BlackEconomics.org®

"More Black Scientists?"

Sometimes we fail to take heed of knowledge that reaches us for a variety of reasons: (1) We are too self-assured in our righteousness; (2) we discount the value, knowledge, and wisdom of the one delivering the knowledge; (3) we view information (that can become knowledge) as already known and accounted for; and so on.

Where does this fit in the pantheon of questions, concerns, and issues that Black Americans have considered, and may consider, in our quest to become free indeed? What is the point? It is often very beneficial for an opponent to provide truth to an enemy in a fleeting manner and without much embellishment. Later, an opponent can operationalize that truth on the enemy with severely deleterious effects, but without further reference.

In this case, we go back just over a score years to 2002 to a report on a Women's Health Initiative investigation. It is entitled "Risks and Benefits of **Estrogen Plus Progestin** in Healthy Postmenopausal Women: Principal Results from the Women's Health Initiative Randomized Controlled Trial.[i]

While planned for 8.5 years, the investigative study was halted after just 5.2 years. *Inter alia*, the Estrogen plus Progestin treatment produced far more invasive breast and other forms of cancer than anticipated by the study's designers, so that they shut the study down. This was a significant revelation about the potential effects of elevated levels of "hormones" in the food that we consume—that "truth." Little was added concerning that "revelation." But it "made sense." We took it to heart; i.e., into our minds and lived with it without much further consideration. Our opposers used the point of revelation to detail some of the potential effects of our elevated consumption of hormones and made it clear which key hormone was at play: **Estrogen—not Testosterone.**

A score years later, what is Black America's reality? Although cancer rates among Black adults have come down from their high point at the end of the millennium, obesity among our adults and youth have surged.[ii] In fact, after making the revelation, our opposers clouded the picture during the most recent crisis in a score years in the nation and around the world (COVID-19) by emphasizing that this peculiar influenza virus was not so much the problem as was the related co-morbidities—a term about which we had heard little before. Which co-morbidity was most insidious? Obesity! What had we been informed earlier about the major indicator of higher levels of hormones (of the Estrogen kind)? Obesity! Are you, me, our people, our leaders, and our scientists awake? How could this "connection" be overlooked?

Also, our opposers used COVID-19 to inform us that fundamental cleanliness could help counteract contraction of the disease (wash our face and hands often).[iii] But by saying that co-morbidities served as a very important nail that silenced and sealed victims in a coffin, they revealed in plain sight what we should have intuited: Seek to slow and halt obesity by reducing our intake of not foods, but foods that channel high levels of estrogen/progestin. **We need more scientists!**

Now a brief detour to become more fully informed about hormones—especially estrogen.[iv]

- Foods to avoid when seeking to balance or reduce estrogen intake include: Dairy products, processed red meat, alcohol (especially beer), soy products, sugary foods and drinks, and refined/processed foods. Notably, certain other foods (seeds, cruciferous vegetables, and dried fruit) contain estrogen-like components, but those components can play a healthful role by reducing the buildup of estrogen in the body.

- Indicators of elevated levels of estrogen in the body differ depending on gender, weight, age, etc. However, for females, intensified menstrual cycles, unexplained weight gain, bloating, water retention, breast tenderness, persistent fatigue, insomnia, headaches, heightened anxiety, and mood swings can indicate elevated levels of estrogen. Males, on the other hand, may reflect increased breast tissue, erectile dysfunction, reduced libido (sex drive), and infertility.

- We visit physicians all the time for so many reasons. Hence, we should enquire: Why do standard laboratory ("blood work") tests seldom measure estrogen levels? Is this rational? **It is considered rational because:**

    - Standard lab tests typically target well-known or common and acute diseases that are highly ranked among causes of death and, according, most lab tests are not designed to capture subtle imbalances in the body, which is how measures of hormone levels are typically perceived.
    - Hormones can fluctuate dramatically, and a point-in-time test might produce an alarmingly high or exceptionally low-level reading, when a better approach would be to measure hormonal variation over time.
    - A random hormone level reading that is compared with a national population standard may at first appear alarming, but on a second look becomes irrelevant for individuals who are unique/different from the national population.

- If obesity is an important problem for the nation, then why do doctors not pay more attention to hormones as a key cause of obesity? Google's Gemini argues that hormones are generally not the root cause of obesity, which results most often from an "energy imbalance." That is, more calories are consumed than are expended. Also, in certain cases, hormonal production and related imbalances arise from, and is the not cause of, excessive weight gain.

- Another important question is: Why do few of our Black American social media health experts not focus heavily on the vagaries of hormones? We believe this outcome is consistent with points already made. Social media health experts seek to optimize their audiences (followerships). Hence, they are likely to focus on major health concerns that are well-known, easily identifiable, and come with ready solutions, not on hormonal issues that may appear subtly over time and may require an extended period of treatment to resolve.

- If we request that physicians order an "estrogen level" test as part of "lab work," then what should we expect to observe in the "lab report"? That is, what are the "titles," "names," or codes for the basic estrogen level test and what is the metric of measurement (see Endnote v for answers)?[v] For the average American male versus female, which are expected levels of estrogen in the body measured using the following tests: Estradiol (E2), Estrogen, Total (Fractionated), Estrone (E1), and Estriol (E3) tests (see Endnote vi for answers)?[vi]

- Problem bearers seek ready solutions. In this case general offerings for reducing or counteracting elevated estrogen levels in the body include: A high-fiber diet; limiting alcohol intake (especially beer); regular exercise; and avoiding environmental toxins.

This BlackEconomics.org Information Brief poses and answers several very important questions. Do we raise too many questions? No! Remember your parents' or grade schoolteachers' very important admonition: There are no "dumb questions, only inadequate incorrect answers?" Let us not entertain the silliness of our youth. Rather, let us seize the following reality with perfect clarity: "What we don't know can not only hurt us, but it can kill/destroy us."[vii]

How did we come to consider this topic? What does it tell us? How should we respond?

We came to consider this topic when one we thought was a close friend confessed that he was attempting to destroy us by incorporating estrogen into our food. A saying of a certain Black American Baba came immediately to mind: "It is essential that we not only keep our friends close, but that we keep our enemies closer." Nevertheless, it is a sad situation when a "close friend" also proves to be an arch enemy. Not to worry: What Satan, Iblis, Lucifer intends for evil can be transformed into a great good!" This Information Brief may prove to be a "great good."

What important lesson is on display in this brief? What we already knew and know! But this brief also informs us that we should seek a full awakening and not just recite—in sleep-walking-like or trance-like fashion—platitudes that serve as openings to, and reminders of, truth. We should form an alive mind—like scientists' minds—that considers and questions all aspects of life using the most important "trigger" for discovery: Asking "Why"? This is another BlackEconomics.org submission that proves without doubt that Black America requires more scientists.[viii]

How should we respond to this information infusion? As written and stated elsewhere, "some say that answers to certain questions are implicit in problem statements."[ix] We believe this is particularly true in this case. In fact, we are thankful to have highlighted these transparent realities that only a few have emphasized. If Black America desires to continue our long-awaited and

righteous rise, then we should redouble our efforts to become fully awakened and not aid our destruction and disappearance as a "People."

We cannot argue that Black America's lack of "money/financial/Reparations" resources prevents us from becoming awake. Booker T. Washington, Marcus Garvey, Elijah Muhammad, Malcolm X, and selected Black American economists over the years have laid the point bare: Do for self by first transforming our minds. Do not look outside for a handout or a hand. We live in a dog-eat-dog and pseudo capitalist environment. Actually, it is worse than that. We inhabit a world controlled by oligarchs and plutocrats, who use their power to control global developments. If Black Americans want to not only survive, but to thrive, and not contribute to our own demise, then we should look no further than to "the God in Us."[x] It is when we arrive at this realization, become the gods (children of the Most Hight God, Psalms 82:6 and St. John 10:34) that we are, then we will recognize truth wherever it is found, consider it from as many angles as possible, and then permit our informed, intelligent, and righteous minds to guide our responses.

It is when this initial, righteous, and harmonious process emerges among us and becomes the order of the day that we can be guided to a UNITY (an UMOJA) that we may never have experienced before in America. It remains up to us (Black Americans (Afrodescendants)) to see the challenge, to see our future, and to bring it into being.[xi]

B. Robinson
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End Notes

[i] Writing Group for the Women's Health Initiative Investigators (2002). "Risks and Benefits of **Estrogen Plus Progestin** in Healthy Postmenopausal Women: Principal Results from the Women's Health Initiative Randomized Controlled Trial. JAMA. Vol. 288; No. 3, p. 321-33. https://jamanetwork.com/journals/jama/fullarticle/195120#google_vignette. (Ret. 070826).

[ii] Office of Minority Health (2026). "Obesity and Black/African Americans." US Department of Health and Human Services. https://minorityhealth.hhs.gov/obesity-and-blackafrican-americans (Ret. 071126).

[iii] Magdaline Linke and Konrad Jankowski (2022). "Religiosity and the Spread of COVID-19: A Multinational Comparison. *Journal of Religious Studies*. Vol. 61, 1641–1656. https://doi.org/10.1007/s10943-022-01521-9 (Ret. 071126). We use a table from this article to reveal the difference in case and death outcomes per million population from October 2020 to May 2021 and show that predominantly Muslim countries experienced much better outcomes (per capita) than NonMuslim countries (see the table below).

Line No.	Predominantly (> 85%) Muslim vs. NonMuslim Countries	Cases per Million (CPM) Population			Deaths per Million (DPM) Population		
		(A) CPM Oct '20	(B) CPM May '21	(C) Difference [C = B - A]	(A) DPM Oct '20	(B) DPM May '21	(C) Difference [C = B - A]
1	Muslim Countries	2,789	18,409	15,620	2,789	402	(2,387)
2	NonMuslim Countries	8,013	34,827	26,814	8,013	681	(7,332)
3	Differences [3 = 2 - 1]	5,224	16,418	11,194	5,224	279	(4,945)

Sources: Linke and Jankowski (2022) and BlackEconomics.org calculations and visualization.

The table shows that for Covid-19 cases, Muslim countries experienced a much slower rise in cases per million population than NonMuslm countries from October 2020 until May 2021 once Covid-19 hit. However, although

both Muslim and NonMuslim countries witnessed significant declines in deaths per million population over the period, NonMuslim countries saw more dramatic declines in deaths. Summarizing, Muslim countries on average experienced an 11.2K reduction in cases per million population over the period, but nearly a 5K less reduction in deaths per million population. This larger reduction in deaths may be attributable, at least in part, to the fact that NonMuslim countries in the sample enjoyed a $15.5K higher GDP per capita on average as of October 20202 than Muslim Countries, and could, at least theoretically, direct considerably more financial resources to fighting Covid-19.

[iv] Much of the following information is derived from Google's LLM AI BOT Gemini. We cite Gemini where it provides a preponderance of information. We use Gemini as a reliable secondary source (and not primary sources) to accelerate our release of this important BlackEconomics.org Information Brief.

[v] The names; CPT (Common Procedure Terminology) codes; Lab-Specific Panel Codes; Quest Diagnostic numbers; and metric for measuring Estrogen levels are (from Google's LLM AI BOT Gemini (Ret. 071126)):

- Common Names: Estradiol, E2, or Estrogen.
- CPT Code: (82670) (for Estradiol) or (82672) (for Total Estrogens).
- Lab-Specific Panel Codes: *Labcorp:* Test number 004515 (Estradiol) or 004549 (Estrogens, Total).
- *Quest Diagnostics:* Test number 4021 (Estradiol) or 439 (Estrogens, Total).
- The standard metric for measuring Estrogen levels is: pg/mL (picograms per milliliter).

[vi] Average American adult male versus female (premenopausal and postmenopausal) expected levels of Estradiol (E2) or Estrogen in the body are as follows (from Google's LLM AI BOT, Gemini (Ret. 071126)):

Line No.	Adult Male vs. Female Americans	Picograms per milliliter (pg/mL)	
		Estradiol (E2)	Estrogen (Total Fractionated)
1	**Males**	10 - 40	60 - 190
2	**Females**		
3	Premenopausal	15 - 350	40 - 501
4	Postmenopausal	0 - 30	

Sources: Google LLM AI BOT Gemini and BlackEconomics.org visualization.

[vii] Derived from the very silly idea that "what one does not know cannot harm." As a child, we learn such pablum. If we do not comprehend the falseness of this saying, we may pass it on to our generation. This is how we "are destroyed for a lack of knowledge," which is an oft repeated biblical quote (Hosea, 4:6). It is linked directly to another essential oft repeated biblical quote: "ye shall know the truth, and the truth shall make you free" (St. John: 8:32). Why do few of our preacher/leaders not marry these two very important realities in their Sunday sermons?

[viii] BlackEconomics.org's first foray into this topic occurred in "More Physicists Fewer Fullbacks" aka "HBCUs Should Produce Quantum Physicists, Not Quarterbacks." https://nationalcenter.org/ncppr/2008/09/01/hbcus-should-produce-quantum-physicists-not-quarterbacks-by-b-b-robinson-ph-d/ (Ret. 070726).

[ix] This statement was made as part of BlackEconomics.org's commentary of CNN's "Black in America" special program in 2008. It is heard at the 1:10 mark of the following 2:33-long report. https://www.youtube.com/watch?v=RkOHVvqmd3o (Ret. 070726).

[x] Derived from Mary, Mary's most important hit "It's the God in Me." https://www.youtube.com/results?search_query=Mary+mary+Its+the+god+in+me (Ret. 070726).

[xi] The brief recording cited here is an essential reminder about "Me." It is from the October 16, 1995, *Million Man March* and reflects an essential aspect of Black American (Afrodescendant) Culture: "The call and response." https://blackeconomics.org/BEMedia/ME.mp3.