



Breast cancer? Why me and why now?

A fresh look at the facts based on the newest holistic research

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This seems to be a valid question, right? *Why did I develop breast cancer and why now? Breast cancer is the most common cancer for women and not only celebrities like Sheryl Crow and Kylie Minogue have been diagnosed. We all seem to know relatives or friends confronted with this disease. Scientists have worked passionately to find the cure or understand cancer. But isn't it interesting, that after we have spent over 200 Billion Dollars for that fight, the cause of breast cancer - and most other cancers - "... is still not known !".*

Yes, modern medical science has found many risk factors like a person's age, genetic factors, the personal health history or an unbalanced diet contributing to breast cancer. But risk factors tell us only if we are at risk and not what the actual cause or origin of the most common cancer for women is.

But did you know that 70% of all women with breast cancer have no known risk factors?¹ That statement alone should make us think.

In 1940, the lifetime risk of a woman developing breast cancer was 5%, or one in 20. The American Cancer Society estimates that risk to be 13% in 2005, or almost one in eight.² Aren't we told that we have made huge advances in cancer treatments? Or are we losing the fight against cancer? Why have we not been successful finding a cure, after spending billions of dollars in research? Or did we focus only on the biochemical and mechanical mechanisms of breast cancer without looking at the big picture?

Breast Cancer: Overview of Risks

The majority of breast cancer cases are "sporadic," meaning there is no direct family history of the disease or risk factor involved. Still, reading the list of risk factors is quite a strange experience because many of them are just part of life itself and confuse the issue even more than clearing it up. Known risk factors for breast cancer are:

- **Getting older:** Your risk for breast cancer increases as you age.
- **Family history:** risk factor found only in 5-10% of breast cancer patients. About 75% of women with a family history of breast cancer will not develop the disease.
- **Genetics:** risk factor found only in 5-10% of breast cancer patients.
- **Other risk factors:** The age at childbirth, early menstruation, late menopause, excessive radiation, weight, alcohol, race, long term use of estrogen, progesterone.
- **No risk factors present:** Approx. within 70%.³

Do you know what this means? The risk factors we usually hear about and we often believe to be the cause of this disease can only be found with approx. 30% of all breast cancer

patients. Are you as surprised as I am? First, we do not seem to know what causes breast cancer and second, 70% of breast cancer patients do not show any risk factors!

Let's dig deeper and look at the current scientific understanding of breast cancer from a traditional medicine and alternative/complementary medicine point of view first.

What Is Breast Cancer?

Traditional medicine has been excellent in diagnosing, monitoring and analyzing the biochemical level of the body and especially tumors. Usually, cells in the body divide (reproduce) only when new cells are needed. Sometimes, cells in one part of the body grow and divide out of control, which creates a mass of tissue called a tumor. If the cells that are growing out of control are "normal" cells, the tumor is called benign (not cancerous). If however, the cells that are growing out of control are "abnormal", the tumor is called malignant (cancerous).⁴

So the question is what cells are considered normal and which ones abnormal? If you are an oncologist or doctor then please do forgive me if I am trying to explain this in a simple language, because we as patients should understand the difference, right?

Malignant or benign breast cancer? What factors decide?

If a tumor is normal or abnormal is not an easy determination. In our traditional medical system a pathologist will receive a sample of the breast mass cells or tissue after a biopsy. In a lab he will view the sample under a microscope and look for abnormal cell shapes or growth patterns (differentiation: if tumor cells resemble normal cells or lack the structure and function of normal cells; nuclear grade: size and shape of the nucleus in tumor cells and the percentage of tumor cells that are in the process of dividing or growing).

Important to understand is that a pathologist must determine if a tumor is benign and malignant based on how the cells appear through the microscope. The non-invasive, benign cell growth is called intraductal carcinoma in situ (CDIS) or carcinoma lobular in situ (CLIS). The invasive, malignant cell growth (if tissue boundaries have been broken) is called ductal or lobular carcinoma (or breast cancer).

At a certain point (determined by medical standards and the pathologists) a cell growth is considered malignant and the current strategy in Traditional Medicine is to fight these out of control symptom with full force. Because we interpret the facts of cell growth as malignant, destructive and a sure sign of death, it makes sense to use all means necessary to eliminate the symptom and therewith prolong life.

This therapy goal is achieved by the standard treatments, which have been very similar for the last 30-40 years: chemo therapy, radiation, and operation. We do not need to cover the problems these treatments bring with them, because most of us are familiar or have heard about the tremendous side effects.

Contrary to common belief, independent studies confirm, that the survival rate for breast cancer (and many other forms of cancer) using chemo therapy, radiation, and operation have not improved a lot over the last decades.⁵

Complementary and alternative medicine (CAM)

Complementary medicine approaches disease with the understanding that we as human beings can not be reduced to machines made of cells, atoms and genes. Body, mind, and spirit are seen as a whole and treated accordingly. Many forms of therapy and systems are

available, like Chinese Medicine, Mind Body Therapy, Energy Healing, Natural Medicine, Energy Psychology and others.

Some of the factors causing cancer from a CAM point of view are:

- Malnutrition
- Lack of exercise
- Psychological issues
- Emotional factors
- Energetic imbalance
- Stress
- Past life
- Social factors

There is a huge variety of CAM Therapies, some more accepted or used than others. Breast cancer seems to be treated with a basic immune regulation, hyperthermia, hormone and mistletoe therapy, orthomolecular medicine, oxygen, visualization, relaxation, biofield therapy, life style changes, psycho therapy, conflict resolution, energetic healing, etc. Currently, most CAM methods are applied in combination with chemo therapy, radiation, and operation.

Unfortunately many CAM treatments, products and claims can not be taken too serious since they lack empirical or scientific evidence (which is understandable considering that almost all research funding is used for traditional methods). Additionally, the CAM field seems to miss a clear structure since every field uses very different approaches for diagnosis and therapy: nutrition, energy, mind, spiritual, etc.

META-Medicine – a revolutionary new healing paradigm

Now, let's take a fresh look at breast cancer from a comprehensive, integrative point of view. To achieve this, we need to take off our "specialists cap" and allow ourselves to view breast cancer from a multi-disciplinary perspective.

META-Medicine is based on the newest holistic empirical findings and work being done in Europe and has been used and applied by doctors, naturopaths and health practitioner for many years.

META-Medicine is researching disease, healing and health from an over determined "big picture" and biopsychosocial point of view.

Before we focus specifically on breast cancer, I believe it is important to review some of the models and assumptions that form the foundation of META-Medicine:

1. Symptoms are bio-logical meaningful reactions

Nature does not make errors or mistakes. The new understanding is, that our organism is a highly intelligent, ordered and sophisticated system with biological meaningful reactions, which we have labeled as "disease or illness".

2. The biopsychosocial connection or the organ-mind-brain-social connection.

Organ, mind, brain and our environment are interdependent systems. Each organ is associated with a specific emotional conflict theme and a specific brain relay.

3. Traumatic life events as the beginning of a disease process

A disease process originates from a Traumatic Life Event or Biological Conflict Shock. We experience this highly emotional event as unexpected, dramatic and isolative simultaneously at all levels of our organism. The way we unconsciously react and associate a conflict experience determines which disease process (which organ and brain relay) is affected. The emotional intensity, conflict length and our coping-skills determine the conflict mass and therefore the intensity of the disease process and symptoms.

4. Disease as a process: The major points and phases of a disease cycle

Every illness goes through two phases (stress and regeneration phase) and specifically through 7 major points from the beginning of the disease cycle to a complete healing. The typical symptoms of an illness, such as muscle pain, headache, running nose, ulcer, cancer, leukemia, fear, anger, stress, etc. are not the illnesses per se but a partial aspect of a comprehensive disease program.

5. Our brain as the over-determined relay system for all organs

The brain works as an over determined relay system of our organism. Each organ with conflict content can be assigned to a specific brain relay. The cerebral changes in a brain relay, during a disease process, can be measured by using a brain CAT scan or MRI.

6. Embryonic layers: Evolutionary understanding of organ reactions

Based on embryology and ontogenesis we can assign the development of an organ to one of the three embryonic layers (from which our complete body has developed as an embryo). Each organ reacts based on its embryonic layer origin in the stress or regeneration phase either with cell growth or decomposition; over activity or under activity; loss of function or increased function. This differentiation determinates if a typical symptom of an illness arises in the stress or in the regeneration phase.

The META-Medicine models allow us to fully understand the cause and process of disease more fully and consequently to be more precise and complete in diagnosis and therapy.

Now, let's look how this new model will help us understanding breast cancer better.

Breast cancer from the META-Medicine perspective

First of all, META-Medicine distinguishes between 2 different types of breast tissue. The breast glands and the breast ducts. Why? Because both consists of different tissue (ectodermal and mesodermal tissue), both have a brain relay in very different areas in the brain (which can be confirmed using brain CAT scan or MRI) and both organs react completely different under stress and regeneration.

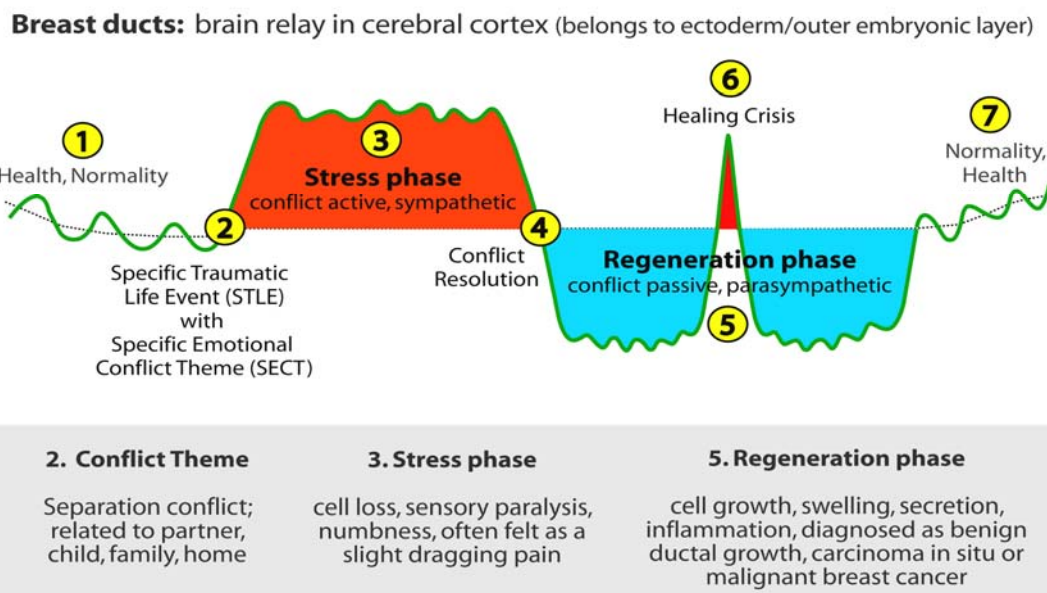
META-Medicine: Breast ducts

It is important to understand that everything in our body is an intelligent process and that breast tissue does not just grow without a command or intelligence behind it (software). Or do you believe a tumor is a random process? Remember 70% of breast cancer patients do not even have risk factors. In META-Medicine, we totally believe in the inherent intelligence of our body - starting from a minor disease like the flu, back pain, eczema to cancer.

What triggered the symptom “breast cancer” becomes clearer, if we know that every disease goes through very distinctive points and phases. From the beginning of a disease to the complete healing we find 7 major points and phases, as graphically displayed below.

The beginning of a disease process is triggered by a Specific Traumatic Life Event (STLE). – an unexpected, highly-dramatic and isolative biological conflict shock experience. Biological because it is an unconscious process beyond our conscious awareness. Our complete organism will react synchronously at all levels with “stress symptoms”. Depending on the type of conflict the related organ is affected and will react.

Based on current empirical data, the breast ducts seem to be affected if we experience a traumatic “separation” conflict. Typical examples are: an unexpected and emotional separation from our partner or child; we are losing our house/nest, etc. Depending on our handedness either the left or right breast is affected.



We do not experience the biological conflict shock only in our mind (as believed in psychology), but our complete organism reacts and we see a number of symptoms in the first stress phase: numbness, slight pain, problem thinking, emotional imbalance, stress. Remember, these are only symptoms - not the cause of the disease. If the patient is able to solve the conflict (for example: the partner returns, we accept the fact that he/she is gone, etc.) then our organism switches into regeneration and needs to repair the “damage” done in the stress phase. Now, we recognize completely different symptoms like swelling, secretion, inflammation, cell growth, exhaustion.

Usually what happens now is, that we go to a specialist because we feel “sick” and often at this point the breast tumor is diagnosed or noticed. The prior stress phase, where the actual loss of substance happened, has not been noticed and usually no connection is made to prior symptoms and the separation conflict experience.

It is fully understandable, if most women are in shock when they are diagnosed with a breast ducts tumor and ask themselves: “Why me? Why now? Why do I have a tumor, especially now that my life has improved. Why is this illness happening to me?”

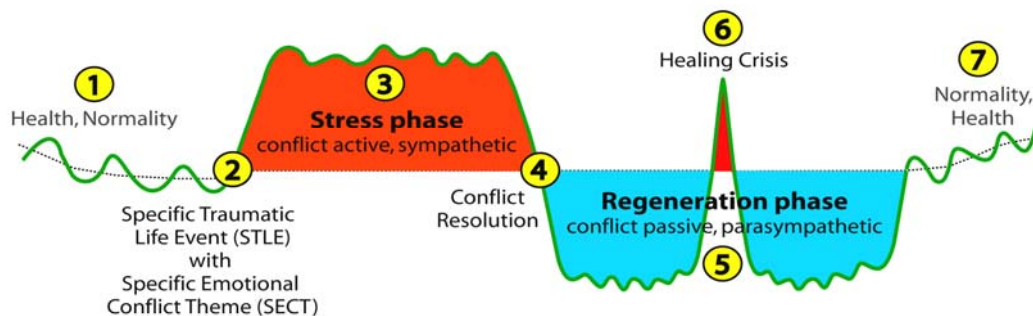
Suddenly, after knowing the healing mechanism of breast duct cancer, it all makes sense, doesn't it? The initial stress phase is over, the conflict has been solved, the body tries to

repair the damage and get back to health. Up until now, we believed this intelligent reaction to be a “malignant, out of control and deadly disease”! By understanding that the body actually does something very intelligent and meaningful, we can let go of the fear and support the natural healing process with whatever therapy method the patient is comfortable with.

META-Medicine: Breast glands

Let’s look at the second type of breast cancer. The breast glands react completely different during the stress and regeneration phase because they consist of tissue that belongs to a different embryonic layer (mesoderm). The breast glands brain relay is in the cerebellum.

Breast glands: brain relay in cerebellum (belongs to mesoderm/middle embryonic layer)



2. Conflict Theme	3. Stress phase	5. Regeneration phase
worry/fight conflict; for example with partner, child, family or home	cell growth, swelling, nodes, diagnosed as lobular cyst or malignant breast tumor	tumor growth stops, either cell degradation, or the tumor encapsulates

Like all other organ reactions the breast glands go also through the 7 major points and phases of healing. The Specific Traumatic Life Event is a worry/fight conflict, often related to a partner (private or business), children, etc.

Right after experiencing the conflict shock we are stressed, think about the “problem” all the time, and if the conflict is very intense or goes on for a long time we notice organ symptoms like swelling and a node in the breast. After we solve the conflict (either through a real life solution or mentally/spiritually) we fall into the regeneration phase feeling exhausted, tired. Now we will notice a completely different set of organ symptoms. Either the tumor growth stops or it is decomposed or encapsulated.

Did you notice that the breast gland tumor grows in the stress phase and the breast duct tumor grows in the regeneration phase? You probably can imagine the implications in therapy. If the META-Medicine model is correct – and based on empirical research it is – wouldn’t it seem necessary to approach these 2 different types of breast cancer differently?

Client case: Breast gland cancer – Worry/fight conflict

Woman, age 47, right handed is diagnosed after a biopsy with a malignant breast gland cancer.

Questions a META-Medicine practitioner might ask now are: Which phase is the patient in? What are the symptoms of the major points and phases? What was the Specific Traumatic Life Event? What are the triggers (conditioning) that keep the disease process chronic?

The META-Medicine Diagnosis Process allows a health practitioner to be very precise and quick in diagnosis and finding the conflict preceding the illness, the major points and phases, the subjective situation of the patient.

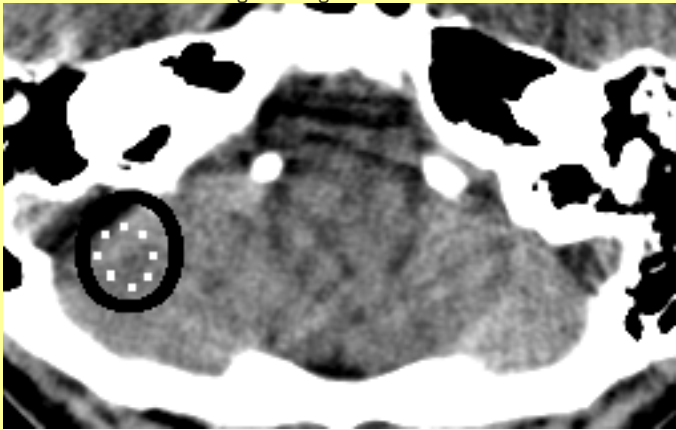
Just by knowing the symptom, the META-Medicine doctor knows exactly the facts of the breast gland disease process (see graphics above). In this case he also had a brain CAT scan available and could confirm a chronic process through Brain Relay Diagnostics. See box for details.

The conflict shock experience for this patient was her son leaving the family and house after an intense fight. This was especially dramatic, because the son was mentally unstable. The patient experienced the situation as a worry/fight conflict for her son (a right handed woman will react with her left breast if the worry is about her son. If the right breast is affected, then it has to do with the partner, often husband or a business partner.)

Right after the initial conflict shock, the patient worried all the time and was very fearful, sad and angry at the same time. She could not sleep anymore, had no appetite, cold hand and feet, and was freezing a lot and the problem with her son was on her mind all the time (all typical symptoms of the stress phase).

We know by now, that a breast duct tumor grows under stress. In her case the conflict situation was very intense emotional and it was not solved for a long time. After several months she noticed a node which has been diagnosed as lobular breast cancer.

Brain relay diagnostics
Confirming the organ-brain connection



Brain CAT scan of the cerebellum: the dotted circle in the brain relay assigned to the brain glands show clearly visible markings. Several ring formations indicate a chronic process (fluctuating between the stress/conflict active and regeneration/conflict passive phase).

Brain relay diagnostics confirms scientifically the direct link between an organ, a conflict and the brain. A trained META-Medicine doctor can determine the organ symptoms (current, chronic, old), the state/process (stress or regeneration phase) of the disease and the conflict content using brain relay diagnostics.

The conflict resolution for her happened when her son came back to the family and his mental condition improved. From this moment on, she felt extremely tired and totally exhausted. Even if "her problem" was solved and she was relieved, she still felt physically "sick". The symptoms changed and suddenly the breast was painful and swollen (typical symptoms of the regeneration phase).

After several months going through this regeneration phase (often not an easy process) her tumor felt „solid and hard“ which is an indication of an encapsulation of the tumor (the other possible reaction would be a decomposition of the tumor, basically the tumor would be smaller or would disappear).

Towards the end of the regeneration phase her

symptoms disappeared and she started to feel energetic and vital again, setting new goals in life and feeling overall healthy.

Conclusion

You might ask, well has Traditional Medicine and CAM be wrong? No, not really. All medical systems have specialists in their particular field of expertise with tremendous knowledge. But they all have their pro and cons and basically look at very different aspects of the disease and healing process.

For example Traditional Medicine concentrates mainly on the biochemical reactions and even in the light of the newest meta-medical research all these clinical facts are still true. Tumor cell growth can be clinically and histologically confirmed, chemo therapy often reduces the tumor, an operation removes the "tumor tissue". Because the cause of the cell growth has not been know, these mechanical forms of treatment seem to make sense.

But consider this: If it is true, that our body reacts bio-logically meaningful and intelligently and that a Specific Traumatic Life Event was the starting point of the mind-body symptoms, then suddenly our interpretations of these biochemical facts will change. Tumor cells are not benign or out of control or malignant anymore, but symptoms of a much larger, intelligent and meaningful disease and healing process. By realizing the "big picture", we notice a much more complete process and interaction between body, mind, spirit, and environment.

Biochemical reactions, physiological stress, emotions like fear or anger or conflictive thinking are only symptoms. They are not the cause of the disease but either symptoms of the stress phase or regeneration phase.

Yes, we can treat symptoms only (biochemical, energetically, emotionally, mentally, etc.) without really understanding the process and yes, we will achieve limited healing results (often with tremendous side effects). But by understanding the cause, process and meaning of each disease we can apply our "arsenal of therapies" way better.

And even more important because META-Medicine formulates a new foundation and platform, all specialists - the different experts in medicine and health care - can work together more easily. Suddenly they speak the same language, have the same understanding and will be able to agree on the most productive and positive therapy plan for each patient.

Additionally, in the light of these new findings prevention and a truly holistic approach to healing seems to make more sense and promises better changes for a sustainable cure and a long life full of vitality.

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¹ <http://www.webmd.com>

² http://www.webmd.com/content/article/9/1662_52440

³ http://www.webmd.com/content/article/9/1662_52440

⁴ http://www.webmd.com/content/article/9/1662_52440

⁵ Chemo therapy study at university Hospital Munich, Germany. Published in Spiegel Magazine 11/2004