



ARTICLES – 2006

Health Facts With Dr. Max

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SOME GOOD NEWS

A recent American Cancer Society report shows that progress in the early detection and treatment of breast cancer is paying lifesaving dividends, with continuing decreases in mortality rates. In fact, the report indicates that death rates from breast cancer have declined by 2.3% a year since 1990. The increase is most pronounced among younger women. While the incidence in breast cancer increased by 0.3% a year from 1987 to 2002, that increase was limited to women 50 and older. Among women 40-49, the number of cases declined during that period.

ARTICLES - JANUARY

Studies indicate that the early diagnosis of breast cancer can increase a woman's chances of surviving the disease. All women should perform monthly breast self-examinations and have annual physical exams that include a breast exam. Depending on your age and family history, a mammogram may also be advisable.

Bridging the gap between body and mind, The Counseling & Gynecology Group offers a unique approach to women's healthcare. We provide complete gynecological care for all ages combined with stress management and treatment of depression and anxiety. Call us at 413-525-4546 to schedule an appointment. We are located at 281 Maple St. East Longmeadow.

MENTAL HEALTH AFFECTS MARITAL SATISFACTION

A married couple's satisfaction with marriage is affected by the mental health of both spouses. So says a study of nearly 775 couples in seven U.S. states. Researchers found that each person's level of anxiety and depression predicted his or her own marital satisfaction as well as that of the spouse's. The more anxious or depressed either spouse was, the more dissatisfied he or she was with the marriage. Depression was found to have more influence than anxiety on how satisfied both husbands and wives felt about a marriage. Clearly, addressing one's own depression and anxiety benefits not only one's self, but one's marriage as well.

The Counseling and Gynecology Group is pleased to welcome you to our weekly column. In the weeks ahead, we will share recommendations on how to enjoy the best possible physical and emotional health throughout your life. Along with gynecological care for all ages, we treat both men and women for depression, anxiety and sexual dysfunction disorders. We treat the whole person; body, mind, emotions and sexuality. This is what true wellness is about. Call us at 413-525-4546 to schedule an appointment. We are located at 281 Maple St, East Longmeadow.

VIVA LA DIFFERENCE!

Since 1998, the FDA has asked that new drugs be tested on both men and women, not just on men as in the past. We've learned that body size and sex hormones cause women to process medication in a manner different from men. Moreover there are some basic differences in how women take medication into their bloodstreams, distribute them throughout their tissues, break them down and eliminate them. Often, women are more sensitive to medication. Advancing age has also been known to change the metabolism of medication.

Women respond to prescription medication differently than men. Regardless of the medication you take, it is important to report any discomfort or other symptoms to your doctor.

At the Counseling and Gynecology Group, we provide comprehensive women's healthcare in a positive and nurturing environment. We offer annual exams, management of PMS and menopause, and diagnosis and treatment of gynecologic disorders. Because we emphasize a pro-active approach to a healthy life, we also offer stress management, hypnotherapy, homeopathy and botanical medicine and nutrition. Call us at 413-525-4546 to schedule an appointment. We are located at 281 Maple St., East Longmeadow.

Hint: Because most drugs on the market have not been extensively tested on women, female patients should ask their physicians whether the prescribed dose of medication is appropriate for their weight, age and gender.

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THE CHANGE BEFORE "THE CHANGE"

Published April 4, 2006

While menopause is only one week in time (the natural last period), perimenopause is an extended transitional state. It is characterized by an array of symptoms as hormones shift in the months or years prior to menopause. Perimenopause generally begins with less regular menstrual cycles and ends a year after the last period. It varies greatly from one woman to the next, and has an average duration of about 3 to 4 years. Periods may end abruptly for some, while others menstruate erratically for years.

Also varying from woman to woman is the presence of symptoms for some and the absence of symptoms for others. These perimenopausal symptoms include hot flashes, night sweats, uterine bleeding problems, sleep disturbances, mood changes, poor concentration, mild memory problems, palpitations, vaginal dryness and reduce libido.

The Counseling and Gynecology Group will revisit this topic from time to time in future columns. The pre- and post-menopause is a special area of interest for Dr. Chorowski, the nurse practitioner and psychotherapist. We offer a number of traditional and alternative therapies (including bio-identical hormones, homeopathy, and herbal treatment) for women at this stage of life as well as for their mothers and daughters.

P.S. Half of all women will have reached menopause by 51.4 years of age.

NOT GETTING RESULTS

Published April 11, 2006

It is disappointing news that the great majority of sexually active young American women are ignoring repeated recommendations to get routine screening for Chlamydia. This is the most commonly reported sexually transmitted disease (STD). One reason that women do not submit to screening is that Chlamydia causes not symptoms in 70% of cases. Another is that women are simply not aware of the danger because Chlamydia has only been recognized as an important sexually transmitted disease since the 1970's. The good news is that detection is easy via cultures/or a urine sample test. Results are generally available within a day. Chlamydia can usually be treated with a short course of antibiotics, sometimes just a single dose.

A recent advance in STD detection is the ability to detect gonorrhea and/or Chlamydia form the Thin Prep pap smear IF REQUESTED. (It is not automatically done). All women 25 and under should consider this test at the time of their pap smear. All women of any age who think they might be at risk should request Chlamydia testing even if it is not their annual exam. At the Counseling and Gynecology Group, we emphasize prevention and early detection.

P.S. Undetected and untreated Chlamydia can cause problems that include pelvic inflammatory disease, infertility, ectopic pregnancy.

FEWER PERIODS

Published April 18, 2006

There is no need for women not seeking pregnancy to menstruate monthly. In fact, fewer periods might be healthier. Two-thirds of women will at some point seek help with cramping, bloating, excessive bleeding, or endometriosis. Suppressing menstrual periods and the associated complaints is relatively easy using hormonal contraception. Birth control pills, patches or rings produce a thinner uterine lining than is produced in a normal cycle. The 7-day break from hormones usually result in a light, less crampy bleed. When pills, patches or rings are used continuously the lining is kept thin so there should be no menses and no menstrual complaints usually for 3 months before scheduling a 7-day break to have a period. Slight break-through spotting is possible.

Women of any age might want to minimize their menses and menstrual complaints by having fewer periods. Despite the myth that “periods are good for you; they clean you out”, there is no good medical reason for a women not seeking pregnancy to put up with monthly periods. As women age and periods become less predictable, this hormonal approach could be an option. At the Counseling and Gynecology Group, we offer unique women’s healthcare by treating the whole person; body, mind, emotions, and sexually to help our patients understand and manage changes.

P.S. Several studies of extended contraception show that many women like it because it reduces or eliminates menstrual discomforts.

BONING UP ON OSTEOARTHRITIS

Published April 25, 2006

After many years of telling patients that osteoporosis and osteoarthritis are two unrelated diseases processes, we might have to modify that information. In fact, if you are a post-menopausal woman who suffers from both osteoarthritis of the knee and osteoporosis you may be able to kill two birds with one stone. According to a recent study of 800 women who had symptoms of osteoarthritis of the knee, use the alendronate seemed to reduce the occurrence of osteoarthritis-related damage in the knee. The anti-resorptive drug alendronate (Fosamax) provides effective treatment for the bone-thinning disease known as osteoporosis by returning balance to the bone-remodeling process, thereby stopping the disease. This new study suggests that the osteoporosis drug alendronate may also reduce the occurrence of osteoarthritis-related damage in the knee, as well as reduce related pain.

Osteoarthritis, also called degenerative joint disease, is the most common form of arthritis and results when the protective layer of cartilage between bones wears down with use and

age. The main symptoms are pain and stiffness in the joints that are serious enough to restrict movement.

Bridging the gap between body and mind, The Counseling and Gynecology Group provides complete gynecological care combined with stress management and treatment of depression and anxiety.

P.S. The study mentioned above also indicated the use of estrogen also seemed to reduce bone loss among the women studied with knee osteoarthritis.

GENDER SPECIFIC
Published May 2, 2006

Whether you're a man or a woman may play a more important role in the incidence, diagnosis, and treatment of mental disorders than you may have realized. According to the National Institutes of Health, gender matters most when it comes to how people deal with such mental health problems as post-traumatic stress disorder, anxiety, depression, and bipolar disorder. The difference between men and women may be evident in how they react to such disorders, which symptoms are most prominent, and whether or not they seek help. For instance, women are twice as likely to suffer post-traumatic stress disorder (PTSD) than men. They are also twice as likely to suffer depression, although men are less likely to seek help for depression.

Everyone feels sad or "blue" at times, but depression lasts for weeks and causes difficulty in thinking, produces physical symptoms, and profoundly disrupts a person's life and relationships. Although depression is a serious illness, studies indicate that men are less likely than women to seek professional help. At The Counseling & Gynecology Group, we emphasize a pro-active approach to a healthy life and offer individual and couples counseling, stress management, treatment of depression, hypnotherapy, and homeopathy and botanical medicine and nutrition.

P.S. When depressed, men are more likely to report a loss of interest in daily activities and feelings of irritability than feelings of despair and hopelessness.

NO TIME FOR DELAY
Published May 9, 2006

Bladder cancer may be more common in men, but it is more often discovered at an advanced stage in women. One explanation for this difference is that, while bladder cancer is usually announced by blood in the urine (hematuria) that is visible to the naked eye, most women are not always alarmed when they experience hematuria. They are usually quite accustomed to menstruation, erratic perimenopausal bleeding, and spotting during urinary tract infections. Thus, women may delay treatment unless the condition persists. This delay can be risky. Although visible hematuria is usually indicative of a benign condition, it is considered a warning sign that must be investigated, usually in cooperation with a urologist.

May is Women's Health Care Month. Early detection of bladder cancer increases the likelihood of a successful treatment program. If you are experiencing the symptoms

described in this column or have not had a routine physical exam this year, call The Counseling & Gynecology Group to schedule an appointment.

P.S. Blood in the urine is also a symptom of urinary tract infections, kidney stones, and interstitial cystitis.

ARE HIGH PROTEIN DIETS THE ANSWER?

Published May 16, 2006

If you are a postmenopausal woman on a high-protein diet, here are some words of caution. The typical woman eats 50% more protein than the government's daily recommended allowance (RDA). However, when Harvard researchers put 39 health postmenopausal women on a meal plan that allowed them to eat no more than the RDA level, the results were rather surprising. After one week, the women had less acid, less calcium, and fewer bone-related protein fragments in their urine, which are possible signs that bone loss had slowed. The acid is left over when protein is broken down, and it is neutralized by pulling calcium from the bones. This supports the argument that high-protein diets can hasten osteoporosis.

High protein diets – generous in meat, eggs, and cheese – have received a lot of attention as a means of losing weight. However, researchers have found that high-protein diets deprive the body of some key vitamins and fiber and can also hasten osteoporosis in postmenopausal women. The sooner you take steps to prevent osteoporosis, the better.

At The Gynecology & Counseling Group, we can conduct a bone mineral density (BMD) test to determine if you have osteoporosis and create a diet and exercise program best suited to your needs. We emphasize a proactive approach to a healthy life.

P.S. Most women need only about 50 grams of protein daily (the RDA). Excess carbs, fats or protein is unhealthy. A diet that balances all 3 is ideal.

WHAT TWO CANCERS HAVE IN COMMON

Published May 23, 2006

According to recent research, there perhaps exists a link between skin and breast cancers. Women with breast cancer are at increased risk of melanoma and vice versa. Specifically, survivors of melanoma were found to have an 11% increased risk of developing breast cancer. The risk was even stronger, at 19%, in women whose skin cancer had been diagnosed at age 50 or younger. Similarly, in breast cancer survivors,

the risk of melanoma increased by 16%, and rose to 46% in breast cancer patients who were diagnosed at age 50 or younger. Thus, women who have survived either breast cancer or skin cancer may want to be particularly attentive to both.

Now that warm and sunny weather is finally here, you're probably hearing more about sunscreen. Research indicated that the risk of skin cancer may be elevated in women who have been diagnosed with breast cancer.

At The Counseling & Gynecology group, we help women make informed decisions about how to improve their health and lifestyles.

P.S. It is possible that shared genetic susceptibilities or female hormones contribute to both skin cancer and breast cancer.

SIGN OF THE TIMES **Published May 30, 2006**

We live during a time of war and natural disasters that have the potential to cause extensive anxiety. Post-traumatic stress disorder (PTSD) is an anxiety disorder that can develop as a response to an unanticipated and terrifying life event, such as witnessing a death, being a victim of rape or abuse. If you suffer persistent symptoms of reliving the event, avoid all thoughts of it to the extent that you withdraw, or feel constantly on guard against it happening again, you should seek help. Treatment does not involve forgetting a traumatic event, such as being in a violent situation. Instead, the therapist will help you confront the fear so that thoughts of it do not prove to be so disruptive.

Stress is the body's physical response to excessive demands, frequent changes in routine, or a threat to life or limb. If you dwell on or relive a disturbing event, you may be suffering from post-traumatic stress disorder. At The Gynecology & Counseling Group, we are trained in psychology, hypnosis, homeopathy, and marital and family therapy. Our practice specializes in the interface between psychiatry and gynecology.

P.S. You do not have to experience a traumatic event directly to experience post-traumatic stress disorder. Some residents of New York City, for example, still relive 9/11 even if they weren't in the World Trade Center.

**Health Facts with Jenifer Fleming
June 6, 2006**

WHILE THE DOCTOR IS AWAY

While Dr. Chorowski is away being honored at Tufts University School of Medicine for 25 years of service, we would like to take this opportunity to introduce you to Jenifer Fleming, our nurse practitioner. “Jeny” has been a provider with The Counseling & Gynecology Group since 1990 and she has been involved in women’s healthcare for over 25 years. She is a practitioner of complementary therapies and specializes in caring for women throughout life cycles. From adolescent reproductive health and sexuality, to alternative care during menopause, Jeny offers a broad range of treatment options. Jenny supports our proactive approach to a healthy life, and promotes self-care and wellness to her patients. Her bright yet soothing personality is welcomed by her patients from the teenager’s first visit, to the post-menopausal patient, allowing them to feel comfortable to discuss any topic.

Jeny has received her degrees and certification from the University of Sussex, England, University of Glasgow, Scotland, Yale University and the American College of Nurse Midwives. Jeny has also served as a consultant to the Boston Women’s Health Book Collective (Our Bodies, Our Selves).

P.S. Dr. Chorowski was being honored for 25 years of teaching medical students, interns and residents at Baystate Medical Center.

**Health Facts with Dr. Max
June 13, 2006**

URINARY TRACT INFECTION

Pain (or a burning sensation) while urinating and passing a small amount of urine are typical symptoms of a urinary tract infection. At the upper end of the urinary tract system are the kidneys, which produce urine by removing waste and water from the blood. Connected to the kidneys are two tubes, called ureters, which carry urine out of the body. Women are especially susceptible to urinary tract infections because their urethras are so short that bacteria from the nearby rectal area can easily migrate to the urethra. Prompt treatment with antibiotics is usually effective.

Defined as a bacterial infection causing inflammation to the urethra, UTI occurs most often in women ranging in age from 15 to 60. Increasing consumption of cranberry or orange juice can help acidify the urine as a preventive.

P.S. Sexually transmitted diseases are another cause of urinary tract symptoms.

Health Facts with Jenifer Fleming
June 20, 2006

A TEEN'S FIRST GYN VISIT

Response to our nurse practitioner's column was so positive that we thought we would bring her back for some more columns. As she is the usual clinician for our teens, she will discuss their first Gyn exam:

The American College of Ob-Gyn now recommends that teenage girls schedule their first Gyn visit between ages of 13 and 15. "The initial visit provides an excellent venue for the clinician to start a practitioner-patient relationship, build trust and counsel patient and parent/guardian regarding healthy behavior while dispelling myths and fears," the ACOG documents states. It also will assist young women in establishing a 'health home' and improves their comfort level allowing them to ask for help or advice in the future should the need arise.

At the Counseling & Gynecology Group we help the female patient of all ages to make informed decisions about their health and lifestyles while providing a relaxing environment to put them at ease.

P.S. Healthcare for the adolescent should include review of normal menstruation, diet and exercise, healthy sexual decision-making and the development of healthy, safe relationships. An internal exam is optional unless indicated by the medical history.

Health Facts with Dr. Max
June 27, 2006

SENIOR MOMENTS

If you suspect that an elderly family member or friend is depressed, your assistance to him or her in seeking help may be a life-and-death decision. Research now suggests that, for the elderly, depression may be as much of a risk for death as cardiovascular disease and diabetes. Just how depression increases death rates is not clear. Some scientists believe that depression renders people less able to care for themselves, or it may adversely affect the immune system in some unknown way. Whatever the mechanism, the study makes it clear that addressing the problem of depression is particularly important among the elderly. Family and friends of the elderly should look for signs of depression and seek help.

Depression is a serious mental illness involving deep feelings of sadness and despair. Everyone feels "blue" at times, but depression lasts for week, even months, causing difficulty in thinking and producing physical symptoms. For yourself or someone you love, call the Counseling & Gynecology Group to schedule a consultation. We offer counseling for anxiety and depression, hypnosis and relaxation techniques, and holistic health care.

P.S. Signs of depression among the elderly might include agitation, anxiety, social withdrawal, alcohol abuse, decreased appetite and weight loss, confusion, sadness, and feelings of hopelessness.

Health Facts with Dr. Max
July 3, 2006

REDUCING BREAST-CANCER RISK WITH OLIVE OIL

Eating a Mediterranean diet rich in fruits, vegetables, and olive oil, in particular, helps protect women from developing breast cancer, and now scientists think they know the reason why. It seems that oleic acid, which is the main component of olive oil, blocks the action of a cancer-causing oncogene (HER-2/neu), which is found in about 30% of breast cancer patients. In fact, scientist found that oleic acid not only suppressed the section of the oncogene, it also improved the effectiveness of the breast-cancer drug Herceptin, a targeted therapy that works against the HER-2/neu gene. Breast-cancer patients with HER-2/neu positive tumors suffer from an aggressive form of the disease. These new findings offer hope of better treatment.

Breast-cancer can occur at any age, but it becomes more common as a woman gets older. The earlier breast cancer is detected, the more likely is a successful treatment program. At the Counseling & Gynecology Group, we office a continuum of women's health care including annual exams. Offering a pro-active approach to a healthy lifestyle.

P.S. Substitute olive oil for unhealthy fat in your diet, but don't add it to your diet in such a way that it increases your overall fat intake.

Health Facts with Dr. Max
July 11, 2006

IS HYSTERECTOMY TO BLAME FOR HEART PROBLEMS?

A woman who undergoes a hysterectomy is more vulnerable to heart disease, stroke, and other cardiovascular problems. New research finds, however, that the surgery itself is not the culprit. Instead, researchers point to the fact that women who have hysterectomies are also more likely to have the classic risk factors for cardiovascular trouble, such as obesity, high-blood pressure, high cholesterol, diabetes, and smoking. According to the study, women who had undergone hysterectomies were also found to exercise less and consume more saturated fat. Thus, hysterectomy could be a marker for other medical problems, which should lead doctors to pay closer attention to blood pressure, smoking, cholesterol, and other risk factors for cardiovascular disease.

Symptoms of heart disease include rapidly beating heart and shortness of breath with minimal exertion. You can reduce your risk of heart disease by getting frequent exercise,

eating a diet low in saturated and trans fats, with at least five daily servings of fruit and vegetables, and checking in regularly with our doctor. At the Counseling & Gynecology Group we emphasize a pro-active approach to a healthy life and offer homeopathy and botanical medicines and nutrition.

Health Facts with Dr. Max
July 18, 2006

NEW HELP FOR MENORRHAGIA

Women who suffer from excessive menstrual bleeding (menorrhagia) often undergo surgery to remove the lining of the uterus, which is the source of the bleeding. Now, there is research that shows there may be a simple, less-invasive option. In the office a tiny device is placed inside the uterus and releases the hormone levonorgestrel has shown itself to be an effective treatment for excessive menstrual bleeding. The device, which goes by the brand name Mirena, has already been approved for use as a contraceptive. Once inserted, it can provide control of heavy periods for months or years as needed. The study showed that the implanted device reduced blood loss as dramatically as surgery as well as provided contraception.

When the Mirena is first inserted, before the lining becomes completely thinned out, women may have unpredictable spotting. Eventually, the lining becomes so thin that women stop having their periods altogether. Call the Counseling & Gynecology Group to schedule an appointment for an evaluation of your irregular or excessive menstrual bleeding. We offer the latest and least invasive options to manage menstrual dysfunction.

P.S. Mirena should be considered for heavy bleeding because it is simple to insert, well tolerated, and cost effective. It can be used whether contraception is needed or not.

Health Facts with Dr. Max
July 25, 2006

LINK BETWEEN STRESS AND AGGRESSION

Behavioral neuroscientists have recently completed a study that may help explain why the stress of traffic jam may lead people to road rage. The study found a biological link between stress and aggression. According to the scientists involved in the research, there is a fast-acting feedback loop between as stress hormone and the aggression mechanism. This finding suggests that stress and aggression may be mutually reinforcing. It is well know that, in part by mobilizing energy reserves, these stress hormones prepare the physiology of the body to fight or flee during stressful situation. Now it appears that the very same hormones “talk back” to the brain in order to facilitate fighting.

Stress is the body’s physical response to excessive demands, frequent changes in routine, or the threat to live or limb. Unrelieved stress can lead to a range of health problems and even aggression. If you are feeling stress, do you know what is causing that stress? Call

the Counseling & Gynecology Group to schedule a consultation, we offer stress and pain management, counseling for anxiety and depression, hypnosis and relaxation techniques, and holistic health care.

P.S. Techniques that work to help diffuse stress include EMDR, hypnotherapy, and T.A.T. (Tapas Acupressure Techniques). These therapies actually help to heal the ‘hard wiring’ and offer us more resources for healthier ways of coping with stress.

SEXUAL CONSEQUENCES OF HYSTERECTOMY?

Published August 1, 2006

While women may fear that undergoing a hysterectomy might compromise their sexual pleasure, new research shows that the procedure is more likely to increase the enjoyment of intimate relations for many women. According to the study, by eliminating the factors that make it necessary for women to have a hysterectomy, the procedure may actually improve sexual well being. This study addresses the concern that, because hysterectomy affects the contraction of the uterus with organism and disrupts local nerve supply, it may also adversely affect sexual pleasure. After studying 413 women at 13 hospitals in the Netherlands, research found that neither a vaginal hysterectomy, a total hysterectomy, or a subtotal (one that leaves the cervix only) hysterectomy had any impact on sexual well being after the procedure.

P.S. Because so many area of your life can have an impact on sexuality, (whether you have had a hysterectomy or not) successful treatment of low sexual desire often involves addressing physical, emotional and relationship factors. The fist step is to get reliable information on female sexuality, aging and menopause from your clinician and other good resources.

PELVIC PROLAPSE

Published on August 8, 2006

Pelvic organ prolapse is a weakness in the supporting structures of the pelvic region that allows the balder, rectal, or uterine tissue to bulge into the vagina. Any of the number of resultant conditions can drastically alter a woman's quality of life, causing discomfort, embarrassment, and limited sexual and physical activity. At one time, this problem was hardly discussed or recognized. However, due to the fact that women are living longer and remaining active long past menopause, pelvic organ prolapse has become a high-priority issue. As a result, gynecologists are increasingly screening women for symptoms that include pelvic pressure and pain, urinary incontinence, constipation, and sexual difficulty.

Our bodies change as we get older. Because women are living active lives well past menopause, there has been an increase in the occurrence of pelvic organ prolapse. If you experience pelvic pressure or pain, please call The Counseling & Gynecology Group.

P.S. Surgery might be avoided by early diagnosis and counseling regarding lifting precautions, and weight loss progression of the prolapse. A vaginal support device (pessary) might also delay surgery.

COMBATING FIBROIDS WITHOUT SURGERY

Published on August 15, 2006

According to a recent study, the non-surgical treatment for uterine fibroids known as uterine fibroid embolization (UFE) has a five-year success rate of 73%. These results are comparable to myomectomy, a procedure in which fibroids are surgically removed. UFE has the added advantages of being less invasive and requiring less recovery time. Uterine fibroids are common benign growths that develop in the muscular walls of the uterus. About 40% of American women 35 years of age and over develop these growths annually, resulting in about 200,000 hysterectomies each year. UFE is an interventional radiology treatment that blocks the blood supply to fibroid tumors, causing them to shrink.

Fibroid embolization is considered minimally invasive, meaning that it does not require major surgery. If you experience abnormal uterine bleeding, heavy periods, pressure, and pain, call The Counseling & Gynecology Group.

P.S. As with many uterine-sparing treatments, such as UFE or myomectomy, growth of new fibroids is possible. An annual ultrasound might be advisable to monitor shrinkage of the fibroids and pick up new ones.

HELPING MEN TO BETTER MENTAL HEALTH

Published August 22, 2006

An estimated 42% of men with at least one episode of major depression in their lifetimes do not recognize that they have a mental health problem. Hispanic men especially have also displayed a reluctance to get treatment for depression, owing to their fear that doing so may jeopardize their employment. The National Institute of Mental Health has started a public education campaign called “Real Men, Real Depression” to encourage that seeking treatment for depression may result in the loss of a job. In fact, it may improve work performance.

Depression is a chemical imbalance as well as a mental illness. This is important because people with depression are not able to just “cheer up”. Because the illness runs in families, some people may be prone to depression. Often, depression arises following a specific life event such as the death of a loved one or a divorce. If you or a loved one has symptoms of depression, please call The Counseling & Gynecology Group.

P.S. Symptoms of depression include sleep changes, difficulty finding pleasure in everyday activities, feelings of guilt, lack of energy, difficulty concentrating, appetite changes and suicidal thoughts.

Health Facts

ARE YOU GETTING ENOUGH D?

Published August 29, 2006

A survey of 500 women age 50 and older shows that while 8 out of 10 women assume that they are getting enough vitamin D, more than 70% do not get the amount needed to prevent the bone-thinning disease osteoporosis. Unless a person gets adequate vitamin D, about half of the bone-building calcium he or she does take does not get utilized. With this in mind, women should get 400 International Units (I.U.) of vitamin D daily, 600 I.U. after age 70. This amount is available in a multivitamin or a calcium-plus-D supplement. Some women may need up to 1,000 I.U. daily, especially if they have osteopenia (bone thinning) or osteoporosis (significant bone loss). Sunlight helps the body produce its own vitamin D.

Osteoporosis is a condition involving gradual loss of the minerals in bones. Over time, the bones lose part of their mass and become porous, weak, and vulnerable to breaks or fractures. Getting adequate vitamin D and calcium through diet or supplements is an important preventative measure.

Health Facts with Jenifer Fleming

MENSTRUAL INFORMATION FOR GIRLS

Published September 5, 2006

It might take two years from the time she gets her first period for a girl's body to develop a regular cycle. That is how long it takes for her body to adjust to the influx of hormones that puberty unleashes. What is "regular" varies from person to person. The typical cycle of a female adult is 28 days, although some are as short as 22 days and others as long as 45. Changing hormone levels might make a girl's period short one month (just a few days) and long the next (up to a week). A girl may also skip a month, get two periods right after another, or alternate between heavy and light bleeding from one month to another.

Health Facts with Dr. Max

A VACCINE TO PREVENT CANCER?

Published on September 12, 2006

We now have a vaccine intended to further reduce the 10 deaths a day that we have in the US from cervical cancer. It does so by boosting immunity to many of the viruses that

cause cervical cancer. At present the vaccine is indicated for young women ages 9-26 when both exposure to the virus and the immune response to a vaccine would be at their peaks. The vaccine is not a live virus, making it safe even if the patient goes on to a pregnancy after immunizations. It does work best if given before “sexual debut”. A pelvic exam is not mandatory before getting the vaccine and is available at most gynecological and pediatric services.

The Pap test is effective in detecting cervical cancer in its early stages when it is highly curable.

P.S.

The vaccine does not eliminate the need for pap smears, which should start by age 21 or 3 years after sexual activity starts, whichever comes first.

NATURAL TREATMENT

Published September 19, 2006

Despite the retraction of some of the concerns about estrogen use in women under 60, many will look for a natural alternative to hormone therapy. Unfortunately, no product has produced the results comparable to low dose estrogen. This disappointment extends to soy, black cohosh, dong quai, red clover and chasteberry; the positive effects are barely better than placebo and tend only to help those with milder symptoms. Recently some practitioners have reported success with an herbal preparation that contains all the above products (except soy) plus hesperidin and a Chinese herbal blend extract. It worked best for women with mild hot flashes, fatigue, insomnia or moodiness. Unfortunately it did little to help with libido problems, vaginal dryness, severe hot flashes or preventing osteoporosis. Those women might consider low dose hormonal therapy.

Menopause is not a disease, it is a phase of life, and its symptoms can often be relieved.

P.S. Black cohosh, red clover, and chasteberry are all plant products that the body treats like estrogen (“phyto-estrogens”) without the full set of concerns about taking prescription estrogen.

RUN AWAY FROM DEPRESSION?

Published September 26, 2006

While a depressed individual may not be able to run away from his or her condition, studies show that exercise may be at least as effective as standard anti-depressant medications in reducing symptoms in people with mild depression. Depression is a

condition that is characterized by low energy and moderate tension. Exercise has a significant “mood effect” that seems to dissipate the lethargic, anxious mental state. If the thought of joining a gym or exercise club seems overwhelming to a depressed individual, he or she might derive almost as much benefit simply by taking almost daily walks. Exercise can also be a powerful adjunct to talk therapy.

Depression is a serious mental illness involving deep feelings of sadness and despair. Regular physical activity such as exercise can reduce or prevent the symptoms of depression.

P.S. Symptoms of depression include sleep changes, difficulty finding pleasure in everyday activities, feelings of guilt, lack of energy, appetite changes, and suicidal thoughts.

Health Facts for October

PAINFUL BLADDER

Published October 3, 2006

Interstitial cystitis (IC) is a condition that results in recurring discomfort or pain in the bladder and the surrounding pelvic region. People experience mild discomfort, pressure, tenderness, or intense pain in the bladder and pelvic area. Symptoms may include an urgent need to urinate (urgency), a frequent need to urinate (frequency), or a combination of these symptoms. IC is far more common in women than in men. Of the estimated 1 million Americans with IC, up to 90% are women. Some of the symptoms of IC resemble those of bacterial infection, but medical tests reveal no organisms in the urine of patients with IC. The cause is not known.

The early treatment of a medical condition increases the likelihood of a successful treatment program.

P.S. Newer treatments include instilling DMSO into the bladder or an oral drug called pentosan. Many still find relief from antihistamines, antidepressants or from pain medications. Eliminating dietary triggers such as highly acidic foods might help.

BREAST CANCER RISK

Published October 10, 2006

There's a good reason for African-American women to be particularly vigilant about screening for breast cancer. African-American women who contract breast cancer prior to reaching menopause are twice as likely as Caucasian women to have an aggressive and more deadly form of the disease. Of the several types of breast cancer, basal-like tumors are aggressive, can be more difficult to treat, and have relatively poor relapse and survival rates. Researchers do not yet know why younger African-American women are more prone to this aggressive form of breast cancer, but it does explain why they are at a greater risk of a poor outcome from the disease than Caucasian women despite having a lower risk of breast cancer.

P.S. Previous research had shown that African-American women with breast cancer do not live as long as Caucasian women with the disease because they have higher rates of diabetes, high blood pressure, and other chronic illnesses.

DENSER BONES WITH LESS EFFORT

Published October 17, 2006

Bisphosphonates are products that slow bone loss and are either used to prevent osteoporosis in patients with some bone thinning (osteopenia) or to actually treat osteoporosis. The original products, alendronate and risedronate, are available as once-a-day or once-a-week preparations. More recently the FDA approved a once-a-month product, idandronate. It is also available as a once-a-season injectable. Other products, not in the bisphosphonate class, are now available and many others are being developed to meet the needs of the baby-boomer generation.

The cells and structures in the bones are constantly being renewed. With age, the rate of loss exceeds the body's ability to replenish the minerals. Vitamin D, calcium, excising, and prescriptions are possible recommendations.

P.S. If you can't drink milk for its calcium content, consider calcium enriched orange juice.

SMOKING AND WRINKLES

Published October 24, 2006

Smoking is the single greatest preventable cause of illness and premature death. It increases the risk of coronary heart disease, lung cancer and even breast and cervical cancer among others. Also noted are earlier menopause, accelerated bone loss, and dental problems. Sometimes the realization of these risks, the cost of cigarettes or the adverse effect on wrinkles encourages a patient to seek help. Nicotine gum, nasal sprays or patches help about one third of the time, as does bupropion. Recently a non-nicotine anti-smoking pill with a 44% success rate has become available. Varenicline helps adults quit in 12 weeks by partially activating the nicotine receptor. It also reduces the severity of cravings and the withdrawal symptoms from nicotine. At no extra cost, there is a daily encouragement by phone or email.

Lifestyle modification, rather than medication, should always be the first treatment to consider. Modifiable lifestyle areas include substance use, exercise, stress reduction, nutrition, and weight management.

P.S. Inform yourself about some of the options and get on-line help by visiting Smokefree.gov. Appointments are also available with us to discuss varenicline and other options. Almost every insurer is in favor of counseling for smoking cessation.

ATTACK MODE

Published November 28, 2006

On average, women having heart attacks get to the emergency room about 20 minutes later than men do. This delay can increase the extent of heart damage. Why the delay? Many women don't think of themselves as being at risk for heart attack. In addition, they may not experience the stereotypical clutch-the-chest pressure and pain, and may attribute their symptoms to something else. With this in mind, women should realize that often they do not have chest discomfort during a heart attack. Those who do experience chest discomfort often feeling aching, pressure, and tightness rather than the crushing pain that is characteristic of men's heart attacks.

You can reduce your risk of a heart attack by checking in regularly with your doctor and getting frequent exercise. Stop smoking and eat a balanced diet low in trans fats. Bridging the gap between body and mind, THE COUNSELING AND GYNECOLOGY GROUP offers gynecological care for women of all ages, holistic and nutritional therapy, and wellness coaching. Please call us at 413-525-4546 to schedule an appointment. We are located at 281 Maple Street, East Longmeadow.

P.S. Some signs of a heart attack in women include shortness of breath, unusual fatigue/weakness, nausea, cold sweats, dizziness, and heaviness or aching in the arms or jaw. Don't dismiss these symptoms; proceed directly to the ER. An angioplasty performed within 90 minutes reduces the risk of heart muscle damage and of dying.

FISH TALE

Published November 21, 2006

Epidemiologic studies consistently show positive health effects from fish consumption on mortality, cardiovascular risk factors and, now, dementia. Scientists found that people with the highest blood levels of an omega-3 fatty acid called DHA were about half as likely to develop dementia as those with lower levels. The study reported in the NY Times found that people who ate two or more servings of fish a week reduced their risk for dementia by 39 percent, but there was no effect on the risk for dementia among those who ate less than that. The finding is consistent with earlier data showing high levels of DHA in healthy brain tissue and low levels in the brains of people with Alzheimer's disease. The kind of fish consumed is important. Fatty fish is best, and frying will cause DHA to deteriorate. Supplements are also a source of DHA. The FDA does not endorse DHA or fish oil capsules, but recognizes doses of up to 3 grams a day of fish oil as generally safe.

At THE COUNSELING AND GYNECOLOGY GROUP, we offer diet and wellness counseling as well as gynecological care for all ages. Call 413-525-4546 for an appointment to discuss your personal health needs. We are located at 281 Maple Street East Longmeadow.

P.S. Eating a nutrient-rich food will usually produce a better result than taking supplements of that nutrient.

THE ADVERSE EFFECTS OF STRESS ON WOMEN

Published November 14, 2006

Unsurprisingly, stress can exert adverse effects on a woman's body. Now a new study helps pinpoint an important focus of these problems. The new research shows that the immune cells of women who are under extreme emotional stress age faster than the immune cells in women who do not face such pressure. The study focused on the telomeres in the chromosomes of particular immune cells of women between the ages of 20 and 50. Telomeres cap the ends of chromosomes and shorten as cells reproduce, a measure of age. When telomeres reach a minimum level, the cells can no longer reproduce. Thus, it appears that chronic stress has the potential to shorten the life of immune cells.

At the Counseling & Gynecology Group we offer counseling for depression and anxiety, stress and pain management, hypnosis and relaxation techniques. If you are experiencing extreme stress please call us.

COMEBACK KID

Published November 7, 2006

The intrauterine device has been making a comeback as a contraceptive method. The newer devices lead to infections in only 1 out of 1000 insertions so IUD's are now safer. Two devices are currently available: a Copper T (ParaGard), which lasts for 10 years and a progesterone-releasing device (Mirena), which lasts 5 years. Mirena releases levonorgestrel, which reduces menstrual flow by 70% after a few months. Over 20% have no menses by the second year of use. For women with painful and/or heavy periods this device makes their lives more manageable. Levonorgestral protects against pelvic infection making it appropriate to consider for women at low risk for infection (in a mutually monogamous relationship) even if their family is not yet complete.

Matching contraception to the patient's needs involves counseling, education, and regular re-evaluation. At THE COUNSELING AND GYNECOLOGY GROUP we take the same holistic approach to contraception as we do to all of healthcare by considering the body, mind and sexuality. We are located at 281 Maple Street, East Longmeadow. Call us at 413-525-4546 if this approach appeals to you.

P.S. After 2 years of use the IUD becomes more cost effective than most birth control pills. Current evidence does not support the myth that the IUD is an abortifacient since it works by preventing fertilization.

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PAINFUL BLADDER

Published October 3, 2006

Interstitial cystitis (IC) is a condition that results in recurring discomfort or pain in the bladder and the surrounding pelvic region. People experience mild discomfort, pressure, tenderness, or intense pain in the bladder and pelvic area. Symptoms may include an urgent need to urinate (urgency), a frequent need to urinate (frequency), or a combination of these symptoms. IC is far more common in women than in men. Of the estimated 1 million Americans with IC, up to 90% are women. Some of the symptoms of IC resemble those of bacterial infection, but medical tests reveal no organisms in the urine of patients with IC. The cause is not known.

The early treatment of a medical condition increases the likelihood of a successful treatment program.

P.S. Newer treatment include instilling DMSO into the bladder or an oral drug called pentosan. Many still find relief from antihistamines, antidepressants or from pain medications. Eliminating dietary triggers such as highly acidic foods might help.

RUN AWAY FROM DEPRESSION?

Published September 26, 2006

While a depressed individual may not be able to run away from his or her condition, studies show that exercise may be at least as effective as standard anti-depressant medications in reducing symptoms in people with mild depression. Depression is a condition that is characterized by low energy and moderate tension. Exercise has a significant “mood effect” that seems to dissipate the lethargic, anxious mental state. If the thought of joining a gym or exercise club seems overwhelming to a depressed individual, he or she might derive almost as much benefit simply by taking almost daily walks. Exercise can also be a powerful adjunct to talk therapy.

Depression is a serious mental illness involving deep feelings of sadness and despair. Regular physical activity such as exercise can reduce or prevent the symptoms of depression.

P.S. Symptoms of depression include sleep changes, difficulty finding pleasure in everyday activities, feelings of guilt, lack of energy, appetite changes, and suicidal thoughts.

NATURAL TREATMENT

Published September 19, 2006

Despite the retraction of some of the concerns about estrogen use in women under 60, many will look for a natural alternative to hormone therapy. Unfortunately, no product has produced the results comparable to low dose estrogen. This disappointment extends to soy, black cohosh, dong quai, red clover and chasteberry; the positive effects are barely better than placebo and tend only to help those with milder symptoms. Recently some practitioners have reported success with an herbal preparation that contains all the above products (except soy) plus hesperidin and a Chinese herbal blend extract. It worked best for women with mild hot flashes, fatigue, insomnia or moodiness. Unfortunately it did little to help with libido problems, vaginal dryness, severe hot flashes or preventing osteoporosis. Those women might consider low dose hormonal therapy.

Menopause is not a disease, it is a phase of life, and its symptoms can often be relieved.

P.S. Black cohosh, red clover, and chasteberry are all plant products that the body treats like estrogen (“phyto-estrogens”) without the full set of concerns about taking prescription estrogen.

A VACCINE TO PREVENT CANCER?

Published on September 12, 2006

We now have a vaccine intended to further reduce the 10 deaths a day that we have in the US from cervical cancer. It does so by boosting immunity to many of the viruses that

cause cervical cancer. At present the vaccine is indicated for young women ages 9-26 when both exposure to the virus and the immune response to a vaccine would be at their peaks. The vaccine is not a live virus, making it safe even if the patient goes on to a pregnancy after immunizations. It does work best if given before “sexual debut”. A pelvic exam is not mandatory before getting the vaccine and is available at most gynecological and pediatric services.

The Pap test is effective in detecting cervical cancer in its early stages when it is highly curable.

P.S.

The vaccine does not eliminate the need for pap smears, which should start by age 21 or 3 years after sexual activity starts, whichever comes first.

Health Facts with Jenifer Fleming

MENSTRUAL INFORMATION FOR GIRLS

Published September 5, 2006

It might take two years from the time she gets her first period for a girl's body to develop a regular cycle. That is how long it takes for her body to adjust to the influx of hormones that puberty unleashes. What is “regular” varies from person to person. The typical cycle of a female adult is 28 days, although some are as short as 22 days and others as long as 45. Changing hormone levels might make a girl's period short one month (just a few days) and long the next (up to a week). A girl may also skip a month, get two periods right after another, or alternate between heavy and light bleeding from one month to another.

Health Facts with Dr. Max

ARE YOU GETTING ENOUGH D?

Published August 29, 2006

A survey of 500 women age 50 and older shows that while 8 out of 10 women assume that they are getting enough vitamin D, more than 70% do not get the amount needed to prevent the bone-thinning disease osteoporosis. Unless a person gets adequate vitamin D, about half of the bone-building calcium he or she does take does not get utilized. With this in mind, women should get 400 International Units (I.U.) of vitamin D daily, 600 I.U. after age 70. This amount is available in a multivitamin or a calcium-plus-D supplement. Some women may need up to 1,000 I.U. daily, especially if they have osteopenia (bone thinning) or osteoporosis (significant bone loss). Sunlight helps the body produce its own vitamin D.

Osteoporosis is a condition involving gradual loss of the minerals in bones. Over time, the bones lose part of their mass and become porous, weak, and vulnerable to breaks or fractures. Getting adequate vitamin D and calcium through diet or supplements is an important preventative measure.



ARTICLES – December 2006

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P.S.

After 2 years of use the IUD becomes more cost effective than most birth

control pills. Current evidence does not support the myth that the IUD is an abortifacient since it works by preventing fertilization.

KIDNEY STONES

Published on December 12, 2006

Kidney stones are small bits of minerals and salts that bind together to form little pebble-like substances. They vary in size from a tiny grain of sand to golf-ball size (rarely). Some stay in the kidney and others pass part way or all the way through the urinary tract. Symptoms of kidney stones include: severe pain in the side, abdomen or groin; nausea or vomiting; fever or chills; red or pink-colored urine. After the diagnosis is confirmed, initial treatment will likely include drinking lots of water to flush the stone(s) out and taking painkillers. One in six stones won't come out and might require treatment to remove them such as an external shock-wave therapy to break down the stone.

P.S.

Help prevent kidney stones by drinking a minimum of eight 8 o.z. glasses of water a day; even more to prevent a recurrence. Vitamin B6 and foods (not supplements) that contain calcium might help. Limit sodium to 2000mg a day and eat a diet high in potassium but low in sugar. There are more specific restrictions for those with uric acid or calcium oxylate stones.

A “SILENT” DISEASE

Published December 19, 2006

Chlamydia (kla-MID-ee-uh) is the nation’s most common sexually transmitted disease (STD), especially among those who do not practice safer sex practices. The bacteria can be passed during vaginal, anal or oral sex. In women, infection can spread into the uterus and the fallopian tubes possibly causing pelvic inflammatory disease (PID), chronic pain or reduced fertility. Unfortunately many experience no symptoms (a “silent” disease) but some do have pain, discharge or bleeding. Diagnosis involves an exam and culture of the cervix or urine. Treatment can be as little as a day’s worth of antibiotics if the disease is confined to the cervix and hasn’t spread.

Whether you are a man or a woman, if you have symptoms in the genital area, you may have a sexually transmitted disease such as Chlamydia.

By The Way:

All sexually active women age 25 and under should be screened annually and at any age if they have a new partner or any symptoms such as painful urination, discharge or lower abdominal pain. Safer sex means mutual monogamy after both partners have tested negative for STD’s. Otherwise use condoms every time.

HANG UP ON HANGOVER

Published December 26, 2006

The best way to avoid a hangover is to be the designated driver and avoid the alcohol in the first place. However, if you think you may have overindulged, Harvard Health Publications and others suggest the following:

1. Plenty of water to avoid dehydration.
2. Eat some carbohydrates.
3. Avoid darker colored liquors in favor of clear ones.

4. A pain reliever other than acetaminophen for the headache and other discomforts.
5. An OTC anti-nauseant like meclizine. It will also make the room stop spinning.
6. Few OTC "hangover remedies" work. Two that have had some success include: extract of prickly pear cactus and high dose vitamin B6.
7. Caffeinated tea in the morning might help with the grogginess.
8. "Hair of the dog" only delays the hangover.

Moderation in food and in alcohol is the key to getting through the holidays. If the holidays are taking more of an emotional toll on you, then you should, we are here to help for men and women.

P.S. BTW (By the way)

Hangover usually describes the headache, fatigue, nausea, diarrhea and shaking that most hangover sufferers experience. Some also sweat, become anxious, irritable, experience sensitivity to light or noise or have trouble sleeping.