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Paradigm Shifts In Cancer Treatment

By Simon Mitchell

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A paradigm is a sort of cultural, consensual pattern of thought or model of something. For example the current consensus in scientific medicine. Paradigms change, like the impact of Galileos work on disproving the flat-earth theory or Copernicus heresy that the Earth moves round the Sun. These new ideas met a great deal of resistance from orthodox philosophy but eventually gave rise to a changed perception of the world we live in.

We live now in a time of paradigm shift which creates fundamental changes in our assumptions about the world, and even this contributes to modern stress! Although our physical sciences have discovered new fields of quantum reality, medical science is lagging far behind. Philosophy has traditionally been an important part of medical practice since the medieval days of Paracelsus, even Hippocrates, an ancient Greek (and originator of the Hippocratic Oath).

How we perceive the world and our part in it is central to how we perceive the role of dis-ease and our reaction to it. One of the present problems of finding effective cancer treatment within Western scientific medicine is a paradigm gap. There are different perceptions of the world at work speaking incompatible languages. These have deep roots in our philosophy. This gap is presently condemning millions of people world-wide to suffer treatments for cancer that are often as destructive as the disease itself.

Paradigm 1: The mechanistic view

This can be traced back to Descartes and other scientists such as Sir Isaac Newton. The universe is a vast machine and we are all cogs, all with our part to play in its function. The healthy body is a well made clock and if it goes wrong we simply take it apart and tinker with the insides until it goes again. If it breaks it doesnt really matter because there are plenty more where that came from. Nothing exists unless it has been proven through logical methods.

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cancer: something had gone wrong with this body, it has a lump. Cut it out and throw the lump away.

Paradigm 2: The anthropomorphic view

This paradigm is central to the philosophy of Darwinism and others who helped set humans as apart and above, or at the head of other life forms. Humanity is the supposed crown of creation, we are created to lord it over every other creature as head of the food chain. The planet is ours to dominate and exploit to our own demands. We must conquer every mountain and battle against disease. We are the most evolved and dominant species in a process of natural selection. We exist for no purpose and have just evolved through sheer luck. In this world our media fantasy industries create pigs and fish that can talk human. Animals are anthropomorphised through culture to have the same needs, desires and dreams as humans. The animals, forests, oceans and environment around us exist purely for our convenience. This paradigm is human self-centred and exploitative to everything including ourselves.

cancer: something has gone wrong with this body, it has grown an enemy inside it. I will root it out and battle with it.

Paradigm 3: The Gaian view (an emerging paradigm)

This paradigm started with Einstein and the science of energy. Its inception combines an age when we saw the first images of the Earth as a whole entity from space. James Lovelock and his search for life on Mars is a central figure in its development through his identification of the Gaia Hypothesis regarding Earth.

This planet we inhabit is a self-balancing, homeostatic system similar to our own as single biological entities. It maintains the optimum conditions for life despite our best efforts to pollute it. Our bodies are a miracle of biology, constantly flexible and adaptive but easy to harm. Anything we do to it or each other, we do to ourselves as we are part of the same web or circle of life. We exist for a purpose but do not yet know what it is. We are part of an evolving cycle of life, a happening miracle.

Cancer: something has gone wrong with this body, it is trying to tell me something. I will listen to it and get help to understand why it has happened and what I need to learn and do to get better.

Simon Mitchell

This is an extract from 'Don't Get Cancer' a new ebook available only at:
<http://www.simonthescribe.co.uk/don'tget1.html>

Solution To Breast Cancer!

By Camry James

How long should a patient take tamoxifen for the treatment of breast cancer?

Patients with advanced breast cancer may take tamoxifen for varying lengths of time, depending on

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their response to this treatment and other factors. When used as adjuvant therapy for early stage breast cancer, tamoxifen is generally prescribed for 5 years. However, the ideal length of treatment with tamoxifen is not known.

How Often Should I Take Tamoxifen?

Two studies have confirmed the benefit of taking adjuvant tamoxifen daily for 5 years. These studies compared 5 years of treatment with tamoxifen with 10 years of treatment. When taken for 5 years, the drug reduces the risk of recurrence of the original breast cancer and also reduces the risk of developing a second primary cancer in the other breast. Taking tamoxifen for longer than 5 years is not more effective than 5 years of therapy.

What is Tamoxifen

Tamoxifen is an oral selective estrogen receptor modulator which is used in breast cancer treatment, and is currently the world's largest selling breast cancer treatment. It is used for the treatment of early and advanced breast cancer in pre- and post-menopausal women. It is also approved by the FDA for the reduction of the incidence of breast cancer in women at high risk of developing the disease. It has been further approved for the reduction of contralateral (in the opposite breast) breast cancer.

Tamoxifen and Cancer

Tamoxifen is used to reduce the risk of breast cancer for women who:

1. are at high risk of breast cancer but have no personal history of the disease
2. have non-invasive, hormone-receptor-positive breast cancer, or DCIS (ductal carcinoma in situ)
3. have hormone-receptor-positive invasive breast cancer at any stage.

Tamoxifen is sometimes used to treat gynecomastia in men. Tamoxifen is also used by bodybuilders in a steroid cycle to try and prevent or reduce drug-induced gynecomastia caused by steroids that are used in the same cycle.

Tamoxifen is also used to treat infertility in women with anovulatory disorders. A dose of 10–40 mg per day is administered in days 3–7 of a woman's cycle.

Tamoxifen has been proven to be the cure to Breast Cancer. We urge you to find out more about Tamoxifen at

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