

NATIONAL POST

Use with caution: Pink ribbons are well and good. But why aren't people talking about the link between the pill and breast cancer?

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by Andrea Mrozek, Manager of Research and Communications at IMFCanada.

It's hard not to notice that it's Breast Cancer Awareness Month. From pink ribbons to pink running shorts to pink hockey sticks, the campaign is on. "This October," reads one pink Web ad, "be a friend."

Vague advice to be sure, and women are right to wonder what precisely is the nature of the awareness being raised. For instance: Is it wrong to leave the light on at night? Are there risks to living on a farm? Both are questions posed by recent cancer research, which has examined possible links between breast cancer and myriad risk factors. Through it all, however, there's one comparatively solid link to breast cancer that goes unmentioned. It's the link between breast cancer and the birth control pill.

Eighty-four per cent of Canadian women have taken the Pill at some point, but few of those are aware that the Pill was classified as a "group-one carcinogen" by the International Agency for Research on Cancer in 2005. Far fewer still are likely aware of a new meta-analysis on the link between breast cancer and the Pill, published this month by the Mayo Clinic, a U.S.-based medical practice operated by the Mayo Foundation, a non-profit organization.

The lead author, Dr. Chris Kahlenborn, focused on younger, premenopausal women who had been on the Pill prior to having their first baby. The results: Twenty-one of 23 studies indicate a link between the Pill and breast cancer. Overall, they point to an astounding 44% increased risk of developing breast cancer for young women on the Pill before having their first child.

For 20 years, a study here, or a study there, has shown there could be a link between the Pill and breast cancer. The gold standard of Pill research, however, remains a 1996 Oxford study, which said the Pill causes a small increased risk of breast cancer, but after 10 years that risk vanishes. Dr. Kahlenborn's goal was to improve on the Oxford study.

Why are his conclusions being reported on the back pages -- even as breast cancer "awareness" has otherwise become an activist and media obsession? Perhaps it is because the Pill has long been the darling of feminists -- a veritable icon of female empowerment. In some circles, suggesting the Pill might kill you is seen as tantamount to issuing a press release that women belong in the kitchen. Pharmaceutical companies, too, have a vested interest in maintaining the Pill's clean bill of health: Half of the population can be on it for decades.

Queen's University professor Samantha King said in an interview with Maclean's earlier this month that we weren't asking "the hard questions about whether we're spending [breast cancer research money] in the right way." She went on to point out that "incidence rates have remained stubbornly high ... A woman's lifetime risk of breast cancer was one in 22 in the 1940s, but by 2004, it was one in seven."

Ms. King wasn't discussing the Pill per se. But given the numbers she cites, the subject should be impossible to avoid.

The amount of evidence already available is a trumpet call for further research, something like the conclusive Women's Health Initiative study dedicated to examining hormone replacement therapy, whose results made the front pages recently. Until then, young women seeking birth control should be told of the 44% increased risk in order to make their own decisions.

There's always the risk of this information being misconstrued as an attack on women's rights. But the risks of suppressing information and not discussing this link are much, much higher. Unvarnished honesty will do a lot more to protect women's health than this month's politically correct flurry of pink.

2001 – 130 rue Albert Street Ottawa Ontario Canada K1P 5G4

T 613.565.3832 f/t 613.565.3803 1.866.373.4632

www.imfcanada.org