Primary, Secondary, and Tertiary Prevention of Cancer: Strategies for the Integrative Clinic - Part One

By: Rebecca Stealey

While advances are being made every day to improve cancer management, the disease nevertheless remains the second leading cause of death in the United States and the seventh worldwide in 2011. Integrative medicine is in a unique position to educate, support, and give people a fighting chance at preventing this disease.

Primary Prevention

Primary prevention involves strategies aimed at preventing healthy individuals from ever developing cancer, and can be implemented at any stage in the life.

First off, some real basics that just need to be said:

- Quit smoking
- Exercise more
- Eat lots of fruits and vegetables (preferably organic)

And some strategies that might take a little more guidance, education, and encouragement from an integrative healthcare practitioner.

Vitamin D – Safe exposure to sunshine is the best way to normalize Vitamin D levels. When this is not possible, moderate supplementation is warranted.

A 2009 study concluded:

It is projected that raising the minimum year-around serum 25(OH)D level to 40 to 60 ng/mL (100–150 nmol/L) would prevent approximately 58,000 new cases of breast cancer and 49,000 new cases of colorectal cancer each year, and three fourths of deaths from these diseases in the United States and Canada, based on observational studies combined with a randomized trial. Such intakes also are expected to reduce case-fatality rates of patients who have breast, colorectal, or prostate cancer by half. There are no unreasonable risks from intake of 2000 IU per day of vitamin D3, or from a population serum 25(OH)D level of 40 to 60 ng/mL. The time has arrived for nationally coordinated action to substantially increase intake of vitamin D and calcium.1

Test your patients Vitamin D levels at least once a year and follow the guidelines above. Such simple measures can possibly prevent a lot of pain and suffering for a lot of people down the road.

Breastfeeding – Breastfeeding reduces a woman’s risk of developing breast cancer within her lifetime. Furthermore, each month of breastfeeding may decrease a woman’s relative risk of developing ovarian cancer by 2%.

In addition to so many other lifelong benefits for babies - decreased risk of obesity, infections, allergies, asthma, type 1 and II diabetes, and hypertension in adulthood - it is also possible that breastfeeding plays a role in reducing the risk of certain childhood cancers.

Breastfeeding is harder than it looks, and does not necessarily come naturally to new mothers. Consider referring new and expectant mothers to a lactation consultant or La Leche League. Both mother and baby will benefit immeasurably.

International Lactation Consultant Association: http://www.ilca.org
La Leche League - http://www.lli.org

Diet, Diet, Diet – While there is no magic recipe for preventing or curing cancer, following sound, dietary principals is essential. In a landmark 1981 study, the authors concluded that, “Diet probably plays a major role in controlling between one third and two thirds of human cancers.”

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Ask your patients about their diet, answer their questions to the best of your ability, and follow-up consistently. This is a tough one for a lot of people, and ultimately, the right cancer preventative diet is going to be one that works realistically, long-term.

Euglycemia – 25.8 million Americans have been diagnosed with diabetes and another 104 million have abnormal glucose tolerance. Control of fasting blood sugars and insulin levels is an important cancer preventative goal, as is limiting obesity and maintaining a healthy BMI. Barry Boyd, MD expounded upon the connection between metabolic syndrome, inflammation, and the development and proliferation of cancers such as colon, prostate, pancreas, and breast in a 2003 article.8

A key factor in achieving euglycemia is to limit intake of processed foods, refined flours, and paying close attention to the glycemic index of food, or the rate at which blood sugar rises upon eating a meal. Food combinations can help to adjust the glycemic index of foods e.g. eating pineapple with protein (sunflower seeds) and fat (cottage cheese). If not sensitive to gluten, whole grain pasta can be eaten with cannellini or fava beans to lower its glycemic index, and still obtain the long-lasting energy we need to get through an active day. And of course exercise works to lower and stabilize blood sugars.

Assess and Limit Exposure to Toxins – Hair analysis can be used to reliably assess an individual’s exposure to certain heavy metals.9 10 11 12 13

Many ACAM physicians are equipped to assess an individual’s heavy metal burden and manage the condition accordingly. Environmental exposure to heavy metals such as lead, mercury, arsenic, and cadmium is a well-known risk factor for cancer. Individuals with


known or suspected environmental exposure can be tested using hair analysis and treated with the aim of reducing their risk of developing cancer. Intravenous chelation therapy using EDTA and a variety of other strategies can be used to reduce an individual’s heavy metal burden.

There are many other compounds in our environment that can increase our risk of developing cancer. The 12th Report on Carcinogens (RoC) compiled by the Department of Health and Human Services was released in 2011:

http://ntp.niehs.nih.gov/?objectid=03C9AF75-E1BF-FF40-DBA9EC0928DF8B15

Integrative practitioners have at their disposal nutraceutical, homeopathic, dietary, and lifestyle educational resources to support their patients in avoiding and detoxifying themselves of these carcinogens.

**Psychoneuroimmunology** – A big word that looks at the study between our thoughts, feelings, and immunity. Persistent activation of the hypothalamic-pituitary-adrenal (HPA) axis in the chronic stress response and as occurs in depression can impact the immune system. “In general, both stressors and depression are associated with the decreased cytotoxic T-cell and natural-killer-cell activities that affect processes such as immune surveillance of tumours.”

Conscientiously practice therapeutic communication with your patients. A primer on therapeutic technique can be found here:

http://www.lscc.edu/academics/nursing/CN%20I%20Forms/techstherapeuticcommunication.pdf

Ask your patients what is going on in their lives. Encourage them to pursue stress-reducing activities, hobbies, and talk about things they love and enjoy. Make the time you spend with them a time of healing. If you feel out of your depth in dealing with an emotional or psychiatric crisis, refer your patient to a licensed therapist or psychologist.

Primary prevention of cancer in the integrative clinic can be as involved as an extensive nutritional, hormonal, and diagnostic work-up or as basic and fundamental as supporting somebody in smoking cessation. The war on cancer will not be won in a lab or by a team of well-funded researchers. It will be won through the everyday interactions between a patient and their healthcare provider, characterized by ingenuity, consistency, and caring.

Rebecca Stealey is currently enrolled in the ABSN (Accelerated Bachelor of Science in Nursing) program at Loyola University in Chicago, IL. She has worked at the Ayre Clinic for Contemporary Medicine in the Chicago area since November 2005. Once completing her BSN, she plans on enrolling in Loyola’s MSN with a graduate degree in Oncology. She firmly believes that it is the responsibility of everybody working in healthcare to protect the young (and the young at heart).

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