National Breast Cancer Coalition’s (NBCC) Health Care System Framework

Maine Breast Cancer Coalition supports the NBCC “Framework for a Health Care System Guaranteeing Access to Quality Health Care for All.” Below are highlights of the framework:

A health care system that is built on this framework will:
- provide a basic benefits package that is comprehensive and based on sound scientific evidence;
- maintain continuity of coverage;
- be efficient and cost-effective;
- be fully funded through shared financial responsibility;
- be sustainable and affordable.

The health care system must be accountable to the users and the public. A system must be established to:
- evaluate and support development of medical evidence for health interventions upon which coverage will be based;
- support ongoing and continuous comparison of interventions to ensure access to appropriate and cost-effective health care; modify and expand current benefits as appropriate based on evidence.

To find out more visit www.stopbreastcancer.org or call toll-free 1-866-640-0969.

MBCC Representatives Attend National Breast Cancer Coalition Advocacy Training Conference

This past April, representatives from the Maine Breast Cancer Coalition attended the National Breast Cancer Coalition (NBCC) Advocacy Training Conference, *Beyond Ribbons to Revolution*, in Washington, D.C.

Five MBCC representatives joined hundreds of participants from across the country and the world. For three intense days participants armed themselves with the latest information on breast cancer research, quality care and access, and the politics of healthcare. They learned about the nuts and bolts of the political process and the strategies necessary to achieve NBCC’s goals. Then they were ready to head to Capitol Hill for meetings with members of Congress and their staff.

Maine Breast Cancer Coalition representatives Pat Bredenberg, Laurel Bezanson, Carol Beagan, Ro LeGasse’, and Elaine Siracusa-Magid met with Maine legislators to introduce them to NBCC’s new Framework for a Health Care System Guaranteeing Access to Quality Health Care for All, the National Breast Cancer Coalition’s number one public policy priority. The framework addresses a legislative approach to coverage issues. NBCC recognizes that access to quality health care goes beyond coverage and must have evidence-based medicine at its core. For highlights of the framework, see the article on the left of this page.

MBCC representatives also thanked our senators and congressmen for their long-term support of the Breast Cancer and Environmental Research Act (BCERA: S.579, H.R.1157). Because breast cancer is a complicated disease that occurs in an environmentally complex world, no causes of the disease have yet been determined. It is generally believed that the environment plays some role in the development of breast cancer, but the extent of that role is not understood. The Breast Cancer and Environmental Research Act would establish a national strategy to study the links between the environment and breast cancer.

To date, a bipartisan majority of 70 Senators and 270 Representatives have cosponsored BCERA, including all Maine legislators. The Breast Cancer and Environmental Research Act has extensive grassroots momentum and is long overdue for passage, but its passage has been stalled. The MBCC representatives requested that our Maine senators make every effort to urge their leadership to bring this bill to the floor for a vote. They also asked our congressmen to urge Energy and Commerce Committee leadership to act on H.R.1157 so this bill can advance to the floor.

For more information about the National Breast Cancer Coalition, its legislative priorities, or what you can do to advocate for passage of H.R. 1157 go to www.stopbreastcancer.org.
You may think once a chemical is banned from use, you no longer need to worry about being exposed. A new study by the Silent Spring Institute may make you think again. Researchers found high levels of now-banned PCBs in the homes and blood of some Cape Cod residents. The likely culprit? A wood floor finish applied half a century ago. PCBs (polychlorinated biphenyls) are toxic industrial chemicals that were widely used in electrical equipment before being banned in 1977. They have been linked with a host of health problems including effects on brain development, thyroid function, and cancer. Four studies found that women with both high PCB exposure and a genetic variation that affects how their bodies process chemicals have three times higher breast cancer risk than women who don’t have this combination of factors.

When Silent Spring Institute researchers discovered PCBs in nearly one-third of 120 Cape Cod homes, and alarmingly high levels in two of the homes, they knew they needed to look for the source so residents could reduce their exposures. The research team retested air and dust in the homes with very high levels and collected blood samples from the residents. Air and dust levels remained high five years after the first test. In addition, blood levels were higher than 95% of a representative sample of the US population, and one resident had higher blood levels than any reported in the US Centers for Disease Control’s National Health and Nutrition Examination Survey. The likely source of PCBs was discovered during interviews with study participants when one resident recalled using the hardwood floor and bowling alley finish Fabulon. Searches in an old reference text showed that Fabulon, popular in the 1950s and 1960s, contained PCBs until they were removed in 1969.

Much of the estimated 1.5 billion pounds of PCBs produced lingers in the environment, slowly breaking down. Because PCBs move up the food chain and accumulate in fat, eating fish from contaminated waters and fatty meat and dairy foods is thought to be the most common source of human exposure. Indoor sources such as paints, caulk, and flooring used in schools and other buildings can also be important, new studies show. “Our findings suggest that the exposure potential posed by historic use of PCBs in buildings may be significantly underestimated,” said Ruthann Rudel, lead study researcher.

If you suspect a floor was finished with Fabulon, don’t sand it; that could increase exposure. Using a vacuum with strong suction, a brush on/off switch, a multi-layered bag for dust collection and a HEPA filter should help reduce exposure to PCBs and other harmful chemicals in house dust. Consumer Reports rates vacuums for how well they get rid of dust. Silent Spring Institute Executive Director Julia Brody noted, “This study is a lesson in the dangers of putting untested chemicals into consumer products. Once they’re out there, we can’t easily get rid of them.”

The study appeared in the January 17, 2008 issue of Environmental Health. It was funded by the Commonwealth of Massachusetts and National Institutes of Health. To learn more about the study, visit the Silent Spring Institute website: www.silentspring.org/newweb/research/household_pcbs.html

**Maine Breast Cancer Coalition’s Mission**

- **Financial Support** for underserved people with breast cancer or breast health needs
- **Advocacy** for breast cancer research and legislation
- **Education** to promote knowledge about breast cancer and quality care

**PATCO Construction “Pink Key Project” Update**

PATCO Construction is a family owned and operated Maine business. For every building (residential or commercial) under contract in 2008, PATCO will contribute $500 to The Maine Breast Cancer Coalition’s Support Service Fund. The “Pink Key Project” has already raised $7,111 for the Fund. (This includes money from a raffle held by employees.)

The financial toll that cancer takes only compounds the physical and emotional one,” says PATCO owner Mark Patterson. “By earmarking these funds specifically for the Support Service Fund, we’re helping women right here in Maine who might not otherwise have access to these important services.”

For more information about PATCO or the Pink Key Project go to www.patco.com.

**Cochrane Library Breast Cancer Research Summaries Available**

The Cochrane Collaboration is an international not-for-profit organization, providing up-to-date information about the effects of healthcare. Systematic reviews are their main product and are published electronically in successive issues of “The Cochrane Library.”

www.cochrane.org

Although a paid subscription is required to access the Cochrane Library's extensive reviews and resources, free summaries of studies on many health-related topics can be accessed at the site. To access free Cochrane Library summaries of breast cancer-related studies go to www.cochrane.org/reviews/en/topics/52_reviews.html.
Breast cancer in men is a rare disease that accounts for less than 1 percent of all cancers in men and less than 1 percent of all diagnosed breast cancers. Ductal carcinoma in situ (DCIS) is even rarer in men than is breast cancer.

Many of the men who get breast cancer seem to have a family history on their father's or their mother's side. Risk factors for women, such as early exposure to radiation and higher estrogen exposure in utero, also seem to be relevant to men.

For a time there was concern that men who got estrogen treatments for prostate cancer were more vulnerable to breast cancer, but this doesn't seem to be the case. Rather, prostate cancer can metastasize to the breast. (Remember that it remains prostate cancer; the cancer cells are prostate cancer cells, not breast cancer cells.)

All mammals, male and female, are born with breast buds and ductal cells. At puberty girls’ breasts develop and the ducts enlarge and also grow lobules to make milk. Even though male breasts do not undergo this development, breast cancer can still occur in the breast ducts. Breast cancer in men shows itself in all the ways it does in women—usually as a lump—but it tends to be discovered later because men aren't usually very conscious of their breasts. The treatments are the same as well. Men can undergo sentinel node biopsy. And they can have a lumpectomy and radiation or a mastectomy. There is a tendency to overtreat men with post-mastectomy radiation because surgeons see these cancers so rarely. Recent data demonstrate that local recurrences in men are rare even in Stage III disease, and that the same indications should be used as are employed in women. (continued in next column)
We would like to express our appreciation to the following groups, organizations or businesses that recently held fundraising events or made in-kind donations to the Support Service Fund:

Women from the Congregational Church of Matinicus Island posed for a discreet “au natural” calendar to raise money for needed church renovations, including supplying running water to the church kitchen. Their fundraising efforts were so successful they had leftover money. They decided to give the extra funds, $3,069, to an organization that helps people with breast cancer, and chose the MBCC Support Service Fund.

Stonewall Kitchen of York, Maine selected the Support Service Fund as the recipient of their annual charity initiative and donated more than $5,000 earlier this year. They recently made an additional donation of $228.85.

Inverness Medical Innovations of Scarborough has selected the Support Service Fund as the recipient of their fundraising efforts this year and recently sent an additional contribution of $319, bringing their total contributions to more than $2,000.

Kappa Delta Phi Fraternity from University of Maine at Machias donated $70 they raised at a “date auction.”

St. Joseph Hospital Print Shop in Bangor is donating the printing of all Maine Breast Cancer Coalition newsletters for 2008. They are making this in-kind donation as part of their Community Benefits commitment. We wish to extend a special thank you to Dave Voteur.

We recently received a generous individual donation for the Support Service Fund from:
   Deborah Eicher

Thank you for your generous contributions!

How You Can Help

The Support Service Fund is only partially supported by grants from major foundations. MBCC also relies on contributions from local groups, businesses, or individuals. If your community group, business, or organization would like to dedicate all or part of the proceeds from a fundraising effort to the Support Service Fund, contact grants chairperson Christine Haiss at 207-938-4018 or czh@tdstelme.net. One hundred percent of these donations will go to Support Service Fund recipients, as our low administrative costs are covered by our Maine Affiliate of Susan G. Komen For the Cure grant.

Or please consider a tax-deductible donation of any amount. See the donation and membership form below for details. Checks should be made payable to MBCC. Please write “Support Service Fund” on the memo line.

MBCC is a 501(c)(3) non-profit organization.

Join Us!

If you are reading this newsletter and are not yet a member of the Maine Breast Cancer Coalition, please consider joining us. Membership is only $15 for individuals or $100 for business, organization, or corporate memberships. Please send us the membership form below (or a photocopy). Or consider becoming an active member. We meet the second Wednesday of every other month from 5:45 to 7:30 P.M. at the Alfond Cancer Center in Augusta. Please call 1-800-928-2644 first to confirm meeting dates as they may change.

Yes! I want to support the Maine Breast Cancer Coalition’s work.

☐ I want to be active in the Maine Breast Cancer Coalition. Please contact me.
☐ I want to become a member of MBCC. Enclosed is a check for $15 (individual) or $100 (business or organization membership) payable to MBCC.
☐ I want to make a tax-deductible contribution. Enclosed is a check payable to MBCC for $_______.
   In honor/memory of ___________________.
☐ I want to donate the following gifts or services:
   ______________________________________________________
   ______________________________________________________

Name ____________________________
Address __________________________
City __________________ State ____ Zip____
Phone (day) __________ (eve.) __________
Email ____________________________

Please mail your check for membership and/or contribution with this form to:

Maine Breast Cancer Coalition
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Bangor, ME 04401-3650