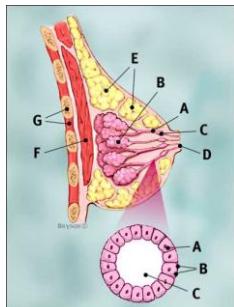


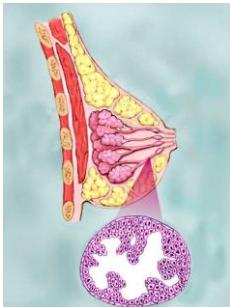
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Development of Breast Cancer or Ductal Carcinoma in Situ

There are two factors in the development of breast cancer:

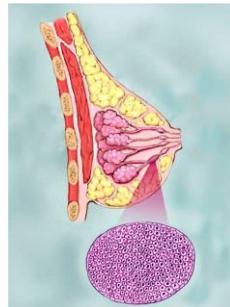
1. Atypical cells dividing with dysfunctional DNA.
2. A blood supply feeding this tumor formation called neo-angiogenesis.



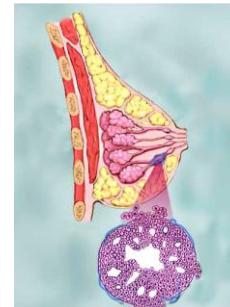
Normal Health
Mammary Duct
(Cut away view).



Early Development
of Atypical Cells
within the Mammary
Duct.



Advanced Ductal
Carcinoma in Situ
(non-invasive with
palpable lump).



Invasive Ductal
Carcinoma
(Should be removed
before spreading).

Research has proven that 80% of patients with Ductal Carcinoma in Situ or DCIS, can reverse this condition with an immune support protocol that includes: nutritional supplementation, lifestyle modification and diet improvements. However if it has become invasive it is very important to have it surgically removed so as to eliminate the risk of it spreading into the lymphatic system or surrounding tissue/organs, thus metastasizing. Finding a lump early and removing it before the lymphatic system has become involved has a very good prognosis and will eliminate the need for chemotherapy as it is contra-indicated for breast cancer and should only be recommended if it has spread to the lymphatic system or surrounding organs.

Before discussing the protocol to reverse DCIS or immune compromised conditions, we need to understand how this happens in the first place. Atypical cells, or cells which are no longer functioning properly because they are old or have been damaged from radiation or injury, should have a natural 'cell apoptosis' or 'self-destruct mechanism' to keep it from reproducing with dysfunctional DNA thus becoming DCIS. Our body's natural immune function kicks in when we go into deep states of sleep. This is when our sympathetic nervous system's involuntary mechanism cleans out the debris/dead cells via the lymphatic system with the 'T' Cells and 'B' Cell allowing our lymphocytes/lymphatic system to remove this toxic debris from the intercellular tissue into the blood stream which then allows the liver to remove it. When we are under stress, hyper-adrenal and/or not sleeping well we STOP this natural process so these atypical cells continue to accumulate and reproduce dysfunctional cells. We can deduct from this that long term stress or adrenal exhaustion is a major contributor to cancer and other immune deficient diseases. (See Article: *Healing Adrenal Burn-Out*) See images above for a visual on the progression of these atypical cells dividing with dysfunctional DNA and eventually becoming invasive carcinoma.

Factors in the development of degenerative or immune deficient disease (cancer) are poor diet/eating habits, use of recreational drugs/medication or alcohol which compromises the liver's ability to detoxify the body. Also lack of sleep, exercise or fresh air, exposure to toxic chemicals or impure/inorganic food with toxic carcinogenic chemicals, toxic water supply, exposure to radiation or electro-magnetic fields from computers, wireless internet or cell phones. Other sources of estrogen that can cause neo-angiogenesis are xeno-estrogens from plastics, heating foods in plastic, letting water sit in a hot car in plastic, microwaving food or hot leftover in plastic. (See Article: *Top 10 Ways to Lower Your Risk Factors of Breast Cancer*).

Most breast cancer is estrogen or progesterone receptor positive. It is a major factor in the development of breast cancer as it supports the blood supply feeding the tumor called neo-angiogenesis. Our liver is made to

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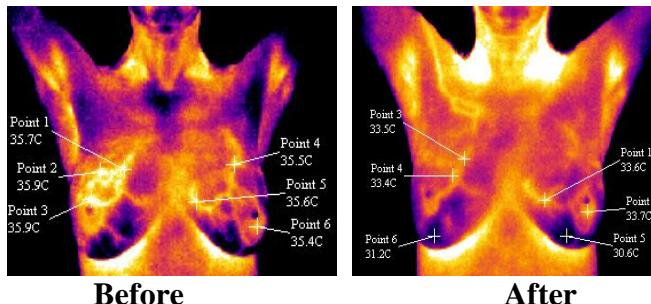
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clean out the hormones our body produces but can be overwhelmed when we take synthetic hormones such as birth control pills or postmenopausal hormone replacement therapy or HRT, fertility drugs or the morning after pill. Most of these hormones are made of estradiol which in itself is harmless but it can convert to estrone, which can cause neo-angiogenesis (the blood supply that feeds a tumor). Breast Thermography uses a medical grade infrared camera (with no carcinogenic radiation or painful compression) that can see the development of neo-angiogenesis and therefore can be used monitor to see if this immune support protocol is being effective.

THERMAL IMAGES SHOWING THE BEFORE AND AFTER FOLLOWING THIS PROTOCOL



The top left Thermal Image is a perfect example of Thermography showing neo-angiogenesis and the right an example of the successful results of this immune support protocol with neo-angiogenic blood vessels gone. Mammography cannot see neo-angiogenesis but does see calcifications which statistic show in 10% of the cases are an indication of DCIS (a pre-cancerous condition) and in 90% of the cases calcifications are benign cholesterol deposits. Unnecessary biopsy can spread DCIS outside the duct making it invasive. Statistics also show that 40% of women over 40 have DCIS when considering 8% go on to get breast cancer from this it is a strong indication that it does resolve itself when we get the care, nutrition and nurturing we need.

The following 3 products are an essential part of the Protocol to build the immune system to diminish the factors that cause DCIS and even mammary duct infections or acute cysts in the breasts are:

1.DIM Evail take 2 tablets 2X a day (morning and night) That is at least 400 mg daily double that if you have active Breast Cancer that is estrogen or progesterone receptor positive.

2.Liposomal Glutathione 1 dose 2X a day away from food because stomach acids destroy glutathione. To order these two prior products go to: <http://healthybreasts.ehealthpro.com>

3.Turkey Tail Mushroom 2 caps 2X a day morning and night. To assure you are getting pure products with no fillers buy it from: [Host Defense® Mushrooms](#)

Massage breasts and under arms daily with Frankincense diluted in coconut oil to increase circulation to the lymphatic system which delivers these immune building products to the area it needs it most. Stay on the protocol until you get a benign thermography results.

This article is intended to educate, not intended to substitute a doctors advise or treatment of disease.



About the Author: Nancy Gardner-Heaven TMT is board certified as a Technician of Medical Thermology, at Auburn University by the American Academy of Thermology. After training as a surgical nurse at Stanford University, she studied Nutrition and Preventing Disease at The America College of Advancement in Medicine. Her research on reversing DCIS was presented at Auburn University in 2003, published in the Townsend Letter in 2004, has been instrumental in saving thousands of women from unnecessary surgical procedures. She taught disease prevention at Francisco State University, UC Berkeley and the University of Hawaii. As director of Thermo-Tech Inc., she has been offering Breast and Full Body Thermography Screening for 30 years.