

Abortion and Breast Cancer: New Turkish study showing the link leaks through mainstream wall of denial

By Joel Brind, Ph.D.

In recent years I have reported on many instances of mainstream medical journal studies allegedly proving the non-existence of the abortion-breast cancer link (ABC link). I had become accustomed to making the denial of the ABC link from high places the object of my scientific study, rather than the ABC link itself. Thus have readers been informed of the sleight of hand used in essentially fraudulent studies from the most prestigious institutions such as Oxford and Harvard, published in the most prestigious journals such as the *Lancet* and the *New England Journal of Medicine*.

But just as the internet has provided an avenue for inconvenient political truths to leak out to the public, so have new “open access” medical journals taken advantage of the internet to allow politically inconvenient medical truths to get out to the general public.

On April 8 of this year, the open access online medical journal *World Journal of Surgical Oncology* accepted, and published online, a new study on risk factors for breast cancer identified among hospital patients in Istanbul, Turkey.

Dr. Vahit Ozmen and colleagues at the Istanbul Medical Faculty and the Magee-Womens Hospital (also in Istanbul) interviewed 1492 patients with breast cancer and 2167 women with unrelated diseases and no significant chronic disease (controls) during the years 2000-2006.

The results of the Ozmen study are not the sort that can be found in recent “mainstream” medical journals. Most significantly, induced abortion emerged as the strongest risk factor—in fact, the only statistically significant risk factor other than age (over 50)—with patients who’d had any induced abortions found to be 66% more likely to get breast cancer.

While this finding of a significant ABC link comes as no surprise to readers, the Ozmen study did produce some substantial surprises. Several other known risk factors also showed increased risk, specifically, late age at first birth, family history of breast cancer and obesity. But the study also found significant *decreases* in risk among women who used oral contraceptives, hormone replacement therapy, and higher education level (past high school). These findings of protective effects run counter to what has been almost universally observed around the world.

How do such counterintuitive findings reflect on the validity of the Ozmen study? This is an important question. The answer—which the authors only broadly hint at—is likely quite simple and straightforward.

No epidemiological study is ideal. After all, the purpose of an epidemiological study is to approach, as closely as possible, the conditions of a controlled experiment. Of course, this is generally neither ethical nor even possible. Some types of study are better than others, and unfortunately, a hospital or clinic-based study—such as the Ozmen study—is particularly vulnerable to certain biases, because it is not “population based”. That is, using only hospital or clinic patients is not the same as obtaining a cross-section of the population at large.

Dr. Ozmen et al. do acknowledge the general weakness of the study methodology: “We are aware that this hospital based study has some potential such as selection biases and information bias.” Although they mention a few specific examples of these biases, they do not, however, suggest any particular connection between their unusual findings and any particular bias.

But the simple and straightforward likely explanation is this: The more highly educated, more “modern” women are also likely those who use contraceptive steroids or hormone replacement therapy (HRT). If these women are also more likely to visit the clinic with relatively minor complaints, while the more traditional women are more likely to stay away from the clinic and hospital unless they are seriously ill with something like breast cancer, then the selection bias will operate in the direction of associating the more modern lifestyle attributes with the controls, rather than the patients. This will show up in the results as a decreased frequency of oral contraceptive and HRT use, and a lower education level among the patients, compared to the healthier controls. Hence, these variables are associated with protective effects. The protective effects are not real, but are rather attributable to the modern lifestyle attribute of seeking medical care for relatively minor illness or injury.

Yet if that is a plausible explanation for the contrary findings of decreased risk for women who take contraceptive steroids and HRT, does that not also cast doubt on the validity of the finding of increased risk among women who’ve had any induced abortions?

The simple answer is no, and the reason is also simple and straightforward: Since induced abortion is also one of those “modern” lifestyle exposures, one should also see more abortions among the healthy controls in the study, compared to the patients, just as is seen with the other “modern” exposures discussed above. In other words, the simple operation of selection bias that explains the contrary results of the study, suggests that the results obtained for induced abortion likely represent an *underestimate* of the true ABC link in the Turkish population.

Interestingly, Dr. Ozmen et al. do not find any reason to explain their finding of a significant ABC link among the women of Istanbul. In reviewing the literature (independently of my own work in reviewing the literature on the ABC link, which is not even cited in the Ozmen study), they simply conclude: “Therefore, similar to our findings, the majority of the studies reported that induced abortion was associated with increased breast cancer risk.”

I guess they didn’t get the “memo” from the US National Cancer Institute, which declared back in 2003 that the non-existence of the ABC link had been “established”!

The fact that the internet provides the opportunities for honest research to leak out through the wall of denial erected by our increasingly nonsensical and bizarre political institutions, does indeed inspire hope that the truth ultimately will out, to the benefit of women and children everywhere.

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