



Americans Exposed to Atomic Bomb Levels of Radiation through Medical Imaging, CT Scans, Mammograms



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by Mike Adams, the Health Ranger

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Learn more: http://www.naturalnews.com/025767_Radiation_Ct_Scans.html#ixzz1KqyScQm6

(NaturalNews) A new report released by the *National Council on Radiation Protection and Measurement* reveals that Americans' exposure to radiation has increased more than 600 percent over the last three decades. Most of that increase has come from patients' exposure to radiation through **medical imaging scans** such as CT scans and mammograms.

Most patients have no awareness of the dangers of ionizing radiation due to medical imaging scans. Virtually no patients -- and few doctors -- realize that **one CT scan exposes the body to the equivalent of several hundred X-rays** (<http://www.naturalnews.com/023582.html>), for example. Most women undergoing mammograms have no idea that the radiation emitted by mammography machines actually *causes* cancer by exposing heart and breast tissue to dangerous ionizing radiation that directly causes DNA damage.

Even low doses of radiation can add up to significant increases in lifelong cancer risk. A study published in the *New England Journal of Medicine* (2007) found that survivors of the 1945 atomic bombs unleashed on Japan during World War II still faced significant increases in lifetime cancer risk. And the levels of radiation to which these particular study subjects were exposed is equivalent to receiving only two or three CT scans, explains an ABC News story (<http://abcnews.go.com/Health/Cancer...>).

Yes, it's true: A couple of CT scans can expose your body to as much radiation as standing a few miles from an atomic bomb explosion. This is a simple scientific fact.

Is modern medicine priming the population for a wave of future cancers?

Exposure to CT scans and mammograms today can lead to cancer much later in life. As ABC News reports, Dr. Len Lichtenfeld, the deputy chief medical officer of the American Cancer Society, says, "Radiation exposure from these scans is not inconsequential and can lead to later cancers."

Thanks to the widespread use of medical imaging scans, hospitals are also becoming a major source

of **nuclear waste material**. See the [NaturalNews](http://www.naturalnews.com/025711.html) report on that topic here:
<http://www.naturalnews.com/025711.html>

This material can be seized by [terrorists](#) and used to make dirty bombs. Thus, [hospitals](#) are now a **major source for potential tools for terrorists**.

The bottom-line question in all this is simple: Are medical imaging devices causing more harm than good? And do mammograms actually *create future cancer patients* by causing cancer in the breast? In my view, the answers to both these questions are a resounding YES. Medical imaging does more than just detect cancer, it also [causes](#) cancer! And that's in the financial interests of the drug [companies](#) and cancer clinics that profit from treating cancer.

Here's what other [doctors](#), authors and health [experts](#) have to say on the subject of CT scans, mammograms and radiation:

Authors' Quotes on Radiation and CT Scans

Below, you'll find selected quotes from noted authors on the subject of Radiation and Ct Scans. Feel free to quote these in your own work provided you give proper credit to both the original author quoted here and this NaturalNews page.

After four years of work, it became disturbingly clear to the research team that the main cause of the rising rates of [leukemia](#) was medical **radiation**, in the form of diagnostic medical **x-rays**. The use of **radiation** in [cancer treatment](#) employs high-intensity **x-rays**. Much higher doses are involved in cancer [treatment](#) than in diagnostic **x-rays**, because the purpose is to kill cells, or at least cripple their ability to reproduce. While a typical diagnostic X-ray might deliver one or two rads (radiation absorbed doses) of **radiation**, a six-week course of radiotherapy delivers about 5,000 rads.

- [Reclaiming Our Health: Exploding the Medical Myth and Embracing the True Source of Healing](#)
by John Robbins
- [Available on Amazon.com](#)

Do you know, however, that one whole body scan may be equivalent to the **radiation** received during 500 **chest** x-rays? Any amount of **radiation** exposure damages cellular [DNA](#), thereby increasing the risk of cancer and premature [aging](#). Companies promoting these **ct scans** don't mention the **radiation**, but members of the Life Extension Foundation were told to avoid these body scans because of the [health](#) risks posed by this excess amount of **radiation**.

- [Disease Prevention and Treatment](#) by The Life Extension Editorial Staff
- [Available on Amazon.com](#)

It is foolish to believe every person entering the cancer era of their lives, from age 50 on, should continually be subjected to [screening radiation](#) ([X-rays](#), **mammograms**, CT scans) and invasive needle biopsies, in a futile attempt to detect cancer at its earliest stage. Paradoxically, all these screening methods only serve to increase the risk for cancer. Among women with detected [breast cancer](#), 88% have not spread and 12% are invasive tumors.

- [You Don't Have to be Afraid of Cancer Anymore](#) by Bill Sardi
- [Available on Amazon.com](#)

After searching for possible causes, he came to the conclusion that work-related **radiation** had done the damage. We both have had patients with non-Hodgkin's lymphoma who received **radiation** in the **chest** and then developed coronary [disease](#). In cardiology, we call that **radiation** atherosclerosis. We believe **x-rays** damage endothelial cells. A prime example was a patient with multiple risk

factors for CVD, including diabetes and high blood pressure. In 1995, prior to beginning New Cardiology [therapy](#), he was treated with **radiation** for a neck tumor.

- [Reverse Heart Disease Now: Stop Deadly Cardiovascular Plaque Before It's Too Late](#) by Stephen Sinatra, M.D. and James C., M.D. Roberts

- [Available on Amazon.com](#)

X-ray **radiation** from medical **imaging** and **ct scans** are also believed to increase the risk for cancer. A report issued by the Food & Drug Administration now suggests the risk for cancer from medical **x-rays** may be as much as 1 in 1,000. There are over 3 billion x-ray images taken annually in the world.

- [You Don't Have to be Afraid of Cancer Anymore](#) by Bill Sardi

- [Available on Amazon.com](#)

The minimum **radiation** from a routine **chest** X-ray is 2 mrem. X-ray **radiation** accumulates in the body and it is well-known that ionizing **radiation** used in X-ray procedures causes gene mutation. We can only obtain guesstimates as to its impact on health from this high level of **radiation**. Experts manage to obscure the real effects in statistical jargon such as, "The risk for lifetime fatal cancer due to **radiation** exposure is estimated to be 4 in one million per 1,000 mrem."

- [Death by Medicine](#) by Gary Null PhD, Carolyn Dean MD ND, Martin Feldman MD, Debora Rasio MD, Dorothy Smith PhD.

- [Available on Amazon.com](#)

Should these patients be exposed to repeated **radiation** mammography? [Clinical Oncology Royal College Radiology 18: 257-67, 2006] Even exposure to **chest x-rays**, particularly before the age of 20, heightens the risk for breast cancer with BRCA mutations. [Journal Clinical Oncology 24:3361-6, 2006]

Quietly, the **radiation** emitted during **mammography** was reduced as digital films were introduced. How many [women](#) have now developed breast cancer from these early screenings is unknown. Virtually every woman exposed to high-dose **radiation mammography** should have been placed on antioxidant therapy.

- [You Don't Have to be Afraid of Cancer Anymore](#) by Bill Sardi

- [Available on Amazon.com](#)

We are all exposed to **radiation** in the form of medical **x-rays**. Cardiologists, for instance, are exposed to a considerable amount of **radiation** because of the [nature](#) of this work. We do fluoroscopy all the time, putting in pacemakers and cardiac catheterizations. Fluoroscopy uses **x-rays** to view parts of the body on a screen, similar to the screening your luggage undergoes when you pass through airport security.

- [Reverse Heart Disease Now: Stop Deadly Cardiovascular Plaque Before It's Too Late](#) by Stephen Sinatra, M.D. and James C., M.D. Roberts

- [Available on Amazon.com](#)

British physician Alice Stewart has spent much of her life investigating the connection between low-level **radiation** and higher cancer [risks](#). Most doctors have stopped using fetal **x-rays** since Stewart's work showed that a significant increase in leukemia was found in the [children](#) of mothers who had prenatal **x-rays** taken. She has said she believes that the effects of background **radiation** coupled with exposure to **x-rays** may cause most childhood cancers.

- [Empty Harvest](#) by Dr Bernard Jenson and Mark Anderson

- [Available on Amazon.com](#)

Another treatment, **radiation**, can trigger neurological [symptoms](#), limiting the amount that can be used to treat cancer. The response of normal [brain](#) tissue to **radiation** often does not appear for

weeks or months. So when someone with cancer receives **radiation**, it can be difficult to tell whether the appearance of neurological symptoms some months later stems from the cancer or from the **radiation**.

- [Keep Your Brain Young: The Complete Guide to Physical and Emotional Health and Longevity](#) by Guy McKhann, and Marilyn Albert

- [Available on Amazon.com](#)

And a Wise Woman anti-cancer lifestyle offers many ways to stay cancer-free and prevent recurrence should you decide against adjuvant **radiation**. If you do choose **radiation**, it will most likely be a six-week course of therapy, and it can only be done once. (It is considered unsafe to use **radiation** therapy on the same breast twice). **Radiation** therapy can cause DNA damage, skin [injuries](#) (burns, discoloration, and permanent texture changes), nausea, [appetite](#) loss, hair loss, exhaustion, **chest** pain, pneumonia, and permanent damage to the lungs, heart, and ribs (known as late-stage injuries).

- [Breast Cancer? Breast Health! The Wise Woman Way](#) by Susun S. Weed

- [Available on Amazon.com](#)

X-rays are another type of **radiation**. This is the most common type of human [poisoning](#). Most individuals are poisoned as a result of medical **x-rays**, which, when performed repeatedly, result in significant tissue damage. X-ray technicians, radiologists, orthopedists, chiropractors, chiropractic assistants, [cardiologists](#), dentists, and dental assistants are highly vulnerable to developing **radiation** poisoning. High tension power lines are another type of poisoning. In this case the individual is being poisoned by electromagnetic **radiation**. **Radiation** may also emanate from broadcasting centers.

- [Dr. Cass Ingram's Lifesaving Cures](#) by Dr. Cass Ingram

- [Available on Amazon.com](#)

History has many examples of how **radiation** use is strongly linked to an increase in cancer rates. Atomic bomb survivors in Japan have increased rates of leukemia and cancers of the breast, [thyroid](#), lung, stomach and other organs, illustrating another example of how **radiation** causes cancer. In general, the breast, thyroid and [bone](#) marrow are most sensitive to the effects of ionizing **radiation**. Avoiding unnecessary medical **x-rays** is one of the best ways to reduce exposure to ionizing **radiation**.

- [Probiotic Rescue: How You can use Probiotics to Fight Cholesterol, Cancer, Superbugs, Digestive Complaints and More](#) by Allison Tannis

- [Available on Amazon.com](#)

Bross's work in a special article titled "Low-Level Radiation: Just How Bad Is It?" The report concluded that it was difficult to accurately assess the hazards posed by the **radiation** used in **x-rays** and cancer therapy because of the political nature of the **radiation** issue. It was hard to get clarity about the dangers, Science noted, because the matter fell within "the domain of the atomic [energy](#) establishment." It is perhaps only from within the nuclear establishment itself that the true dangers of medical **radiation** can ever be told.

- [Reclaiming Our Health: Exploding the Medical Myth and Embracing the True Source of Healing](#) by John Robbins

- [Available on Amazon.com](#)

Damage from **radiation** exposure accumulates over your lifetime:

- Atomic bomb [survivor](#) (35 rads at epicenter): increase up to + 35
- Mammogram (0.5-1 rad): increase + 1 per exposure of each breast. One [mammogram](#) can double a 35-year-old woman's breast cancer risk.
- Diagnostic **x-rays** for scoliosis (1.5-3 rads): increase +3 per exposure

- Fluoroscopy (7.5 rads each): increase +5 for each
- **Radiation** treatment (8,000 rads): increase +10 each

The younger you are when your breasts are exposed to **radiation**, the greater your risk.

- [Breast Cancer? Breast Health! The Wise Woman Way](#) by Susun S. Weed
- [Available on Amazon.com](#)

Exposure to electromagnetic energy from electric and electronic equipment has become a factor in modern life. **Radiation protection** is offered by amino acids cysteine and glutathione; Vitamins A, C, and E; minerals Selenium and Zinc. Russian clinical study reveals some benefit from Ginseng (*Eleutherococcus senticosus* (ES)). **RADIATION SICKNESS**. Caused by overexposure to **radiation** such as **x-rays**, television screens and to an atmosphere polluted by such disasters as Chernobyl.

- [Bartram's Encyclopedia of Herbal Medicine: The Definitive Guide](#) by Thomas Bartram
- [Available on Amazon.com](#)

It is claimed that the irradiated foods do not themselves become radioactive and thus are not introducing **radiation** to the consumer. The concern with [food](#) irradiation is that it may produce by-products that are carcinogenic and increase the incidence of leukemia and other types of cancer or disease of the [liver](#) and kidneys. These health problems may not become evident for 20 to 30 years. Most of us are very skeptical about **radiation** in general, whether it be **x-rays** or even [microwaves](#), let alone gamma **radiation** of our food.

- [Staying Healthy with Nutrition: The Complete Guide to Diet and Nutritional Medicine](#) by Elson M. Haas, M.D.
- [Available on Amazon.com](#)

If this process was safe and effective for someone who was in remission, then why didn't they give **radiation** to everyone, just to make sure cancer never attacked them? Why didn't the doctors, their wives, and their children take **radiation** as a preventive measure? I pictured a **radiation** drive-thru like a fast-food window. They literally fried my mother's **chest** with what I would later discover was an enormous amount of **radiation** therapy. When I saw the **radiation burns** on my mother's **chest**, I wondered if no treatment at all would have been a better bet.

- [The Cure: Heal Your Body, Save Your Life](#) by Timothy Brantley
- [Available on Amazon.com](#)

This "background" **radiation** is a small amount. Medical **x-rays** used at the [dentist](#) to see teeth root health, **x-rays** used by physicians to investigate bone health and **mammograms** of the breast subject the body to **radiation**. Uranium miners and those living in areas close to nuclear weapons [tests](#) are exposed to higher levels of **radiation**. Ironically, some cancer treatments include **radiation** therapy to help kill cancer cells. Yet the **radiation** itself increases the risk of cancer. Historically, **radiation** was used to monitor patients with tuberculosis.

- [Probiotic Rescue: How You can use Probiotics to Fight Cholesterol, Cancer, Superbugs, Digestive Complaints and More](#) by Allison Tannis
- [Available on Amazon.com](#)

Low-radiation **mammograms** are safer **mammograms**, but less **radiation** means a fuzzier picture. Standard x-rays -- rarely used any more for breasts--create an easy-to-interpret high-radiation image. Xerograms use half that **radiation**, but are twice as hard to read. Film-screen **mammography**, the latest very-low-radiation exam, gives an image that's even more difficult to interpret. More than 10 percent of all screening **mammograms** done at one large center in 1992 couldn't be read and had to be redone.

A 1994 study showed wide variation in the accuracy with which **mammograms** are interpreted.

- [Breast Cancer? Breast Health! The Wise Woman Way](#) by Susun S. Weed

- [Available on Amazon.com](#)

The higher frequency radiations, from **x-rays** to nuclear **radiation**, are clearly dangerous. Electromagnetic **radiation** can be divided into two categories. The first is ionizing **radiation** and includes **x-rays**, gamma rays, and nuclear **radiation**. Exposing our body to these highly reactive ions at certain levels can dramatically affect our atomic structure. Ionizing **radiation** can actually rip electrons from atoms and molecules and directly affect cell division and cell structure.

- [Staying Healthy with Nutrition: The Complete Guide to Diet and Nutritional Medicine](#) by Elson M. Haas, M.D.

- [Available on Amazon.com](#)

Screening **mammograms** are unsafe other ways, too: they expose sensitive breast tissues to **radiation**, and they increase your chances of having a biopsy and being overtreated for carcinoma in situ. Scientists agree that there is no safe dose of **radiation**. Cellular DNA in the breast is more easily damaged by very small doses of **radiation** than thyroid tissue or bone marrow; in fact, breast cells are second only to fetal tissues in sensitivity to **radiation**. And the younger the breast cells, the more easily their DNA is damaged by **radiation**.

- [Breast Cancer? Breast Health! The Wise Woman Way](#) by Susun S. Weed

- [Available on Amazon.com](#)

Radiation causes many undesirable internal reactions, especially in the most prolific tissues, such as the gastrointestinal tract and skin. **Radiation** therapy may affect the appetite, tastes, and the ability to eat. **Radiation** is cumulative, and many things may add to it, from [color](#) TV and microwaves to **x-rays** and fallout exposure. We need a good protective program! When living in areas with high background **radiation**, it is wise to take higher amounts of antioxidants regularly.

- [Staying Healthy with Nutrition: The Complete Guide to Diet and Nutritional Medicine](#) by Elson M. Haas, M.D.

- [Available on Amazon.com](#)

In the **radiation oncology** departments, cancer patients routinely undergo therapy with high intensity **x-rays**, particle beams, and other types of **radiation**. Although **radiation** therapy has been successful in treating certain types of cancers, there are many cancers that are not cured either by **radiation** or by a combination of **radiation** and other orthodox medical and surgical modalities. Doctors may have once had the key to curing cancer with energy. But something happened to that priceless knowledge.

- [Vibrational Medicine: The #1 Handbook of Subtle-Energy Therapies](#) by Richard Gerber, M.D.

- [Available on Amazon.com](#)

Radiation [sickness](#) can take many forms, including the exacerbation of existing disease states, and also differs in intensity depending on the degree of exposure to low or high levels of **radiation**. It is important to recognize that it is not just atomic explosions that create **radiation** hazards. Diagnostic **x-rays**, TV screens, and other apparently noninvasive sources need to be considered. It is beyond the scope of this book to explore the complexity of **radiation** sickness or the range of treatments available to treat the condition.

- [Health from the Seas: Freedom from Disease](#) by John Croft

- [Available on Amazon.com](#)

It is now known that **radiation** causes mutation of the important p53 suppressor gene. For this reason, I do not recommend postlumpectomy **radiation**. Even though it may decrease the risk of a local recurrence of cancer, it does not help to inhibit metastatic cancer. Recent findings show that women receiving **mammograms** should be cautious of overexposure to **radiation** emitted by equipment that is not professionally and regularly monitored. Such equipment can deliver doses of

radiation far above what are assumed today to be safe levels.

- [Herbal Medicine, Healing and Cancer: A Comprehensive Program for Prevention and Treatment](#)
by Donald R. Yance, Jr., C.N., M.H., A.H.G., with Arlene Valentine
- [Available on Amazon.com](#)

Sources for this story include:

- [Americans' Radiation Exposure Rises 6-Fold in 29 Years](#)
- ABC News
- [Overexposed: Imaging tests boost U.S. radiation dose](#)
- Reuters

Articles Related to This Article:

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About the author: Mike Adams is an award-winning journalist and holistic nutritionist with a strong interest in personal health, the environment and the power of nature to help us all heal. He has authored and published thousands of articles, interviews, consumers guides, and books on topics like health and the environment, reaching millions of readers with information that is saving lives and improving personal health around the world. Adams is a trusted, independent journalist who receives no money or promotional fees whatsoever to write about other companies' products. In 2010, Adams created NaturalNews.TV, a [natural living video sharing site](#) featuring thousands of user videos on foods, fitness, green living and more. He's also the CEO of a highly successful [email newsletter software company](#) that develops software used to send permission email campaigns to subscribers. Adams volunteers his time to serve as the executive director of the [Consumer Wellness Center](#), a 501(c)3 non-profit organization, and pursues hobbies such as martial arts, Capoeira, nature macrophotography and organic gardening. He's also author a large number of health books offered by [Truth Publishing](#) and is the creator of numerous reference website including [NaturalPedia.com](#) and the free downloadable [Honest Food Guide](#). His websites also include the free reference sites [HerbReference.com](#) and [HealingFoodReference.com](#). Adams believes in free speech, free access to nutritional supplements and the innate healing ability of the human body.

Learn more: http://www.naturalnews.com/025767_Radiation_Ct_Scans.html#ixzz1KqxnCes6



Radiation scientists agree TSA naked body scanners could cause breast cancer and sperm mutations



Friday, December 03, 2010
by Mike Adams, the Health Ranger
Editor of NaturalNews.com ([See all articles...](#))

Learn more:

http://www.naturalnews.com/030607_naked_body_scanners_radiation.html#ixzz1KqzdOfKB

(NaturalNews) The news about the potential health dangers of the TSA's naked body scanners just keeps getting worse. An increasing number of doctors and scientists are going public with their warnings about the health implications of subjecting yourself to naked body scanners. These include Dr Russell Blaylock (see below) as well as several professors from the University of California who are experts in X-ray imaging.

At the same time, some internet bloggers are insisting that the TSA's naked body scanners pose no health risks because air travelers are subjected to higher levels of radiation by simply enduring high-altitude flights where cosmic radiation isn't filtered out by the full thickness of the Earth's atmosphere. This comparison, however, is inaccurate: The TSA's body scanners **focus radiation on the skin and organs near the skin** whereas cosmic radiation during high-altitude flights is distributed *across the entire mass of your body*.

Comparing the total radiation exposure *across your entire body* to machine-emitted radiation exposure that *focuses its ionizing radiation primarily on your skin* is like comparing apples and oranges. You'll see this explained further, below, in the words of these scientists.

As Dr Russell Blaylock (www.BlaylockReport.com) recently reported:

*The growing outrage over the Transportation Security Administration's new policy of backscatter scanning of airline passengers and enhanced pat-downs brings to mind these wise words from President Ronald Reagan: The nine most terrifying words in the English language are: **I'm from the government and I'm here to help you.** So, what is all the concern really about - will these radiation scanners increase your risk of cancer or other diseases? A group of scientists and professors from the University of California at San Francisco voiced their concern to Obama's science and technology adviser John Holdren in a well-stated letter back in April.*

The letter Dr Blaylock is referring to is from the Faculty of the *University of California, San Francisco* and is signed by Doctors John Sedat Ph.D., David Agard, Ph.D., Marc Shuman, M.D., Robert Stroud, Ph.D.

You can download or view the full letter from NaturalNews here (PDF):
<http://www.NaturalNews.com/files/TS...>

Even though it was written in April of this year, this letter has received increased publicity lately due to the TSA's sudden expansion of naked body scanners in airports as well as the agency's arrogant insistence that such machines will soon be used at bus stations, railway stations and other entrance points for mass transportation.

In this NaturalNews article, I highlight **the most important warnings from this letter** and explain, in plain language, what these scientists are trying to say.

The letter that the TSA doesn't want you to read

Once again, this letter was written by Drs John Sedat Ph.D., David Agard, Ph.D., Marc Shuman, M.D., Robert Stroud, Ph.D., all from the University of California.

Here is their background as described in the letter:

Dr. Sedat is a Professor Emeritus in Biochemistry and Biophysics at the University of California, San Francisco, with expertise in imaging. He is also a member of the National Academy of Sciences. The other cosigners include Dr Marc Shuman, and internationally well known and respected cancer expert and UCSF professor, as well as Drs David Agard and Robert Stroud, who are UCSF Professors, X-ray crystallographers, imaging experts and NAS members.

Here are the highlights of the letter along with my comments and explanations:

"We are writing to call your attention to serious concerns about the potential health risks of the recently adopted whole body backscatter X-ray airport security scanners. This is an urgent situation as these X-ray scanners are rapidly being implemented as a primary screening step for all air travel passengers."

Translation: The naked body scanners may be dangerous to your health.

"Our overriding concern is the extent to which the safety of this scanning device has been adequately demonstrated. This can only be determined by a meeting of an impartial panel of experts that would include medical physicists and radiation biologists at which all of the available relevant data is reviewed."

Translation: The safety of these naked body scanners has never been demonstrated, and especially not by an independent panel of qualified scientists.

"The physics of these X-rays is very telling: the X-rays are Compton-Scattering off outer molecule bonding electrons and thus inelastic (likely breaking bonds)."

Translation: The ionizing radiation emitted by these devices can alter your DNA.

"Unlike other scanners, these new devices operate at relatively low beam energies (28keV). The majority of their energy is delivered to the skin and the underlying tissue. Thus, while the dose would be safe if it were distributed throughout the volume of the entire body, the dose to the skin

may be dangerously high."

Translation: The danger of these devices is significantly higher than what might be assumed from the TOTAL radiation emissions. This is why those who claim "you get more radiation just from flying" are flat-out wrong in their conclusions.

"This comparison is very misleading: both the air travel cosmic ray exposure and chest X-rays have much higher X-ray energies and the health consequences are appropriately understood in terms of the whole body volume dose. In contrast, these new airport scanners are largely depositing their energy into the skin and immediately adjacent tissue, and since this is such a small fraction of body weight / volume, possibly by one to two orders of magnitude, the real dose to the skin is now high."

Translation: This is a further explanation of why the ionizing radiation from the naked body scanners may pose a much higher risk of cancer (two orders of magnitude higher!) than what might be assumed from the total radiation emissions.

"In addition, it appears that real independent safety data do not exist. A search, ultimately finding top FDA radiation physics staff, suggests that the relevant radiation quantity, the Flux [photons per unit area and time (because this is a scanning device)] has not been characterized. Instead an indirect test (Air Kerma) was made that emphasized the whole body exposure value, and thus it appears that the danger is low when compared to cosmic rays during airplane travel and a chest X-ray dose. In summary, if the key data (flux-integrated photons per unit values) were available, it would be straightforward to accurately model the dose being deposited in the skin and adjacent tissues using available computer codes, which would resolve the potential concerns over radiation damage."

Translation: The FDA screwed up the safety testing (gee, really?) by assuming the emitted radiation was distributed *across the entire body* rather than focused on the skin.

It brings up the question: When and how were these devices ever approved by the FDA anyway? Naked body scanners are clearly "medical devices" as they emit X-rays that penetrate body tissue. Did the FDA ever conduct long-term clinical trials demonstrating the safety of these devices? (Of course not.)

Did they ever test the safety of naked body scanners on **pregnant women**? What about **senior citizens**? How about people who have already undergone radiation treatments for conditions like **thyroid cancer**?

Ten big concerns voiced by the scientists

Here are ten additional concerns raised by these scientists in their letter: (the bolded titles are my subheads, the subsequent explanation text is quoted straight out the scientists' letter)

#1) Cancer in senior citizens - The large population of older travelers, greater than 65 years of age, is particularly at risk from the mutagenic effects of the X-rays based on the known biology of melanocyte aging.

#2) Breast cancer - A fraction of the female population is especially sensitive to mutagenesis-provoking radiation leading to breast cancer. Notably, because these women, who have defects in DNA repair mechanisms, are particularly prone to cancer, X-ray mammograms are not performed

on them. The dose to breast tissue beneath the skin represents a similar risk.

#3) White blood cells being irradiated - Blood (white blood cells) perfusing the skin is also at risk.

#4) HIV and cancer patients - The population of immunocompromised individuals -- HIV and cancer patients (see above) is likely to be at risk for cancer induction by the high skin dose.

#5) Radiation risk to children - The risk of radiation emission to children and adolescents does not appear to have been fully evaluated.

#6) Pregnant women - The policy towards pregnant women needs to be defined once the theoretical risks to the fetus are determined.

#7 Sperm mutations - Because of the proximity of the testicles to skin, this tissue is at risk for sperm mutagenesis.

#8 Radiation effects on cornea and thymus - Have the effects of the radiation on the cornea and thymus been determined?

#9 Problems with the machine - There are a number of 'red flags' related to the hardware itself. Because this device can scan a human in a few seconds, the X-ray beam is very intense. Any glitch in power at any point in the hardware (or more importantly in software) that stops the device could cause an intense radiation dose to a single spot on the skin.

Translation: This machine does not emit a "flood light" of radiation like you might get from a dental X-ray machine. Rather, this machine emits a thin, narrow beam of radiation that is quickly "scanned" across your body, back and forth, in much the same way that an inkjet printer prints a page (but a lot faster). Because the angle of the X-ray beam is controlled by the scanner software, **a glitch in the software could turn the naked body scanner into a high-energy weapon** if the beam gets "stuck" in one location for more than a fraction of a second.

#10 Higher radiation for the groin? - Given the recent incident (on December 25th, 2009), how do we know whether the manufacturer or TSA, seeking higher resolution, will scan the groin area more slowly leading to a much higher total dose?

None of these ten concerns are being answered by the TSA and its head John Pistole. The attitude from the TSA on these scanners, in fact, is **downright belligerent**, treating Americans as terrorists and threatening to arrest and detain individuals who refuse to be scanned and groped.

The TSA, it seems, believes it can do no wrong. Such is the inevitable outcome of granting too much power to any government department, as it will always seek to expand its power to the point of tyranny over the People.

Dangerous errors are possible

In this letter, these scientists go on to explain why they continue to hold such concerns: (my emphasis added)

We would like to put our current concerns into perspective. As longstanding UCSF scientists and physicians, we have witnessed critical errors in decisions that have seriously affected the health of thousands of people in the United States. These unfortunate errors were made because

*of the **failure to recognize potential adverse outcomes of decisions made at the federal level.***

*Crises create a sense of urgency that frequently leads to hasty decisions where **unintended consequences** are not recognized. Examples include the failure of the CDC to recognize the risk of blood transfusions in the early stages of the AIDS epidemic, approval of drugs and devices by the FDA without sufficient review, and improper standards set by the EPA, to name a few.*

*Similarly, there has not been sufficient review of the intermediate and long-term effects of radiation exposure associated with airport scanners. There is good reason to believe that **these scanners will increase the risk of cancer to children and other vulnerable populations.***

We are unanimous in believing that the potential health consequences need to be rigorously studied before these scanners are adopted. Modifications that reduce radiation exposure need to be explored as soon as possible.

In summary we urge you to empower an impartial panel of experts to reevaluate the potential health issues we have raised before there are irrevocable long-term consequences to the health of our country. These negative effects may on balance far outweigh the potential benefit of increased detection of terrorists.

Translation: These scientists believe that the TSA's naked body scanners pose **a risk of promoting cancer** across the population and that a real, scientific evaluation by trained, independent scientists must be conducted before these scanners are put to further use.

Again, you can read this letter for yourself here:

<http://www.NaturalNews.com/files/TS...>

Big Government says: What cancer?

The TSA, of course, refuses to hold any serious discussion about the science behind its use of naked body scanners... primarily because **there is no legitimate science backing the use of its naked body scanners.**

This whole scam was orchestrated by Chertoff and his Washington buddies to **scare the population** into accepting X-ray scans at airports so that a few rich white guys could cash in on the sale of these machines to the federal government.

The whole thing is a massive con job that, as usual, benefits the bank accounts of a few well-connected power pushers while compromising both the freedoms and the health of the American people.

No legitimate safety testing has ever been conducted on these naked body scanners, and yet the FDA and TSA just allow them to be rolled out on the ASSUMPTION that they must somehow be perfectly safe. (The same is true with seasonal flu vaccines, by the way, which are never tested in randomized, placebo-controlled clinical trials.)

Isn't this how aspartame got legalized, come to think of it? Except in that case it was Rumsfeld, not Chertoff, calling the shots.

You can't have nutrition, but we'll feed you X-rays!

Think about what's happening here for a minute: The FDA is an agency that has gone out and threatened, raided and persecuted manufacturers of walnuts, cherries and green tea products who made **scientifically validated** health claims about the benefits of those products. And yet, when it comes to rolling out naked body scanners that pose a cancer risk to the population, the FDA requires **no legitimate scientific testing whatsoever** and simply rubber stamps the whole project, thereby subjecting virtually the entire population to radiation-emitting devices with **an unknown level of health risk**.

But then again, what do they care if a few thousand people get cancer anyway? More cancer just means more profits for the cancer industry which, not coincidentally, just happens to treat its patients with **yet more radiation** as some sort of "therapy" for cancer. (I know, this just gets more bizarre the further you go).

Big Pharma must love the fact that millions of Americans are now being subjected to yet another form of ionizing radiation, as that means **more cancer patients** to buy chemotherapy in the years ahead, too. Pile 'em in, Chief! We've got more cattle to brand!

The craziest part of all

But the really crazy part about this whole story is not that the scientists are concerned about the health risks of these naked body scanners. It's not that the TSA is, itself, a terrorist organization now generating more fear and terror than the international terrorists could ever hope to accomplish. It's not even the fact that the FDA allows these radiation machines to be widely used across the country despite the fact that they've never been honestly and scientifically tested for use on humans.

No, the real shocker in all this is the startling fact that **people are lining up like cattle to go along with this**. Your average American citizen, it seems, just can't wait to bow down to authority and subject their private body parts to a federal search in complete violation of their Constitutional rights.

The American education system, it seems, has successfully produced **a race of wage slaves** who utterly fail to ask intelligent questions or stand up for their own rights. I guess that's the result of all the **revisionist history** being taught in public schools these days, where children are taught that Christopher Columbus is a national hero and that the government always tells the truth.

By the way, this reminds me to mention one of the most eye-opening books you will ever read. It's called *Lies the Government Told You: Myth, Power, and Deception in American History* by Judge Andrew Napolitano (<http://www.amazon.com/Lies-Governme...>)

If you're not one of the Sheeple, and you think for yourself, and you have come to the realization that practically everything you were taught about history in the public schools was a complete fabrication, then you will definitely enjoy this book. It's written by one of the most knowledgeable and intelligent Constitutional scholars you'll ever encounter, and its sections on the Fourth Amendment are especially relevant to what's happening today with the TSA.

In fact, come to think of it, Judge Napolitano recently appeared on the Alex Jones Show to talk about the freedom issues with the naked body scanners and obscene gropes. You can watch those

videos at: <http://www.prisonplanet.com/the-ale...>

It's a very educational interview.

Naked body scanners pose a cancer risk

But getting back to the health issue in particular, it is clear to anyone who understands the laws of physics that the TSA's naked body scanners create an **increased risk of cancer** to the population.

That's why I had the sense to refuse to go through one of these when directed to do so at a California airport. I opted out and went through the "easy" pat down (the easy version, before they upgraded to their "enhanced" pat downs). (http://www.naturalnews.com/030100_n...)

As of right now, **I refuse to fly** until the TSA backs off its naked body scanner madness. Not only do I refuse to subject my biology to ionizing radiation that carries an unknown cancer risk, but I also strongly object to the U.S. government violating my Constitutional rights by viewing the shape of my naked body on their electronic viewing screens.

Who are the real terrorists? The TSA

Another thing that has become abundantly clear in all this is that **the real terror threat is the TSA itself**. "Terrorism" is defined as using fear to achieve a political purpose. I can't think of a better example of that than the TSA and its fear-mongering campaign engineered to justify its huge power-grabbing expansion of personnel and authority. This is a government agency that had fewer than 200 employees a few years ago but now directs over 60,000 agents (it's like a whole new army of domestic secret police).

Another obvious "a-ha" moment in all this comes when you realize that **air travelers are far more afraid of the TSA than any terror threat**. Your chances of being killed by a terrorist on an air flight in America are so low that you probably have a greater chance of being struck by lightning right smack in the center of your butt crack while doing a yoga pose in a thunderstorm. And yet, your chances of being molested by the TSA are orders of magnitude higher, and everyone who stands in line at a security checkpoint is thinking, in the back of their minds, "Oh God, I hope they don't single me out for an obscene pat down."

The fact that this thought appears in your head (and admit it, it does) should be a **huge red flag** that you now live in a police state. People who live in truly free societies do not fret over being molested by their own government security agents.

Think about it: The way you and I feel in a TSA security line in many way reflects a small part of the way a Jewish citizen must have felt in Germany, in the 1930's, when a Nazi party member knocked on their door and demanded to see their papers. You never know: Am I going to be arrested? Molested? Detained? Deported? Or even killed?

Remember: **Terrorism hinges on the ability of those in power to leverage fear in order to achieve their political goals**. And right now, that seems to be a word-for-word blueprint for what the TSA is doing to the American people.

"The price of freedom is eternal vigilance." - Thomas Jefferson.

And Winston Churchill famously said:

"If you will not fight for the right when you can easily win without bloodshed; if you will not fight when your victory will be sure and not too costly; you may come to the moment when you will have to fight with all the odds against you and only a small chance of survival. There may even be a worse case: you may have to fight when there is no hope of victory, because it is better to perish than to live as slaves."

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About the author: Mike Adams is a consumer health advocate and award-winning journalist with a passion for teaching people how to improve their health. He is a prolific writer and has published thousands of articles, interviews, reports and consumer guides, impacting the lives of millions of readers around the world who are experiencing phenomenal health benefits from reading his articles. Adams is an independent journalist with strong ethics who does not get paid to write articles about any product or company. In mid 2010, Adams produced NaturalNews.TV, a [natural health video sharing website](#) offering user-generated videos on nutrition, green living, fitness and more. He also founded an [environmentally-friendly online retailer called BetterLifeGoods.com](#) that uses retail profits to help support consumer advocacy programs. He's also a noted pioneer in the email marketing software industry, having been the first to launch an [HTML email newsletter technology](#) that has grown to become a standard in the industry. Adams volunteers his time to serve as the executive director of the [Consumer Wellness Center](#), a 501(c)3 non-profit organization, and practices nature photography, Capoeira, martial arts and organic gardening. Known by his callsign, the 'Health Ranger,' Adams posts his missions statements, health statistics and health photos at [www.HealthRanger.org](#)

Learn more:

http://www.naturalnews.com/030607_naked_body_scanners_radiation.html#ixzz1KqzBZTNa



Rosemary Found to Offer Best Protection against Radiation Poisoning

Monday, April 20, 2009 by: Barbara L. Minton

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http://www.naturalnews.com/026079_radiation_exposure_rosemary.html#ixzz1Kr2BqmTn

(NaturalNews) The U.S. is turning into radiation nation. In the twenty-three years since Chernobyl, Americans seem to have forgotten the impact of radiation on health. Swept up in the euphoria over an endless parade of wireless devices, we have turned our backs on the common sense that informed us that Chernobyl was a really big deal when we heard the news. Today Americans act as though they are addicted to radiation and completely oblivious of the jack-hammering effect it has on human cells. They appear willing to accept cancer and even death as small prices to pay for the ability to communicate with anyone, anywhere, anytime. As the nation eagerly anticipates the rollout of WiMAX, promising bone-incinerating coverage of 3,000 square miles from a single tower, those who object find they have no voice and no choice. However, recent research has shown there are steps to take in self-preservation. Carnosic and rosmarinic acids naturally deter radiation poisoning.

RF/microwave exposure leads to cancer development

It has been known for a decade that RF/microwaves from cell phones and tower transmitters cause damage in human blood cells that results in nuclei splintering off into micronuclei fragments. The development of micronuclei heralds the development of pre-cancerous conditions. Many victims of Chernobyl developed blood cell micronuclei that rapidly turned into full blown cancers.

Numerous animal studies have demonstrated that mobile phone radiation quickly causes DNA single and double strand breaks at levels well below the current federal "safe" standards. A six-year industry study showed that human blood exposure to cell phone radiation had a 300 percent increase in genetic damage in the form of micronuclei, suggesting a health threat much greater than smoking or asbestos.

Compounds from rosemary fight against mutagenic effects of radiation

In two separate studies, scientists in Spain found that nothing fights radiation damage to micronuclei like a simple garden herb known as rosemary. They noted that ionizing radiation causes the massive generation of free radicals that induce cellular DNA damage. They studied the protective effects of several compounds against gamma ray induced chromosomal damage in micronuclei testing by adding various compounds to human blood before and after irradiation. When the compounds were added after gamma-irradiation treatment, the protective effects relied

not on scavenging ability, but on activity against free radicals already present in the cells, such as lipoperoxy radicals which are mainly responsible for continuous chromosomal oxidative damage.

The fact that carnosic acid and carnosol found in rosemary are fat soluble allows them to provide highly asinificant protective anti-mutagenic activity. Even the most powerful water-soluble antioxidants lack the capacity to protect against gamma ray induced damage. This study can be found in the *British Journal of Radiology*, February 2 edition.

In their second study, the generation of radiation induced cellular DNA damage to skin from free radicals was the focus. The researchers sought to demonstrate that rosmarinic acid from rosemary would act as a photo-protector both by acting as a scavenger of free radicals and as an inducer of the body's own endogenous defense mechanisms by regulating tyrosinase activity and stimulating melanin production. They found that formulation of toxic malonyldialdehyde was delayed by the use of rosmarinic acid, and the protection factor was 3.34 times greater than for other compounds studied, as measured in micronucleus testing. In vivo testing showed the capacity of orally administered rosmarinic acid to inhibit skin alterations as a result of UV radiation exposure. This study was reported in the February edition of *Food and Chemical Toxicology*.

Common food compound protects lymphocytes against radiation

In a study from India, scientists investigated the radio-protective potential of caffeic acid against gamma radiation-induced cellular changes. A dose of 66 microM of caffeic acid showed the optimum protection of micronuclei and was used to investigate the radio-protective effects of the compound. Lymphocytes were pre-incubated with caffeic acid and controls were not. All the lymphocytes were exposed to different doses of radiation. Genetic damage and biochemical changes were measured. Gamma irradiated control lymphocytes showed a radiation dose-dependent increase in genetic damage and a significant decrease in antioxidant status. Caffeic acid pretreated lymphocytes positively modulated all radiation induced changes. This study is found in the 2008 *Journal of Biochemical and Molecular Toxicology*.

Food sources offering significant amounts of caffeic acid are apples, citrus fruits, and cruciferous vegetables.

RF/microwave radiation has the same effect on health as gamma rays

A pile of research has confirmed that non-ionizing communications radiation in the RF/microwave spectrum has the same effect on human health as ionizing gamma wave radiation from nuclear reactions. This means that Chernobyl has effectively come to America. Injuries resulting from radioactive radiation are identical with the effects of electromagnetic radiation. In the U.S., deadly high frequency radiation is now blasting from tens of thousands of cell towers and rooftop antennas all over the country. The tiny city of San Francisco, has over 2,500 licensed cell phone antennas positioned at 530 locations to nuke its citizens around the clock.

There is no safe dose of radiation

RF/microwave and gamma waves are identical in their abilities to produce gene damage and cancer at the cellular level, and there is no safe dose of either. Cell damage is not dependent on a certain level of exposure because at any time in that exposure, breaks in DNA can occur.

Communication antennas saturate the environment with multiple electromagnetic frequencies simultaneously. The response to this endless cellular jiggling is graphically described by Amy Worthington in her article on the radiation poisoning of America. "Human DNA hears this energetic

cacophony loud and clear, reacting like the human ear would to high volume country music, R&B plus rock and roll screaming from the same speaker simultaneously. Irradiated cells struggle to protect themselves against the destructive dissonance by hardening their membranes. They cease to receive nourishment, stop releasing toxins, die prematurely and spill micronuclei fragments into a sort of tumor bank account." According to an expert quoted in her article, 2000 hours of cellular phone exposure, or a latency period of about 10 years, increases the risk of brain cancer by 240 percent.

Many studies have shown that workers exposed to RF/microwave radiation routinely have inflated cancer rates, and the latency period between exposure and disease development is short. Some suspect that communications carriers exceed FCC exposure limits. Once equipment is installed and inspections are completed, it can be cranked up to create wider coverage. The FCC has sole regulatory authority over the communications industry, but has neither the money nor the employees to conduct verification testing. Even if they could do the monitoring, their guidelines are obsolete based on current scientific findings that have shown damage to human cells occurs at levels thousands of times lower than current standards permit. In other countries the allowed exposure levels are much less. Russia's standards are 100 times more stringent than those in the U.S., because their scientists have found that human hearts, kidneys, livers and brains are damaged at much lower exposure levels.

When it comes to protecting against radiation, we are on our own

Since the beginning of the wireless revolution, there have been no federally funded studies to determine the impact of constantly escalating levels of radiation on public health. Most people remain blissfully unaware of their proximity to towers and transmitters. They are also unaware of their levels of exposure in their workplaces where wireless transmitters may be located just a few feet away from them.

Some of the symptoms of overexposure to radiation are heart palpitations, diminishing hearing ability, headaches, sleep disturbance, chronic fatigue, endocrine problems, short term memory difficulties, sleep disturbance, chronic fatigue, frequent infections, reproductive issues, and reduced cognitive ability and information processing difficulties. The development of tumors and cancer is one big indication that something is radically wrong, and that *something* may be radiation poisoning.

What is a person to do about these symptoms? Right now it looks like the best defense against radiation poisoning is the same as the best defense against all diseases. This defense begins with diet and supplements. Eating a diet high in apples, citrus fruits, cruciferous vegetables, drinking red wine, and using fresh rosemary have been scientifically shown to be effective. Supplements of rosemary extract containing carnosic and rosmarinic acids are widely available. Supplements of DIM offer higher doses of one of the most potent compounds in cruciferous vegetables. Broccoli sprouts are the best source of sulforaphane, another highly potent compound in cruciferous vegetables. Broccoli sprouts are available as supplements too. Making a pitcher of fresh vegetable juice several times a week for all family members to drink is a great way to fortify everyone against an environment that has turned against them. The juice should contain high amounts of broccoli, cabbage or other cruciferous vegetables. Adding a small slice of fresh ginger will give the juice an appealing flavor. Use only organic or fresh locally grown vegetables if they are available.

Although it may not seem like it, living without the use of wireless devices is possible. Until giant steps are taken in that direction, demanding that wireless emissions from transmitters be drastically reduced is fairly pointless. Demanding the government conduct routine compliance testing at all transmission sites and update federal radiation exposure standards is something that can be done right now.

We can break our radiation addiction by giving up wireless internet systems and cell phone calls. Once knowledge is instilled about the devastating health consequences of wireless, it may no longer be fun to play wireless games and chatter on the phone while driving or shopping. If people do not buy WiMAX devices and their related services, the increased brutal bombardment of radiation it promises will be derailed.

OSHA standards say that no environment should be deliberately made hazardous. Armed with the knowledge of what radiation does to human cells, people can refuse to work or shop in environments that endanger their health. They can demand that wireless devices be removed from their children's schools and from their work and entertainment places.

As a nation we bought into the advertisement that cell phones were necessary for an emergency. Yet the emergency happening now is the cell phone. What we thought would keep ourselves and our families safe now threatens to kill us. A look at our teenagers shows that convenience has been replaced by addiction. These teens rarely talk directly to each other, preferring endless communication through text messaging that is already producing teens with carpal tunnel syndrome. It really doesn't have to be this way.

If we as a people are unable to break away from radiation addiction, Mother Nature will take control of the situation. Those lucky enough to adapt to radiation nation will survive and reproduce. Those who cannot keep up genetically will end up like the dinosaurs.

For more information see:

<http://proliberty.com/observer/2007...>
<http://abcnews.go.com/Health/Cancer...>
<http://www.ncrponline.org/>

About the author

Barbara is a school psychologist, a published author in the area of personal finance, a breast cancer survivor using "alternative" treatments, a born existentialist, and a student of nature and all things natural.

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Mammograms cause breast cancer (and other cancer facts you probably never knew)

Monday, August 15, 2005 by: Dawn Prate

Learn more:

http://www.naturalnews.com/010886_breast_cancer_mammograms.html#ixzz1Kr3F59ai

Breast cancer is the leading cause of death among American women between the ages of 44 and 55. Dr. Gofinan, in his book, *Preventing Breast Cancer*, cites this startling statistic along with an in-depth look at mammographic screening, an early-detection practice that agencies like the American Cancer Society recommend to women of all age groups. According to most health experts, catching a tumor in its early stages increases a woman's chances of survival by at least 17 percent.

The most common method for [early detection](#) is mammography. A [mammogram](#) is an X-ray picture of your breast that can reveal tumor growths otherwise undetectable in a physical exam. Like all x-rays, mammograms use doses of [ionizing radiation](#) to create this image. Radiologists then analyze the image for any abnormal growths. Despite continuous improvements and innovations, [mammography](#) has garnered a sizable opposition in the medical community because of an error rate that is still high and the amount of harmful [radiation](#) used in the procedure.

Effectiveness of Mammography

Is mammography an effective tool for detecting [tumors](#)? Some critics say no. In a Swedish study of 60,000 [women](#), 70 percent of the mammographically detected tumors weren't tumors at all. These "[false positives](#)" aren't just financial and emotional strains, they may also [lead](#) to many unnecessary and invasive biopsies. In fact, **70 to 80 percent of all positive [mammograms](#) do not, upon biopsy, show any presence of [cancer](#).**

At the same time, mammograms also have a high rate of missed tumors, or "false negatives." Dr. Samuel S. Epstein, in his book, *The Politics Of Cancer*, claims that in women ages 40 to 49, one in four instances of cancer is missed at each mammography. The [National Cancer Institute](#) (NCI) puts the false negative rate even higher at 40 percent among women ages 40-49. [National Institutes of Health](#) spokespeople also admit that mammograms miss 10 percent of malignant tumors in women over 50. Researchers have found that [breast tissue](#) is denser among younger women, making it difficult to detect tumors. For this reason, false negatives are twice as likely to occur in premenopausal mammograms.

Radiation Risks

Many critics of mammography cite the hazardous [health](#) effects of radiation. In 1976, the controversy over radiation and mammography reached a saturation point. At that time mammographic [technology](#) delivered five to 10 rads (radiation-absorbed doses) per [screening](#), as compared to 1 rad in current screening methods. In women between the ages of 35 and 50, each rad of [exposure](#) increased the risk of [breast cancer](#) by one percent, according to Dr. Frank Rauscher, then-director of the [NCI](#).

According to Russell L. Blaylock, MD, one estimate is that annual radiological breast exams increase the [risk](#) of breast cancer by two percent a year. So over 10 years the risk will have increased 20 percent. In the 1960s and 70s, women, even those who received 10 [screenings](#) a year, were never told the risk they faced from exposure. In the midst of the 1976 radiation [debate](#), Kodak, a major manufacturer of mammography film, took out full-page ads in scientific journals entitled *About breast cancer and [X-rays](#): A hopeful message from [industry](#) on a sober topic.*

Despite better technology and decreased doses of radiation, [scientists](#) still claim mammography is a substantial risk. Dr. John W. Gofman, an [authority](#) on the health effects of ionizing radiation, estimates that 75 percent of breast cancer could be prevented by avoiding or minimizing exposure to the ionizing radiation. This includes mammography, x-rays and other medical and dental sources.

Since mammographic screening was introduced, the incidence of a form of breast cancer called ductal carcinoma in situ (DCIS) has increased by 328 percent. Two hundred percent of this increase is allegedly due to mammography. In addition to harmful radiation, mammography may also help spread existing [cancer cells](#) due to the considerable pressure placed on the woman's breast during the procedure. According to some health practitioners, this compression could cause existing cancer cells to metastasize from the breast tissue.

Cancer [research](#) has also found a gene, called oncogene AC, that is extremely sensitive to even small doses of radiation. A significant percentage of women in the [United States](#) have this gene, which could increase their risk of mammography-induced cancer. They estimate that 10,000 A-T carriers will die of breast cancer this year due to mammography.

The risk of radiation is apparently higher among younger women. The NCI released [evidence](#) that, among women under 35, **mammography could cause 75 cases of breast cancer for every 15 it identifies**. Another Canadian study found a 52 percent increase in breast [cancer mortality](#) in young women given annual mammograms. Dr. Samuel Epstein also claims that pregnant women exposed to radiation could endanger their fetus. He advises against mammography during pregnancy because "the future [risks](#) of leukemia to your unborn child, not to mention [birth](#) defects, are just not worth it." Similarly, studies reveal that [children](#) exposed to radiation are more likely to develop breast cancer as adults.

Navigating the Statistics

While the number of [deaths](#) caused by breast cancer has decreased, the *incidence* of breast cancer is still rising. Since 1940, the incidence of breast cancer has risen by one to two percent every year. Between 1973 and 1991, the incidence of breast cancer in females over 65 rose nearly 40 percent in the United States.

Some researchers attribute this increase to better detection technologies; i.e., as the number of women screened for breast cancer rises, so does the number of reported cases. Other analysts say the correlation between mammographic screening and increases in breast cancer is much more ominous, suggesting [radiation exposure](#) is responsible for the growing number of cases. While the matter is still being debated, Professor Sandra Steingraber offers ways to navigate these [statistics](#). According to Steingraber, the rise in breast cancer predates the introduction of mammograms as a

common diagnostic tool. In addition, the groups of women in whom breast cancer incidence is ascending most swiftly – blacks and the elderly – are also least likely to get regular mammograms.

The majority of [health experts](#) agree that the risk of breast cancer for women under 35 is not high enough to warrant the risk of radiation exposure. Similarly, the risk of breast cancer to women over 55 justifies the risk of mammograms. The statistics about mammography and women between the ages of 40 and 55 are the most contentious. A 1992 Canadian National Breast Cancer Study showed that mammography had no positive effect on mortality for women between the ages of 40 and 50. In fact, the study seemed to suggest that women in that age group are more likely to die of breast cancer when screened regularly.

Burton Goldberg, in his book, *Alternative Medicine*, recommends that women under 50 avoid screening mammograms, although the [American Cancer Society](#) encourages mammograms every two years for women ages 40 to 49. Trying to settle this debate, a 1997 consensus panel appointed by the [NIH](#) ruled that there was no evidence that mammograms for this age group save lives; they may even do more harm than good. The panel advises women to weigh the risks with their [doctors](#) and decide for themselves.

New Screening Technologies

While screening is an important step in fighting breast cancer, many researchers are looking for [alternatives](#) to mammography. Burton Goldberg totes the safety and accuracy of new [thermography](#) technologies. Able to detect [cancers](#) at a minute physical stage of development, thermography does not use x-rays, nor is there any compression of the breast. Also important, new thermography technologies do not lose effectiveness with dense breast tissue, decreasing the chances of false-negative [results](#).

Some doctors are now offering digital mammograms. Digital mammography is a mammography system in which x-ray film is replaced by solid-state detectors that convert x-rays into electric signals. Though radiation is still used, digital mammography requires a much smaller dose. The electrical signals are used to produce images that can be electronically manipulated; a physician can zoom in, magnify and optimize different parts of breast tissue without having to take an additional image.

The [experts](#) speak on mammograms and breast cancer:

Regular mammography of younger women increases their cancer risks. Analysis of controlled trials over the last decade has shown consistent increases in breast cancer mortality within a few years of commencing screening. This confirms evidence of the high sensitivity of the premenopausal breast, and on cumulative carcinogenic effects of radiation.

The Politics Of Cancer by Samuel S Epstein MD, page 539

In his book, "Preventing Breast Cancer," Dr. Gofinan says that breast cancer is the leading [cause of death](#) among American women between the ages of forty-four and fifty-five. Because breast tissue is highly radiation-sensitive, mammograms can cause cancer. The [danger](#) can be heightened by a woman's genetic makeup, preexisting benign breast [disease](#), artificial menopause, obesity, and hormonal imbalance.

Death By Medicine by Gary Null PhD, page 23

"The risk of radiation-induced breast cancer has long been a concern to mammographers and has driven the efforts to minimize radiation dose per examination," the panel explained. "Radiation can cause breast cancer in women, and the risk is proportional to dose. The younger the woman at the

time of exposure, the greater her lifetime risk for breast cancer.

Under The Influence Modern Medicine by Terry A Rondberg DC, page 122

Furthermore, there is clear evidence that the breast, particularly in premenopausal women, is highly sensitive to radiation, with estimates of increased risk of breast cancer of up to 1% for every rad (radiation absorbed dose) unit of X-ray exposure. This projects up to a 20% increased [cancer risk](#) for a woman who, in the 1970s, received 10 annual mammograms of an average two rads each. In spite of this, up to 40% of women over 40 have had mammograms since the mid-1960s, some annually and some with exposures of 5 to 10 rads in a single screening from older, high-dose equipment.

The Politics Of Cancer by Samuel S Epstein MD, page 537

No less questionable—or controversial—has been the use of X rays to detect breast cancer: mammography. The American Cancer Society initially promoted the procedure as a safe and simple way to detect breast tumors early and thus allow women to undergo mastectomies before their cancers had metastasized.

The Cancer Industry by Ralph W Moss, page 23

The American Cancer Society, together with the American College of Radiologists, has insisted on pursuing largescale mammography screening programs for breast cancer, including its use in younger women, even though the NCI and other experts are now agreed that these are likely to cause more cancers than could possibly be detected.

The Politics Of Cancer by Samuel S Epstein MD, page 291

A number of "cancer societies" argued, saying the tests — which cost between \$50-200 each - - are a necessity for all women over 40, despite the fact that radiation from yearly mammograms during ages 40-49 has been estimated to cause one additional breast cancer [death](#) per 10,000 women.

Under The Influence Modern Medicine by Terry A Rondberg DC, page 21

Mammograms Add to Cancer Risk—mammography exposes the breast to damaging ionizing radiation. John W. Gofman, M.D., Ph.D., an authority on the health effects of ionizing radiation, spent 30 years studying the effects of low-dose radiation on humans. He estimates that 75% of breast cancer could be prevented by avoiding or minimizing exposure to the ionizing radiation from mammography, X rays, and other medical sources. Other research has shown that, since mammographic screening was introduced in 1983, the incidence of a form of breast cancer called ductal carcinoma in situ (DCIS), which represents 12% of all breast cancer cases, has increased by 328%, and 200% of this increase is due to the use of mammography.⁶⁹ In addition to exposing a woman to harmful radiation, the mammography procedure may help spread an existing mass of cancer cells. During a mammogram, considerable pressure must be placed on the woman's breast, as the breast is squeezed between two flat plastic surfaces. According to some health practitioners, this compression could cause existing cancer cells to metastasize from the breast tissue.

Alternative Medicine by Burton Goldberg, page 588

In fact the [benefits](#) of annual screening to women age 40 to 50, who are now being aggressively recruited, are at best controversial. In this age group, one in four cancers is missed at each mammography. Over a decade of pre-menopausal screening, as many as three in 10 women will be mistakenly diagnosed with breast cancer. Moreover, international [studies](#) have shown that routine premenopausal mammography is associated with increased breast cancer death rates at older ages. Factors involved include: the high sensitivity of the premenopausal breast to the cumulative carcinogenic effects of mammographic X-radiation; the still higher sensitivity to radiation of women who carry the A-T gene; and the danger that forceful and often painful compression of the breast during mammography may rupture small [blood](#) vessels and encourage distant spread of undetected cancers.

The Politics Of Cancer by Samuel S Epstein MD, page 540

Since a mammogram is basically an x-ray (radiation) of the breast, I do not recommend

mammograms to my patients for two reasons: 1) Few [radiologists](#) are able to read mammograms correctly, therefore limiting their effectiveness. Even the man who developed this technique stated on national television that only about six radiologists in the United States could read them correctly. 2) In addition, each time the breasts are exposed to an x-ray, the risk of breast cancer increases by 2 percent.

The Hope of Living Cancer Free by Francisco Contreras MD, page 104

Mammography itself is radiation: an X-ray picture of the breast to detect a potential tumor. Each woman must weigh for herself the risks and benefits of mammography. As with most carcinogens, there is a latency period or delay between the time of irradiation and the occurrence of breast cancer. This delay can vary up to decades for different people. Response to radiation is especially dramatic in children. Women who received X-rays of the breast area as children have shown increased rates of breast cancer as adults. The first increase is reflected in women younger than thirty-five, who have early onset breast cancer. But for this exposed group, flourishing breast cancer rates continue for another forty years or longer.

Eat To Beat Cancer by J Robert Hatherill, page 132

The use of women as guinea pigs is familiar. There is revealing consistency between the tamoxifen trial and the 1970s trial by the NCI and American Cancer Society involving high-dose mammography of some 300,000 women. Not only is there little evidence of effectiveness of mammography in premeno-pausal women, despite NCI's assurances no warnings were given of the known high risks of breast cancer from the excessive X-ray doses then used. There has been no investigation of the incidence of breast cancer in these high-risk women. Of related concern is the NCI's continuing insistence on premeno-pausal mammography, in spite of contrary warnings by the American College of Physicians and the Canadian Breast Cancer Task Force and in spite of persisting questions about hazards even at current low-dose exposures. These problems are compounded by the NCI's failure to explore safe alternatives, especially transillumination with infrared light scanning.

The Politics Of Cancer by Samuel S Epstein MD, page 544

High Rate of False Positives—mammography's high rate of false-positive [test results](#) wastes money and creates unnecessary emotional trauma. A Swedish study of 60,000 women, aged 40-64, who were screened for breast cancer revealed that of the 726 actually referred to oncologists for treatment, 70% were found to be cancer free. According to The Lancet, of the 5% of mammograms that suggest further testing, up to 93% are false positives. The Lancet report further noted that because the great majority of positive screenings are false positives, these inaccurate results lead to many unnecessary biopsies and other invasive surgical procedures. In fact, 70% to 80% of all positive mammograms do not, on [biopsy](#), show any presence of cancer.⁷¹ According to some estimates, 90% of these "callbacks" result from unclear readings due to dense overlying breast tissue.⁷²

Alternative Medicine by Burton Goldberg, page 588

"Radiation-related breast cancers occur at least 10 years after exposure," continued the panel.

"Radiation from yearly mammograms during ages 40-49 has been estimated to cause one additional breast cancer death per 10,000 women."

Under The Influence Modern Medicine by Terry A Rondborg DC, page 122

According to the National Cancer Institute, there is a high rate of missed tumors in women ages 40-49 which results in 40% false negative test results. Breast tissue in younger women is denser, which makes it more difficult to detect tumours, so tumours grow more quickly in younger women, and tumours may develop between screenings. Because there is no reduction in mortality from breast cancer as a direct result of early mammogram, it is recommended that women under fifty avoid screening mammograms although the American Cancer Society still recommends a mammogram every two years for women age 40-49. Dr. Love states, "We know that mammography works and will be a lifesaving tool for at least 30%."

Treating Cancer With Herbs by Michael Tierra ND, page 467

Equivocal mammogram results lead to unnecessary surgery, and the accuracy rate of mammograms is poor. According to the National Cancer Institute (NCI), in women ages 40-49, there is a high rate of "missed tumors," resulting in 40% false-negative mammogram results. Breast tissue in younger women is denser, which makes it more difficult to detect tumors, and tumors grow more quickly in younger women, so cancer may develop between screenings.

Alternative Medicine by Burton Goldberg, page 973

Even worse, spokespeople for the National Institutes of Health (NIH) admit that mammograms miss 25 percent of malignant tumors in women in their 40s (and 10 percent in older women). In fact, one Australian study found that more than half of the breast cancers in younger women are not detectable by mammograms.

Underground Cures by Health Sciences Institute, page 42

Whatever you may be told, refuse routine mammograms to detect early breast cancer, especially if you are premenopausal. The X-rays may actually increase your chances of getting cancer. If you are older, and there are strong reasons to suspect that you may have breast cancer, the risks may be worthwhile. Very few circumstances, if any, should persuade you to have X-rays taken if you are pregnant. The future risks of leukaemia to your unborn [child](#), not to mention birth defects, are just not worth it.

The Politics Of Cancer by Samuel S Epstein MD, page 305

Other medical research has shown that the incidence of a form of breast cancer known as ductal carcinoma in situ (DCIS), which accounts for 12% of all breast cancer cases, increased by 328% — and 200% of this increase is due to the use of mammography!

Under The Influence Modern Medicine by Terry A Rondborg DC, page 123

As the controversy heated up in 1976, it was revealed that the hundreds of thousands of women enrolled in the program were never told the risk they faced from the procedure (ibid.). Young women faced the greatest danger. In the thirty-five- to fifty-year-old age group, each mammogram increased the subject's chance of contracting breast cancer by 1 percent, according to Dr. Frank Rauscher, then director of the National Cancer Institute ([New York Times](#), August 23, 1976).

The Cancer Industry by Ralph W Moss, page 24

Because there is no reduction in mortality from breast cancer as a direct result of early mammograms, it is recommended that women under 50 avoid screening mammograms, although the American Cancer Society is still recommending a mammogram every two years for women ages 40-49. The NCI recommends that, after age 35, women perform monthly breast self-exams. For women over 50, many doctors still advocate mammograms. However, breast self-exams and safer, more accurate technologies such as thermography should be strongly considered as options to mammography.

Alternative Medicine by Burton Goldberg, page 973

In the midst of the debate, [Kodak](#) took out full-page ads in scientific journals entitled "About breast cancer and X-rays: A hopeful message from industry on a sober topic" (see *Science*, July 2, 1976). Kodak is a major manufacturer of mammography film.

The Cancer Industry by Ralph W Moss, page 24

The largest and most credible study ever done to evaluate the impact of routine mammography on [survival](#) has concluded that routine mammograms do significantly reduce deaths from breast cancer. Scientists in the United States, Sweden, Britain, and Taiwan compared the number of deaths from breast cancer diagnosed in the 20 years before mammogram screening became available with the number in the 20 years after its introduction. The research was based on the histories and treatment of 210,000 Swedish women ages 20 to 69. The researchers found that death from breast cancer dropped 44 percent in women who had routine mammography. Among those who refused mammograms during this time period there was only a 16 percent reduction in death from this

disease (presumably the decrease was due to better treatment of the malignancy).

Dr Isadore Rosenfeld's Breakthrough Health By Isadore Rosenfeld MD, page 47

In 1993—seventeen years after the first pilot study—the biochemist Mary Wolff and her colleagues conducted the first carefully designed, major study on this issue. They analyzed DDE and PCB levels in the stored blood specimens of 14,290 New York City women who had attended a mammography screening clinic. Within six months, fifty-eight of these women were diagnosed with breast cancer. Wolff matched each of these fifty-eight women to control subjects—women without cancer but of the same age, same menstrual status, and so on—who had also visited the clinic. The blood samples of the women with breast cancer were then compared to their cancer-free counterparts.

Living Downstream by Sandra Steingraber PhD, page 12

One reason may be that mammograms actually increase mortality. In fact numerous studies to date have shown that among the under-50s, more women die from breast cancer among screened groups than among those not given mammograms. The results of the Canadian National Breast Cancer Screening Trial published in 1993, after a screen of 50,000 women between 40-49, showed that more tumors were detected in the screened group, but not only were no lives saved but 36 percent more women died from

The Cancer Handbook by Lynne McTaggart, page 57

One Canadian study found a 52 percent increase in breast cancer mortality in young women given annual mammograms, a procedure whose stated purpose is to prevent cancer. Despite evidence of the link between cancer and radiation exposure to women from mammography, the American Cancer Society has promoted the practice without reservation. Five radiologists have served as ACS presidents.⁵³

When Healing Becomes A Crime by Kenny Ausubel, page 233

Premenopausal women carrying the A-T gene, about 1.5 percent of women, are more radiation sensitive and at higher cancer risk from mammography. It has been estimated that up to 10,000 breast cancer cases each year are due to mammography of A-T carriers.

The Politics Of Cancer by Samuel S Epstein MD, page 539

A study reported that mammography combined with physical exams found 3,500 cancers, 42 percent of which could not be detected by physical exam. However, 31 percent of the tumors were noninfiltrating cancer. Since the course of breast cancer is long, the time difference in cancer detected through mammography may not be a benefit in terms of survival.

Woman's Encyclopedia Of Natural Healing by Dr Gary Null, page 86

The American College of Obstetricians and Gynecologists also has called for more mammograms among women over 50. However, constant screening still can miss breast cancer. mammograms are at their poorest in detecting breast cancer when the woman is under 50.

The Cancer Handbook by Lynne McTaggart, page 53

Despite its shortcomings, every woman between the ages of fifty and sixty-nine should have one every year. I also recommend them annually for women over seventy, even though early detection isn't as important for the slow-growing form of breast cancer they tend to get. One mammogram should probably be taken at age forty to establish a baseline, but how often women should have them after that is debatable. Some authorities favor annual screening. Others feel there's not enough evidence to support screening at all before fifty. Still others believe that every two years is sufficient. I lean toward having individual women and their doctors go over the pros and cons and make their own decisions. Finally, a mammogram is appropriate at any age if a lump has been detected.

The Longevity Code By Zorba Paster MD, page 234 For breast cancer, thermography offers a very early warning system, often able to pinpoint a cancer process five years before it would be detectable by mammography. Most breast tumors have been growing slowly for up to 20 years

before they are found by typical diagnostic techniques. Thermography can detect cancers when they are at a minute physical stage of development, when it is still relatively easy to halt and reverse the progression of the cancer. No rays of any kind enter the patient's body; there is no [pain](#) or compressing of the breasts as in a mammogram. While mammography tends to lose effectiveness with dense breast tissue, thermography is not dependent upon tissue densities.

Alternative Medicine by Burton Goldberg, page 587

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FINALLY: NIH takes a step to track radiation exposure from medical tests

Wednesday, February 17, 2010 by: S. L. Baker, features writer

Learn more: http://www.naturalnews.com/028181_medical_imaging_radiation.html#ixzz1Kr4aItRZ
(NaturalNews) Many Americans are exposed to atomic bomb levels of radiation (http://www.naturalnews.com/025767_R...) over their lifetimes, thanks to the medical industry's determination to push radiation imaging techniques like mammography and CT scans on the healthy as well as the ill. In fact, over the past three decades, Americans' exposure to radiation through common medical tests has soared six-fold. But although it is a well-known scientific fact that radiation exposure, which is cumulative, increases the risk of cancer, [government](#) scientists have failed to warn the public about the dangers of repeated tests involving [radiation](#), claiming the specific [risk](#) level is unknown.

Now, finally, researchers at the National Institutes of Health ([NIH](#)) Clinical Center have decided radiation dose [exposure](#) reports should be included in patients' electronic medical records. According to an article in the February issue of the *Journal of the American College of Radiology* (JACR), [the NIH](#) researchers hope this effort will result in an eventual accurate assessment of [cancer](#) associated with low-dose [radiation exposure](#) from medical imaging [tests](#).

"The cancer risk from low-dose [medical radiation](#) tests is largely unknown. Yet it is clear that the U.S. population is increasingly being exposed to more diagnostic-test-derived ionizing radiation than in the past," David A. Bluemke, MD, lead author of the article and director of Radiology and Imaging Sciences at the NIH Clinical Center, said in a statement to the press. "One widely publicized appraisal of medical radiation exposure suggested that about 1.5 to 2 percent of all cancers in the USA might be caused by the clinical use of CT alone."

A new radiation reporting policy

To attempt to document the amount of radiation exposure [patients](#) receive from medical tests, the [radiology](#) and nuclear medicine experts at the NIH Clinical Center have come up with a radiation reporting policy that involves the major radiation equipment vendors, starting with keeping track of exposures from CT and PET/CT scans. "All vendors who sell imaging equipment to Radiology and Imaging Sciences at the NIH Clinical Center will be required to provide a routine means for radiation dose exposure to be recorded in the electronic medical record. This requirement will allow cataloging of radiation exposures from these medical tests," said Dr. Bluemke. In addition, the NIH will now require that vendors make sure that radiation exposure can be tracked by patients in their own personal [health](#) records.

Dr. Bluemke added that this approach is consistent with the American College of Radiology's and Radiological Society of North America's official stance that "patients should keep a record of their

X-ray history". You read that correctly. ***Patients themselves are currently supposed to keep up with how much radiation they've been bombarded with, according to the radiology industry.***

What's more, the NIH's new pronouncement that requires radiation testing vendors to keep track of how much radiation they expose patients to only applies to people receiving screening or testing through the NIH. "We encourage all medical imaging facilities to include similar requirements for radiation-dose-reporting outputs from the manufacturers of radiation-producing medical equipment," Dr. Bluemke said.

So the new NIH policy does not mean other medical centers and hospitals that use medical imaging are now required to keep records of how much radiation they are zapping patients with -- the government is only ***encouraging*** these facilities to follow through on this recommendation. Bottom line: the only real protection from excessive medical radiation is **for people to take control of their own health, to ask questions of any doctor who wants to order these tests, and to avoid any and all unnecessary radiation imaging testing.**

For more information:

<http://www.naturalnews.com/radiatio...>

<http://www.jacr.org/article/S1546-1...>)00362-7/ tests

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Doctors use Fukushima-like radiation to "treat" thyroid disorders



Tuesday, March 22, 2011

by Mike Adams, the Health Ranger

Editor of NaturalNews.com ([See all articles...](#))

Learn more: http://www.naturalnews.com/031793_hyperthyroidism_radiation.html#ixzz1Kr5Qqhnc (NaturalNews) Japan has been reporting for several days that much of the raw milk being produced in the Fukushima province is now radioactive. This raises today's quiz question: If the FDA were operating in Japan, what would they do about this raw, radioactive milk?

Answer: They would seize it because it's RAW, not because it's radioactive.

After all, it is the FDA that has long supported the **mass irradiation of the food supply** as a way to sterilize it and "kill pathogens." The food irradiation agenda has long been a top priority of the FDA (http://www.naturalnews.com/023015_f...). Meanwhile, the FDA has been a steady enemy of **raw milk** (and other raw foods).

Even today, when you buy almonds grown in California, they must be fumigated or irradiated in order to comply with California state law (which was supported by the USDA and applauded by the FDA). (<http://www.naturalnews.com/021989.html>)

Perhaps the Fukushima nuclear power plant has a future after all: Instead of producing power, it can function as an **FDA-approved food irradiation center** where fresh, raw foods are exposed to radiation to make them "safe" for public consumption.

Does your doctor want to irradiate your thyroid gland?

It's not just your food that's being irradiated, of course: It's also your body. In addition to the radiation-emitting mammography machines and cancer radiotherapy treatment machines used in hospitals every day, there's also a very common radiation treatment for so-called "hyperthyroidism" that involves injecting a radioactive form of iodine into patients and "burning out" their thyroid gland.

Guess what they use for their thyroid radiation treatment? **Radioactive iodine** -- the same deadly substance being released from the Fukushima power plant!

I can't make this stuff up. The treatment is so dangerous that patients who subject themselves to it **set off radiation alarms** at airports and transportation centers. The patients are so radioactive that

they're told not to stand near any other person for several days because the radiation would damage them. From EPA.gov:

"Key beta emitters used in medical imaging, diagnostic and treatment procedures are phosphorus-32, and iodine-131. For example, people who have taken radioactive iodine will emit beta particles. They must follow strict procedures to protect family members from exposure.

Radioactive iodine may enter the environment during a nuclear reactor accident and find its way into the food chain.

Industrial gauges and instruments containing concentrated beta-emitting radiation sources can be lost, stolen, or abandoned. If these instruments then enter the scrap metal market, or someone finds one, the sources they contain can expose people to beta emitters."

(<http://www.epa.gov/radiation/unders...>)

Coming soon: The Fukushima hospital?

The fact that western medicine uses the same deadly radiation being released by the Fukushima nuclear facility as a "treatment" for your thyroid is nothing short of astonishing. Doctors quite literally "fry" patients' thyroid glands with this radiation, and then send them home to die from the inevitable cancers that will result.

This leads to the rather obvious conclusion of what to do with the Fukushima nuclear power plant now that it can no longer be used to generate electricity: Western medical doctors can **turn it into the Fukushima hospital** to "treat" cancer patients and hyperthyroidism sufferers with yet more radiation!

This is not said in jest. Radiation is used every day throughout the medical industry, even when radiation is the cause of the cancer in the first place. Cancer doctors, you see, have somehow reached the bizarre conclusion that cancer is caused by **a lack of radiation** and therefore cancer patients need *more* radiation as a "treatment."

If this philosophy is followed throughout Japan, it will mean that all the cancer victims from the Fukushima catastrophe will be given *yet more radiation* as a way to treat the cancers they develop. Or perhaps they'll be given chemotherapy, a powerful chemical poison, to go along with the radiation. It all just shows you how completely quacked-out modern cancer treatments really are, doesn't it?

Only in western medicine does the "treatment" consist of pure poison or deadly radiation. And aren't those the very same things that caused cancer in the first place?

Isn't it amazing how doctors say "use more sunscreen" because the sun's radiation might give you cancer, but to treat the cancer, they give you **artificial radiation** from far more dangerous sources? (By "artificial" I mean it is a "contrived" source of radiation that's not normally present in the human environment.)

I think they should rename hyperthyroidism treatments to be the "Fukushima protocol." Radioactive iodine, folks. You can get it either from a nuclear meltdown, or **from your doctor**.

Oh, and by the way, when they give you radioactive iodine to burn out your thyroid, they specifically tell you in advance to *avoid* taking in other sources of iodine, or else the radioactive iodine "won't burn out your thyroid good enough" (paraphrased, obviously). Don't protect your

body, in other words. That's the message from both the White House and the medical system: Don't take precautions against radiation. Just do what you're told and go along with whatever you're supposed to do, no matter how totally loony that "official" advice might be.

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About the author: Mike Adams is a consumer health advocate and award-winning journalist with a passion for teaching people how to improve their health. He has authored more than 1,800 articles and dozens of reports, guides and interviews on natural health topics, reaching millions of readers with information that is saving lives and improving personal health around the world. Adams is an honest, independent journalist and accepts no money or commissions on the third-party products he writes about or the companies he promotes. In 2010, Adams created NaturalNews.TV, a [natural living video sharing site](#) featuring thousands of user videos on foods, fitness, green living and more. He also launched an [online retailer of environmentally-friendly products](#) (BetterLifeGoods.com) and uses a portion of its profits to help fund non-profit endeavors. He's also a noted pioneer in the email marketing software industry, having been the first to launch an [HTML email newsletter technology](#) that has grown to become a standard in the industry. Adams volunteers his time to serve as the executive director of the [Consumer Wellness Center](#), a 501(c)3 non-profit organization, and regularly pursues cycling, nature photography, Capoeira and Pilates.

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