The TRUTH About VITAMIN D and Breast Cancer: What New Research Shows Transcript

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Introduction to vitamin D and breast cancer

In this video, I'm going to walk you through on what the latest research shows for vitamin D in women receiving treatments for breast cancer and how to best use vitamin d to your advantage.

I'm Dr. Mark Stengler and I've researched and written 20 books on nutrition and functional medicine and have been practicing integrative medicine as a naturopathic medical doctor for 30 years.

Now, many of you are aware of vitamin D has so many powerful effects in the body, helps with your bone health, it helps the inflammation, but we're going to talk about how it really affects cancer and some recent research on it.

Now the study I'm referring to is titled vitamin D supplementation improves pathological complete response in breast cancer patients undergoing neoadjuvant chemotherapy, a randomized clinical trial.

And this was published in the journal nutrition and cancer. So actually very mainstream. So in this study, they're essentially comparing vitamin D to placebo.

Overview of the clinical trial

And in the clinical trial, there are looking at women ages 45 years and older, again, who had breast cancer. They're getting chemotherapy, getting the chemotherapy to reduce the size so then they can go on to get other treatments, say like surgery.

The women were split into two groups, the vitamin B group. It took a daily supplement of 2000 IU of vitamin d for six months. the placebo group, They took appeal, looked the same, but had no vitamin E for 6 months as well.

Now research has shown that women with breast cancer often have vitamin D deficiency at the time of diagnosis. In this study, the women in both groups, placebo and those receiving vitamin, had vitamin deficiency.

And so what they're looking at in this is they are looking what's called pathological complete response rate or PCR. And this is a huge deal because it's an important prognostic factor in breast cancer and is linked to a better outlook.

This is when after chemotherapy and surgery, the pathologist finds no signs of remaining invasive cancer in the breast tissue or lymph nodes. So this an import marker to look at.

So after 6 months of the study, the results were quite striking. The women who took the daily vitamin D supplement, which was only 2,000 units, not a very high dose in my opinion, had a much higher PCR rate.

Trial results and PCR improvement

They had 43% of them achieved a PCR, a complete response. A placebo group only 24% achieved the PCR. women with breast cancer undergoing the vitamin D supplementation were much more likely to achieve a pathological complete response than women in the placebo group.

The researchers also found a magic number. Women with vitamin d blood levels that were greater than or equal to 20 nanograms per milliliter at the end of the intervention were more to likely achieve PCR than those with a deficiency.

In fact, the The higher the vitamin D level was, the higher their percentage of women who achieved PCR,

demonstrating a positive association between vitamin and the PCR.

So, how does vitamin help? How does this happen? Well, vitamin is thought to play a protective role in the development of breast cancer. Vitamin D, as you know, is converted into its active form within the tissue in the skin.

That includes the breast tissue itself. The active forms interacts with the vitamin D receptor and can help slow down the cancer cell's ability to grow, multiply and spread.

This helps to explain why sufficient levels of vitamin are associated with a more favorable pathological response.

How vitamin D may support treatment

Also, vitamin D acts as a chemo booster. Vitamin D appears to influence the response to chemotherapy agents. It's consistent with experimental studies demonstrating that vitamin d sensitizes breast cancer cells to chemotherapy.

Studies have shown that Vitamin d enhances the anti-tumor activities of common chemotherapy agent. So why does this matter? Why does the results of the study matter?" Well, it's obvious.

I mean, seems to be quite beneficial for women who are getting cancer treatments, taking vitamin D. And these results reinforce the theory that increasing serum vitamin-D through supplementation increases the levels of vitamin in the target tissue, such as the breast tissue.

This produces that active form of Vitamin D, and vitamin, of course, is very inexpensive, especially compared to pharmaceutical medications. And so the results of this study agree with scientific evidence showing an association between vitamin D deficiency and the prognosis and mortality of breast cancer.

So if you or a loved one are on a breast-cancer journey, these findings reinforce the importance of the assessment of your blood vitamin-D levels and supplementations when your levels are deficient or I would say suboptimal.

Talk to your doctor about having your vitamin levels checked. It's just a small step that can make a big difference in your outcome.

Why the findings matter clinically

And I routinely do this not for just patients who have cancer or breast cancer, but for all my patients because vitamin D deficiency or suboptimal levels are so common.

In our book, Outside the Box Cancer Therapies, Dr. Anderson and I document that several population studies suggest that vitamin deficiency increase the risks of adults developing cancer.

In a study of 790 female breast cancer survivors, 75.6% had low blood vitamin D levels. A review of studies found that post-menopausal women with low levels of vitamin d had a higher risk of developing breast cancers compared to post menopause women, with high levels vitamin.

In women who have a history of breast, vitamin status has been strongly associated with better breast survival. Research suggests that a serum level or blood level of vitamin D, 25-hydroxyvitamin D should be at least 40 nanograms per mil.

Most labs will see the ranges between 30 to 100. And you need to have a level like this to reduce your risk of developing cancer. While this diet use 2000 units of Vitamin D which is equivalent to 50 micrograms, I have most patients take 5000 IU which equivalent 125 micro grams.

And so I just test the patient's blood levels, give them vitamin D supplementation and increase the levels if they're not at an optimal level above 40.

Testing, dosing, and maintaining optimal levels

We usually shoot for a mid-range. Now I always have patients supplement K2 with vitamin d when it's being used for long-term because K-2 directs the calcium to your bones away from your arteries and vitamin-D enhances the absorption of calcium into your bloodstream.

A lot of people do not get vitamin D readily because it's in foods a lot people don't eat regularly. Salmon, herring, sardines, cod liver oil, a little bit of butter and egg yolks, shiitake mushrooms left out in the sunlight.

But the amounts aren't very high in those foods. Also, you get Vitamin D, as I mentioned before, when your skin is exposed to sunlight, however, women with breast cancer receiving chemotherapy or other people who are in cancer treatments like chemotherapy, they often are on medications, chemotherapy agents, which make the skin sun sensitive.

So they're advised to stay out of the sun or to use sunscreen so they don't get that skin sensitivity reaction. And so again, they are going to be prone to vitamin D deficiency.

I'm not sure why so many oncologists, given all the research we've had on vitamin D in the last decade, aren't routinely testing patients and their vitamin d levels.

I have so many patients who come in for integrative support for cancer therapy and I'm the first one to check their Vitamin D levels and quite often we find they are deficient or low.

So something that should have been screened a long time ago. Well I hope you liked this video. Hit the like button, hit the subscribe button and i look forward to reaching out to other videos in