

Elva Elliott:

Elva Elliott (not her real name) was upset. She walked out of her doctor's office after learning that she would need yet another breast biopsy. She'd been through this two times already and she just wanted it to stop. She'd lost track of the number of cysts she'd had aspirated. She didn't understand why she had lumpy, bumpy, tender breasts and increasingly large nodules. She was always afraid that one of the lumps would be cancer. So far, none of them had been. But she had heard reports on the news recently that young African-American women, like her, who developed breast cancer, died more frequently than young white women. She was fearful that one of these days, one of these lumps would be cancer.

She was tired of getting cut on. As soon as she recovered, another lump would develop.

She was also having more breast pain, fluid retention and moodiness, especially right before her periods. She didn't even want to hug her husband, her breasts were so tender. This was getting to be an issue between them. He understood, but he was frustrated.

She had been diagnosed with Fibrocystic Breast Disease (FBD), which 60-80 % of women have. Many doctors consider it so common that they no longer call it a disease. Well, she didn't know what it was, but she knew it wasn't healthy. She cut back on caffeine and took extra Vitamin E to minimize her tendency to get the breast lumps, but it didn't seem to help much. She tried and failed to give up chocolate. She had to have a little bit of chocolate everyday, more before her periods. She put herself on a guilt trip, knowing the chocolate was feeding the cysts.

Now she was looking at another biopsy. She got in her car, felt the new lump in the upper outer quadrant of her left breast against the seat belt, and her eyes welled up. She bit her



Lumpy, Bumpy, Painful Breasts

lip, turned on the car, and drove home.

When she got home, her husband, Anthony, tried to give her a hug, but she pushed him away and she didn't hug her kids.

After she explained what was going on, Anthony said "Honey, there has to be a better way. I hate for you to go through another operation. Your breasts are too pretty to get cut up all the time."

Elva rolled her eyes. Wasn't that just like a man? But she too was getting frustrated with the scars on her breasts.

Second opinion

A couple of weeks later I met Elva Elliott in my office. She was a short, curvy woman with ebony colored skin, who wore a relatively

snug top and was obviously comfortable with her figure.

"When did you start having problems with your breasts?" I asked.

"I've had some problems ever since I went through puberty in fourth grade; I grew out instead of up," she laughed. "No, actually I've had the most problems since the birth of my kids. Since then I've had numerous lumps and cysts."

"When was your first period?" I asked.

"Fifth grade, I still remember bleeding all over the place, the first time. Not a great way to be introduced to growing up," she laughed sarcastically.

"Have you had other female problems?" I asked.

"Yes. I had endometriosis when I was in my late teens. Awful pain with my periods. I took birth control pills which fixed it and after I had my two kids in my mid-twenties, I didn't have problems with it anymore. Now I use an IUD."

"What about PMS? Any moodiness, fluid retention, breast tenderness?" I asked.

"All the above plus food cravings, especially chocolate just before my periods." >>>

"Did you breast-feed your children?"
"Absolutely," Elva bragged. "They are so smart and healthy now."

"Were you exposed to cigarette smoke as a youngster or as a teenager?"

"Oh yeah. Both of my parents smoked back then. Neither of them knew any better. I've never smoked."

"Did you have any x-rays when you were younger?"

"Had a CT scan of my abdomen in the 5th grade. They thought I might have an ovarian cyst or appendicitis. I didn't. But I have had several ovarian cysts since then."

"Any family history of breast, uterine, ovarian or prostate cancer?" I asked.

"Thank goodness, no. Everyone has diabetes and heart attacks," she answered.

"I see you wear a bra. How many hours a day do you spend in your bra?"

Elva looked at me, rolled her eyes, and said, "My friend told me you would ask me that question. I couldn't possibly unleash these babies on the world. That would be scary! I just feel more comfortable in a bra twenty-four hours a day. I like clingy tops like this. I don't want my breasts to sag and I don't like for people to see my nipples. My nipples are big, so I have to wear a bra."

"And the bra at night?" I asked.

"Believe it or not I'm kind of shy," she smiled.

Physical Exam

Elva was 34 years old and had beautiful skin with very few wrinkles. She had large breasts and she was only 5'2". Examination showed that she had significant fibrocystic changes throughout both breasts and she had an obvious 1 inch lump in the upper outer-quadrant of her left breast, which was exquisitely tender. She had deep red strap marks across her shoulders and around her breasts from her underwire bra. Lastly, she had some roughness of her elbows and knees suggesting Vitamin D deficiency.

As I examined her breasts she said, "How do you tell the difference between these lumps and breast cancer?"

"Bottom line, you can't, because you can have FBD and cancer at the same time. But stick your tongue into your cheek and hold it there. Now feel the firmness of your tongue through your cheek. It gives a little, but not much. It's not tender and it doesn't move when you push on it. Next, feel from the base of your left little finger using the fingers of your right hand, down the side of your palm towards your wrist and you'll feel a bony prominence right at the top of your wrist on the lower lateral part of your palm. You feel that?"

"Yes."

"The consistency of breast cancer is somewhere between the firmness of your tongue stuck in your cheek and that bony prominence in your hand. It either feels hard and bony, or firm. It doesn't move and it doesn't hurt or feel tender. Breast cancer feels like a marble underneath a rug.

"The lumps that you have in your breasts are a combination of scar tissue, fibrous breast tissue and cysts which feel more rubbery, not hard. They aren't fixed or attached to the chest wall. You can push on them and they move some. And they're tender when it gets close to your period. Right?"

"Right, like now."

A breast Thermogram can find problems 5 to 8 years before the problems can be seen by a mammogram. If the Thermogram is used in conjunction with a mammogram, it is possible to detect 95% of early breast cancer.

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"What I'm feeling now is FBD. I don't feel anything that feels like cancer," I reassured her.

Elva breathed a deep sigh and her whole body relaxed.

Testing

We put an iodine patch on her skin to determine her need for iodine. Iodine is essential for healthy breasts and good lymphatic flow. We drew a 25-hydroxy Vitamin D level on her because Vitamin D is necessary for healthy breasts. It also reduces the risk of breast cancer. Frequently, Vitamin D levels are low in African-American women because the darker the skin, the more difficult it is to make Vitamin D. We drew a progesterone level since low levels during the two weeks before the period cause breast and ovarian cysts and PMS. Lastly, we ordered a thermogram, an infrared picture, of her breasts. This gives us a good picture of the physiology or health of the breast tissue itself.

Educating the patient

After the tests, I explained to Elva that her FBD could be due to a number of factors including iodine deficiency, too much estrogen, too little progesterone relative to estrogen, and toxins accumulating in her breasts.

Many women can become estrogen dominant; that is, they have too much estrogen for the amount of progesterone that their ovaries produce. Their bodies can produce the estrogen in the ovaries or in fat.

Or it can be environmental estrogens, chemicals with estrogen-like effects, like phthalates in plastic wrap and polycyclic aromatic hydrocarbons (PAH) in cigarette smoke, automobile exhaust, and grilled foods. Another is Bisphenol A which is in heavier plastic bottles and is a liner in most canned food. When scientists started using new plastic test tubes in the early 1990's they found Bisphenol A leached out of the new test tubes and stimulated the growth of breast cancer cells in culture. A government panel in August sided with industry declaring that it wasn't a problem because of low concentra-

tion, ignoring the environmental scientists' observations and concerns.

If that wasn't bad enough, some breast cysts also make estrogen, so the local breast tissue may have much higher concentrations of estrogen than the rest of the body.

I explained to Elva that endometriosis, ovarian cysts, PMS, and even breast cancer could also be due to too much estrogen compared to progesterone.

"How do I get rid of this stuff?" Elva asked.

"Let's get the results of your tests then we'll know where to go with supplements and whether you'll benefit from progesterone. But there is one thing you can do tonight," I smiled. I paused for emphasis, "Get out of your nighttime bra."

Elva rolled her eyes as I put my index finger lightly on her forearm. I said, "Do you feel my finger resting on your arm?"

"Just barely."

"The weight of my finger is about 5 mm of mercury pressure. Compare that to your blood pressure of 115/70 mm of mercury pressure. This little pressure is enough to stop lymphatic flow. Remember the red marks outlining your breasts and across your shoulders? That indicates a lot more pressure and certainly stops all lymphatic flow out of your breasts as long as you wear the bra. Toxins that you eat, breathe, and absorb through your skin are distributed into your breasts every single day through your bloodstream. Toxins come out through the lymphatic system. So for twenty-four hours a day, you don't have good lymphatic flow out of your breasts. Any toxins that flow into your breasts stay there for a long time."

Elva said, "I know. They get really sore by the end of the day. That's why I put on those lighter bras at night."

"Good thinking, but you need to go a step further. Don't wear the bra at night," I emphasized.

"Well my husband is going to love you. I'll try," she acquiesced.

I also started her on Magnesium Glycinate to reduce her cravings for chocolate, flax seeds that contain phytoestrogens to protect her from environmental estrogens, and di-indole

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methane, a cousin of a chemical in broccoli and other crucifers, to enhance her metabolism of stronger estrogens into weaker estrogens. I told her to monitor the big tender lump, if it didn't get better when she had her period, we might still need to get a biopsy. Lastly, we discussed a healthy diet for her.

A few days later

We called Elva a few days later. Her iodine patch only lasted for four hours. Should have lasted 24 hours. Her Vitamin D level was extremely low, less than 15 ng/ml. 40 ng/ml is a minimum; 70 ng/ml protects against breast and other cancers. Progesterone level was 5 ng/ml; healthy levels 21 days after the first day of a period should be 13-23 ng/ml. Lastly, her thermogram showed a number of hot spots that were warmer than the rest of her breasts. The warmest one was where she had the big tender lump, but she also had a number of warm spots in her right breast.

"Does that mean I have breast cancer?" she asked.

"No," I said. "It means that you have abnormal physiology in those portions of your breasts. Unhealthy breast tissue. We know that where the breast is hotter, there is chronic inflammation. This can be associated with an increased risk of cancer down stream, but one thermogram doesn't diagnose active cancer."

"How do I get rid of it? Make it healthy?" Elva asked.

"Several things: start on Iodoral, an iodine/iodide supplement. Remember, iodine is necessary for good lymphatic flow; this will help detoxify and decongest your breasts.

"This, in combination with wearing a bra less often will get you healthier breasts in about three months. Are you out of your bra at night?" I asked.

"I'm trying. It feels weird since I've been in it forever."

"Great," I encouraged. "Go to my website www.brafree.org to learn more about healthy breasts."

Next, to reduce her risk of breast cancer, I put her on 10,000 IU Vitamin D3. "We'll recheck a level in 4 months to make certain that you're not toxic. You need a level of at least



40 ng/ml for proper thyroid function and to absorb calcium from your gut."

Lastly, I started her on bioidentical progesterone in the form of Prometrium®, a pill, which she took at night, days fifteen through twenty-six after the first day of her period. This would start immediately after ovulation.

"Elva, as I see it; this is what you have right now: Vitamin D, magnesium, and iodine deficiencies. Estrogen dominance (or excess) with progesterone insufficiency contributing to fibrocystic breasts, PMS, painful breasts before your period, and ovarian cysts."

"Will I survive?" she mused out loud.

"And thrive," I reassured.

One week later

I called to see how she was doing. Her big lump was a little smaller and less tender since she'd started her period.

"Were you able to get out of your bra during the day?"

"I just can't do it. I'd be so embarrassed. What would my friends think?"

"Well, I suggest that you consider dressing a little bit differently so that your friends don't know. It's none of their business whether you have a bra on or not. You could wear a camisole that has one of those shelf-bras in it that just has an elastic band beneath your breasts. You could also use one of the Barely There® bras or your night-time bras during the day. You have gotten out of the bra at night haven't you?"

"I did that, no problem. It's just going outside," she complained.

"Elva, you have very large, lovely breasts. And getting out of your bra is probably one of the most important things that you can do to get rid of your current problem, FBD. It may also reduce your risk of breast cancer downstream. You had exposure to passive inhalation of cigarette smoke and x-rays at a young age when your breasts were more vulnerable. You started your period early. You took birth control pills for over four years. All of which increase your risk of breast cancer in later

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years. Fortunately you had two kids and you breast-fed both of them. Also no family history of breast cancer. All of that reduces your risk. But if getting out of your bra also eliminates the breast pain, helps you avoid the surgery that you don't want to have, gets rid of the lumpy, bumpy breasts, and possibly reduces your risk of breast cancer, why not try it for awhile? The only risk is the possibility of some increased discomfort short term as your breasts begin to detox. It's not doing to cost you a dime. Well, maybe it will, because you'll have to buy some new lingerie."

"I don't know," she hesitated.

"Dress just a little bit differently and no one needs to know. Wear a little jacket or vest, or crocheted top over your shirt and camisole. Wear a scarf around your neck that drapes onto your chest or a shirt that is crinkled and stretchy or has a pattern to it. No one will be able to tell that you were walking around without a bra."

"Oh yes they would. They would see 'em swingin' and I'm sure they'll drop to my knees."

"Actually, that doesn't happen. The Japanese have done studies with digital photography showing that when you remove your bra and stay out of it for about twelve weeks, you actually get firmer, perkier breasts."

"You've got to be kidding," she said with disbelief.

"No I'm not. You have ligaments in your breasts that help hold your breasts up. Imagine what would happen if you put your arm in a sling for six days, six weeks, six months, six years. What would happen?"

"Well, it would just shrivel up."

"Exactly. So the ligaments inside your breasts shrivel up and get weak and you get more sagging the longer you stay in a bra."

"I hadn't thought about it that way," she said with amazement.

"The way to get the perkier, most compact breasts is to get a rebounder or mini-trampoline and bounce five minutes a day brafree. That will gently tug on the ligaments in the upper outer quadrant of each breast and tighten them up. Make them stronger over a twelve-week period."

"That is just hard to believe," Elva said.

FBD could be due to a number of factors including iodine deficiency, too much estrogen, too little progesterone relative to estrogen, and accumulated toxins

"Elva, what do you have to lose?" I asked.

"Well, I like buying lingerie, and new clothes. I know Anthony is going to love this trampoline thing. He'll think it's wonderful. But I don't know what my

girlfriends are going to say."

"This is about getting healthy breasts Elva."

"I got it. Okay. Bra's coming off. I'll give it a try."

"Excellent!" I cheered.

Two weeks later

Elva called the office complaining that her breasts were so incredibly sore she couldn't stand it anymore. I called her back and reassured her that this was completely predictable.

"Is the big lump worse?" I asked.

"No, it's much smaller. But, both of my breasts ache when I lie down or when I move. How long is this going to last?" she whined.

"Think of your breasts as detoxing. I warned you that this could happen. I'm so sorry it's so intense. The more toxins or toxic estrogens stored in the breasts the more tender they'll be for a few weeks. It's temporary, but frequently, heavier-breasted women go through a transient period where their nipples and breasts are sorer. Generally this resolves over a two to three-week period."

I encouraged her to increase her fluids, slow down on the rebounding for a few days since this stirs up the toxins, and use Psyllium fiber before bedtime each night to bind toxins being dumped into her gut in her bile.

Three months later

I rechecked her in twelve weeks and she was delighted to report that she had no new cysts, and her old ones were getting smaller. Even the really big lump in the outer quadrant of her left breast was almost gone. No more PMS, no breast pain before her periods, and her periods were a lot more comfortable. No more cramps. And best of all: no more chocolate cravings.

Physical exam confirmed her report. She also had no red marks around her breasts from a light, stretchy camisole. Her elbows were smoother from the Vitamin D. >>>

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I encouraged her to continue with her program and continue on her rebounder because her breasts still had not gotten as perky as I hoped they might. I also told her that since she had breast fed her kids, they might never get as perky as they were before her pregnancies.

Six months later

Recheck in six months showed that she had minimal FBD and essentially no breast pain. Her breasts were free of lumps and bumps. Her Vitamin D level was in optimal range. We repeated her

iodine skin patch test and it lasted 12 hours, so we kept her on lodoral. The patch needed to last 24 hours before cutting back.

We repeated her thermogram and she no longer had any hot spots in her breasts. Her breast tissue was much healthier and less inflamed than it had been before.

She asked "Couldn't we just have done a mammogram? They didn't want to do mammograms on me because I'm so young."

I said, "They were wise to suggest that you not get mammograms. They're

difficult to interpret in younger women with denser breasts. Ultrasounds are fine. Remember, a mammogram is an x-ray and x-rays can be damaging to your breasts. They can also be very helpful, but a cancer has to be large enough to be able to be seen on mammography. Generally cancers have to be about the size of a green pea before you can pick them up on mammograms. So in younger women, a thermogram can show an area of unhealthy inflamed breast tissue that could potentially become cancerous years before cancer ever develops. In older women, thermograms compliment, but don't replace screening mammograms."

I suggested that she plan on getting a mammogram when she turned forty and that she probably wouldn't need one before then, but she needed to do her monthly self breast exams and I would recheck her in another six months.

She smiled at me and said, "You know, I didn't think that this would work. I never thought that I would go out in public without a bra on. But I've gotten used to it. Every time I put on a bra, I get pain again if I leave it on too long. I've got a few dresses that I have to wear a bra with, and sometimes I like to put on a bra to tease my husband, but I take them off as soon as possible. I can't believe that I put up with wearing a bra for such a long period of time. My breasts feel so healthy and so comfortable. I didn't even realize how cramped and painful they were before. I can hug my kids and hubby any time of the month. They're not as perky as I'd like, but they don't sag at all. Thank you."

"I'm happy for you!" I replied.

She laughed, "I'm going to tell my friends they don't need to come see you, they just need to throw away their bras!"

"That's a good first step, but I'm always available if they need me."

Submitted by Elizabeth Vaughan, MD, a physician for over 28 years, practices at Vaughan Medical Center, 301-A West Wendover Avenue in Greensboro. Visit www.VaughanMedicalCenter.com for more information, or call 336-808-3627.



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