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BST and the FDA

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The FDA found themselves in the middle of another controversy this year when they allowed farmers to use synthetic BST, a hormone developed by the Monsanto Corporation, which can stimulate growth and milk production in cows.

Although the FDA claims BST is perfectly safe, there are those who disagree. Carol Roquemore, spokesperson for the Alta Dena Dairy, a California company with a long history of providing high quality, minimally processed products, states that dairies like Alta Dena, who only buy milk from farmers who do not use BST in their cattle, cannot put this information on their labels. They were informed by the agency that cares about our health, the FDA, that placing a BST-free label on their dairy products would infer that brands without this label were unsafe and that they could be sued by those who use and produce BST. One has to wonder what other labels, such as sugar-free, fat-free, and preservative-free infer. One also has to wonder why an agency concerned with public health would not praise companies who inform the public exactly what is and is not in their product.

The following letter will eloquently inform us about this issue. It was written by Samuel Epstein, MD, MPH, PhD, professor of occupational and environmental medicine and chairman of the Cancer Prevention coalition at the University of Illinois, Chicago campus. Dr. Epstein wrote this letter to Dr. David Kessler of the FDA. It also appeared in the September 1994 issue of *Preventive Medicine Update* published by Health Comm & Associates, Gig Harbor, Washington. Dr. Epstein states and I quote:

"I am writing to express grave concerns about the risks of breast cancer from consumption of BST-produced milk. These concerns are based on the following scientific considerations:

1. BST administration induces a substantial increase that is sustained in the levels of uncharacterized insulin growth factor 1, or IGF1, in milk.
2. IGF1 is not destroyed by pasteurization and, therefore, will remain in the milk.
3. IGF1 is not inactivated by digestion in the human gut.
4. Intact protein molecules such as IGF1 are absorbed across the gut wall, particularly in infants with more permeable gut mucosa.
5. In a 1990 FDA publication disclosing Monsanto toxicity tests, oral administration of relatively low doses of IGF1 to rats for only two weeks induced statistically significant and biologically highly significant systemic effects. Increased body weight, increased liver weight, increased bone length, and decreased epiphyseal width were all seen. These results are confirmatory of prior theoretical predictions. However, contrary to these explicit data, the FDA alleges that IGF1 lacks oral activity.
6. There are close biological similarities, including an identical amino acid sequence between bovine and human IGF1.
7. BST administration induces prominent uptake of IGF1 by specific receptors in breast epithelium.
8. IGF1 induces rapid division and multiplication of cultured human breast epithelial cells.

9. IGF1 induces malignant transformation of human breast epithelial cells.

10. IGF1 is a growth factor for human cancer cells, maintaining their malignancy, progression, and invasiveness. IGF1 has been similarly associated with colon cancer.

11. Apart from increasing IGF1 levels in milk, BST directly stimulated further IGF1 production at the local cellular level. Thus, undigested BST or partially digested active fragments absorbed across the permeable infant gut may still further increase IGF1 production by breast epithelium. It may be noted there are no available BST-specific antibody data which contraindicate such absorption.

12. The undifferentiated prenatal and infant breast is particularly susceptible to hormonal influences. Such imprinting by IGF1 may not only constitute a direct breast cancer risk factor, but may also constitute an increased sensitivity of the breast to subsequent unrelated risk factors such as carcinogenic and estrogenic pesticide contaminants in food mammography.

On the basis of this data and women's right to know, I urge that minimally you revoke recent FDA restrictions on labelling of BST-free milk. More prudently, I further urge that you revoke approval of BST registration."

It is very troubling to this author that a bunch of bureaucrats are robbing the public of its right to an informed choice. Clearly, the FDA fears that with truth in labelling many consumers would not buy milk derived from BST cattle. What is so dangerous about that?

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