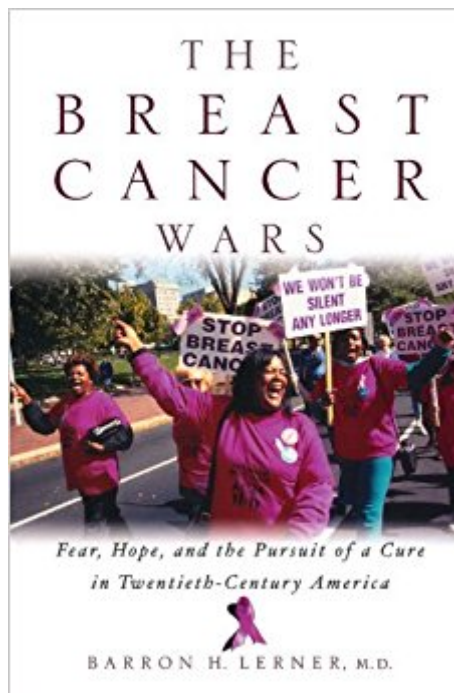




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The Breast Cancer Wars: Hope, Fear, And The Pursuit Of A Cure In Twentieth-Century America



Synopsis

In this riveting narrative, Barron H. Lerner offers a superb medical and cultural history of our century-long battle with breast cancer. Revisiting the past, Lerner argues, can illuminate and clarify the dilemmas confronted by women with--and at risk for--the disease. Writing with insight and compassion, Lerner tells a compelling story of influential surgeons, anxious patients and committed activists. There are colorful portraits of the leading figures, ranging from the acerbic Dr. William Halsted, who pioneered the disfiguring radical mastectomy at the turn of the century to Rose Kushner, a brash journalist who relentlessly educated American women about breast cancer. Lerner offers a fascinating account of the breast cancer wars: the insistent efforts of physicians to vanquish the "enemy"; the fights waged by feminists to combat a paternalistic legacy that silenced patients; and the struggles of statisticians and researchers to generate definitive data in the face of the great risks and uncertainties raised by the disease. And for this new paperback edition, Lerner has included a postscript in which he discusses the most recent breast cancer controversy: do mammograms truly lower mortality rates or do they lead to unnecessary mastectomies? In Lerner's hands, the fight against breast cancer opens a window on American medical practice over the last century: the pursuit of dramatic cures with sophisticated technologies, the ethical and legal challenges raised by informed consent, and the limited ability of scientific knowledge to provide quick solutions for serious illnesses. *The Breast Cancer Wars* tells a story that is of vital importance to modern breast cancer patients, their families and the clinicians who strive to treat and prevent this dreaded disease.

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Customer Reviews

Sure to be controversial, this prodigiously researched medical and cultural history examines deeply held views on the treatment of breast cancer, particularly the societal embrace of a "war on cancer" rather than an emphasis on prevention. Lerner (a physician and medical historian at Columbia's College of Physicians and Surgeons), whose mother developed breast cancer, focuses, in large part, on the rise and fall of the radical mastectomy pioneered by surgeon William Halsted. To prevent what he theorized was the centrifugal spread of cancer to the lymph nodes, Halsted determined that it was necessary to remove not only the breast but also the nodes and two chest-wall muscles, leaving the patient feeling disfigured and with serious side effects. Lerner details the arguments that many in the scientific community made against this eventually discredited theory and against radical mastectomy, including those advanced by surgeon George Crile. Crile favored less aggressive operations and disagreed with the cancer establishment's relentless publicity campaign for early detection. He and others were convinced that it was the biology of the cancer, rather than how early it was diagnosed, that determined whether or not a tumor would metastasize. Barron also explores the strong impact the 1970s women's movement had on cancer treatment, with women demanding more information from physicians and input into their treatment options. Provocative and highly engaging, Lerner's book presents an important contribution to medical history; moreover, he offers insights into areas that most books about breast health and disease do not probe. Illus. Agent, Michele Rubin. (May)Forecast: A controversial book on a hot-button issue, this may not be widely read, but it will be widely discussed.Copyright 2001 Cahners Business Information, Inc. --This text refers to an out of print or unavailable edition of this title.

Military metaphors have long been used in promoting breast cancer awareness, prevention, and treatment. In *The Breast Cancer Wars*, Lerner (medicine, Columbia Univ.) presents a remarkably readable understanding of distinctly American attitudes toward the disease and the ways in which American culture and society have influenced its treatment. Restricting his history to the 20th century, with a focus on the years from 1945 to 1980, Lerner begins by describing surgical pioneer William Halsted's radical mastectomy in a medical and historical context. Halsted's treatment was considered by some to be not radical enough and later, as the century progressed, was thought far too extensive. Lerner deftly profiles breast cancer survivors, celebrity spokeswomen, surgeons, and

researchers and even makes the concept of randomized controlled trials (RCTs), first introduced in the United States in 1971, understandable to the lay reader. There are a few minor problems in this extensively researched and annotated book some medical terminology, which could be more extensively defined in the glossary, is explained in parentheses, and concerns over the environmental causes of breast cancer are mentioned only in passing. Ellen Leopold's *A Darker Ribbon* (LJ 10/1/99) covered a similar time period using a feminist, activist approach. Lerner's book is essential for women's studies and history of medicine collections, but no public or academic library could go wrong in adding it to its collection. (Index not seen.) Martha E. Stone, Treadwell Lib., Boston Copyright 2001 Reed Business Information, Inc. --This text refers to an out of print or unavailable edition of this title.

Barron Lerner's *"Breast Cancer Wars"* joins Ellen Leopold's *"Darker Ribbon"* as an eyeopening look backstage at the Breast Cancer Follies in America. They are both important books, and make many of the same points, but if you are of a mind to read only one history of this disease, make it this one. Leopold's book, written from a frankly feminist (and that's OK) point of view is dry and academic. But as a frank feminist myself, I must say I much preferred Lerner's lively, even juicy, warts-and-all look at the nature of American surgeons and how they make their decisions. But be warned: like they say about watching sausage being made, it ain't pretty. In fact the chapter on super-radical surgery that was the fashion for a, thankfully short, period of time in the 1950's upset me so much that I couldn't sleep that night. Do NOT read that part at bedtime! The phrase "human remnant" used by one famous surgeon in referring to his patients - or what was left of them when he got through with them - still gives me nightmares. Lerner is himself a doctor - he teaches internal medicine and medical history at Columbia, so he has an insider's knowledge and interpretive skills that Leopold lacks. In detailing why, exactly, it took nearly half a century for American surgeons to even agree to scientifically test the efficacy and safety of the radical Halsted mastectomy, Lerner exposes the thought processes that dominate the surgical profession. Trust me, you will never look at your doctors the same way. His thoughts on the risk averse, controlling mentality of the American population, and how that is reflected in the kind of doctors and medical procedures we traditionally prefer - the mindset that allowed the Halsted and its horror chamber cousins to hold sway for so long - is particularly important. Toward the end of the book, Lerner touches on chemotherapy - which is a case of poisoning the many in order to help a miniscule few. It is impossible not to see the similarities with the now discredited Halsted. Like the Halsted, chemotherapy is basically a sales job, with no studies that show it is very helpful at all to non-metastatic women. And yet, we risk

averse, bigger is better, give it all to me Americans - and our doctors - are embracing it with the same mindless fervor as the radical mastectomy. Wake up folks. Read this book - it is a must.

Before signing the consent forms for my lumpectomy, I asked my surgeon if there was a possibility that I might wake up from my operation without a breast. "No," he said, "we don't do that any longer." Ah, but they used to. In fact, according to "The Breast Cancer Wars" it was standard procedure during most of the twentieth century for a woman to go under the knife for a biopsy and wake up without her breast, axillary nodes, and her chest wall muscles. If she were unlucky enough to be operated on in the fifties, she might also be minus an arm and part of her rib cage. Chapter 4, "The Scalpel Triumphant: Radical Surgery in the 1950s" is truly grotesque to someone who had her own surgery in December, 2001. One surgeon of that middle decade even accused a colleague of "having performed a 'humanectomy.'" People who went in to the operating room with breast cancer might lose a whole forequarter (clavicle, scapula, and an arm). For reproductive cancers, there was an operation called the hemipelvectomy, "which required removal of the 'hind-quarter': a leg and an adjacent bone from the pelvis." A surgeon named Pack performed over 200 hemipelvectomies on men and women, acquiring the nickname 'Pack the Knife' from his admiring colleagues. How did the war against cancer come to involve such radical surgeries? According to the author, surgeons gained experience with extreme operations during World War II, where they also learned about the life-saving qualities of blood transfusions and penicillin: "Indeed, the Surgeon General had reported a remarkable 96 percent survival rate among injured World War II military personnel." "When the surgeons returned from the battlefields, they were prepared to take extreme measures against an enemy more ancient than the Nazis. Cancer researcher Michael Shimkin later noted, "'surgeons went radical and then superradical' during the decade following World War II." I started reading this book fully prepared to despise William Halsted, the surgeon who invented the radical mastectomy and performed it first in 1882. However that was not to be the case. Halstead was a great surgeon and "believed that his operation, if performed early enough in the course of the disease, could substantially prolong the survival of patients"--as did generations of surgeons following his training and example, even though 75% of their patients were dead five years after surgery. Even after statistics like the above, randomized controlled trials involving lumpectomies and follow-up radiation, womens' activism, better mammography, and a new theory on how breast cancer metastasized, older surgeons performed radical and modified radical mastectomies well into the 1980s--a century after Halstead performed his first. When speaking of one of the old-school surgeons who turned 80 in 1980, Dr. Susan Love, herself a notable breast surgeon, remarked: "It was sad. He had lived too

long. He just couldn't make that critical jump."Dr. Lerner has written a superb medical and cultural history of America's war against breast cancer. Women who are considering treatment options for breast cancer should, at the very least read Chapter 11: "The Past as Prologue--What Can the History of Breast Cancer Teach Us?"

A well-researched and clearly written work that is less polemical than a reader may have been led to expect. If you want to know how it is that the importance of early detection has come to seem axiomatic despite evidence of its limited value, the answer lies in the history of cancer propaganda. This volume offers good information about that subject, as well as about changes to the climate of opinion surrounding cancer, particularly breast cancer, over the decades. A fine book.

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