

Supplement: False or misleading statements identified and confirmed by the three reviewers.

Statement	Identification/Correction	Comment
<p>"...the radiation can stay in your body for 18 months"</p>	<p>"There is no way the radiation can stay in your body, any more than the light that comes into your eyes stays in your head. Even the energy the rads create when it hits your tissues can't stay around for more than a few hours, I wouldn't think. The effects of the rads on the tissues obviously stay around for a long time, some of them maybe forever."</p>	<p>Radiation does not persist, but the effects of radiation may persist.</p>
<p>[related to lymph node size]"The American Cancer Society's Treatment Guidelines for Patients, Version 6 (Sept. 04), discusses size, nodal involvement, and distant spread as the three components of stage (page 13). They define T1 as 2 cm in diameter or smaller. No mention of length or width."</p>	<p>"The size parameters are for the breast tumor, not the nodes"</p>	<p>In the TNM system, T refers to the size of the tumor, not lymph node.</p>
<p>"...the second medication expired last December, however, my doctor stated, 'these meds are expired, however, the pharmaceutical companies do this so that they can continue to refill the shelves'"</p>	<p>"All drugs and diagnostics need expiration dates. These are generally determined from stability tests. Samples of the product are stored at 4 degrees C (refrigerated), 25 degrees C (room temp) and at 37 degrees C (body temp). At regular intervals products stored under various conditions are sampled and tested. Obviously at 37 degrees, the products begin to fail first. And one can extrapolate from the data what the stability truly is. Often it's years however, the manufacturers want to see at least 90% of original product potency" for the product to be deemed "sellable." The 90% level</p>	
<p>"...most drugs, even many years after official expiration, were still active, the decrease in potency was almost never enough to affect the drug's action"</p>		
<p>"There is nothing scientific about the expiration date. It is</p>		

<p>an arbitrary time limit, in most cases."</p>	<p>data generated by both real-time and accelerated (25 and 37 degree C data) stability studies is what I believe generally determines the expiration dates. But most product is good for long past the exp. date. It's just not in the complete full dose. "</p>	
<p>"...another female doctor tells me that after five years women are cured of cancer"</p>	<p>"I think doctors should be telling us ... great, no sign of metastatic disease, go out and live your life. So what I am saying is, I believe we have periods of remission.... Some longer than others, depending on the stage of the cancer at first diagnosis and spread"</p> <p>"It is unlikely that BC will return after 10 years, that the risk of getting BC at 18 years after diagnosis is the same as is for the general population, and that very rarely BC may return after as much as 25 years."</p>	<p>Not all breast cancer recurrences occur within the first 5 years. For example, in the NSABP B-06 trial comparing mastectomy with lumpectomy (with or without irradiation) for the treatment of invasive breast cancer, only 69% of the first recurrences were detected within the first 5 years. Nine percent of local recurrences, 7 % of regional recurrences, and 13 % of distant recurrences were detected after 10 years<sup>1</sup>.</p>
<p>"My naturopath did not want me to use flaxseed oil, as a person who's had hormone-dependent cancer. Flaxseed meal is ok."</p>	<p>“yes, it is controversial. It is another one of those ‘is it a phytoestrogen that works like estrogen, or does it block estrogen receptors, thus blocking uptake of estrogen by tumor cells’ things.”</p>	<p>In animal models, ER-positive as well as ER-negative tumor growth and metastases were reduced by dietary flaxseed<sup>2, 3</sup>. Xenograft tumor growth rate was significantly decreased with flaxseed oil alone<sup>4</sup>. Clinical data on dietary flaxseed is too limited to make any recommendations.</p>
<p>"... the studies indicate no survival benefit with radiation"</p>	<p>Uncorrected</p>	<p>Adjuvant radiation therapy has been associated with not only a decrease in local recurrence but also a decline in mortality in large prospective randomized trials of post-mastectomy radiation therapy,<sup>5, 6</sup> and in a pooled analysis of prospective trials of radiation therapy after breast conservation.<sup>7</sup></p>

<p>"If you actually had a tumor then it doesn't sound like DCIS, it sounds invasive since DCIS is not a lump as such, you can't feel DCIS."</p>	<p>Uncorrected</p>	<p>Some DCIS (ductal carcinoma <i>in situ</i>) is palpable<sup>8</sup>.</p>
<p>"One thing that I know came pretty clear from the huge ATAC clinical trial is that people on Arimidex do tend to suffer bone loss but it tends to all be in the first two years of use"</p>	<p>Uncorrected</p>	<p>The effect of anastrozole on rate of bone loss after 2 years is not yet known. The ATAC trial demonstrated that after an increase in fracture rate up to 2 years, the relative risk of fractures with anastrozole stabilized<sup>9</sup>. However, the 2-year results of the trial demonstrated that the rate of bone loss was constant over the first and second years of anastrozole treatment<sup>10</sup>. Longer follow-up is needed to determine whether bone mineral density loss stabilizes over time; a five year assessment is planned.</p>

## Bibliography

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