public in February 2014,<sup>1</sup> the Swiss Medical Board also advised that the quality of mammography screening should be evaluated and women should be informed, in a "clear and balanced" way, about the benefits and harms of screening.

The report caused an uproar among the Swiss medical community, but it echoes growing sentiments around the globe that mammography for breast cancer screening in asymptomatic populations no longer makes sense.

### 3 Primary Reasons the Swiss Medical Board Recommended No More Systematic Mammograms

In a perspective piece published in the *New England Journal of Medicine*,<sup>2</sup> two members of the Swiss Medical Board's expert panel explained how they reached their conclusions. Three primary factors came into play:

#### 1. Outdated Clinical Trials

The ongoing debate over mammography screening is based on a "series of re-analyses of the same, predominantly outdated trials." The first mammography trial began more than 50 years ago and the last trial was in 1991.

The mammography benefits that were supposedly found during these trials were prior to the era of modern breast cancer treatment, in which the prognosis of women with breast cancer has improved significantly from even two decades ago. The expert panel questioned:

*"Could the modest benefit of mammography screening in terms of breast-cancer mortality that was shown in trials initiated between 1963 and 1991 still be detected in a trial conducted today?"*

#### 2. The Benefits Did Not Clearly Outweigh the Harms

The experts noted they were "struck by how nonobvious it was that the benefits of mammography screening outweighed the harms."

They cited a recent study published in *British Medical Journal (BMJ)*<sup>3</sup> -- one of the largest and longest studies of mammography to date -- involving 90,000 women followed for 25 years. It found that mammograms have absolutely NO impact on breast cancer mortality.

Over the course of the study, the death rate from breast cancer was virtually identical between those who received an annual mammogram and those who did not, while 22 percent of screen-detected invasive breast cancers were over-diagnosed, leading to unnecessary treatment. The experts noted:

*"This means that 106 of the 44,925 healthy women in the screening group were diagnosed with and treated for breast cancer unnecessarily, which resulted in needless surgical interventions, radiotherapy, chemotherapy, or some combination of these therapies."*

A Cochrane Collaboration review also found no evidence that mammography screening has an effect on overall mortality,<sup>4</sup> which, taken together, seriously calls into question whether mammography screening really benefits women. According to the authors of the Cochrane review:

*"If we assume that screening reduces breast cancer mortality by 15% and that overdiagnosis and overtreatment is at 30%, it means that for every 2000 women invited for screening throughout 10 years, one will avoid dying of breast cancer and 10 healthy women, who would not have been diagnosed if there had not been screening, will be treated unnecessarily."*

*Furthermore, more than 200 women will experience important psychological distress including anxiety and uncertainty for years because of false positive findings."*

### 3. Women's Perceptions of Mammography Benefits Do Not Match Reality

The experts also said they were "disconcerted" by the profound discrepancy between women's perceptions of mammography benefits and the actual benefits.

In one survey, most women said they believed mammography reduced the risk of breast cancer deaths by at least half and prevented at least 80 deaths per 1,000 women screened. In reality, mammography may, at best, offer a relative risk reduction of 20 percent and prevent in absolute terms *only one* breast-cancer death per 10,000 women. The experts asked a long overdue question:

*"How can women make an informed decision if they overestimate the benefit of mammography so grossly?"*

The sad reality of course, is that they can't. Many women are still unaware that the science backing the health benefits of mammograms is sorely lacking. Instead of being told the truth, women are guilt-tripped into thinking that skipping their yearly mammogram is the height of irresponsibility. It can be hard to stand your ground against such tactics. After all, you expect health professionals to know what they're talking about, and to give you the best advice possible.

When it comes to cancer prevention, however, many doctors are just as confused and manipulated as the average person on the street because of the relentless industry and media propaganda that downplays or ignores research that dramatically contradicts their profit-based agenda.

Indeed, mounting research shows that *more* women are being harmed by regular mammograms than are saved by them. In light of such facts, avoiding an annual mammogram is hardly an irresponsible act.

Ditto for saying "no thanks" to 3D tomosynthesis, which exposes you to an even greater amount of cancer-causing radiation for virtually no additional benefit. Please understand that there *are* other screening options, each with their own strengths and weaknesses, and you have a right to utilize those options. Also remember that in order to truly avoid breast cancer, you need to focus your attention on actual prevention and not just early detection.

## Certain Factors, i.e. Dense Breasts and Genetics, Make Mammograms Even Riskier

Under normal circumstances, the Swiss Medical Board reported that for every breast-cancer death prevented in US

women over a 10-year course of annual screening beginning at 50 years of age:<sup>5</sup>

- 490 to 670 women are likely to have a false positive mammogram with repeat examination
- 70 to 100, an unnecessary biopsy
- Three to 14, an over-diagnosed breast cancer that would never have become clinically apparent

This lack of clear benefit, and evidence of apparent harm, was enough for them to recommend abolishing mammography-screening programs. You might be surprised to learn, however, that for some women the effectiveness of mammograms is even less... or poses an even greater risk of harm. Up to 50 percent of women have dense breast tissue, which makes mammograms very difficult to decipher. Dense breast tissue and cancer both appear white on an X-ray, making it nearly impossible for a radiologist to detect cancer in these women. It's like trying to find a snowflake in a blizzard.

Breast density laws have now been passed in California, Connecticut, New York, Virginia, and Texas, making it mandatory for radiologists to inform their patients who have dense breast tissue that mammograms are basically useless for them. A law is now being considered at a federal level as well.

Some radiologists already provide density information to their patients, and encourage them to utilize other options like thermography, ultrasound, and/or MRI. I believe it reasonable for a woman to trust that her radiologist is not withholding vital breast density information. Unfortunately, many have kept this potentially lifesaving data from women for decades, and our government agencies have failed to protect them from this unethical, albeit profitable practice.

Another at-risk group are women with BRCA 1/2 mutation, which is associated with an increased risk of breast cancer. Results published in *BMJ* in 2012 showed that women carrying this mutation are *particularly* vulnerable to radiation-induced cancer.<sup>6</sup> Women carrying this mutation who were exposed to diagnostic radiation before the age of 30 were *twice* as likely to develop breast cancer, compared to those who did not have the mutated gene.

They also found that the radiation-induced cancer was dose-responsive, meaning the greater the dose, the higher the risk of cancer developing. The authors concluded that: "*The results of this study support the use of non-ionizing radiation imaging techniques (such as magnetic resonance imaging) as the main tool for surveillance in young women with BRCA1/2 mutations.*" Despite these findings, the National Cancer Institute reports that some expert groups recommend women with BRCA 1/2 mutation have a mammogram every year starting as young as age 25<sup>7</sup> – the exact scenario that the *BMJ* study found may double their breast cancer risk!

## How to Lower Your Risk of Breast Cancer Naturally

It's important to remember that early diagnosis is *not* the same as prevention. And cancer screening that does more harm than good can hardly qualify as "your best bet" against becoming a cancer statistic! I believe the vast majority of all cancers could be prevented by strictly applying basic, common sense healthy lifestyle strategies, such as the ones below.

- **Avoid sugar, especially fructose, and processed foods.** All forms of sugar are detrimental to your health in general and tend to promote cancer. Refined fructose, however, is clearly one of the most harmful and should be avoided as much as possible. This automatically means avoiding processed foods, as most are loaded with fructose.
- **Optimize your vitamin D levels.** Vitamin D influences virtually every cell in your body and is one of nature's most potent cancer fighters. Vitamin D is actually able to enter cancer cells and trigger apoptosis (programmed cell death). If you have cancer, your vitamin D level should probably be between 70 and 100 ng/ml. Vitamin D works synergistically with every cancer treatment I'm aware of, with no adverse effects. Ideally, your levels should reach this point by exposure to the sun or a safe tanning bed, with oral vitamin D used as a last resort.
- **Limit your protein.** Newer research has emphasized the importance of the mTOR pathways. When these are active, cancer growth is accelerated. One way to quiet this pathway is by limiting your protein to one gram of protein per kilogram of lean body mass, or roughly a bit less than half a gram of protein per every pound of lean body weight. For most people, this ranges between 40 and 70 grams of protein a day, which is typically about 2/3 to half of what they are currently eating.
- **Avoid unfermented soy products.** Unfermented soy is high in plant estrogens, or phytoestrogens, also known as isoflavones. In some studies, soy appears to work in concert with human estrogen to increase

breast cell proliferation, which increases the chances for mutations and drives the phenotype associated with cancer.

- **Improve your insulin and [leptin](#) receptor sensitivity.** The best way to do this is by avoiding sugar and grains and restricting carbs to mostly fiber vegetables. Also make sure you are exercising, especially with [Peak Fitness](#).
- **Exercise regularly.** One of the primary reasons [exercise](#) works to lower your cancer risk is because it drives your insulin levels down, and controlling your insulin levels is one of the most powerful ways to reduce your cancer risks. It's also been suggested that apoptosis (programmed cell death) is triggered by exercise, causing cancer cells to die in the way nature intended. Studies have also found that the number of tumors decrease along with body fat, which may be an additional factor. This is because exercise helps lower your estrogen levels, which explains why exercise appears to be particularly potent against breast cancer.
- **Maintain a healthy body weight.** This will come naturally when you begin [eating right](#) and exercising. It's important to lose excess body fat because fat produces estrogen, creating a vicious self-perpetuating cycle.
- **Drink a pint to a quart of organic green vegetable juice daily.** Please review [my juicing instructions](#) for more detailed information.
- **Get plenty of high-quality, animal-based omega-3 fats, such as krill oil.** [Omega-3 deficiency](#) is a common underlying factor for cancer.
- **Curcumin.** This is the main active ingredient in [turmeric](#) and in high concentrations can be very useful adjunct in the treatment of cancer. It actually has the most evidence-based literature supporting its use against cancer of any nutrient, including vitamin D.<sup>8</sup> For example, it has demonstrated major therapeutic potential in preventing breast cancer metastasis.<sup>9</sup> It's important to know that curcumin is generally not absorbed that well, so I've provided several [absorption tips](#) here. Newer preparations have also started to emerge, offering better absorption. For best results, you'll want to use a sustained release preparation.
- **Avoid drinking alcohol,** or at least limit your alcoholic drinks to one per day.
- **[Avoid electromagnetic fields as much as possible.](#)** Even electric blankets may increase your cancer risk.
- **Avoid synthetic hormone replacement therapy, especially if you have risk factors for breast cancer.** Many forms of breast cancer are estrogen-fueled, and according to a study published in the *Journal of the National Cancer Institute*, breast cancer rates for women dropped in tandem with decreased use of [hormone replacement therapy](#). (There are similar risks for younger women who use oral contraceptives. Birth control pills, which are also comprised of synthetic hormones, have been linked to cervical and breast cancers.) If you are experiencing excessive menopausal symptoms, you may want to consider bioidentical hormone replacement therapy instead, which uses hormones that are molecularly identical to the ones your body produces and do not wreak havoc on your system. This is a much safer alternative.
- **Avoid BPA, phthalates, and other xenoestrogens.** These are estrogen-like compounds that have been linked to increased breast cancer risk.
- **Make sure you're not iodine deficient,** as there's compelling evidence linking iodine deficiency with certain forms of cancer. Dr. David Brownstein, author of the book *Iodine: Why You Need It, Why You Can't Live Without It*, is a proponent of iodine for breast cancer. It actually has potent anticancer properties and has been shown to cause cell death in breast and thyroid cancer cells.<sup>10</sup> For more information, I recommend reading Dr. Brownstein's book. I have been researching iodine for some time ever since I interviewed [Dr. Brownstein](#) as I do believe that the bulk of what he states is spot on. However, I am not at all convinced that his dosage recommendations are correct. I believe they are far too high.
- **Avoid charring your meats.** Charcoal or flame-broiled meat is linked with increased breast cancer risk. Acrylamide—a carcinogen created when starchy foods are baked, roasted, or fried—has been found to increase cancer risk as well.

This is not an exhaustive list. There are many other strategies that can be useful as well, like practicing self-love and self-acceptance. In the video below, you can view my interview with Dr. Christiane Northrup, a practicing physician and ob-gyn specialist who has dedicated a good portion of her life to helping women take control of their health. She believes women who tend to be most at risk for breast cancer are those who have difficulty nurturing themselves and receiving pleasure, which is why learning nurturing self-love and self-acceptance may be especially important for women.

[Download Interview Transcript](#)

**[+] Sources and References**

**[+] Comments (43)**