
We'Re All Born To Die

My genetic predisposition has three dominant cancers. Pancreatic (most painful), lung (most common), and breast. This is pretty ominous but I can provide a life that goes without these disparities longer by understanding which is most likely to affect me and how I can reduce that risk. I plan on examining each cancer for its individual risk to those without them in their gene pool and those with it, compared with my everyday risk factors and how I plan to improve those. My gene ancestry has death in one 1st degree relative and one 2nd degree by lung cancer. Second degree relatives have passed from breast, pancreatic, and heart disease. Next to none information about their lifestyles and what risk factors they contributed to their own diseases is in my scope of knowledge so I can only consider my risk factors. I left out heart disease as a possibility because, with four cases of death by cancer I find it's chances to be much less, without assuming that it cannot kill me. Taking into consideration that cancer cases are ten to fifteen percent hereditary, I've decided to add together rough percentages of my likeness to obtain these illnesses for a possible total (in this instance we'll start at fifteen percent, keeping in my mind my current lifestyle).

Pancreatic cancer affected my maternal grandfather, who led the best lifestyle he could through the knowledge provided through his era. He exercised daily and well into his old age (passed at age of ninety-two), he maintained a balanced diet inclusive of fruits and vegetables, but suffered from alcoholism, heavy drinking being one of the top contributors to pancreatic cancer according to cancer. net. Somatic mutations contribute to a one out of seventy six chance of development barely equaling one percent of average risk. As of right now in my life my chances of developing this cancer later are very low seeing as I fall under the category of "light" drinker with low exposure to chemicals on a daily basis, metal works (welding and such), and dry cleaning chemicals. One thing that does raise my risk is the fact that pancreatic cancer is ten percent gene related (cancer. org). Equaling a twenty-six percent chance of development increasing with age. Other factors of this disease include the fact that men are more susceptible and obesity, an uncommon disparity in my family. Sciencedirect. com provides a study finding that sixty-four percent to eighty-six point five percent of 278 of their breast cancer patients are negative for BRCA one & two and negative for ovarian cancer, have early onset cancer. While those with One and Two have a seven out of ten chance of development by age eighty (sciencedirect. com). Increasing with age, cdc. gov tells us that are likeliness of developing breast cancer is twelve percent in our lifetime, men with the BRCA2 gene have a 40% chance of development while women have a five to ten percent chance of development. Contributions to breast cancer include exposure to radiation (studies are looking for increased risk through mammogram screening because of the radiation used), dense breasts and hormone therapy. Reducing risk of breast cancer can be done by reducing exposure to radiation and hormone therapy, breastfeeding, and controlling the disease through preventative care is always possible by screenings and mammograms. My job is to get tested and see how my chances will be increased depending on my results.

Adding together my age risk (. 06%) with basic chance of development and our baseline of ten to fifteen percent I am at roughly a twenty eight percent chance of development without knowledge of hereditary mutations. Lung cancer, in my opinion, is the foremost possible cause of my death especially with it's chronic first & second hand exposure and genetic predisposition

in my life. Cancer. org relays that men have a one out fifteen chance of development and women have a one out seventeen chance. Other contributing factors include pollution, smoking, and radiation. Studies (like [ncbi. nlm. nih. gov/pmc/articles/PMC5351216/](https://pubmed.ncbi.nlm.nih.gov/PMC5351216/)) states that familial lung cancer significantly increases one's risk, first degree relatives contribute a fifty percent chance of development and eight percent of cases are contributed to genetics. Most studies seem to agree that you can smoke without developing this cancer and that you can go your entire life without smoking and still develop this illness. Additional factors to my risk include the use of cannabis which according to a (small) study (only 102 cases) done in New Zealand can raise my risk by eight percent every year and that I can multiply my risk by more than five with over ten years of continuous usage ([ncbi. nlm. nih. gov/pmc/articles/PMC2516340/](https://pubmed.ncbi.nlm.nih.gov/PMC2516340/)). This study correlates to one done in North Africa where a six to eight fold increase was found in cannabis users. Starting with my fifteen percent baseline and adding my fifty percent increase because, of genetics I have already surpassed the other two cancers and knowing that my use of cannabis will not halt I can raise those risks by eight at least. By the looks of it lung cancer is what will kill me.

One day no one now, will walk this Earth, one day we'll be apart of our distant ancestors in history and very few of our lives will be remembered. There will be no way that our choices today could have changed the fact that we will not be here in 150 years. I get the most sleep I can, I exercise to maintain a strong body, and my diet is plant oriented I am not free of self-deprecating habits but I can limit them. Every morning we turn on our car and release carcinogens and we dump free radicals on our cuts when we get hurt. We are all going to die, I'm going to choose how I do it and I'm going to be aware of it.