Ingrid Edstrom's Proactive Breast Wellness Program

at ProactiveBreastWellness.com

Reviewed by Carol Petersen, RPh, CNP – Women's International Pharmacy 8/2014

Our current medical system has been designed to take our hands and give us direction when disease has become evident, but it has left us sadly wanting when it comes to prevention. Finding and accessing the information necessary to prevent disease is difficult and time consuming. And, even if we do find it, interpreting it and understanding it may take some help.



Thankfully, a comprehensive compilation of what we currently know about keeping our breasts free from disease, including breast cancer, is available as an engaging multimedia presentation offered by Ingrid Edstrom, FNP, M.Ed., CTT. **The Proactive Breast Wellness Program** is her *magnus opus* and a labor of love.

A nationally certified Family Nurse Practitioner, Edstrom combined her nursing degree with a minor in clinical nutrition. She also earned a Master's Degree in Health Education, and has completed clinical training programs at the Mind Body Medical Institute. Ingrid Edstrom has skillfully combined all of her educational and clinical skills, and gift wrapped them in a delightful presentation so that we would have the resources we need to keep our breasts healthy.

Edstrom includes information about the various effects that hormones have on the breasts, the type of diet and foods that can be used to improve breast health, and the environmental issues affecting the breast. She even includes a meditation so that listeners can help reduce high cortisol, making us aware of the emotional and spiritual aspects of dealing with our breasts and our bodies.

The Power of Progesterone

Edstrom's presentation covers a complete program for breast health, but let's just focus in on one section she calls "The Power of Progesterone" as a sample. She states that after age 35, many women cease having ovulatory cycles, even though they continue to bleed regularly. This lack of ovulation increases the estrogenic dominance by 100 times. Add on the burden of many environmental exposures to estrogen-like compounds (which she also covers extensively) and the normal counter balance of

progesterone for estrogen is greatly diminished.

Quoting Dr. John Lee, Edstrom maintains that progesterone should be used for breast cancer protection, during breast cancer treatment, and after breast cancer treatment. She also cites Dr. Susan Love, a breast surgeon, who recommends that any breast surgery should be done on days 13 through 28 of the menstrual cycle (progesterone levels are higher then) or, if that is not possible, progesterone cream should be applied to the breasts for two weeks before the planned surgery. Published studies have documented better outcomes when progesterone plays a role.

Edstrom discusses the problems with artificial progestins and brings up the issue of California's mandatory cancer warning labeling on the over-the-counter progesterone products. She points out that California rule makers depended upon compilations of studies that primarily involoved progestins, and then concluded erroneously that the required warning should pertain to progesterone as well. Progesterone, itself, has not been proven to be a carcinogen but instead offers protection. She cites the studies that demonstrate this.

Edstrom also discusses various dosage forms at length and details her preferences. She gives practical hints on how to use different dosage forms and offers some clinical suggestions. For example, she recommends that progesterone creams not be applied to the abdomen because this application may have the most significant effect in slowing gut motility. She learned from compounding pharmacists that progesterone cream applied directly to dense or thickened areas of the breasts may have the best results. She likes to use progesterone drops prepared with organic jojoba oil, and warns that progesterone is in suspension in this dosage form and should therefore be shaken very thoroughly before using to ensure proper dispersion.

Screening Methods

A cornerstone of Edstrom's presentation, as well as her clinical practice, is the use of breast thermography as a tool for early warnings of issues presenting in the breast. Thermography is not an invasive test but captures the subtle differences in the temperature of the skin in a color scale. As might be imagined, the hot spots indeed appear as yellow to red colors, while normal temperatures appear in the blue and green ranges. The temperatures and color differences show areas of increased metabolic activity in the breast tissue long before a mass that could be palpated would form or would appear on a mammogram. This imaging allows for early interventions and also allows for a measure of the success of the interventions.

While mammograms are firmly entrenched in our medical system, there are some negative aspects with this type of testing. Mammograms introduce radiation (a known carcinogen) into our bodies. Mammograms do not prevent breast cancer and are not the best tool for an early warning. Both false negatives and false positives are common. Mammograms can actually damage or spread cancerous cells because of the high pressure applied to breasts in order to obtain the imaging. Breasts that are lumpy or

have thick tissue present problems for accurate diagnoses with mammograms.

Thermography, on the other hand, measures physiologic changes rather than physical. As a cancer tumor develops, new blood vessels are formed feeding the tumor. This enhanced metabolic activity is easily detected with thermograms. Additionally, the increased metabolic activity can show up three to eight years before a tumor has actually developed. A suspicious thermogram can be followed up with an MRI, and neither of these diagnostic techniques subjects the body to radiation.

Edstrom thinks that thermography may replace mammography as the primary early screening tool in the not too distant future. She says that other screening methods are also being developed, such as a way to test fluid expressed from the nipples for cancer cells, and a saliva assay to test for a protein linked to breast cancer.

A Proactive Approach

As the incidence of breast cancer has steadily risen, we probably all know someone who has been affected. **Ingrid Edstrom's Proactive Breast Wellness Program** is information that every one of us can use and benefit from, whether we are worried about breast cancer, are undergoing breast cancer treatment, or need to know how to prevent a reoccurrence.

If Ingrid Edstrom can be successful in her proactive approach to breast health, then the pink ribbon campaigns will become history. Let's change the campaign from "breast cancer awareness" to "breast health awareness." We encourage you to take advantage of Ingrid's gift to us!

Just imagine the progress that would be made if women gathered in their neighborhoods, or their book clubs and coffee shops, and listened to presentations like this together, with the chance to discuss and disseminate the valuable information she offers.

Additional Resources

We were pleasantly surprised to see that Edstrom references several of our <u>Connections newsletters</u> when she covered the topic of hormones and balance. She also links to a <u>collection of abstracts on hormone therapies</u> that we compiled and published. Please feel free to explore these resources for additional information that may contribute to your breast health awareness.

Women's International Pharmacy, Inc.

Toll Free Phone: 800. 279. 5708 ~ Toll Free Fax: 800. 279. 8011 ~ Email: info@womensinternational.com

Privacy Notice | Terms of Use | About WIP
Copyright © 2014 Women's International Pharmacy, Inc. All Rights
Reserved.