

New center joins battle against breast cancer

By ANITA CRONE

In the past 40 years, fatalities from uterine cancer have been drastically reduced. But breast cancer remains unchecked and is the number one killer of American women between the ages of 45 and 60.

One of the reasons for the reduction in uterine cancer deaths may be the universal availability of clinics which now give the pap smear as a matter of course.

In an attempt to develop a test or early warning examination for breast cancer, some 27 cancer detection centers have been created nationwide.

The center serving this area opened Monday, Sept. 16 in Ann Arbor.

Preliminary results have already shown the techniques used in the centers do work. One woman had a tumor missed by her doctor during a recent checkup, detected at the center.

THE ANN ARBOR facility will examine 5,000 women this year, and an additional 5,000 women in the second year of the five-year program. It is under the direction of Dr. Barbara Threatt, a University of Michigan radiologist.

The center is supported by grants from the American Cancer Society and the National Cancer Institute, an unusual partnership of a private health organization and a federal agency.

Aimed primarily at women in the 35 to 74 age group, the primary goal of the center is to detect the presence of tumors early enough to provide an increased chance of survival to patients with the disease.

THE NATIONAL program is looking for the equivalent of a pap test for breast cancer," Dr. Threatt said. The center's approach is not to examine cells on a microscope slide, but to combine the newest and most reliable methods of x-ray and physical examinations, and then to compare the results statistically, the director added.

The Ann Arbor center will screen 10,000 of the 270,000 women to be screened nationwide.

The clinic is located at 376 Washington Street in Ann Arbor.

Statistics from the screenings of the 27 national clinics will be tabulated at a Philadelphia, center, with the statistics being compiled by number rather than name.

"It is possible for the individual centers to keep track of the names of the women screened in the program," said Sandra Nelson, a nurse working on the project.

"But," she added, "the Philadelphia center will not have a listing by name."

ALTHOUGH THE CLINIC does not set up appointments directly, the American Cancer Society's Wayne-Detroit office has dates set aside at the center to handle women in this area who are interested in the free examination.

Women screened sign a contract in which they agree to participate in the program for five years.

During the five-year period, the participant undertakes three standard breast examinations in a visit once every year. The three exams are a basic physical exam, an x-ray, or mammography, and a photograph of the skin temperature or thermography.

The mammography is not performed on women under the age of 35 or on pregnant women.

"We know that x-rays build up in the body," said Mrs. Louise Campbell, an American Cancer Society volunteer at the center. "If, however, the thermography examination or the physical examination lead us to suspect the presence of a tumor, then we will do the x-ray."

THE ENTIRE PROCESS takes a little over an hour and is thorough. The center is equipped to handle 20 women a day.

The screening process begins with a complete eight-page physical history of the patient.

The history covers everything from demographic data to a family history of cancer and a general disease history.

The second step in the screening process is the thermography. The patient is

taken to a waiting cubicle so that her skin temperature can be reduced to 68 degrees.

After a five-minute wait, six thermographic pictures are taken—three using a white-heat photograph, and three employing a black heat technique.

The pictures are harmless, if a little chilly, and are actually infrared photographs in order to detect "hot spots" of suspicious activity.

After the thermography, patients proceed to the mammography. The Ann Arbor center uses the lowest possible x-ray radiation level.

MS. NELSON is in charge of the physical examination, which includes a lesson in self-breast examination techniques.

Ms. Nelson explained that the self examination should be done once a month, and can help in the detection of lumps.

But while the self-exam is important, she urged women to see a doctor if a lump or thickening is discovered.

"Breast cancer can be successfully treated if found early enough," she said. "But home remedies will not cure the disease."

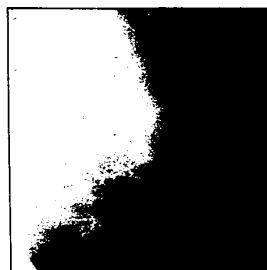
ALTHOUGH THERE ARE doctors who use mammography or thermography in the detection of cancer, the advantage of the Ann Arbor center is that it is free.

The same tests done at a hospital may cost up to \$125. But in the detection of breast cancer, money is not the primary concern.

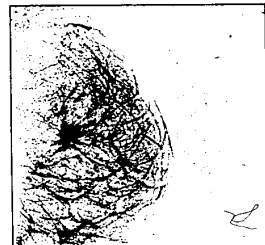
Breast cancer is a killer, and an hour of your time, may be worth years of your life.

Statistics currently available lead Dr. Threatt and other cancer researchers to conclude that a female child has a one in six chance of getting breast cancer before she reaches 60 years of age.

With the odds as high as they are, the tests the center offers are a good means of beating the odds.



IN A CONVENTIONAL breast x ray, a cancer mass shows up as a bright spot near the center of the breast profile.



THE CANCER is revealed as a dark mass when xerography is used in breast cancer detection. Xerograms are specially processed x rays.



THERMOGRAPHY uses heat in the detection of cancer. The light lines indicate hot spots or possible tumors.

Doctors test equipment to unblock lungs

Swallowing something "the wrong way" can cause trouble. Even tragically.

Instead of traveling down the throat and into the stomach, objects can drop into the windpipe.

The major causes of choking catastrophes, pieces of steak and big portions of food, can completely block the windpipe and if not dislodged in minutes, then death occurs.

Offending objects can pass beyond the windpipe and into the air passages of the lungs. Blocking an air passage can cause a lung disease called bronchiectasis. In some cases, surgery may be required to remove the object.

Tiny tools are now being tested to avoid these traumas. Threading these tools through a flexible, nylon tube with a lens on one end, two investigators at the University of Iowa College of Medicine have recovered a variety of items from "the inner recesses of animals' lungs."

Tools are just big enough to grasp a peanut. When they are squeezed through a flexible, lighted tube, the tools can be controlled by the user's hands to pick up paper clips, beans, seeds, coins, chicken bones, screws, and safety pins.

In research supported by the American Lung Association, doctors have found these techniques effective with animals, but further investigation is necessary before the procedures can be attempted on humans.

The doctors believe that the tools will be useful in removing objects from the lungs of all but very young children, who have small and delicate air passages.

Geary to talk on amnesty

Regular Sabbath eve services of Temple Kol Ami will be held at 8:30 p.m. Friday at the Birmingham Unitarian Church, Woodward at Lone Pine roads, Bloomfield Hills.

Afterwards, former priest Maurice Geary will speak on the topic of "Amnesty."

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