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Veteran Abortion Advocate Renews ABC Link Denial by Joel Brind, PhD



For decades, Dr. David Grimes has been honored by feminist groups and professional ObGyn organizations alike over many years for his pioneering work on women's reproductive health. He's also quite a famous ObGyn (as well as a preventive medicine specialist and epidemiologist), having published 10 books and hundreds of peer-reviewed articles. So one would think his writings would embody some real erudition and academic integrity and precision. Unfortunately, however, Grimes is also a veteran abortion practitioner and abortion advocate, and so wedded to the idea of "safe abortion" that it has thoroughly corrupted his communications.

Most recently (Feb. 26, on "The Blog" of the ironically labeled "Health Living" section of the *Huffington Post*), Grimes posted an article entitled "Abortion and Breast Cancer: How Abortion Foes Got It Wrong." I say "ironic" because this article is about the most flagrantly over-the-top dishonest piece I have read in a very long time about the abortion-breast cancer link (ABC link), penned by someone who certainly knows better.

Grimes starts with the idea that the abortion-breast cancer connection (ABC link) "was debunked long ago." In truth, it was the denial that has been repeatedly debunked. The largest and most egregious of prior "studies" Grimes relies on is "a landmark prospective study of women in Denmark." But Grimes neglects to tell us that this 18-year-old study was debunked by published correspondence that demonstrated that 60,000 women in the study who had had legal abortions on record, were misclassified as not having had any abortions, and that the fundamental rule of temporality was violated by

(Continued on page 2)

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This Year's Golf Classic Honors

Beth Anne Fitzpatrick

by Robert Gerling

Save the date: June 5th 2015!



Please save the date and come and join us if you can at the beautiful Cranbury Golf Club in New Jersey for our 5th Annual BCPI Outing. After a very long and hard winter, enjoying the sun and camaraderie of other BCPI supporters with a round of golf and dinner is a great way to spend the day.

This year's honoree is Beth Anne Fitzpatrick. Beth Anne has been a long time supporter of BCPI and has been facing the challenge of breast cancer.

She is a wife, mother of four and grandmother of four. She is a cum laude graduate of Boston College and a guidance counselor at St. Vincent dePaul School. She is passionate about getting the information about the carcinogenic effects of the pill to teens and young women. She also has been a great supporter of the book, "Complications." BCPI wants to honor and support her during her treatment and thank her for her years promoting our mission.

Details of this event will be available soon on the BCPI website.

A Note from the President

This month it will be 15 years since BCPI was incorporated as a non-profit educational charity. In the last 5 years BCPI has grown — adding to the materials we publish and the expansion of our web site. We have become not only a national but international resource for information. This past March, Dr. Brind and I spent 2 days at the United Nations in New York City during the 59th session of the Commission on the Status of Women. We were part of a panel held in the Dag Hammarskjöld Library entitled "Beijing +20 Sexual Health, Research and the Empowerment of Women and Girls," a collaboration of the Permanent Mission of Sierra Leone and the Australian NGO Endeavour Forum. We spoke about how breast cancer incidence could be reduced with pregnancy and breast feeding and avoiding breast cancer risks including information on hormonal contraceptives and replacement therapy, premature birth



Angela Lanfranchi, MD



(Continued on page 2)

Nutrition, Exercise and Breast Cancer Prevention

by Angela Lanfranchi, MD



If you're like me, you can get sick of hearing about "diet and exercise" as the great panacea for whatever health problem you might encounter. But now, science is drilling down to the molecular level as to why they have an important role in breast cancer prevention. I will no longer tune out the constant advice about exercise and carbs which is so annoying to so many.

Over 10 years ago, in 2004, a study published in JAMA, showed that women who exercised had a nearly 20% decrease risk in breast cancer. The study, which was part of the Women's Health Initiative Cohort Study, showed that women who did the equivalent of brisk walking 75 to 150 minutes a week had an 18% reduction in risk compared to inactive women. This reduction occurred even in women who had a family history of breast cancer or took hormone replacement therapy.

The biological basis for exercise risk reduction is being discovered.

A recent study by researchers at the University of New Mexico regarding the hormone Irisin suggests that this hormone may both prevent breast cancer and boost the effect of chemotherapy used treating breast cancer. Irisin is a newly discovered hormone that is released from muscle after exercise. Irisin was discovered by Harvard researchers and was shown to stimulate metabolism in fat. Although there was strong data that showed exercise improved breast cancer survival, scientists at the University of New Mexico were the first to investigate the role of Irisin. In vitro, Irisin selectively killed cancer cells and did not harm normal cells. There was a 22-fold increase in cell death (apoptosis) when combined with the chemotherapy drug doxorubicin. Apoptosis is one of the body's defense mechanism against cancer cells that have formed.

A recent July 2014 study published in Cancer Epidemiology Bio-IGF markers and Prevention by Edmond and colleagues found that women were twice as likely to have recurrence of their breast cancer if their carbohydrate intake remained stable or increased. Carbohydrates are those foods that are neither proteins nor fats. Breads, starches such as rice and potatoes, and all pastas are common carbohydrates that we eat. If the can-



(Continued on page 2)

A Note from the President (Continued from page 1)

and induced abortion. We also gave presentations at the Church Centre during an event for other international NGOs with an audience from Asia, Africa, Australia and the Americas. Our board members continue to be resources for testimony to State and Federal legislative members as well as other non-profits who use our materials to create public policies that would result in the reduction of breast cancer.

This year we hope to begin and complete the 5th edition of our Risk and Prevention booklet last published in 2007, and respond to requests for additional informative brochures on a variety of topics, such as the one I write about in this BCPI Report on the mechanisms of the influence of diet and exercise on breast cancer risk.

Foremost, what our board must do is to thank you and acknowledge you, our BCPI supporters, that make our work possible.

We at BCPI wish to sincerely thank all the schools, small businesses, church groups, sports teams, and more for all the hard work you do to set up fund raisers, special events, concerts, bake sales, walks, and other creative events to raise funds for BCPI. You have touched our hearts; some of your notes, especially from young children, have filled our eyes with tears. We appreciate all of you, from 1st graders to seniors, using your enthusiasm and creative talents for setting up Denim Days, Pink Days, making pink ribbons to sell at schools, organizing sports events, baking goodies, running car washes, and so much more. Especially in a school setting, we see your events, small or large, drawing in faculty and administrators, parents, extended family and the community. Then there are the small businesses who creatively fill their customers needs and desires while sharing a percentage of their profits with us.

Thank you all from the bottom of our hearts!!!



The Breast Cancer Prevention Institute

is a non-profit, 501(c)(3) corporation.

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Veteran Abortion Advocate Renews ABC Link Denial (Cont. from page 1)

the authors' inclusion of breast cancer diagnoses since 1968, but abortions only since 1973. These were based on the Danish authors' false claim that abortion was legalized in Denmark in 1973, when in fact, it had been legalized way back in 1939. (We're talking about the 1997 Danish study in the New England Journal of Medicine, by Mads Melbye, et al., which is familiar to many BCPI Report readers.)

But Grimes' main argument rests on another false report emanating from Sweden—a 23-year-old paper that claimed to show evidence of "recall bias," i.e., that healthy women (called "controls" in epidemiological studies) "underreport" (i.e., lie about) more prior abortions on study questionnaires than do breast cancer patients (called "cases" in epidemiological studies). Grimes even shows statistical data tables to evidence how such differential "underreporting" "caused an apparent 60% increase in risk!" among women who'd had an abortion. Note the use of simple past tense to explain the data tables, as if they come from a real study, like that 1991 Swedish study. Trouble is, the tabular data Grimes shows are 100% fictitious. Why not use the originals? That's easy: The original data tables document the differential "overreporting" of abortions among patients as the basis for the finding of significant response bias. "Overreporting" represents the notion that breast cancer patients will imagine abortions that never took place—based on the fact that they report some abortions that do not appear on the computerized record. So preposterous is the notion of overreporting that seven years later, the Swedish group (headed by Olav Meirik of the WHO) publically re-

Nutrition and Exercise (Continued from page 1)

cer tested positive for IGF-1, Insulin-like Growth Factor, which increases in response to eating carbohydrates, there was a 70% increase in the risk for recurrence of breast cancer. If the tumor had IGF-1 receptors and the patient had stable or increased carbohydrate intake, there was a 500% increase risk of recurrence.

The biological basis for carbohydrate risk is being discovered.

IGF-1 is a protein similar in structure to insulin and is a growth factor which is involved in normal breast development. It is necessary for normal breast development during puberty by stimulating growth. IGF-1 also suppresses apoptosis which can cause mutated or cancer cells death, thereby helping the body to rid itself of cancer.

It is well known that post menopausal obesity causes an increase risk of breast cancer. Obesity is also linked to eating and absorbing carbohydrates which elevates IGF-1. High glycemic index foods which quickly raise blood glucose (sugar) levels are associated with a 57% increased risk of breast cancer, especially in those who are already obese. Asian women who typically have a low risk of breast cancer are also affected by their glycemic load. Asian women who ate white rice which is quickly digested and elevates glucose levels have a higher risk of breast cancer than Asian women who ate slower digesting brown rice, which results in lower levels of glucose. When glucose levels get in the diabetic range of greater than 180, breast cancer risk doubles in post menopausal women compared to those with normal blood glucose levels. Women with excess carbohydrate consumption are also more likely to develop triple negative breast cancer, the type most difficult to treat because they cannot be treated with estrogen blocking or lowering drugs nor a monoclonal antibody to the Her 2 neu receptor. High levels of IGF-1 is associated with 60-86% increase risk breast cancer in premenopausal women.

High carbohydrate diets produce chronic elevation of insulin. Insulin in turn is a growth factor and insulin stimulates breast cancer cells to grow. Receptors for IGF-1, Insulin-like Growth Factor, is very similar to insulin. These receptors, found in some breast cancers, is the probable common denominator linking high carbohydrate diet to cancer.

IGF-1 promotes rapid cell multiplication and reduces cell death, apoptosis. There is a strong correlation of carbohydrate consumption, IGF-1 and breast cancer risk. Research has shown that women with low IGF-1 levels are more likely to survive breast cancer.

A Low carbohydrate diet is less than 130 grams or up to 25% of daily calories; a High carbohydrate diet is over 225 grams or up to 45% of calories a day.

tracted the claim (in correspondence with my research group, all published in the British Medical Association's *Journal of Epidemiology and Community Health*, following the publication in that journal in 1996 of our "Comprehensive Review and Meta-analysis" of ABC link studies) admitting that the phantom abortions were real but "not recorded as legally induced abortions."

All this rehashing and misrepresenting of bad science that Grimes engages in might be funny were the ABC link not devastating so many women's lives. In this regard it is not funny at all that Grimes is totally silent on the veritable tsunami of ABC link evidence that has poured in from Asia in just the last few years, as we have been documenting in the BCPI Report. A 2014 meta-analysis of 36 studies from mainland China reported a 44% overall increase in breast cancer risk among women with any abortions. But the strongest evidence comes from South Asia (i.e., India, Pakistan, Bangladesh, Sri Lanka), where the typical woman marries young, has several children and breastfeeds them all, and never drinks alcohol or smokes cigarettes. In such populations—where there is little else besides abortion to cause breast cancer—relative risks for abortion average greater than fourfold and as high as 20-fold; according to at least a dozen South Asian studies in the last 5 years alone! With over a billion women in China and India alone, it's very conservative to predict millions of breast cancer deaths in Asia attributable to abortion, in the coming decades. No wonder Grimes is not interested in the recent data, for it is devastating to his "safe abortion" agenda.