



October 23, 2010 – Grand Rapids, MI

## Men in Pink

Unless you're color blind, you know that this is National Breast Cancer Awareness month. With all the information available just about everywhere for women, I wanted to focus on breast cancer in men.

A male friend of mine developed and has been successfully treated for breast cancer. He recently sent me a picture of himself at his first Race for the Cure 5K. He wore a breast cancer survivor's pink hat and walked the entire race. I think it would be surprising to most people that men even get breast cancer. It only makes up about 1% of all cancers in men, but it happens. Because men use avoidance as the way to treat just about every other symptom, I thought it important to give the symptoms for breast cancer in men, which are just about the same as they are for women. This information is directly from the National Breast Cancer Awareness website (1).

It is important to see a doctor if any of the following changes to the breasts is noticed:

- A lump or swelling in the chest area
- Dimpled or puckered skin
- A nipple that is inverted (facing inward)
- Redness or scaling of the nipple or breast skin
- Discharge from the nipple

Most breast lumps in men are due to gynecomastia and not cancer. Gynecomastia, the most common male breast disorder, is an increase in the amount of a man's breast tissue. However, it's still important to see a medical professional about any of the symptoms, including a lump, to rule out male breast cancer.

Why would men get breast cancer? No one seems to know for sure, but in my opinion, I think it's related to the amount of fat men carry around their waist. The more belly fat, the more likely a man will produce more estrogen; more female hormones means an increased risk of breast cancer. If you still haven't gotten a copy of my *Health Tips for Men*, check it out—it explains all of the issues for belly fat in men, and there are several other health risks in addition to possibly increasing the risk of breast cancer. One customer recently told me I didn't pull any punches when I talked to men on the CD. True—I've been nice for a long time and men are still dying because they delay going to the doctor. If it takes getting in your face to get your attention, I'm fine with that. Get a copy today if you don't have one, or get copies for the men you care about; it's available in my Store as a CD or instant download.

## Habit Follow-up

I got many responses to the Habit messages, and I want to explain a little about why I focused on the first step when walking or taking the stairs. It's really elementary: you have to know what you're currently doing before you can set a goal for a new habit.

This is especially important when it comes to health. Let's say you want to try the 300-calorie-meal approach that I recommended in the 30 Pound Club message last Sunday. It would be important to know how many times per day you currently eat, how many calories are in those meals, and maybe even what proportion of protein to carbohydrates to fat are in those meals. That can give you information you need to determine how often and how much you should eat if you want to change your health and your weight. You can blindly go forward eating 300 calories every three hours, and maybe that will work for you. But if you take some time analyze what you're doing now, it may make it easier for you to succeed as you try to set a new eating habit. You may be able to identify

scenarios where you could run into problems eating every three hours or with the food selections available at any one time.

Spend time thinking before you write down your goals and start to take action. If you know what you're already doing, you might find acquiring a new habit is easier than it has been before.

What are you prepared to do today?™

***Dr. Chet***

Reference: <http://www.nbcam.org>

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