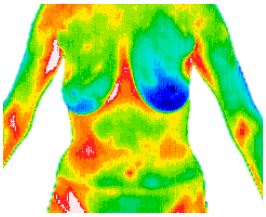
This reports tells you about a screening tool that is saving lives:



"Safe, Pain Free, FDA Approved Procedure May Detect *CANCER* up to Five Years Sooner!!!" It's called Digital Infrared Thermographic Imaging (DITI)..... And Now the Technology has come to Dubuque, IA!

Inside This Report You'll Discover:

- **The *Frightening* New Breast Cancer FACTS**
- **What is Digital Infrared Thermographic Imaging (DITI)**
- **What Millions of Americans Have Done to Detect Cancer Sooner**

There is a very good reason why you fear getting ***CANCER!***
AS you probably already know, Cancer is the second leading cause of death in America.

The statistics for BREAST CANCER are ***ALARMING***: Approximately 38% of Americans will get Cancer (Amcerican Cancer Society) with 1 in 8 US women developing invasive breast cancer. In 2018, an estimated 266,120 new cases of invasive breast cancer were diagnosed along with 63,960 new cases of non-invasive breast cancer. (www.breastcancer.org)

Early detection saves lives!!!

The Journal Cancer (Cancer 71:3547-3551, 1993) concluded breast cancers grow significantly faster in young woman under the age of 50.

The problem is women under the age of 50 usually have much denser breasts making detection with a mammogram more challenging.

Could the answer to detecting Breast Cancer sooner be THERMOGRPAPHY (DITI)?

So what is the REAL story with DITI, and why is it such a good idea?

Well first, let me tell you what DITI is NOT!:

- **NOT** something that *squishes* your breasts
- **NOT** PAINFUL: in fact, there is absolutely no touching
- **NOT** some form of quackery. DITI is **FDA approved** as an adjunctive diagnostic tool for breast cancer (21 CFR884.2980(a)
- **NO** RADIATION: Mammography is ionizing radiation
- **NO** CONTRAINDICATIONS. It is 100% safe!

So how does this new technology work?

OK: I'm going to get into to some ***heavy* science**!
The Human body is thermally symmetrical……. and our normal thermal patterns called thermotomes are constant and repeatable.

Blood flow is under the control of sympathetic function for core temperature regulation. The sympathetic control of skin blood flow and the normal thermal symmetry of the body gives the opportunity for thermography to **detect thermal asymmetry** relating to dysfunction anywhere in the body.

Pathology (**aka cancer**) will cause sympathetic change and in many instances, **thermal asymmetry.**

Many early tumors grow directionally towards pre-existing nearby blood vessels, a process termed 'vessel cooption." This **vessel cooption** creates physiological changes that may **be detected with DITI**.

The rationale for applying thermography for the detection of breast cancer is that breast cancers tend to induce angiogenesis, which is nothing more than the ingrowth of **new blood vessels** into the tumor to supply its nutrient and oxygen needs.

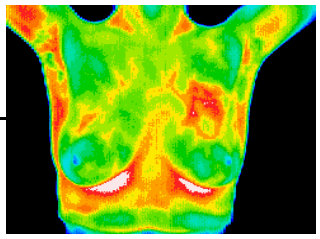
These new blood vessels result in additional blood flow, which results in additional heat. In addition, the metabolism of breast cancer cells tends to be faster than the surrounding tissue, and cancer is often associated with inflammation, two more reasons why the temperature of breast cancers might be higher than the surrounding normal breast tissue and therefore potentially imaginable using infrared thermography (DITI).

Simply put: DITI detects subtle physiologic changes that accompany breast pathology, whether it is cancer, fibrocystic disease, an infection or a vascular disease. Doctors can then plan accordingly and lay out a careful program to further diagnose and /or MONITOR until other standard testing becomes positive. This allows for the earliest possible treatment.

OK…. I told you that science was heavy….. but to sum it all up, DITI can detect physiological changes that occur in the body when pathology such as cancer occurs.

Active Cancer Cells Double in Number Every 90 Days

90 days	2 cells	
1 year	16 cells	
2 years	256 cells	
3 years	4,896 cells	
4 years	65,536 cells	
5 years	1,048,576 cells	(still undetectable)
6 years	16,777,216 cells	
7 years	268,435,456 cells	
8 years	4,294,967,296 cells	(doubled 32 times) *



*Normally detectable by Mammogram at this stage

40 Doublings (Aprox 10 Years) considered lethal.

Thermography (DITI) has the opportunity to detect changes at any stage in cancer development from the ***first year*** up to when a tumor is established and is dense enough to be seen with mammography. Thermography can lead to earlier diagnosis and better treatment options!!!

Using DITI for breast screening provides a totally safe and non invasive method of <u>detecting physiological changes in the breasts</u> that can result in the earliest possible detection of breast disease. DITI can detect and record physiological changes years before there is any clinical evidence of disease. Being able to detect and monitor suspicious changes at an early stage gives the patient the opportunity for early intervention and far greater treatment options.

Remember earlier when I was talking about women under 50 having denser breasts? Here is why that matters…..

The disadvantage with mammography is that with dense breasts it is difficult to differentiate between normal and abnormal density in the early stages of pathology. (It is also necessary to use more radiation to properly image dense breasts).

EARLY DETECTION: Since it is more difficult for mammography to pick up suspicious lesions in younger women between 30 & 50 with denser breasts, **DITI** becomes especially important, because DITI can detect physiological changes at any age!!

Because **pre-menopausal breast tissue** is denser and more vascular than post menopausal breast tissue, any pathology taking place will have a better vascular (blood) supply and there will be increased cell changes and faster development of pathology in the younger women.

This means **the cancer may GROW FASTER!**

Thermography is better suited to detect the physiological changes in the denser and more vascular pre-menopausal breast, with positive findings, months and sometimes years before the pathology becomes dense enough to be seen with mammography.

DITI studies improve the detection rates and accuracy of mammography.

Many women think that if you have a negative mammogram, that they don't have cancer. That is a very dangerous misconception. <u>If you have a negative mammogram, it doesn't mean you don't have cancer, it just means the cancer, if you do have it, hasn't grown large enough for the mammogram to detect it</u>.

Cancer can take years to develop to a stage where it can be detected with mammogram or ultrasound (dense enough for location and biopsy). Thus, DITI is ideally placed as a screening tool to identify changes over time in the 'early' development stages, before there is more advanced pathology that can be detected with other tests.

The **major benefit** of this is detecting early changes that may **precede malignant pathology** that will become diagnosable at some stage. **The earlier an abnormality is detected, the better the treatment options and hopeful outcome will be.**

In patients of mammographic age, DITI not only provides the benefit of early detection of functional change, but can also increase the detection rates of other tests by contributing additional information about functional (physiological) abnormality and also the location of suspicious thermal findings that may be outside the range of other tests.

Keep in mind:

There are no comparison or competition between mammogram and DITI.

They are two different types of tests providing different results. DITI does not provide any of the same findings or information that mammogram or ultrasound provides. DITI shows information relating to physiology including: vascular activity (development of new and abnormal blood vessels known as 'angiogenesis), inflammation, lymphatic activity, hormonal dysfunction and other 'functional' abnormalities. DITI findings are not restricted to just tissue that can be compressed for mammography

STUDIES: There are numerous published studies that support the use of thermography as a useful adjunctive test.

*****The American Journal of Roentgenology concluded Infrared imaging offers a safe noninvasive procedure that would be valuable as an adjunct to mammography in determining whether a lesion is benign or malignant. ***AJR* 2003; 180:263-269**

*****A Study in The Journal of Clinical Oncology concluded: The majority of the retrospective studies show that angiogenesis is an important new prognostic indicator in early-stage breast carcinoma **Journal of Clinical Oncology, Vol 13, 765-782, Copyright © 1995 by American Society of Clinical Oncology**

-Angiogenesis is the development of new blood vessels. Blood = heat. Thermography scans can detect that heat.

At Midwest Thermography, we use the latest and greatest Meditherm camera. As a matter of fact, we waited to purchase the equipment until the new resolution technology was implemented. **The images are incredibly clear with phenomenal resolution!!!**

I feel confident saying The Meditherm 640 is the most advanced thermography camera on the market.

You will be working with the best Medical Doctors in the business!!

The images taken at our clinic are interpreted by Electronic Medical Interpretation Inc. (EMI). This service is the most advanced, professional and innovative approach to medical thermal imaging interpretation. All EMI doctors are Medical Doctors who are board certified thermologists.

Thus, you, the patient, are going to have a Medical Doctor with ***A LOT*** of experience doing the scan interpretation.

What happens at a DITI scan?

The first scan is full body which includes the breasts. All scans are performed by a female American College of Clinical Thermography (ACCT) certified technician.

90 days later, a follow up scan of only the breasts is performed to establish a baseline. Once a stable baseline thermogram is established, annual screening is performed to detect any changes that justify additional testing, which can lead to early diagnosis and better outcome.

The complete test only takes twenty minutes; there is no body contact, and no radiation of any kind.

We recommends starting at age 35 for ALL females especially if there is a strong history of breast cancer in your family.

Here's something to consider:

An estimated 41,400 Americans will die of breast cancer this year. I bet many of them wish they would have detected the cancer sooner!

What to do:
Call the clinic today (563-588-0500): and schedule your initial full body scan.

P.S. Don't be a victim of late diagnosis. Take proactive measures today to best position yourself for early detection.

P.S.S. For more information go to our facebook page (Midwest Thermography) and follow the links to hear leading medical experts discuss thermography.

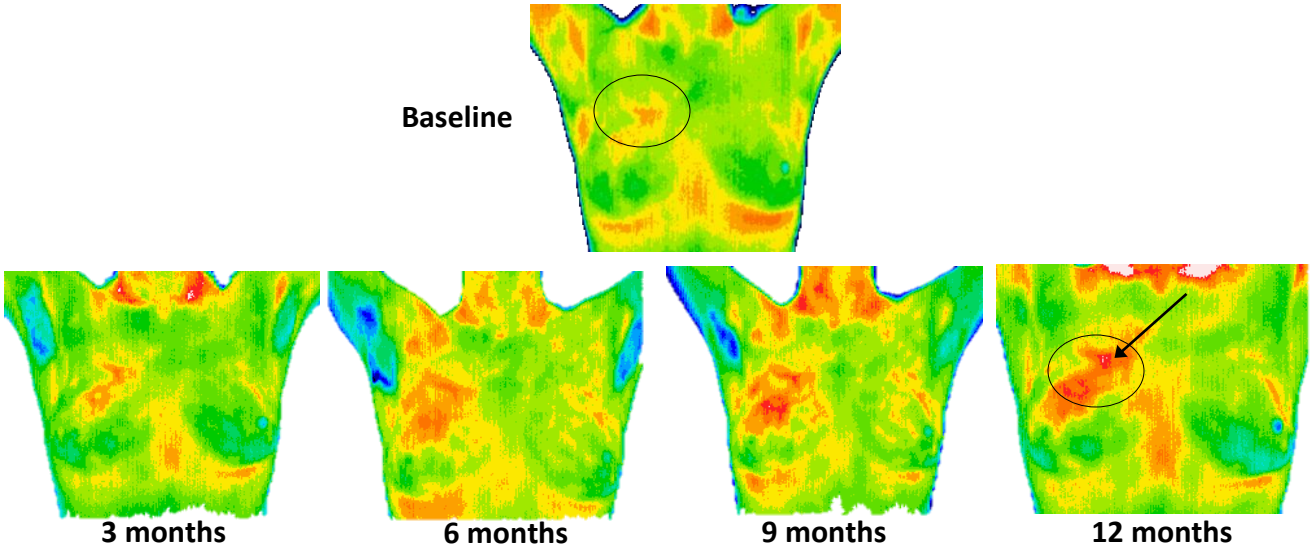
P.S.S. DITI isn't just for the breasts….. DITI is also for Fibromyalgia, whiplash, tennis elbow, plantar fasciitis, and more!!

Still undecided?? Call the clinic (588-0500) for a free consult to see if DITI is right for you!!

Thermography (DITI):

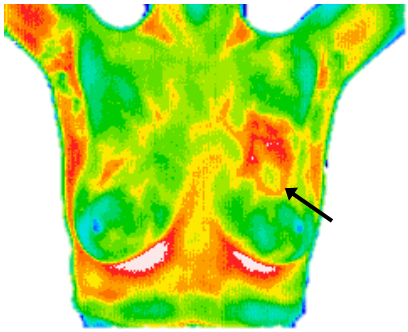
SAFE, NON INVASIVE, FDA APPROVED, PAINLESS

The statistics for cancer are **ALARMING**: 1 in 8 US women will develop invasive breast cancer. In 2018, an estimated 266,120 new cases of invasive breast cancer were diagnosed along with 63,690 new cases of non-invasive breast cancer. In 2018, 41,400 Americans died of breast cancer. (www.breastcancer.org). **Early detection saves lives!!** Thermography can detect physiologic changes in the body **YEARS** before traditional approaches!



This patient was age 37 when her first baseline thermogram showed a **slight hyperthermic asymmetry in the upper right breast**. The follow-up study showed the pattern had become more well defined and although clinical correlation did not find anything remarkable it was decided to repeat the exam again in 3 months, when again significant changes were seen. Mammography was performed at this stage with thermographic guidance of the locally suspicious area at 1 O'clock to the right nipple. The mammographic findings were inconclusive and the patient was referred for a repeat mammogram in 12 months. Thermographic monitoring was continued and at the fifth **comparative study at 12 months significant changes** were still evident and the hyperthermic asymmetry (temperature differentials) had increased.

Immediate further investigation was strongly recommended despite a scheduled mammogram in 6 months, and at the patients insistence a repeat mammogram was performed which **clearly showed a small calcification (1 mm) at 1 O'clock**. Within one week a lumpectomy was performed with good margins and the pathology **confirmed as a malignant carcinoma (DCIS).**
This patient has now had stable thermograms for the last 2 years and is expected to remain healthy.



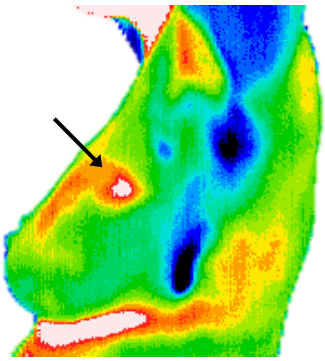
This 37 year old patient **presented for routine thermographi**c breast screening. She was not in a high risk category and had no family history. No breast exams had been performed previously. The vascular asymmetry in the upper left breast and the local hypothermia at 11 O'clock was particularly suspicious and subsequent clinical investigation indicated a palpable mass at the position indicated. A biopsy was performed and a **DCIS of 2 cm was diagnosed**.

Unfortunately this patient only survived for 12 months after diagnosis.

Early Detection:

DITI is especially appropriate for younger women between 30 & 50 whose denser breast tissue makes it more difficult for mammography to pick up suspicious lesions.

DITI detects the subtle physiological changes that accompany breast pathology, whether it is cancer, fibrocystic disease, an infection or a vascular disease. Doctors can then plan accordingly and lay out a careful program for further diagnose and/or MONITOR until other standard testing becomes positive. This allows for the earliest possible detection.

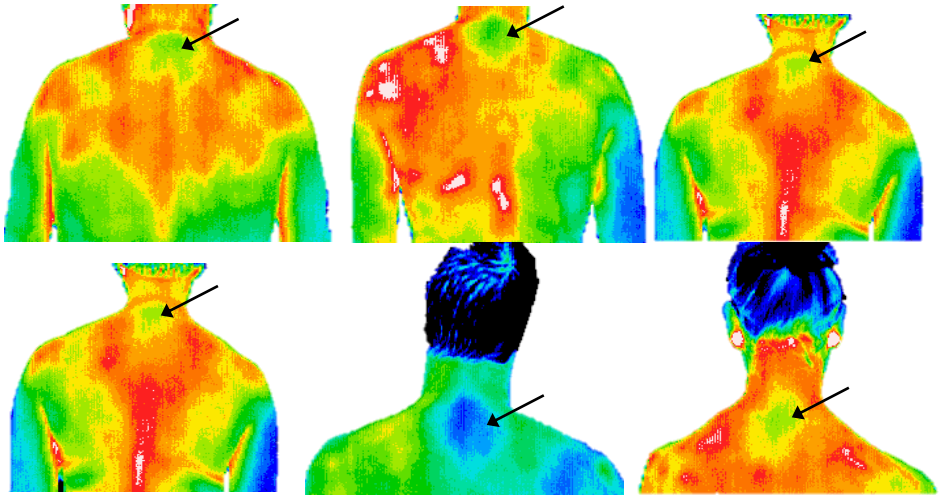


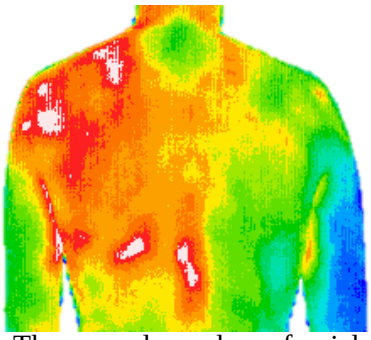
Fibromyalgia and CFS

Patients with positively diagnosed auto-immune related conditions exhibit local hypothermia over T1, T2. This is a repeatable pattern!!

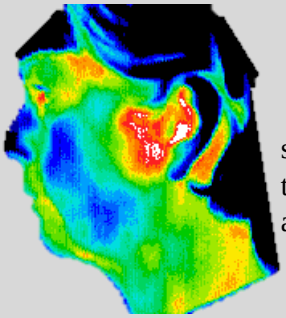
These patients suffer from CFS and Fibromyalgia.

The reliability of this phenomena allows us to monitor the response to treatment and rehabilitation over periods of time … days, weeks, or months.





The muscular and myofascial inflammation of **Fibromyalgia** can be objectively and accurately documented and monitored.

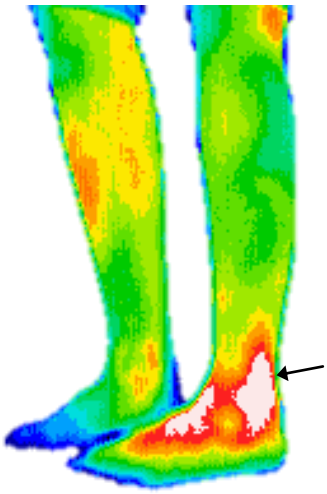


TMJ

Difficult to diagnose TMJ syndromes can be assessed to show the combined effects of inflammation as well as neurological dysfunction.

Post Fracture

Thermography can influence decision making in case management.

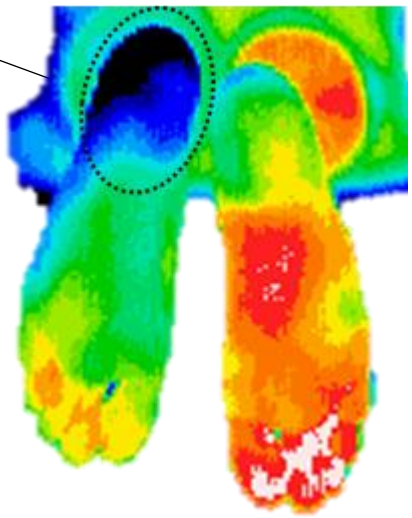


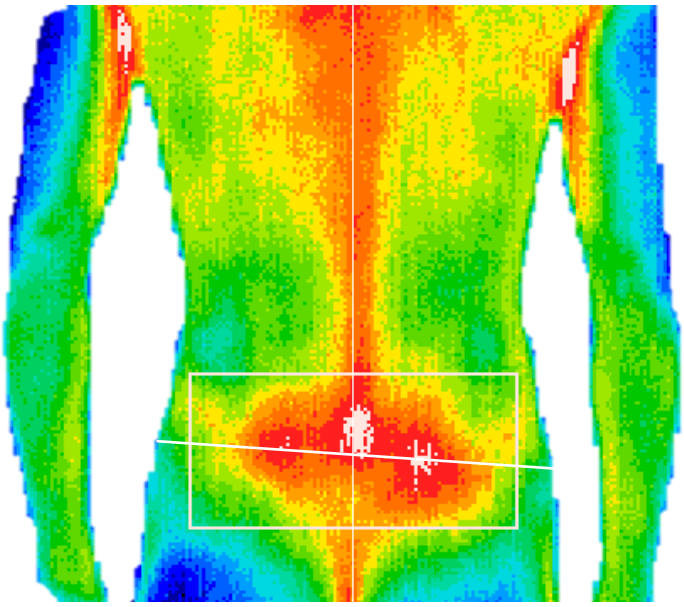
Poor healing of left ankle following cast removal

Sympathetic Pain

Sympathetic reaction to the pain caused by a **bone spur** in the left heel. The hyperthermia in the right plantar foot is likely to be a result of a long term weight transfer off the left heel.

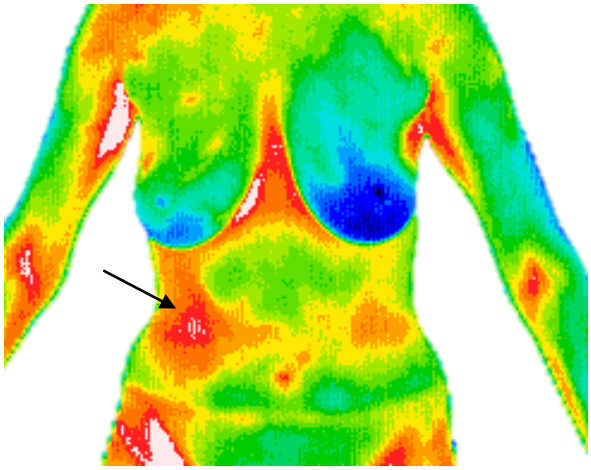
Sympathetic irritation in the heel of the left foot





This is the Thermographic results from a patient with **SI pain and a tilted pelvis**, (the right leg is shorter than the left).

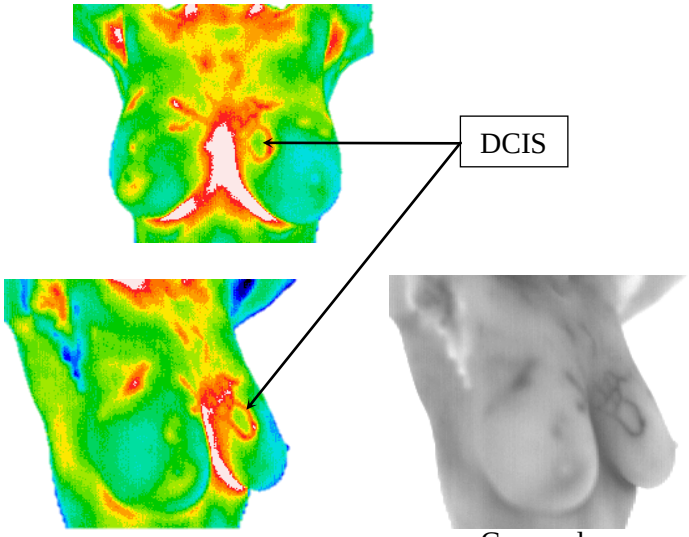
Thermal asymmetries and their relationship to anatomical structure can be correlated with postural asymmetry and other clinical and imaging modalities.

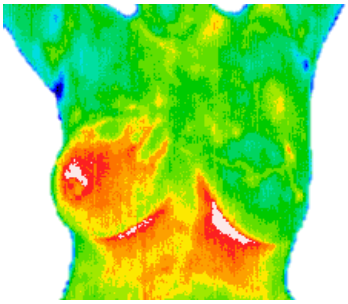


Visceral dysfunction like this **diverticulitis** can be localized for either further investigation or treatment.

Thermography can show suspicious findings that are outside the range of mammography.

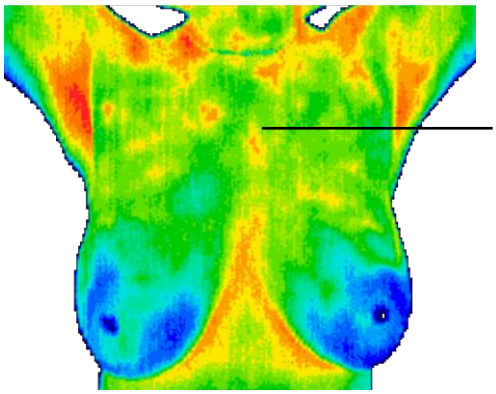
This tumor was missed by a mammogram as it was just outside the boarder of the medial left breast.



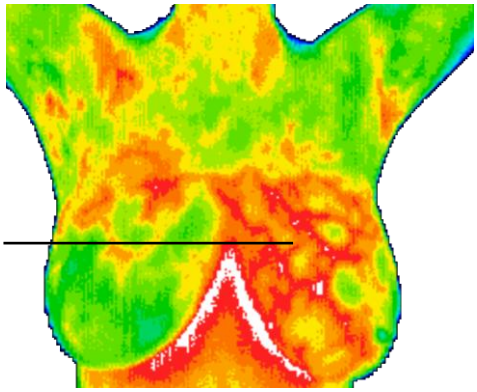


The results of this routine DITI scan led to the diagnosis of **inflammatory carcinoma** in the right breast. There were no clinical indications at this stage. (Thermography can show significant indicators several months before any of the clinical signs of inflammatory breast disease, skin discoloration, swelling and pain).

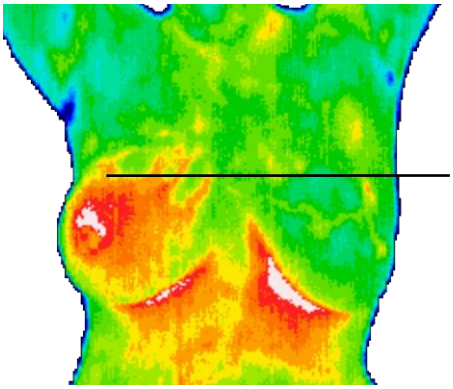
Inflammatory breast disease cannot be detected by mammography and is most commonly seen in younger women, the prognosis is always poor. Early detection provides the best hope of survival.



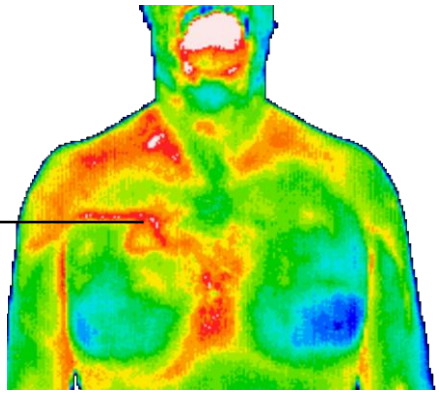
Normal symmetry of healthy breasts



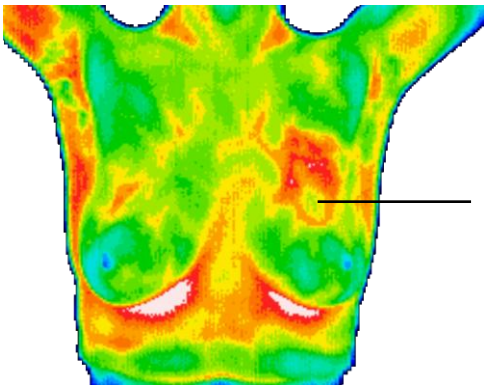
Suspicious vascular activity



Inflammatory breast disease



Male breast cancer (DCIS)



Ductal Carcinoma In Situ (DCIS) left breast