

Abortion Fallout: Breast Cancer

Prepared by The American Association of ProLife ObGyns (AAPLOG)

This is the first in a series of papers to be prepared by The American Association of ProLife ObGyns on the complications of abortion. Some material in this paper used with the permission of Joel Brind. Submitted by Dr. Joe DeCook, VP AAPLOG.

The abortion/breast cancer (ABC) link: is it real, or just anti-choice propaganda? Is it a figment of the proliferers' imagination? Or is it a fact, suppressed because it is so politically incorrect? (Unfortunately, politics and medicine do impact each other.) Is it a real risk that every girl considering elective abortion should be appraised of? Or is it simply an unproven threat thrown into the abortion arena to frighten pregnant women from making the "choice"? These are absolutely vital questions for any abortion inclined pregnant woman. The threat of breast cancer, surgery, radiation, chemotherapy, disfigurement, even death hang on the correct answers.

The Correct Answers . . . how do we get correct answers to such an emotionally charged question in the acrimonious arena of "abortion rights"? There are such strong opinions and feelings in the mix. When seeking answers to such a vital question, medical practitioners depend on a method termed "Evidence Based Medicine." Doctors trust "Evidence Based Medicine" to guide them to correct conclusions in practice dilemmas such as this. So what IS the "Evidence" of an abortion/breast cancer link? Consider the following facts:

1. As of March, 2002, there have been published in the worldwide medical literature 37 studies reporting data on the risk of breast cancer among women with a history of induced abortion. 28 of these studies report increased risk. In the United States, there have been 15 such studies, 13 of which report increased risk, 8 with statistical significance (at least 95% probability that the result is not due to chance) irrespective of age at first full-term pregnancy.
2. The only study yet published which was specifically funded by the United States National Cancer Institute to investigate the ABC link, reported a statistically significant, overall increase in risk of 50% in women with one or more induced abortions; an 80% risk increase among those who also had a family history of breast cancer, an over 100% risk increase in women with an induced abortion before age 18 or over age 30, and an incalculably high risk increase among those with an abortion before age 18 who also had a family history of breast cancer. (Daling et al (1994) JNCI 86:1584-92.)
3. The only study yet published on American women which relied solely on data from medical records entered at the time of the abortion (and therefore immune to "response bias"), reported a statistically significant 90% increase in breast cancer risk with induced abortion. (Howe et al (1989) Int J Epidemiol 18:300-4.)

What practical effect on breast cancer incidence would result from the above "Evidence?" Consider the Daling study (#2 above): Janet Daling's group found an overall 50% breast cancer risk for women who have had an induced abortion. American women today have an approximately 12% lifetime chance of developing breast cancer. It follows that those who

have had an induced abortion will have an 18% lifetime chance of developing breast cancer. But the risk increases even more than 50% for certain subgroups.

For example, among women with a family history of breast cancer (mother, grandmother, sister, or aunt), the increase in risk was 80%. If the woman had her abortion before she was 18, the increase in risk was more than 100%! What if the woman had both risk factors (family history, and abortion before 18)? There were 12 such women out of 1800 in the study, and ALL TWELVE DEVELOPED BREAST CANCER. This subgroup is too small to be “statistically significant,” but surely it is “significant” if you are an abortion-minded 17 year old pregnant teenager with a family history of breast cancer, if you are a doctor counseling this teen about abortion risks, or if you are the girl’s parent concerned for her long term welfare.

Because both breast cancer (180,000 new cases per year) and abortion (1.3 million cases per year) are very common in the US, the increased risk translates into approximately 5,000 new cases of breast cancer per year attributable to induced abortions.

How does induced abortion influence the development, in some women, of breast cancer? (And let it be known that miscarriage—also known as ‘spontaneous abortion’—has no demonstrated breast cancer link). We simply do not know. However, there may be an endocrinological basis.

Consider the following facts:

1. Estrogen excess can be a promoter of breast cancer development.
2. By 12 weeks of pregnancy, the estrogen level is about 20 times increased over non-pregnant levels. (This is why pregnant ladies have nausea and vomiting!)
3. This causes maximal proliferation of undifferentiated (not able to produce milk) breast cells. (This is why pregnant ladies have breast enlargement and tenderness!)
4. When pregnancy goes to term, the cells mature, and begin to give milk. (And it is known that full term pregnancy reduces breast cancer risk.)
5. When pregnancy is suddenly interrupted by induced abortion, the estrogen levels drop precipitously, and these cells are left in an immature state which presumably is more vulnerable to cancer influences.
6. When a person experiences a spontaneous miscarriage, in almost all cases the pregnancy has produced a subnormal estrogen level which is not associated with increased breast cancer risk.

There are current ongoing studies exploring the validity of this line of logic.

If you believe in “Evidence Based Medicine,” 28 of 37 world wide studies, and 13 of 15 American studies (8 of them statistically significant by themselves) seems like pretty strong Evidence. Why, then, the deafening silence on the issue by important American medical groups? For reasons of their own, they have chosen to ignore, downplay, and even deny the abortion/breast cancer link. The ACOG, the professional college dedicated to protecting the

health of American women, in its 2002 Compendium of Selected Publications, states (page 392) "Long term risks sometimes attributed to surgical abortion include potential effects on reproductive function, cancer incidence, and psychologic sequelae.

However, the medical literature, when carefully evaluated, clearly demonstrates no significant negative impact on any of these factors with surgical abortion." The March 2002 Web Page of the National Cancer Institute makes the case that the abortion/breast cancer link is not credible. These groups conveniently dismiss the published evidence as coming from "flawed studies." In the circles of organized medical academia and professional associations, it is simply not politically correct to acknowledge that induced abortion has a breast cancer link.

However, the evidence keeps mounting. "Evidence Based Medicine" (and Truth) will prevail--- but too late for many women who are submitting to their elective abortions without any informed consent regarding breast cancer risk, and with the assurances of many of the leaders in women's health care (and the silence of other leaders) that they need not worry about such risk. If the 28 of 37 worldwide studies, including 13 of 15 American studies, are correct, the physicians who have denied the abortion/breast cancer link, and also those who have conveniently ignored it, will stand guilty of an immense disservice to the women they purport to serve--especially to some of those who subsequently develop breast cancer.

Informed consent should be informed. Women deserve the correct information. The evidence is strong. Yet medical officialdom stands in silent denial, and the most recent ACOG publication stands in outright printed denial. Even the National Cancer Institute has discredited its own (1994) funded study by Janet Daling rather than admit the study's clearly demonstrated abortion/breast cancer link. But there is a small ray of light at the end of the tunnel: The NEJM, arguably the most influential medical journal in the world, in a year 2000 Review of risk factors for breast cancer (342:564-71), actually (very quietly) added, for the first time, abortion to its list of risk factors for breast cancer.

In December, 2001, an Australian woman won an out of court settlement because of lack of adequate informed consent regarding breast cancer and psychological risks with abortion -- the first such settlement in history. Americans United for Life is this year involved with six states developing women's right to know legislation regarding the abortion/breast cancer link. Stay tuned!!!

Contact The American Association of ProLife ObGyns for additional information: www.aaplog.org.