

WOMEN'S healthTODAY

Diet pills

ARE THEY RIGHT
FOR YOU?

MANGIA!

EASY, LIGHT
ITALIAN FARE

**Carrie
Ann Inaba**
on her love of dance

**Colonoscopy
counsel**

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TO KNOW

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Women's Health Today is published four times a year by The Christ Hospital, 2139 Auburn Avenue, Cincinnati, OH 45219, in conjunction with the Foundation for Female Health Awareness, PO Box 43028, Cincinnati, OH 45243. This is Volume 5, Issue 1. © 2008 by The Christ Hospital and the Foundation for Female Health Awareness. All rights reserved.

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Women's Health Today magazine is part of Women's Health Experience, the flagship program of the Foundation for Female Health Awareness. Women's Health Experience is a unique initiative aimed at connecting women with healthcare experts, as well as their local hospitals, to learn about important issues that may affect their health. Through Women's Health Experience regional conferences, *Women's Health Today* magazine and www.womenshealthexperience.com, you'll get objective, timely information. You can also sign up for free e-newsletters containing health news and results of medical studies. Sign up now at www.womenshealthexperience.com.

Don't ignore this important exam

Having a colonoscopy isn't the most pleasant medical experience you'll ever have, but it's surely one of the best things you can do for your health. Many people shy away from this exam because they want to avoid the preparation—laxative use and subsequent diarrhea—or simply because their physician didn't discuss with them the importance of getting a colonoscopy. While your lifetime risk of developing colon cancer is just about 6 percent (male or female), the risk is roughly doubled if you have a parent, sibling or child who's had the disease or polyps after age 50. The risk increases if the relative's cancer or polyps were diagnosed at a younger age, or if more members of your family have had either.

Now that I've alerted you to the need for screening, you have no excuse for not discussing your risk factors with your physician. And be sure to read "Countdown to colonoscopy" on page 20 to help prepare you for your exam, if you and your physician agree it's time you have one.

Also in this issue of *Women's Health Today*, you'll find articles on preventing heart disease ("Take it to heart," page 8), relieving monthly cramps ("Painful periods," page 16), some light Italian recipes ("Mamma mia!" page 14) and other timely and easy-to-understand health information.

I'm interested in your thoughts about our publication; please let me know what topics you'd like to read about in future issues of *Women's Health Today*. I look

forward to hearing from you!

Sincerely,



MICKEY M. KARRAM, MD
PRESIDENT AND CO-FOUNDER
FOUNDATION FOR FEMALE HEALTH AWARENESS



Dr. Karram and his wife, Mona, are the founders of the Foundation for Female Health Awareness, a nonprofit organization dedicated to improving women's health by supporting unbiased medical research and educating women about their health.

keys to healthy blood vessels

How three nutrients keep your blood moving

Because your heart and brain depend on steady blood flow, you need to keep your blood vessels in tip-top shape. Unhealthy, hardened or narrowed blood vessels slow blood flow, setting the stage for blood clots that can trigger a heart attack or stroke. Eating a healthy diet plays an important role in vascular health, and experts have identified three nutrients that can help keep your blood vessels free and clear.

FORTIFY WITH FOLATE.

Folate and the man-made version, folic acid, are B vitamins that help produce and maintain new body cells. Folate helps metabolize homocysteine, an amino acid found normally in the blood. Elevated homocysteine levels can damage coronary arteries and impair their ability to keep blood moving through them easily.

What you need: Most teens and adults should aim for 400 micrograms (mcg) of folate or folic acid a day; pregnant women should get 600 mcg daily.

How to get it: Folate is found in leafy green vegetables like spinach and turnip greens, citrus fruits and juices and dried beans and peas. In the United States, enriched foods like bread, cereal and other grain products are fortified with folic acid.

OPTIMIZE WITH OMEGA-3 FATTY ACIDS.

Two types of omega-3 fatty acids, eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA), are found in cold-water fish such as salmon. A third, alpha-linolenic acid (ALA), comes from tofu and other forms of soybeans, canola, walnuts, flaxseed and their oils. Omega-3 fatty acids help lower cholesterol and triglycerides and reduce blood pressure.

What you need: Aim for between 0.3 grams (g) and 0.5 g of DHA and EPA; and 0.8 g to 1.1 g of ALA daily.



How to get it: Eat a variety of fatty fish like salmon, mackerel and albacore tuna at least twice a week. Include tofu and soybeans, walnuts, flaxseed and their oils in your diet. If you already have coronary heart disease or need to lower your triglycerides, your healthcare provider may suggest you take fish-oil capsules.

ENSURE YOU GET ARGININE.

The body uses arginine, a semi-essential amino acid, to make nitric oxide, which helps the blood vessels relax, aiding proper blood flow.

What you need: Your body manufactures arginine, so most people get enough on their own.

How to get it: Foods that contain arginine include peanuts, almonds, walnuts, chocolate, raisins, brown rice and corn. **WHT**



Keep the blood flowing!

Vascular screenings for the neck, abdomen and leg arteries are available through The Christ Hospital Vascular Center for \$99. Call **(513) 936-5291** for more information.

Seniors'

QUICK QUIZ

Test your health savvy

SENIORS:

Take this quiz to test your knowledge and learn more about staying well. Check your answers below.

- 1** Research shows that people ages 65 and older who frequently eat broiled or baked fish and avoid fried fish are up to 30 percent less likely to suffer from:
- A. allergies
 - B. stroke
 - C. asthma
 - D. kidney disease

- 2** After age 65, both men and women are diagnosed with the following condition at the same rate:
- A. Alzheimer's disease
 - B. breast cancer
 - C. osteoporosis
 - D. colon cancer

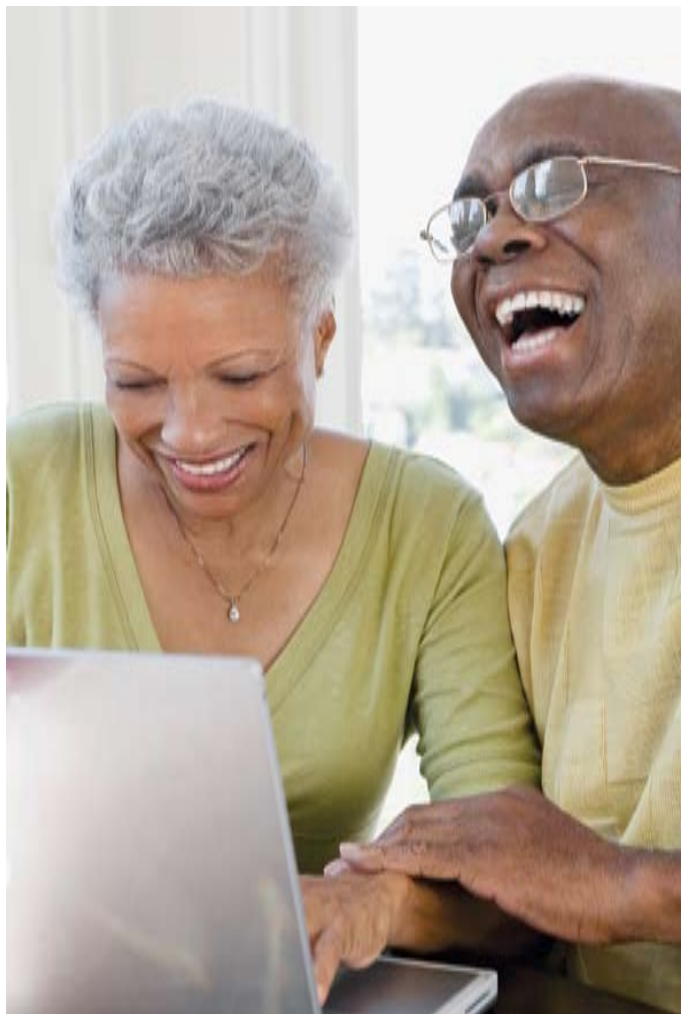
- 3** In addition to calcium, vitamin D and phosphorus, the following vitamin, found in animal-based foods like meat and dairy products, can help prevent osteoporosis:
- A. B₁₂
 - B. B₆
 - C. folate
 - D. magnesium

- 4** A new study shows that people between ages 55 and 85 who nap every afternoon for 30 to 120 minutes improve their:
- A. mental ability
 - B. heart rate
 - C. eyesight
 - D. weight

- 5** A reduced, distorted or lost sense of taste or smell can be a risk factor for:
- A. heart disease
 - B. stroke
 - C. diabetes
 - D. all of the above

- 6** Stiffness, redness or warmth in your joints may be a sign of:
- A. tendinitis
 - B. a torn ligament
 - C. arthritis
 - D. all of the above

ANSWERS: 1) B, 2) C, 3) A, 4) A, 5) D, 6) C



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- travel opportunities (day and overnight)
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Breast cancer: Your surgical options

What woman hasn't shuddered at the thought of discovering a lump in her breast? With about 182,000 women facing a breast-cancer diagnosis last year alone, that thought is not far from the mind and heart of every woman.

A diagnosis of breast cancer does not automatically mean the loss of your breast. The type and extent of the tumor has a significant effect on the number of treatment options available. Recent advances can mean less radical treatments for some breast cancers.

Surgical solutions

When breast cancer is diagnosed, how it's treated depends on the stage of the cancer, where in the breast it's located, whether it's confined to the breast or has spread, the size and type of tumor and the characteristics of the tumor's cells. Age and general health also are factors.

Radical mastectomy (removal of the breast, lymph nodes and underlying chest muscle) was once the standard treatment for all breast cancers. But today the choice of surgical treatments has greatly expanded and radical mastectomies are performed infrequently.

Instead, doctors commonly rely on two surgical options: the modified radical mastectomy, in which the breast and the lymph nodes are removed but the chest muscle is left intact, and the lumpectomy, in which the tumor and some breast tissue is removed, but the lymph nodes and chest muscle are left in place. With the modified radical mastectomy, breast reconstruction is



relatively easy and serious side effects are uncommon. Some patients are candidates for a sentinel lymph node biopsy, which removes only the lymph nodes most likely to contain cancer cells. If these nodes are cancer-free, further lymph node surgery can be avoided.

Breast conservation

For most women with early-stage breast cancers, breast conservation can be the best option. For this treatment to have a good chance

of success, the tumor must be a solitary lesion with no surrounding tissue involvement. Breast-sparing treatment includes a lumpectomy, removal of lymph nodes or sentinel node biopsy and radiation.

After surgery, chemotherapy and radiation can help prevent breast cancer recurrence. However, many healthcare providers recommend drug therapy even to women with early-stage breast cancer.

If you or a loved one is coping with a breast-cancer diagnosis, try to take a calm, measured approach to decision making. Remember that every treatment option has pros and cons. And only you, with the guidance of your healthcare provider, can decide which makes the most sense for you. **WHT**



Is it time for your yearly mammogram?

Women should have a mammogram every year starting at age 40. Call The Christ Hospital's Women's Imaging Center today at **(513) 585-2668** to schedule your exam.



Sandra Miller, MD, is a breast surgeon at The Christ Hospital.



health



+ Genes migraine with aura = CVD risk

Women who experience migraines with accompanying aura—the preheadache warning sign that can mean seeing spots or wavy lines or experiencing numbness or tingling—have a greater cardiovascular disease (CVD) risk than women who get migraines without aura. Now research has found that a particular type of gene carried by some women who experience migraine with aura may further boost their CVD risk. Using data on 25,000 Caucasian women participating in the Women’s Health Study, scientists at Harvard Medical School and Brigham and Women’s Hospital learned that by itself the gene doesn’t increase risk. But women who have the gene and also have migraines with aura are at more than three times the risk of developing CVD.



Broccoli may deflect diabetes damage

Diabetes is bad for the heart, but eating broccoli may ward off some of the damage. High blood glucose levels damage blood vessels, and during bouts of hyperglycemia the number of cell-damaging molecules rises threefold. New research from the University of Warwick suggests that

broccoli may repair some of the damage. The green stuff contains sulforaphane, a compound that encourages the body’s production of blood-vessel protecting enzymes. Sulforaphane also activates nrf2, a protein that protects cells and tissues against damage caused by oxidative stress.

headlines

Gel takes a bite out of mammogram pain

Many women put off having mammograms, claiming the breast-health screenings are uncomfortable or even painful. But Idaho tumor researchers say a simple solution may be at hand: an application of pain-relieving gel. Before their mammograms, more than 400 women ages 32 to 89 used placebos or premedication with acetaminophen, ibuprofen and/or a local anesthetic gel containing 4 percent lidocaine applied to the skin of the breasts and chest wall, and then

removed 30 to 65 minutes before their screening. Oral medicines didn't reduce breast discomfort, but women who used the topical gel said they experienced significantly less discomfort during their mammograms. Eighty-eight percent of the women said they'd definitely get another mammogram the following year, and 10 percent said they probably would.



Work out more to lose more

Dropping excess pounds is difficult enough; keeping them off can seem impossible. So what's the answer? Lots of exercise, say researchers publishing in *Archives of Internal Medicine*, who followed more than 200 overweight and obese women ages 21 to 45. All of the women were directed to eat 1,200 to 1,500 calories a day, then were assigned to one of four groups: burning 1,000 or 2,000 calories a week or getting

moderate or vigorous exercise. After six months, all of the women had dropped 8 percent to 10 percent of their body weight, but most couldn't sustain the loss. After two years, they weighed an average of just 5 percent less. Nearly one-quarter of participants, however, maintained a loss of 10 percent or more over two years. They exercised an average of 275 minutes a week more than those who lost less weight.



Take it to heart

6 ways you can prevent heart disease



If you could better your chances at winning the lottery, you'd do it, wouldn't you? But when it comes to bettering our chances of preventing heart disease, many of us waste golden opportunities. True, heart disease isn't always avoidable—you can't do anything about risk factors such as aging and heredity. But you can do something about six other factors:

1 QUIT SMOKING.

Plenty of aids are available to help you kick the habit, from nicotine patches and lozenges to inhalers and nicotine-free medicine. Talk with your healthcare provider about choosing the best one for you. If you don't smoke, try to avoid secondhand exposure.

2 GET ACTIVE.

Carve time out of your day to work out. Get in at least 30 minutes at once or broken up into three 10-minute sessions. Find an activity you enjoy so you're more likely to stick with it. Go for a brisk walk or take an exercise class at your local recreation center. (But get your healthcare provider's OK first if you've been inactive.)

3 LOWER HIGH BLOOD PRESSURE.

Eat a low-sodium diet, get regular activity, quit smoking and lose weight to bring down high blood pressure. If you're stressed, try relaxation techniques such as yoga, tai chi or meditation.

4 REVAMP THE WAY YOU EAT.

A diet rife with saturated and trans fats can increase cholesterol levels. A better bet is eating plenty of fruits, vegetables, whole grains, low-fat dairy and

lean meats. Oatmeal, walnuts and cold-water fish such as salmon are some foods that can actually help lower your cholesterol.

5 FIGHT OBESITY.

Get at least 60 minutes to 90 minutes of moderate-to-vigorous intensity activity, such as brisk walking or running, on most days to help you lose weight. Make sure you're not exceeding your daily caloric requirements and concentrate on eating plenty of fruits and vegetables.

6 CONTROL DIABETES.

Two in three people with diabetes die of heart disease and stroke. Keep your blood sugar, blood pressure and blood cholesterol within recommended ranges. Meet regularly with a registered dietitian or certified diabetes educator to learn how you can keep your heart healthy. **WHT**



Assess your heart disease risk!

Take The Christ Hospital HeartAware Risk Assessment, available at the Heart and Vascular Center, at **www.TheChristHospital.com**. This seven-minute assessment identifies whether you have the risk factors that can lead to heart disease. If you're at risk, you're eligible to receive a free follow-up visit with a cardiac clinician, who'll review your risk factors and work with you on setting goals to control them.



SEX & GENDER MATTERS

The latest findings on women-specific health from the Society for Women's Health Research

By Jennifer Wider, MD

Psoriasis sense

As many as 7.5 million Americans suffer from psoriasis—a chronic disease of the immune system that affects the skin. Psoriasis isn't contagious and can't be spread from person to person. Five known forms of the disease exist. "The most common form, plaque psoriasis, appears as raised, red patches or lesions covered with a silvery white buildup of dead skin cells called scale," says Bruce Bebo Jr., PhD, director of research at the National Psoriasis Foundation in Portland, Ore.

Psoriasis is just a nuisance for some people, but for others, it's debilitating. Symptoms vary from person to person and can include:

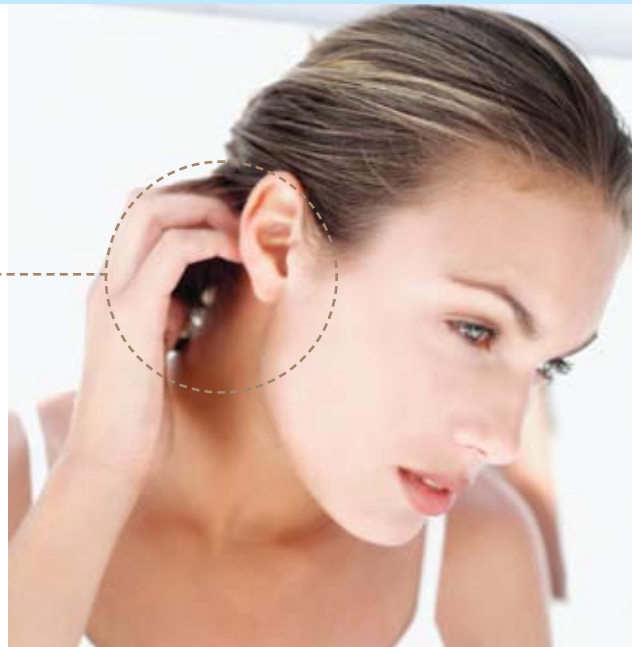
- red, itchy patches of skin covered with silver-colored scales
- dry, irritated or cracked skin that bleeds when scratched
- thickened or ridged fingernails or toenails; they can become brittle and may detach from the nail beds

Most cases of psoriasis come and go, with flare-ups that last for a few weeks or months. Some people go for months or years without a recurrence, but in most cases, psoriasis reappears.

Risk factors

Psoriasis is most common in Caucasians and somewhat less common in African-Americans and Asians, and occurs about equally in men and women. The greatest risk factor for the disease is family history. About 30 percent of people with psoriasis also have a close relative with the disease.

Smoking increases the risk of developing psoriasis and can make the disease more severe, especially in women, but the risk drops if you stop smoking.



Diagnosis and treatment

"No special blood tests or diagnostic tools exist to diagnose psoriasis. The physician or other healthcare provider usually examines the affected skin or, less frequently, views a biopsy of the skin under a microscope," says Dr. Bebo.

Therapies for psoriasis focus on reducing skin inflammation and plaque formation. Women with psoriasis who are pregnant, may become pregnant or are breastfeeding should discuss their treatment options with their physicians, as some may cause birth defects. Fortunately, research has shown that pregnancy hormonal changes may lead to improvements in psoriasis symptoms in some women, giving temporary relief. **WHT**

Learn more!

The Society for Women's Health Research is a nonprofit research, education and advocacy organization that works to improve women's health through sex-specific research, education and advocacy. For more of the latest news and research on women's health, visit their Web site at www.womenshealthresearch.org.

Jennifer Wider, MD, is a medical advisor for the Society for Women's Health Research in Washington, D.C.



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dancing through life

Carrie Ann Inaba
talks about her
passion for
movement

The joy of movement has been part of Carrie Ann Inaba's life ever since she was 3 years old. Each morning, she'd pick a mango or papaya from her family's backyard in Hawaii for breakfast, then dance by the Pacific in an open-air pavilion.

Raised with nature

The 40-year-old Honolulu-born dancer—best known to TV audiences as one of the three judges on the hit ABC show “Dancing With The Stars”—credits her childhood with her general well-being and inner peace. “Part of me is a very earthy child,” says Inaba. “I’m Japanese, Irish and Chinese by heritage, but I’m really Polynesian at heart. I incorporate nature into my life to help keep me grounded and balanced.”

Inaba continues to take advantage of the Pacific—she and dancer boyfriend Artem Chigvintsev share a home in a Los Angeles beachside community described by Inaba as “traditional, but also very modern and Zen-like; it’s just like me. I go down to the ocean at least

continued on page 12

once a week, but I wish I could go every day. There's something about sitting next to this massive body of water that really puts things into perspective for me."

Along with her innate respect for nature, Inaba's beliefs are a mix of her Christian upbringing in Hawaii and her interest in Buddhism and Shintoism. "I believe in the life of inanimate objects, and I respect everything equally," she says.

Dance as more than a career

Inaba became well known both as a hip-hop Fly Girl on "In Living Color" and as a top pop singer in Japan at age 18. But dancing has since become both her career and calling. "I studied various forms of hula," says Inaba about the dance that has proven to be her biggest challenge.

"There's the modern-day dance and the traditional dances that tell the stories of Hawaiian heritage.

Interpreting those is very difficult. You have to walk very, very low to the ground

and build up strength in your calf muscles. Hula dancers need to be completely in sync with each other, unlike ballroom dancing where there are only two people out there on the dance floor," she says. "In Hawaiian dancing, you have to match lines perfectly as you tell the stories of the ancients. Many times, we performed out on the beach in the rain. I was very connected to those dances."

While her personal dance form has evolved over the decades, Inaba continues to enjoy the movement. "I still take dance classes; right now, it's jazz. Or I work out with my boyfriend and go into the studio and just move freely to the music. I just love to dance. It's always been a moving meditation and form of self-expression for me. I never really looked at it as exercise. I have a heightened sense of being alive when I dance," says Inaba. "It's about letting my emotions go, letting all the stress go and being completely in the present. I think that goes back to my first experience of creative movement when I was 3 in Hawaii. I still judge dancers in that way—a good dancer is somebody who's having fun and is comfortable in their own skin."

Inaba and fellow "DWTS" judges ►
Len Goodman (left) and
Bruno Tonioli (right).

The healthy Hawaiian way

At 5 feet 6 inches and 125 pounds, Inaba still starts her day the Hawaiian way with fresh fruit and orange juice. "Being born and raised outside Honolulu, I love any type of fruit for breakfast. I often open a fresh coconut in the morning—it's really fun. Your kitchen gets filled with the shell chips, but the milk is so fresh," she says. Lunch for Inaba can take the form of a healthy chicken curry salad or Cobb salad. "I love fresh greens and vegetables. When I was young, I was allergic to milk, so I grew up not eating anything creamy, including dressings. I'm lucky because those foods don't appeal to me now in the least," says Inaba. "I prefer foods that are light and fresh, without the creamy sauces."

Maintaining her energy and fit form means this

dancer and choreographer also exercises regularly.

Tae Bo, yoga and some treadmill time rounds out Inaba's workout routines.

"Bikram yoga is very challenging," she says. "I feel as

if I've climbed a mountain when I'm done."

Growing up in a world where physical appearance is all-important, Inaba knows the pressure dancers feel to be skinny. "I was always trying to be thin and physically fit, but I soon realized that you can't sustain yourself with quick weight losses. People who have that glow, that light coming from their eyes, color in their skin and vibrant energy are attractive and healthy to me," she says. "That's how I judge a healthy person." **WHT**



Keeping your cool

Keys to anger management



Are you the angry type who constantly erupts like a volcano, or do you keep rage bottled up inside? Neither is the best way to cope with conflict, and both may, in the long run, affect your health.

Of course, losing your cool once in a while isn't harmful, but walking around all the time in a snit may eventually take a physical and emotional toll. That's because chronic stress raises blood pressure and heart rate and constricts blood vessels, all of which contribute to heart disease. People who anger easily also are more likely to have a heart attack.

But learning how to control one's temper doesn't mean being the strong, silent type. On the other hand, becoming comfortable in expressing your dismay is not an invitation to "tell off" the world. The key: finding a middle ground that allows you to get a grip on anger before it takes control of your health.

Next time you're about to fly off the handle, these tips can help you get control:

- **Run for cover.** Find a peaceful place to calm down, then talk to someone you trust and respect. That

person may be able to give you an objective point of view and help identify better ways to express your anger to the person who's incurred your wrath.

- **Have a face-to-face.** When you're calm, have a talk with the person who made you mad. This is a must if that person is your spouse, child or boss or some other individual very important to your overall happiness. Try to avoid attacking; share your feelings and work toward a peaceful resolution.

- **Scratch the surface.** What's underlying your negative responses? It may help to keep a journal to try and uncover these patterns. A therapist also can help guide you in this journey of self-discovery.

- **Look for an outlet.** Exercise, take up a hobby or donate your time to a cause you believe in. You might also consider getting a pet (bearing in mind that animals require effort and also a calm, humane, loving environment).

- **Forget about it.** Often, it's not worth making a stink or holding a grudge over something. Once you're aware of your anger, ask yourself how important it is in the grand scheme of things. If it ranks low, let it go. **WHT**

Mamma mia!

Italian meals go light and healthy

If you want a heart-healthy diet, eat Italian! Sicilian dishes in particular feature fish, legumes, fruits, vegetables, pasta and little meat—plus healthy fats like olive oil. Try these low-fat recipes from the National Institutes of Health.

VEGETARIAN PASTA

SERVES 6

- 2 tablespoons olive oil
- 2 small onions, chopped
- 3 cloves garlic, chopped
- 1¼ cups zucchini, sliced
- 1 tablespoon oregano, dried
- 1 tablespoon basil, dried
- 1 can (8 oz.) tomato sauce
- 1 can (6 oz.) no-salt-added tomato paste
- 2 medium tomatoes, chopped
- 1 cup water

In medium skillet, heat oil. Sauté onions, garlic and zucchini in oil for 5 minutes on medium heat. Add remaining ingredients and simmer, covered, for 45 minutes. Serve over spaghetti.

Per ¾-cup serving: 102 calories, 5 g total fat (1 g saturated), 0 mg cholesterol, 260 mg sodium, 5 g fiber, 3 g protein, 14 g carbohydrates



MINESTRONE SOUP

SERVES 16

- ¼ cup olive oil
- 1 clove garlic, minced (or ⅛ teaspoon powder)
- 1⅓ cups onion, coarsely chopped
- 1½ cups celery with leaves, coarsely chopped
- 1 can (6 oz.) tomato paste
- 1 tablespoon fresh parsley, chopped
- 1 cup carrots, sliced, fresh or frozen
- 4¾ cups cabbage, shredded
- 1 can (1 lb.) tomatoes, cut up
- 1 cup canned red kidney beans, drained and rinsed
- 1½ cups frozen peas
- 1½ cups fresh green beans
- dash hot sauce
- 11 cups water
- 2 cups pasta, uncooked

Heat oil in 4-quart saucepan. Add garlic, onion and celery and sauté for about 5 minutes. Add all remaining ingredients except pasta. Stir until ingredients are well mixed. Bring to a boil and reduce heat, cover and simmer for about 45 minutes or until vegetables are tender. Add uncooked pasta and simmer for 2 to 3 minutes.

Per 1-cup serving: 112 calories, 4 g total fat (0 g saturated), 0 mg cholesterol, 202 mg sodium, 4 g fiber, 4 g protein, 17 g carbohydrates, 393 mg potassium





S P I C E I T U P !

Try these tips to make your favorite Italian dishes a bit healthier:

- **Replace** some of the salt in your recipes with basil, oregano, garlic, parsley and other flavorful seasonings.
- **Think fresh.** Choose fresh, not canned or processed chicken, fish and meat.
- **Make smart substitutions.** Instead of whole milk or cream, cook with lowfat milk, and use vegetable oil instead of butter.
- **Rinse** tuna and other canned foods before cooking to get rid of some of the sodium.
- **Remove the skin** from chicken and any visible fat from other meats before cooking.
- **Skip the salt** when boiling water for pasta.
- **Cook with leaner** beef and pork cuts that end in “loin,” such as tenderloin, sirloin or pork loin.

PAINFUL periods

Don't let them cramp your style

With the dawn of each new period come the cramps—those dull, sometimes throbbing pains that plague your lower abdomen. Most women experience menstrual pain, or dysmenorrhea, at some point in their lives. For some, it's little more than a nuisance. For others, it can be painful enough to interfere with their daily routines, causing missed work or school.

The chemistry of cramps

Researchers aren't completely sure what causes painful periods, but most believe that hormone-like substances called prostaglandins are the culprit. Prostaglandins, produced by cells in the lining of the uterus and in many other parts of the body, stimulate the uterus to contract. Prostaglandin production peaks just before menstruation, making the uterus contract more strongly than at any other time of the cycle. These contractions may be so mild that they aren't even noticed, or they may be so intense that the blood supply to the uterus is temporarily cut off. The result? Pain. Many experts believe that women who suffer from dysmenorrhea produce excessive amounts of prostaglandins, although no one knows why.

Lessen the pain

Painful periods usually aren't serious, and the intensity tends to decrease as you get older—often disappearing after pregnancy. If you suffer from dysmenorrhea, try these self-help measures to take the edge off:

- Take a pain reliever such as aspirin, acetaminophen

(like Tylenol) or ibuprofen (such as Motrin).

- Place a heating pad or hot water bottle on your lower back or abdomen. Massage these areas using your fingertips, moving with a light, circular motion.
- Opt for a diet rich in complex carbohydrates, such as whole grains, fruits and vegetables, and low in salt and sugar. Skip the cigarettes, alcohol and caffeine.
- Eat smaller, more frequent meals.
- Take a warm shower or bath, or drink warm beverages.
- Exercise or walk regularly to release endorphins, your body's built-in painkillers.
- Get enough rest so your body will be less susceptible to pain.
- Relax your muscles with alternative pain relievers such as meditation or yoga. Some women also find acupuncture helps relieve their pain.
- Keep your legs elevated when



Relief is a phone call away

Is it time to seek professional guidance about those nagging cramps? Find a Christ Hospital gynecologist near you by calling our Physician Referral Line at **(513) 585-1000** or go to **www.TheChristHospital.com** and click on "Find a Physician."

For some women, cramps are little more than a nuisance. But for others, cramps can be painful enough to interfere with daily routines. ”

lying down. Or lie on your side with your knees bent.

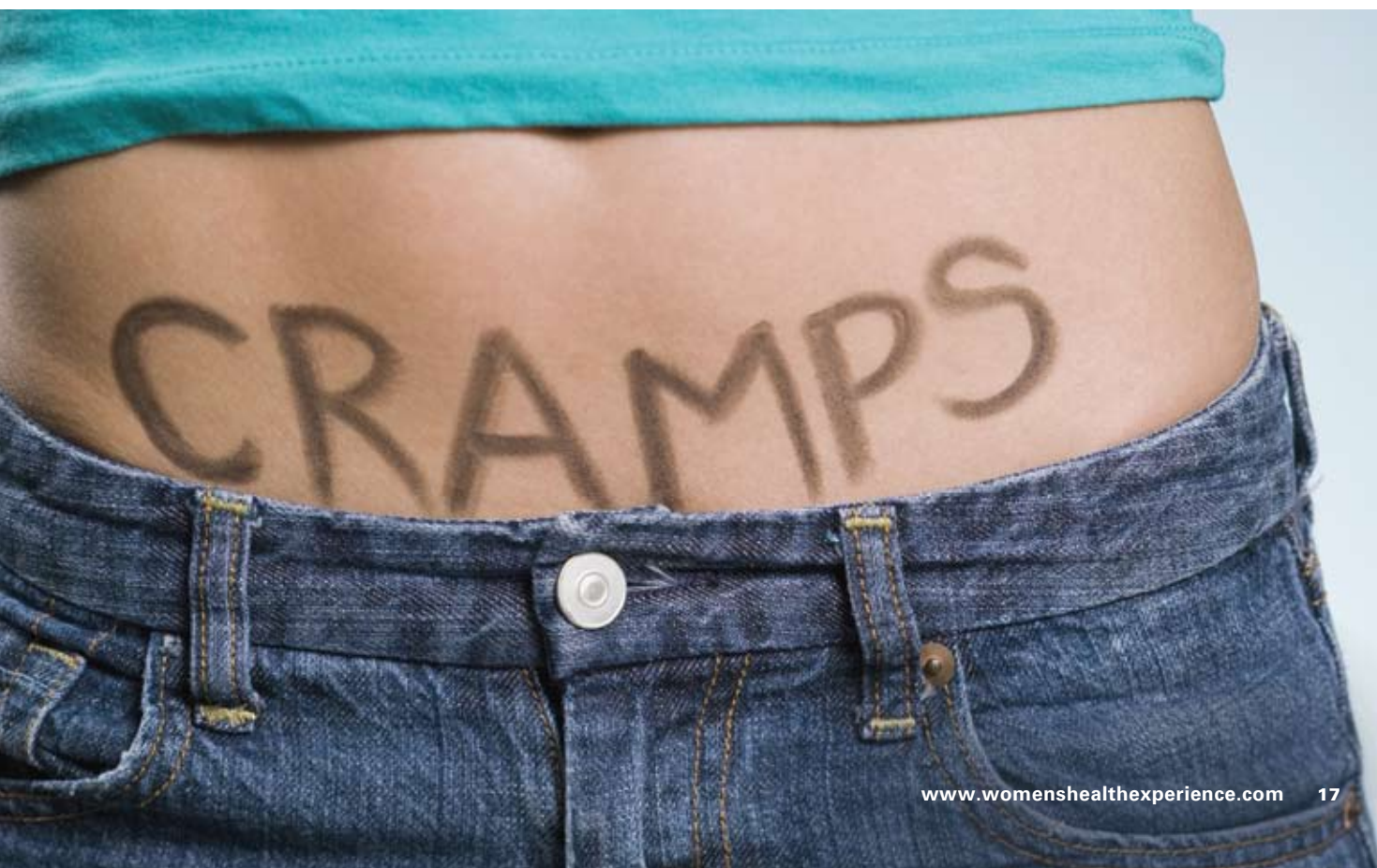
If you find these measures don't help your pain, talk with your healthcare provider. He or she may recommend low-dose hormones, which prevent ovulation and may reduce the production of prostaglandins. Anti-inflammatory medications, antidepressants, antibiotics or stronger pain relievers may also help. **WHT**

When cramps are more than just a pain

Occasionally, painful periods signal a more serious problem, such as pelvic inflammatory disease, endometriosis, fibroids or ovarian cysts. Fortunately, all of these conditions can be identified if you know the symptoms. Here's what to look for:

- fever
- vomiting
- foul-smelling discharge
- painful intercourse
- pain that's sharp and severe rather than a dull ache
- pain that starts five days or more before your period and continues beyond the end
- pain that's centered on either side of the pelvis instead of above your pubic bone
- pain that doesn't respond to antiprostaglandin drugs or oral contraceptives

If you experience any of these symptoms, schedule an appointment with your physician.



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Miracle diet pills?

Fat chance!

When it comes to weight loss, there's no such thing as a magic pill—though some diet aids imply just that with vows of miraculous weight loss. Nonprescription diet pills aren't subjected to the same standards as prescription drugs and other over-the-counter (OTC) medicines, so claims of dramatic weight loss are usually just empty promises. Many OTC diet pills also contain a mix of ingredients in varying amounts, so you run the risk of taking something that causes an allergic reaction or interaction with a prescription medication.

No doubt, diet pills and their promises can be tempting. But before you give in, read on about these heavily advertised products. Bear in mind that many haven't been proven safe or effective, and it's unknown how they affect your long-term health. Before taking any supplement, talk with your healthcare provider.

■ **ALLI** is a reduced-strength, OTC version of the prescription obesity drug orlistat (brand name Xenical). FDA-approved, it promotes weight loss by decreasing fat absorption in the intestines. Alli is meant to be used in conjunction with a low-fat, reduced-calorie diet along with regular exercise. Resulting weight loss is modest—just a few more pounds a year than you'd lose with diet and exercise alone. Undesirable side effects include gas and oily anal discharge.

■ **HOODIA** is an ingredient derived from a cactus, and makers of these supplements claim it reduces your hunger—like it supposedly did for African natives who ate it during long hunts. Unfortunately, there's no evidence it can suppress hunger or result in weight loss.

■ **EPHEDRA** boosts metabolism. The FDA banned weight-loss products containing ephedra after reports of insomnia, high blood pressure, heart attacks and

death—though you can still find products containing the ingredient on the Internet. The supplement country mallow (heartleaf) contains ephedra and should also be avoided.

■ **BITTER ORANGE (CITRUS AURANTIUM)**

is found in many products labeled “ephedra-free” and is a natural source of the ephedra-like ingredient synephrine. Bitter orange can cause many of the same problems ephedra does, including heart arrhythmias and high blood pressure. If you have a history of heart problems, avoid bitter orange. The weight-loss drug Lipovarin contains synephrine.

■ **GREEN TEA EXTRACT**

claims to increase your metabolism and decrease your appetite. However, there's limited evidence to support these claims. This extract may also contain large amounts of caffeine and cause gastrointestinal upset. **WHT**



A lot to lose?

If you have a substantial amount of weight to lose and are considering surgical weight-loss options, register for a free information session with one of The Christ Hospital's bariatric surgeons. Visit www.TheChristHospital.com for dates and times.





Scared about having a colonoscopy, the test that examines the colon and rectum for signs of cancer? You're not alone. Many people fear pain or complications from the procedure.

They shouldn't, says March Seabrook, MD, a board-certified gastroenterologist in Columbia, S.C., and Fellow of the American College of Gastroenterology. Mild discomfort is usually the most people feel during the procedure. And as for complications? "The most dangerous thing about a colonoscopy is driving there," he says.

Colonoscopy can be an invaluable screening tool for colon cancer—the second leading cause of cancer deaths among men and women in the United States. "We don't know how to prevent cancers such as breast cancer, but we know how to prevent colon cancer: a colonoscopy," says Dr. Seabrook.

Guidelines recommend you begin screening at age 50 if you have an average risk of colon cancer, or earlier if you have risk factors such as being African-American, having a family history of colon cancer or certain medical conditions (for example, inflammatory bowel disease), or engaging in unhealthy lifestyle habits (such as smoking).

Still uncertain? Read on to learn what goes into a colonoscopy and soothe any fears.

Schedule your exam

Plan your colonoscopy for a time when you'll have at least a day free from work or other commitments. You'll need the night or afternoon before to prepare and the day of for the exam and rest afterward. Be sure to let the medical staff know if you have a condition like heart disease or diabetes that may need special attention, and inform them of any medications you're taking. You'll also need to obtain your bowel preparation kit—laxatives and preparation instructions—from your pharmacy.

Prep day

As inconvenient or uncomfortable as it may be, following your preparation ensures a completely empty

COUNTDOWN TO **colonoscopy**

What to expect from
this lifesaving test

bowel and clearer images. “It’s a small price to pay for cancer prevention,” says Brooks Cash, MD, a board-certified gastroenterologist and chief of the Gastroenterology and Colon Health Initiative at the National Naval Medical Center in Bethesda, Md. Remember to:

- **Follow the clear liquid diet as instructed.** Choose fat-free bouillon or broth, water, gelatin (avoid red or orange flavors), black coffee or plain tea.
- **Take your laxatives on time.** If you’re scheduled for an early morning exam, you may first have to take one or more tablets that have a stool softener and laxative effect about midday on prep day, depending on what your provider orders. You’ll then take a liquid laxative—in a three-ounce bottle or a gallon-size jug—around dinnertime. The taste will be your biggest obstacle; try refrigerating the laxative for 30 minutes before drinking.
- **Drink your entire laxative quickly.** Drinking through a straw may help. With the gallon-size prep, try to drink a glass every 10 minutes or so until it’s finished. If you feel nauseated or bloated, take a short break or slow down the rate. Have water handy to wash the taste away.
- **Stay near the bathroom.** Most preparations begin to work within 30 to 60 minutes and may have lasting effects for up to three hours or more.
- **Fast as directed.** Don’t eat or drink anything for four to six hours before your exam.

Exam day

With an experienced gastroenterologist, the actual procedure usually only takes 10 to 20 minutes, says Dr. Seabrook. You’ll be given intravenous fluids and medicine to help you relax. Most patients fall asleep and remember nothing about the exam itself. During the exam:

- A gastroenterologist or surgeon inserts a colonoscope

(a long flexible tube) into your rectum and guides it into the colon. A tiny video camera at the tip helps look for polyps (a mass of tissue).

- Your physician may pump air into your colon to inflate it slightly for a better view. If you’re awake, you may feel cramping. Take slow, deep breaths to relieve the pressure.
- If one or more suspicious polyps are spotted, they’ll be removed and biopsied. These procedures usually don’t cause pain or discomfort. There’s a low risk of bleeding when larger polyps are removed, says Dr. Seabrook.

Safe aftercare

Most people remain on bed rest at the facility for only 30 to 60 minutes, or until the relaxing medication wears off, after which:

- You may still feel woozy, which wears off with time.
- You may have cramping, which is eased by passing gas or walking.
- You should be driven home and not attempt driving for the remainder of the day.
- You should call your healthcare provider if you experience persistent abdominal pain, continue to pass blood or blood clots or have a fever of 100° F or higher.

Expect test results within a few days to a week after the procedure. **WHT**



Call today to schedule your exam !

To schedule your colonoscopy at The Christ Hospital, talk to your gastroenterologist or contact our endoscopy department at **(513) 585-1483**.

ASK THE EXPERT

Featuring March Seabrook, MD

Q: What is a virtual colonoscopy?

A: While colonoscopy is the gold standard for detecting colorectal cancer, virtual colonoscopies may be a good alternative for people who have an average risk of colorectal cancer, according to a recent study published in *The New England Journal of Medicine*.

A virtual colonoscopy involves a CT scan (with some radiation) combined with computer software to take images of the colon. No scope is inserted and there’s no sedation. However, there are some caveats:

- You still need to follow the prep of a traditional colonoscopy.
- Virtual colonoscopy also involves pumping air into the colon for a better view.
- The possibility exists for false-positives.
- If a polyp is found, a traditional colonoscopy will need to be performed to remove it.
- Just like colonoscopy, it’s not a perfect test. It may still miss smaller polyps or flat growths.

STRIKE A POSE

Get fit, flexible and stress-free with yoga

When you picture a yoga class, do youthful-looking, limber people performing headstands or pretzel-like poses come to mind? Then you may be surprised to learn that you don't have to tie yourself in a knot to reap the benefits of yoga. In fact, many older adults are getting in on this hot exercise trend. One reason yoga has become so popular is that it's adaptable for people of all ages, shapes and fitness levels, including the overweight and the inflexible.

Yoga lets you work at your own pace, but you don't have to wait long to see results. Even beginners can start becoming more flexible. Focusing on breathing while doing yoga poses helps improve blood flow, extend joints' range of motion, ease tight muscles and improve balance and coordination, making it less likely that you'll injure yourself during everyday activities. An added bonus: Yoga's slow stretches combined with deep breathing exercises may help relieve stress.

Starting out

You can do yoga at home, with guidance from yoga books, magazines and DVDs or videotapes, but signing up for a class may be your best bet—especially if you're a

beginner. Instructors can teach you how to hold and move your body correctly while using soft yoga blocks, blankets and other props to support your body and make poses more comfortable. They can also offer reassurance that keeps you motivated and coming to class.

Senior centers, adult schools, health clubs and, of course, yoga schools offer classes for people at all levels. But not all yoga classes are alike, so ask before you sign up. For example, Ashtanga yoga involves vigorous athletic movements, while Iyengar yoga emphasizes more mental focus while using props like chairs and blocks to help you align your body properly. Gentle yoga and Hatha yoga classes are great choices for beginners. If you're athletic, you may easily progress from a gentler class to one that's more demanding. But if one class doesn't interest you, try another, since instructors vary in their approach. If you have physical limits, try a chair yoga class. You'll still be able to improve your flexibility, mobility and balance by performing poses in a chair.

Safety first

Although yoga is generally safe for healthy adults, talk with your doctor before beginning, especially if you



» KING DANCER

This standing pose strengthens legs and ankles; stretches the chest, shoulders, abdomen, thighs and groin; and improves overall balance.



» BOUND ANGLE

This sitting pose stretches the inner thighs, knees and groin; opens the hips and chest while lengthening the spine; and helps soothe menstrual discomfort.



Learning to relax with yoga

Don't put away your hypertension medicine just yet, but Hatha yoga may help reduce your blood pressure, some studies suggest. At the very least, it can help you learn how to relax and better manage the stress that can affect your blood pressure.

It makes sense: Hatha yoga emphasizes relaxing into postures, along with slow, deep breathing. Other studies show that yoga may also counteract insulin resistance, promote weight loss, lower your heart rate and lower stress hormones—all heart-healthy benefits. Read on to learn more about the most popular types of yoga:

- **Hatha yoga**, which focuses on specific postures, called asanas, as well as breath control and concentration, comes in a variety of different styles. Choose the style that best suits you. But before starting any yoga program, talk with your healthcare provider first.
- **Iyengar** is a gentle form of Hatha yoga that's great for people who've been inactive for a while. You can use chairs, pillows, straps and blocks for support.
- **Kripalu** yoga focuses on intertwining poses with the breath. It's gentle and spontaneous, and the poses are held for only a short time.
- **Ashtanga**, also known as power yoga, will give you a good cardio workout. It focuses on helping you develop strength and endurance and less on helping you meditate.

have or have had joint problems, neck or lower back pain, high blood pressure, a risk of blood clots, osteoporosis, psychotic disorders or eye disorders such as glaucoma. **WHT**

» UPWARD-FACING DOG

This back-bending pose stretches the chest, shoulders and abdomen; firms the buttocks; and strengthens the spine, arms and wrists.



» DOWNWARD-FACING DOG

Popularly known as down dog, this inversion pose strengthens the hands and wrists and stretches the hamstrings, calves and Achilles tendons.



How SHARP is your vision knowledge?

Many of us take our eyesight for granted. But how much do you know about the gift of sight? Test your knowledge by answering true or false to the statements below. Then check the answers to see how you did.

TRUE OR FALSE?

- {1}** Surgery is the only way to get rid of a cataract.
- {2}** Using a computer can damage your eyes.
- {3}** If you are farsighted, you have trouble seeing things close up.
- {4}** Dry eyes are a possible complication of LASIK surgery.
- {5}** Macular degeneration destroys your peripheral (side) vision.

ANSWERS

{1} TRUE. When you have a cataract, your eye's lens is clouded, making it difficult for light to pass through and blurring your vision. While not every cataract requires surgery, if a cataract makes it difficult for you to perform daily activities, you may need surgery. During a cataract procedure, your eye doctor removes the damaged lens and replaces it with a clear, artificial lens. Cataract surgery is typically very successful and improves vision in most people.

{2} FALSE. Looking at a computer screen for long periods can cause you to blink less often, leading to a feeling of eyestrain or fatigue, but causing no harm to your eyes. When working at your computer, make sure to take breaks by shifting your focus every now and then to objects farther away. Position the monitor 18 inches to 24 inches away from your face, pointing slightly downward, and adjust the screen brightness so it's neither too bright nor too dark for you to comfortably see.

{3} TRUE. Farsightedness occurs if your eye is too short or the cornea isn't curved enough, which means light entering your eye isn't focused correctly. If you're nearsighted, you have trouble seeing things in the distance. Eyeglasses or contacts can correct these problems by changing the way light enters your eye.

{4} TRUE. Healing eyes may feel unusually dry for the first six months or so. If you have severe dry eye, you may need a second procedure that helps keep your tears from draining from the eyes' surface.

{5} FALSE. Macular degeneration damages your sharp, central vision. There are treatments that can slow vision loss, but nothing can restore it. The disease is a leading cause of vision loss in Americans ages 60 and older.

Test your health knowledge online

Take more health quizzes and assessments online at www.womenshealthexperience.com.

Plus, find out what other women are saying by participating in our online polls!

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Thank you, Dr. Jennings.

Thank you, Dr. Tobler.

Thank you, Dr. Rafferty.

Thank you, Nurse Fisher.

Thank you, Technologist Stortz.

Thank you for caring.



When we say we're *Caring Above All* what does that mean? It means more than fancy buildings. More than advanced equipment. It even means more than the award-winning, nationally ranked medicine we practice every day. *Caring Above All* means we put caring — for our patients, their families — above all else. Care that makes us different. Makes us special. And makes The Christ Hospital the choice for healthcare in Cincinnati.

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