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Tiny dot

The confusion about mammograms grows

From The Daily Texan

AUSTIN, Texas (U-WIRE) — For more than a decade, health experts and the media portrayed regular mammograms as the Wunderkind of early breast cancer detection.

Now, National Institutes of Health experts have announced they do not recommend regular mammograms for women in their 40s and that "breast cancer mortality is no lower in [women who received mammograms in their 40s] than in controls."

Dr. Richard Klausner, director of NIH's National Cancer Institute and the man who convened the NIH council, reported he was "shocked" by the panel's announcement.

But the NIH panel was right to admit its uncertainty.

Mammograms are unreliable. While they have lowered the mortality rate 30 percent in women over 50, the data concerning mammograms' efficacy for younger women is flawed, incomplete and even contradictory.

Women under 50 are often premenopausal and therefore, have much denser breast tissue. Thus, cancerous cells are often obscured.

There is also the law of unintended consequences. Women responsibly went in for their yearly mammogram, but forsook the self-exam, a crucial component in early detection. The results were tragic. Though many know the remarkable benefits of mammograms, few are aware of their flaws.

Mammograms detect lumps one-eighth an inch across.

Often, they detect cancer years before a self-exam, when a breast lump cannot be felt unless it is twice that size. In this scenario, in which the cancer is "indolent," women can often effectively stop the cancer's spread through a lumpectomy, surgical removal of the cancerous lump from the breast. Here, mammograms can play a critical role.

However, mammograms are far less effective in preventing the fatal spread of aggressive cancer, which rapidly infests other organs — often before the interval between yearly mammograms has elapsed. Aggressive cancer is more common in women under 50. Perhaps women in this category should make more frequent visits. But more mammograms yield more false positives while exposing women to higher doses of radiation.

While there is no cure for breast cancer, the best method of detection is cautious and regular self-exams supplemented by mammograms—especially when there is a family history or if a patient is otherwise "at-risk."

In their own interest, women must remember medicine is not an exact science, and media and politicians—groups who so ardently push for these "panaceas"— are often medically ignorant. The NIH owed us the truth about this uphill struggle. What we choose to do with it is in our hands.

EDITORIAL POLICY

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DN LETTERS

Spoon-fed

This is in response to Sonia Hollimon-Stovall's column "Leveling the field" (DN, Wednesday) on affirmative action. She compared affirmative action to building up Pacific's football team so it could play on a level field with Nebraska.

But affirmative action brings "the advantaged" down to the level of the "disadvantaged" (kind of like communism).

Let's face it. Affirmative action is institutionalized racism. A better analogy is like spoon-feeding a child. For a while, it is necessary, but then after a while they need to learn to feed themselves.

Affirmative action has served its purpose, but there really isn't anything keeping "the disadvantaged" from growing up and feeding themselves.

Perhaps the time and money spent on affirmative action should be used to further educate our disadvantaged groups and "level the playing field" in a positive way.

> Dennis Smolik freshman electrical engineering

Tyranny?

The dictionary defines tyranny as: arbitrary or unrestrained exercise of power; despotic abuse of authority or oppressive or unjustly severe government on the part of any ruler.

When government officials fail to enter into meaningful dialogue with citizens who are directly affected by changes in government or possess insight into relevant issues, by way of both personal and professional experience, then surely, the people



AARON STECKELBERG/DN

of the state of Nebraska are experiencing tyranny!

The Nelson administration has demonstrated a callous disregard for input from blind citizens. They have ignored numerous studies indicating that a better way exists to provide vocational rehabilitation to the blind,

The structure cited by these studies is a stand-alone service agency and is significantly different from that which is proposed in the Health and Human Services "Partnership."

Documented success in the 24 other states, having such an approach, show these agencies account for the placement of 70 percent of all blind persons placed in competitive employment. In Nebraska, the blind have an unemployment rate of approximately 75 percent!

Our elected officials have

dismissed the idea of a separate agency, at no additional cost to taxpayers. This, in spite of the specter of lost federal dollars due to violation of the Rehabilitation Act of 1973, as amended.

Of course Gov. Nelson and Lt. Gov. Robak simply respond "trust us!" They define involvement as putting people on mailing lists, providing updates to "their" agenda. Never mind that Gov. Nelson spent \$1,925,065.35 to hire consultants to identify methods to bring more federal matching dollars into Nebraska!

Now we stand to forfeit federal dollars because of the failure of the "partnership" to comply with federal regulations for receipt of rehabilitation monies.

Doug Boone Lincoln

