

Article extract: “Mammograms are the go-to test to find potential breast cancer but other testing tools offer benefits and may lower risks. Mammograms most significant risks are radiation exposure and overdiagnosis. There are other early detection tools especially helpful in prevention and can be highly effective tools in a long-term prevention strategy. [Here are six early detection tools you may not know about.](#)”

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Finding Breast Cancer—Low Risk Early Detection Tools You May Not Know About

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Mammograms are the go-to test to find potential breast cancer but other testing tools offer benefits and may lower risks.

According to the [National Breast Cancer Foundation](#), 1 in 8 women in the United States will develop breast cancer in their lifetime. In 2022, an estimated 287,500 women were diagnosed with invasive breast cancer, and this year, 43,550 women will die of breast cancer in the United States alone.

Mammograms are the screenings most often recommended by doctors in the United States to detect breast cancer. However, they do [have risks](#). The most significant risks are radiation exposure and overdiagnosis. Mammograms use x-rays, a form of ionizing radiation that we want to avoid whenever possible. Because of advances in technology, mammography has become so sensitive that it's able to pick up a wide variety of anomalies—some of which may not be cancer, some of which may be cancers that may not progress (such as the “stage 0” cancer known as ductal carcinoma in situ), and some of which may regress on their own.

In the present paradigm, once cancer is detected, it's treated with surgery, chemotherapy, and radiotherapy—even without knowing if it would ever become clinically significant. This is often a form of overdiagnosis that results in many women facing significant risks due to unnecessary breast cancer treatment. To read more about mammograms and their associated risks, you can read the Epoch Times article “[The Business of Breast Cancer: Mammogram Risks.](#)”

The good news is that there are other early detection tools that can also be helpful in identifying possible signs of breast cancer—whether those are changes in breast tissue or cancer cells in the blood. These tools can be especially helpful in prevention and can be highly effective tools in a long-term prevention strategy. Each one varies in its methods and scope, but in an attempt to understand and overcome this devastating disease, being

informed about all the options available for its detection and prevention seems only prudent.

Here are six early detection tools you may not know about.

Thermography

[Thermography as a screening tool](#) was first introduced in 1956. Thermography uses highly sensitive infrared cameras and special software to detect and visualize temperature differences in the skin. It can be used on different parts of the body but is commonly used on the breasts to see variations in temperature and increased heat, which can point to various stages of breast disease.

Information from Industry

The principle of thermography is that metabolic activity and vascular circulation in pre-cancerous tissue and the surrounding areas are almost always higher than in normal tissue. These areas become ‘hot spots’ seen clearly on a thermographic scan. ‘Hot spots’ appear red compared to the surrounding tissue that appears yellow, green, or blue.

A cancerous tumor has a voracious appetite, needing an ever-increasing supply of blood and nutrients. As a result, it [dilates existing blood vessels, resurrects dormant vessels, and creates new vessels](#) (neoangiogenesis) to bring blood and nutrients directly to the tumor. This increased circulation causes an increase in the surface temperature of the breast.

Unlike mammography, thermography is noninvasive—there’s no radiation, no compression, the machine doesn’t touch the body, and there’s no pain. Patients can have as many thermography scans as they wish with no danger. The idea behind thermography scans is that they can often detect changes in the breast (increased heat) years before a tumor ever appears.

Limitations of Thermography

Thermography, like mammography, isn’t a diagnostic tool and can’t tell you if you have cancer. If increased heat is detected in the breast, further testing would be recommended. Thermography can be used as an early prevention tool to create a baseline and track breast changes over time, so you know when something may need attention.

A [comprehensive review](#) published in the Journal of Medical Systems in 2020 looked into various screening tools used to detect breast cancer with a focus on thermography. The review authors state that with the advances in thermography equipment and technology, the technique has gained new traction in the past decade and has become the refocus of many biomedical researchers worldwide. The review found that thermography

demonstrates a potential solution for the early detection of breast cancer, particularly in younger women.

Thermography scans in the United States aren't covered by Medicare, but some private insurance companies may cover all or part of the costs. The average price for a scan varies but is, on average, between \$150 to \$200. You generally don't need a referral from a doctor to have a scan, and there are many centers that offer thermography nationwide.

The ONCOblot Test

The ONCOblot Test was developed and created by Dr. D. James Morr  and Dr. Dorothy M. Morr  of Mor-NuCo, Purdue Research Park, West Lafayette, Indiana.

The ONCOblot test is a blood test used to detect the presence of a protein called ENOX2. ENOX2 is shed from the surface of cancer cells into the bloodstream and is only present in the blood if there are cancer cells in the body. The test is based on more than 20 years of research and, according to the [ONCOblot labs website](#), can detect the presence of cancer at approximately 2 million cells—a very early stage.

In contrast, a [mammogram can only detect a tumor made up of about 4.5 trillion cells](#), allowing the ONCOblot test to potentially detect breast cancer years before a mammogram would see it. The ONCOblot test is used to detect very early-stage cancers when they're more easily treated and before they can progress.

The test also claims that it can identify the tissue of origin and, thus, where the primary cancer is located in the body. Knowing the cancer's origin can help determine what treatments or lifestyle changes would be most effective for the patient moving forward. According to ONCOblot Labs, the creators of the test, the ONCOblot test can detect the presence of the following 25 cancers:

- Bladder
- Breast
- Cervical
- Colorectal
- Endometrial
- Esophageal
- Gastric
- Hepatocellular
- Kidney
- Leukemia
- Non-Small cell
- Lung Small cell
- Lymphoma
- Melanoma
- Mesothelioma

- Myeloma
- Ovarian
- Pancreatic
- Prostate
- Sarcoma
- Squamous Cell
- Follicular Thyroid
- Uterine
- Papillary Thyroid
- Testicular Germ Cell

The ONCOblot labs website recommends using the ONCOblot test in the following situations:

- When a patient has had an abnormal mammogram
- A suspicious PET scan
- A high [PSA](#) test
- When the patient has gone through treatment for cancer and is monitoring for recurrence
- For finding the primary cancer if their cancer has already metastasized

Although the ONCOblot labs website states that they're presently not accepting new tests due to technical difficulties (which will hopefully be resolved soon), there are other labs and medical facilities that offer the test. The Cancer Center for Healing, an integrative cancer treatment center, offers the ONCOblot test, as well as the RGCC test (the next on the list), thermography scans, the Cancer Profile, and many others. They're located in Irvine, California.

***** Note from Tirza: If Oncoblot is unavailable, or to see a comparable alternative, consider The Galleri Test at <https://www.galleri.com/>**

The Greece Test (RGCC)

The Greece test, or [RGCC \(Research Genetics Cancer Center\)](#), is a test that measures the number of circulating tumor cells (CTCs) in the blood. Circulating tumor cells are present in the bloodstream after being released by an existing tumor. When circulating tumor cells break off from the original tumor into the bloodstream, they can form secondary tumors elsewhere and lead to metastasis, spreading cancer to other parts of the body.

(An informative video describing this process is on the [Integrative Medicine Center of Western Colorado's website](#).)

Circulating tumor cells (single cells versus clusters) are what [initiate metastasis](#), which is when cancerous cells take root elsewhere in the body.

In an [article](#) published in the journal Cell Reports and conducted by the University of Basel in Switzerland, researchers found that a low-oxygen environment triggers the release of CTCs from the original tumor, which are responsible for metastasis and new tumor formation elsewhere.

RGCC tests were launched in 2004 by Dr. Ioannis Papanotiriou, using genetics to test for different types of cancer. The RGCC Group claims that their team of scientists has developed a range of tests that give comprehensive information about a person's genetics, physiology, and immune profiles, giving them a personalized approach to effective treatment. According to [their website](#), for people with breast, prostate, pancreas, colon, and skin cancer, the tests have an 83 percent to 87 percent accuracy rate.

A [comparative study](#) published in the Journal of Cancer Therapy in 2015 corroborates these numbers, with the researchers finding that it was possible to detect CTCs with higher sensitivity (86.2 percent) and specificity (83.9 percent) compared to standard clinical methodologies.

The RGCC test isolates, counts, and identifies [circulating tumor cells](#) and [cancer stem cells](#) and then tests them against a variety of chemotherapy agents and natural therapies. The results give patients information about which treatments will be effective against their specific cancer, helping to determine an effective treatment plan.

Cancer stem cells are a small percentage of malignant cells capable of creating new lines of cancer cells. They're self-renewing, have a great capacity for cell production, and possess an indefinite lifespan. Cancer stem cell longevity may explain why cancers can recur many years after an apparent cure. They're thought to be the primary driver of [cancer growth and metastasis](#).

According to the RGCC, if you order the test through them, it's only available via their network of health care providers, which is accessible through their website. They also offer online consultations.

The Cancer Profile

The Cancer Profile is used to identify cancer in its earliest developmental stages. The test was developed by Emil Schandl, founder of American Metabolic Laboratories and Metabolic Research, Inc.

According to the [American Metabolic Laboratories website](#), developers of the Cancer Profile, the test can identify cancer as early as 10 to 12 years before other tests detect a tumor.

The Cancer Profile consists of seven different tests, listed below:

- HCG (human chorionic gonadotropin)
- both serum and urine

- PHI (phosphohexose isomerase enzyme)
- CEA (carcinoembryonic antigen)
- GGTP (a liver test)
- TSH (a thyroid test)
- DHEA-S (an adrenal hormone)

These tests are combined to detect early warning signs of cancer, monitor cancers already present, and see if a patient's current treatments are working and how to adjust. One of the biomarkers tested is HCG, a hormone usually produced during pregnancy. Many cancers also produce HCG, so if it's present in the blood, it could indicate cancer. Another marker the profile measures is an enzyme called PHI, or Phosphohexose Isomerase/Glucose Phosphate Isomerase. PHI causes cells to change their metabolism to glycolysis, allowing cancer cells to produce energy in a low-oxygen environment, ensuring their survival. Elevated PHI levels create the perfect environment for cancer to thrive. If testing shows elevated PHI levels, a patient could make lifestyle changes to ensure cancer doesn't develop.

The Cancer Profile also measures thyroid hormone function. The thyroid regulates our metabolic rate, which is linked to the amount of oxygen the body uses and is available to the rest of our tissues. The more oxygen your cells have, the less cancer you're likely to have.

A [study](#) from the University of Georgia discusses that recent research suggests that low oxygen levels in cells may be a primary cause of uncontrollable tumor growth in some cancers. The study states that the findings contradict widely accepted beliefs that genetic mutations are responsible for cancer growth.

The American Metabolic Laboratories and Metabolic Research website states that the combined tests are able to detect cancer activity with an 87 percent to 97 percent accuracy rate.

The Cancer Profile test is available through the American Metabolic Laboratories and Metabolic Research website at a cost of \$654. They'll ship you a test kit, which you return to them with one tube of blood and a small sample of your first morning urine for testing. Their labs are located in Hollywood, Florida, although their site states that they accept international orders. the Cancer Center for Healing also offers the Cancer Profile test.

The Breast Cancer Risk Assessment Tool (The Gail Model)

Health care practitioners use the Breast Cancer Risk Assessment Tool to assess a woman's risk of developing breast cancer over the next five years and within her lifetime—until the age of 90—calculating a lifetime risk. The tool uses seven main factors to determine a woman's risk of developing breast cancer:

- Age
- Age of the first period (menarche)

- Age at the time of the birth of the first child (or if she hasn't given birth)
- Family history of breast cancer (mother, sister, daughter)
- Number of past breast biopsies
- Number of breast biopsies showing atypical hyperplasia
- Race/ethnicity

According to the Susan G. Komen organization's [website](#)—which claims the title of the world's largest nonprofit of funding for the fight against breast cancer—women with a risk of 1.67 percent or higher are considered “high-risk”. A five-year risk of 1.67 percent or higher is the [Food and Drug Administration](#) (FDA) guideline for taking a [risk-lowering drug](#) to reduce the risk of developing breast cancer in the future. The risk-lowering drugs used are Tamoxifen and Raloxifene, each taken as a daily pill for five years. As with all medications, there are health risks. The health risks associated with Tamoxifen are blood clots, cancer, cataracts, and stroke. The risks of Raloxifene are blood clots and stroke.

Tamoxifen (brand name Soltamox) was approved for breast cancer prevention in high-risk women by the FDA in 1998. [The FDA approved Raloxifene for breast cancer prevention](#) in 2007.

Breast Cancer Risk Assessment Tool Limitations

The Breast Cancer Risk Assessment Tool does have limitations. The tool can't accurately estimate the breast cancer risk for women who carry the breast cancer mutation BRCA1 or BRCA2 or women with a previous history of [in situ](#) or invasive breast cancer. The test also doesn't consider a family history of breast cancer beyond first-degree relatives, any other cancers, or any paternal relatives with cancer.

Body Awareness and Breast Self Exams

Perhaps the best preventative tool all women possess is being aware of their bodies and doing regular breast self-exams. There's a lot of information out there that can help guide you on how to do a breast self-exam, and there are even many apps that have been developed to guide you through the process and help you know what to look for.

Knowing the shape and consistency of your breasts and normal changes throughout your cycle is one of the best ways to ensure that everything is in order and keep a little peace of mind. If you notice any changes or feel that something isn't right, go and get it checked out by a doctor you trust.

As with anything, finding problems early on is the best way to ensure a good outcome, and dealing with things and not avoiding them is the most desirable way to handle any health challenges that may come up.

Final Thoughts

All of this is intended to give you information about other tools you can use if you suspect breast cancer or want to begin a preventative strategy. As always, do your research and decide which methods suit you and your specific circumstances. Used in combination, many of these tools could provide a comprehensive prevention strategy that will help you stay ahead of the game, remain in good health, and ultimately, stay cancer free.

In the Western model, we tend to wait until a disease has manifested before we take meaningful action. If we take a more holistic approach by living preventatively—eating well, managing stress, getting enough sleep, and balancing emotions—we’re creating a healthy environment in our bodies and lives in which cancer can’t thrive.

Although prevention may not be possible if you’re facing a cancer diagnosis, knowing the options available to you for testing and treatment, as well as living naturally, listening to your body, and taking good care of yourself on every level, will help bring your body back the balance it needs to flourish.

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