

Thermography: A Safer Option for Breast Cancer Detection

by Mary Laredo, citizen journalist

(NaturalNews.com) The occurrence of breast cancer has dramatically increased in the past 50 years and the medical establishment encourages the use of annual mammogram screenings as a woman's best option for early detection. In fact, for more than 30 years it's been the unquestioned, standard screening device used by the medical community. While mammography may be useful in certain situations, it has many disturbing drawbacks.

With toxic radiation, mammogram testing compresses sensitive breast tissue causing pain and possible tissue damage. To make matters worse, the false negative and false positive rates of mammography are a troubling 30% and 89% respectively.(1) Another concern is that many breast cancers occur below the armpits; however, mammography completely misses this auxiliary region, viewing only the breast tissue compressed between two plates of glass. Considering these drawbacks, breast thermography should be given closer consideration.

Thermography (also called thermology) is a little-known technique for breast cancer detection that's been available since the 1960s. It's non-invasive and non-toxic, using an infrared camera to measure thermal emissions from the entire chest and auxiliary regions. Cancerous tissue develops a blood supply to feed a growing tumor, and the abnormal blood vessel formations generate significantly more heat than the surrounding healthy tissue. The infrared camera detects the differences in heat emitted from abnormal tissue (including malignancies, benign tumors and fibrocystic disease), as compared to normal tissue. There is no physical contact with the patient, who stands several feet away from the camera while a technician takes a series of images.

Thermography can detect abnormalities before the onset of a malignancy, and as early as ten years before being recognized by other procedures such as manual breast exam, mammography, ultrasound or MRI.(2) This makes it potentially life-saving for women who are unknowingly developing abnormalities, as it can take several years for a cancerous tumor to develop and be detected by mammogram. Its accuracy is also impressive, with false negative and false positive rates at 9% for each.(3) Thermography is also an effective way to establish a baseline for comparison with future scans; therefore, women should begin screening by the age of 25.

Although widely embraced by alternative health care practitioners, thermography's obscurity in the mainstream means that too many women rely on mammograms as their only option. There are several reasons for thermography's lack of support by the conventional medical community. Early thermal scanners were not very sensitive, nor were they well-tested before being used in clinical practice. This resulted in many misdiagnosed cases and its utter dismissal by the medical community. Since then the technology has advanced dramatically and thermography now uses highly sensitive state-of-the-art infrared cameras and sophisticated computers. A wealth of clinical research attests to its high degree of sensitivity and accuracy. In 1982, the FDA approved thermography for breast cancer screening, yet most of the medical establishment is either unaware of it or still associates it with its early false start. Since most women are also uninformed of the technology there is no pressure on the medical community to support it.

This author - who knows from first-hand experience the physical and emotional trauma of mammography as well as the passive and comforting accuracy of thermal scanning – would have been spared from years of radiation exposure with an earlier knowledge of thermography. The importance of education and awareness of this technology cannot be overstated.

When a thermographic report is negative, annual monitoring is essential to note any changes as early as possible. A positive report should be discussed with a health care practitioner as it may be necessary to follow-up with another detection method such as mammography or ultrasound to identify the exact location of the abnormality and to determine whether tissue biopsy is needed. If mammography is used to complement the thermal scan, it's important to offset the affects of radiation prior to and following the procedure. Wheat grass juice, green super foods, or brown seaweed such as Modifilan are powerful detoxifiers.

Breast abnormalities and tumors are merely symptoms of imbalances within the body's internal terrain that need to be identified and corrected. A thoughtful and careful look at diet, exposure to toxins, and lifestyle should be the first line of defense against any disease. This, and regular thermal screenings provide an effective arsenal against breast cancer. An internet search of thermography will locate qualified technicians in your area.

1. *Saputo, MD. Len. Overview: Beyond Mammography. From his account of the "Breast Cancer Detection Demonstration Project: Five Year summary*

report" CA: A Cancer Journal for Clinicians, Vol 32, 194-225, Copyright © 1982 by American Cancer Society.

2. International Academy of Clinical Thermology, <http://www.iact-org.org/>

3. <http://healthybreasts.info/> Summary from "Value and Interest of Dynamic Telethermography in Detection of Breast Cancer", *ACTA Thermographica*,

Vol. 1, Num. 2, 89-96, 1976.