



March 22, 2013

Honorable Members of the Senate Public Health & Welfare Committee

Kansas Senate

Dear Chairwoman Mary Pilcher-Cook and Members:

The American Cancer Society is a nationwide, community-based voluntary health organization dedicated to eliminating cancer as a major health problem. We work on behalf of millions of cancer patients, survivors, and their families across the country.

I am writing in reference to Kansas House Bill 2253, which if passed will require physicians and the Kansas Department of Health and Environment to provide information on breast cancer risk, which is not supported by scientific evidence, to women seeking an abortion. The bill language specifically requires a physician to inform a woman at least 24 hours prior to receiving an abortion about potential risks of the procedure including the risk of breast cancer. In addition, HB 2253 requires the Kansas Department of Health and Environment to publish printed materials communicating that breast cancer is a commonly associated risk of the procedure. This is not consistent with the facts. Simply stated, formal reviews of the scientific evidence about possible links between abortion and breast cancer *do not* support the assertion that an abortion increases the risk of breast cancer or any other type of cancer.

The studies that typically are cited to support a link between abortion and breast cancer are small, retrospective studies (i.e., looking backwards) that are methodologically flawed due to recall (or reporting) bias. It is common in these kinds of retrospective studies for patients to attribute the occurrence of disease to major life events, such as an abortion, while women who have not been diagnosed with the disease are more reluctant to report such an event. Thus, when women who have not been diagnosed with breast cancer underreport abortions in a study, it results in the erroneous conclusion that abortions are more common among women who have been diagnosed with breast cancer, and therefore a cause of breast cancer. Thus, studies that rely on self-reports are less reliable than those that are based on medical records. More recent prospective studies with large sample sizes that are based on medical records show no link between both spontaneous (miscarriage) or induced abortion and breast cancer. One of these studies was completed in Denmark, another from Harvard University, and a third as part of the California Teachers study.

In addition, the National Cancer Institute held a workshop in 2003 with 100 of the world's leading experts on pregnancy and breast cancer risk. The experts reviewed all the evidence available and concluded that induced and spontaneous abortions are not linked to an increased risk of breast cancer. They determined that the evidence supporting their conclusion was "well established", which is the highest possible level the group could rank a study.

Finally, the American College of Obstetricians and Gynecologists (ACOG) Committee on Gynecologic Practice also reviewed the evidence of abortion and any possible increased risk of breast cancer in 2003, and again in 2009. They concluded that, "Early studies of the relationship between prior induced abortion and breast cancer were methodologically flawed. More rigorous recent studies demonstrate no causal relationship between induced abortion and a subsequent increase in breast cancer risk."

The American Cancer Society, other organizations, and leading experts have conducted rigorous scientific reviews of the medical literature on pregnancy, abortion, and breast cancer risk, and have found *no* valid scientific evidence to support the assertion that an abortion, induced or otherwise, causes an increased risk of breast cancer. Requiring physicians and the Kansas Department of Health and Environment to communicate disinformation about a link between abortion and breast cancer is not good medicine, it is not good public policy and could be harmful to women. We should agree that a relationship between a woman and her doctor should not be compromised by requiring the physician to communicate information that medical experts and leading organizations have judged to be without scientific merit, and which may diminish a woman's confidence in important health information that is accurate and necessary for her good health.

Thank you for your time, and I would be happy to discuss this further should there be any questions.

Sincerely,

A handwritten signature in cursive script that reads "Otis W. Brawley". The signature is written in black ink and is positioned above the typed name.

Otis W. Brawley, MD
Chief Medical Officer
American Cancer Society

References and Research

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