

Dr. LANE. No, absolutely not.

Senator DOLE. Thank you very much.

Senator NELSON. Thank you, Dr. Lane, for your very thoughtful contribution. We appreciate your taking the time to come before us.

Our next witness is Dr. Edward F. Lewison, surgeon, and chief of the breast clinic, Johns Hopkins Hospital, Baltimore Md.

Dr. Lewison, we are very happy to have you here today, we appreciate your taking the time to come. Your statement will be inserted in the record. You may read it or summarize from it in any way you wish. Thank you for being so patient.

**STATEMENT OF DR. EDWARD F. LEWISON, SURGEON; AND CHIEF,
BREAST CLINIC, JOHNS HOPKINS HOSPITAL, BALTIMORE, MD.**

Dr. LEWISON. Senator Nelson, Senator Dole, members of this Select Committee, as a surgeon and breast specialist, I would like to make it clear that I will take the liberty to broaden the topic and conform with the suggestions that you have given me in your letter. I will discuss the pill and estrogens and breast cancer. I am including estrogens because the two previous speakers spoke of the pill and indicated the hormonal relationships, in my particular type of practice, I find estrogens, given during the menopausal period, as being perhaps one of the most important drugs that I have to contend with.

Now, cancer of the breast is indeed, the most common single organ site of malignancy in women. It is unfortunately a monstrously destructive disease which has claimed its many victims in all walks of life, at almost every age from adolescence onward and from time immemorial. It is in fact an arrant world affliction whose cellular turmoil shows little predilection for race, country, or geographical area.

In the United States alone about one woman in 17—6 percent of the female population—is destined to develop this malign disease and the risk of this possibility increases with each decade of life. A woman of 80 has a better chance of developing breast cancer than a woman of 70 and a woman of 70 a better chance than a woman of 60. There is no point when this disease turns downward in its malevolent course.

More than 300,000 American women will develop breast cancer within the next 5 years and the magnitude of this problem appears to be increasing. Benign breast disease such as chronic cystic mastitis (cysts) and benign tumors (fibroadenomas) are even more common, occurring in about 25 to 35 percent of all adult women. Thus, it is readily apparent that the breast is indeed a most frequent site of both benign and malignant disease.

It is also topical knowledge that the breast is a highly glamorized, hormone sensitive, satellite sex organ. Many years ago it was demonstrated that extracts from the ovary (estrogenic hormones) were remarkably potent growth stimulants for the epithelial cells of the female genital tract including the breast. Cancer is the uncontrolled growth of these same epithelial cells.