

PAIN DRUGS

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users, who were nearly three times more likely to die of cardiovascular disease than NSAID users."

Nonsteroidal Anti-Inflammatory Drug Use and Breast Cancer Risk by Stage and Hormone Receptor Status

Sarah F. Marshall, Leslie Bernstein, Hoda Anton-Culver, Dennis Deapen, Pamela L. Horn-Ross, Harvey Mohrenweiser, et al.

Journal of the National Cancer Institute, Vol. 97, No. 11, 805-812, June 1, 2005

This study was done at the University of Southern California, Los Angeles, California. These authors investigated the association of NSAID use with risk of breast cancer in the California Teachers Study cohort. They analyzed data on 114,460 women in the California Teachers Study cohort who were aged 22 to 85 years and free of breast cancer at baseline, and information on frequency and duration of NSAID use.

These authors note:

"Nonsteroidal anti-inflammatory drugs (NSAIDs) are frequently used for common ailments such as headaches, muscular pain, inflammation, and fever and are prescribed to alleviate chronic conditions such as arthritis. They are also used prophylactically to reduce the risk of heart attack, stroke, or blood clot formation."

Aspirin and other NSAIDs inhibit the expression of the cyclooxygenase-2 (COX-2) gene, which encodes for enzymes that catalyze the synthesis of prostaglandins from the dietary fatty acid arachidonic acid. [Remember, arachidonic acid is the commonly consumed omega-6 fatty acid in the American diet.]

These authors found that 35.0% of these women regularly used NSAIDs, and that many regularly consumed combinations of aspirin, NSAID, and acetaminophen [Tylenol]. Both daily and long-

term uses of ibuprofen were associated with increased risk of breast cancer. "Compared with nonusers, women who took ibuprofen daily for 5 years or longer had a relative risk for breast cancer of 1.51" [This means a 51% increased risk]. Long-term daily use of ibuprofen was also associated with an increased risk of breast cancer [51% increased risk with a range between 17% to 95% increased risk], particularly of nonlocalized tumors (92% increased risk with a range between 24% to 297% increased risk).

Daily long-term (5-year) use of aspirin was associated with an 81% increased risk of breast hormone sensitive breast cancer, with a range of 12% to 292% increased risk.

USA Today reported the following on this study, June 1, 2005:

Study Links Pain Relievers and Breast Cancer

by Rita Rubin

"The latest study, out today in the *Journal of the National Cancer Institute*, is the first to suggest that long-term ibuprofen or aspirin use might actually raise the risk of breast cancer.

Marshall's (Dr. Sarah Marshall from USC) study analyzed data on 114,460 women in the ongoing California Teachers Study. The women were 22 to 85 years old and free of breast cancer when they enrolled in the study a decade ago."

"When the scientists broke their findings down by pain reliever or type of breast cancer, they found

- "Women who took ibuprofen daily for at least 5 years were about 50% more likely to be diagnosed with breast cancer than those who did not take the drug regularly."
- "Women who took aspirin daily for at least 5 years were 80% more likely to develop breast cancers that were

not sensitive to the hormones estrogen or progesterone than women who were not regular users of aspirin."

Recall that a 2003 study showed that chiropractic spinal adjusting was 5-times more effective at treating chronic spine pain than the Cox-2 inhibiting drugs Celebrex and Vioxx² (see table on page 17). Also, chiropractic spinal adjusting showed stable long-term therapeutic benefit, while the few who benefitted from the drugs Celebrex and Vioxx did not.³

Chronic Spinal Pain: A Randomized Clinical Trial Comparing Medication, Acupuncture, and Spinal Manipulation

Spine, July 15, 2003; 28(14):1490-1502

Lastly, an article titled "High-Dose Omega-3 Oils Used to Treat Non-Surgical Neck and Back Pain" notes:⁴

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TIME EDITORIAL

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the ICA is opposed to compulsory programs which infringe upon such rights."

ICA went on to point out that this is not a chiropractic issue "it is a public health and accountability issue. ICA's policy is not one of opposition to or promotion of vaccination; it is one of informed consent and personal freedom."

ICA also expressed concern about the way Mr. Jaroff simplified the research record in favor of his editorial opinion, doing both the chiropractic profession and the consumer a grave disservice. Credible examples of research studies that call the safety and efficacy of mass vaccination programs into question exist in large quantities, a fact well known in the chiropractic profession.

ICA believes that this is a debate that must go on, and not be silenced by scare tactics, by government mandates that are fundamentally contrary to the basic concepts of American freedoms, or by a badly flawed and suspect research environment. With billions of dollars at stake, it has become clear that the pharmaceutical industry is willing to pay

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