

PREGNANCY-ASSOCIATED BREAST CANCER AND THE NUREMBERG CODE

To the Editor:

In their recent review in this journal [1] Keinan-Boker and co-authors stated: "The trend for delayed parenthood may well increase the risk for pregnancy-associated breast cancer, since the proportion of pregnant women at an advanced age and thus at a higher risk for breast cancer is increasing." Lack of informed consent has helped boost the average age of first delivery. In 2001 Henriët and Kaminski [2] reported that French women with two or more prior IA (induced abortions) had 2.4 times the risk of having a maternal age of 35 or above compared to French women with zero prior IAs. In general, IA consent forms fail to inform women that: a) postponing a first full-

term pregnancy elevates lifetime breast cancer risk; b) IA elevates a woman's risk of a future preterm delivery [3]; and c) suction curettage IA violates the 1947 Nuremberg Code, since there are zero published peer-reviewed animal studies of suction curettage [4].

In 2004 Innes and Byers reported [5] that women who delivered under 32.0 weeks gestation had twice the risk of breast cancer as women who delivered a full-term newborn. In a recent article my colleagues and I [4] listed six statistically significant studies reporting that women with prior IAs have an elevated risk of delivering a newborn under 28 weeks gestation.

The Israel Medical Association would serve Israeli women well by alerting the Israeli government to the fact that 100% of suction curettage abortions violate the 1947 Nuremberg Code [4]. To my knowledge, there are zero non-human

primate studies for any surgical abortion procedure (suction curettage, D & C, D & E, D & X) demonstrating no increased risk of preterm delivery for primates with prior surgical abortions.

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“ The mark of the immature man is that he wants to die nobly for a cause, while the mark of a mature man is that he wants to live humbly for one”

Wilhelm Stekel (1868-1940),

physician and psychologist, who became one of Sigmund Freud's earliest followers, a self-described apostle. He later had a falling-out with Freud.

Capsule

Grafting Langerhans islets without rejection

Type 1 diabetes is an autoimmune disease that destroys insulin-producing cells, situated in the pancreas within the islets of Langerhans, leaving sufferers dependent on regular injections of insulin to control their blood glucose levels. An attractive treatment would be the transplantation of islets from healthy donors but, as with all organ transplants, there is the risk of rejection and a need for long-term suppression of the recipient's immune system, leaving the person prey to opportunistic infections. Luo and co-authors have developed a method to make diabetic mice tolerant to islet grafts by injecting them once 1 week before transplantation and again 1 day afterward with donor spleen cells, which were first treated with the chemical cross-linker 1-ethyl-3-(3'-dimethylaminopropyl)-

carbodiimide. Antigen-presenting cells from the donor spleen induced the down-regulation of the host effector T cells that would otherwise orchestrate graft rejection, and encouraged regulatory T cells to provide long-term tolerance to the transplants. Islet cells grafted into diabetic mice produced insulin for several months, and grafts could be replaced without additional treatment, as long as the new islets came from the same original donor. This approach depended on the exact timing and size of fixed-cell injections but, if a similar protocol can be established for humans, it could provide a simple and effective therapy for a very common condition.

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