

Millions wrongly diagnosed with cancer

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Cancer Alert

Radiotherapy radiation wavelengths were recently found, by UCLA Johnson Comprehensive Cancer Center researchers, to transform breast cancer cells into highly malignant cancer stem cells. Clearly, it's been shown, that the overuse of medical radiation (testing) can create cancer cells. In addition, we've been told that cancer rates are 'soaring' – but could western medicine be fabricating (falsely labeling) patients with cancer?

In reality, these breast cells were 30 times more malignant – post treatment. It is a known fact that a subpopulation of cancer stem cells, within tumors, will be made stronger and more malignant through chemotherapy and radiation.

What does this have to do with 'non-cancerous' conditions? Shamefully, everything, it is estimated that a third of all women diagnosed with breast cancer, actually have what's called 'localized breast cancer' – a condition that resembles cancer, but will never cause harm. They have, up until now, undergone (unnecessary) mastectomies and/or chemotherapy – along with radiation treatment. Simply put, this is criminal and avoidable.

Keep in mind, radiation and chemotherapy tend to make cancer cells more aggressive. The 'treatment' actually causes cancer and conventional medicine actually admits to this truth.

Cancer patients will be shocked to read these statistics

According to the data, 'incidentalomas' are found in the lungs of 50% of otherwise healthy persons undergoing computed tomography of the chest; 23% in the kidneys and the liver. For those undergoing ultrasound examinations of the thyroid gland – the number is a shocking 67%.

The chance that these incidentalomas becoming a lethal cancer is well below 1%. Conventionally speaking, an incidentaloma is a tumor found by coincidence (incidental) without clinical symptoms or suspicion.

What has to be remembered is chemotherapy creates an unspecific stress – which causes cellular adaptations. This means, instead of just 'drug resistance', chemo creates a new environment and cells learn how to thrive in the presence of this stressful treatment protocol. Bottom line, after chemotherapy for a non-threatening tumor, you could be much sicker than when you started 'therapy'.

Recently, a National Cancer Institute report published in JAMA confirmed that the medical community should stop calling low-risk lesions like DCIS (ductal carcinoma in situ) and high-grade prostatic intraepithelial neoplasia (HGPIN) – cancer conditions.

Breast and prostate cancers are prime examples, said Otis Brawley, chief medical officer of the American Cancer Society. "Looking at the epidemiology, a third of women have localized breast cancers that look like cancer but are never going to kill them," he said.

Yet, a diagnosis that contains the word 'cancer' often causes so much anxiety for the patient and pressure on a physician to act that many women unnecessarily undergo radiation treatment or mastectomies, Brawley said.

“We cure these women who have these localized tumors, but they didn’t need to be cured,” Brawley said. “That’s a hard concept for even doctors to understand now.”

“Right now, we have women getting bilateral mastectomies for ductal carcinoma in situ, which is not a cancer,” Brawley said. “It’s the world turned upside down.”

The deception behind ‘cancer cure’ rates revealed

It has become apparent that these so called cancers are used to show the successful treatment of breast cancer. The cure rate is going up because the newer technology can find non existent cancers. Many so called cancer survivors report that they were treated for “ductal carcinoma in Situ.”

It has been estimated that 1.3 million cases of breast cancers were over diagnosed and over treated. This may account for the 1 in 3 chance of a women having breast cancer in her lifetime.

A subtle, yet significant, change has occurred within western medicine – in the last 50 plus years. Up to the 1960 s, most individuals visited their physicians when needed, which meant when they were ill or experienced some unknown symptoms.

Today, it seems as if the doctors’ office is a place to go to for ‘prevention’. Medical testing is so pervasive that it is done just as a precaution. When even healthy and asymptomatic people undergo testing – it is to look for disease.

The problem with a ‘disease searching’ mentality is that doctors are often pressured into labeling someone with a health condition – even when there’s nothing really discovered.

Many studies suggest that testing routinely identifies lesions that many patients would not need to know about in their lifetimes. These lesions only become a problem because we feel compelled to diagnose and treat them. Now, I’m not suggesting we bury our heads in the sand – but a second (or third) opinion can’t hurt to evaluate any given health issue. Never rush to conclusions – especially out of fear – when it comes to cancer treatment options.

Beware of ‘scare tactics’ used by conventional medicine

When diagnosed with cancer, many physicians use these scare tactics to trigger a quick (compliant) response from the patient. Advancements in diagnostic technology and procedures have increased the use of blockbuster drugs and has made oncologist (and drug companies) huge profits. I’m all for testing – when necessary – but remember you are in charge of your healthcare and no one should pressure you into making a decision about your life.

Looking at cancer as a symptom of cellular and environmental conditions is a healthy approach. To some of the most successful integrative physicians and alternative practitioners – it is the environment of the cell that has become inhospitable to normal cell function.

This view, which is gaining momentum, will show that radiation and chemotherapy adds to the cells stress burden. Treating every suspected case of so-called cancer will make healthy cells undergo profound genetic changes that make a real diagnosis of an invasive cancer more likely.

H. Gilbert Welch, a professor of medicine at the Dartmouth Institute for Health Policy and Clinical Practice, wrote a book *Overdiagnosed: Making People Sick in the Pursuit of Health* – which says it all...

The thing to remember is millions of women and men have subsequently been treated for non-existent threats to their health. They will not be reclassified as victims of misdiagnosis; there will be no legal recourse for compensations.

The information in journals such as, JAMA will not be common knowledge. There will be very few headlines stating these facts; it will be up to each individual to understand that their health is in their hands.