



Women's Special



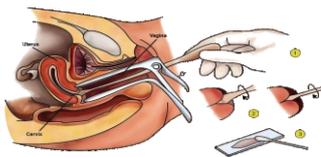
MUST HAVE SCREENING TESTS FOR WOMEN

Regular health check up is an essential part of overall healthy lifestyle even when you feel healthy. As a woman, you need some special examinations and tests that can identify if you have any health issues, much in advance. Diagnosis of any disease at an early stage increases the chances of successful treatment.

The U.S. Preventive Services Task Force (USPSTF) guidelines recommend several screening tests for women. However, your doctor may suggest and personalize the tests you need to undergo based on your age, health status, lifestyle factors, such as eating or smoking habits, etc. Following are some important medical tests for women suggested by the USPSTF guidelines.

CERVICAL CANCER SCREENING (PAP TEST)

A Pap test is used to examine the changes in the cells of your cervix, which may indicate the risk of cervical cancer. During Pap test the medical professional inserts an instrument, called a speculum into the vagina and collects a few cells from the cervix and the area around it. The cells are then placed on a slide and sent to laboratory for testing. The Pap test is recommended for all women between the ages of 21 and 65 years. For women older than 30 years, the



doctor may recommend Human papilloma virus (HPV) test along with Pap test, as HPV is thought to be the major cause of almost all cervical cancers.

You need to talk to your doctor to understand the frequency of Pap test for you as it depends on the age.

BREAST CANCER SCREENING (MAMMOGRAM)

Mammogram is the best test used to detect the risk of breast cancer in women. Screening mammograms are used to check the risk of cancer in women who have

no signs or symptoms of the disease. Diagnostic mammograms are used to examine a lump or any other sign or symptom once the disease is detected. During mammogram procedure, the breast is lightly



compressed between two plates attached with the mammogram machine. This enables the machine to take a black and white x-ray picture of the breast tissue. The x-ray images make it possible to detect tumors that cannot be felt during physical examination of the breasts. As per the guidelines, women who are 50 to 74 years old should have a screening mammogram every two years.

BONE MINERAL DENSITY TEST (OSTEOPOROSIS SCREENING)

Bone Mineral Density (BMD) test measures the amount of calcium and other minerals present in your bone. Dual energy x-ray absorptiometry (DXA) is the most commonly used test for measurement of bone density. During the test, a small x-ray detector scans your spine, one hip, or both. BMD is recommended for younger women who are at risk of disorders related to bones and all women at age 65 and older. You can discuss with your doctor or nurse if you are at risk of osteoporosis or about repeat testing if you are 65 years and older.

DIABETES SCREENING

Diabetes screening tests determine if you are at higher risk of diabetes (pre-diabetes) or already suffering from diabetes. HbA1c (glycohemoglobin test), a fasting plasma glucose (FPG) test, and an oral glucose tolerance test (OGTT) are the most common type of tests used to detect risk or presence of diabetes. Pregnancy increases risk of developing

gestational diabetes and therefore, diabetes screening becomes important if you are pregnant. In addition, new research suggests that diabetes may boost the risk of a stroke in women but not in men. Therefore diabetes screening is an important routine medical test for women. Guidelines suggest diabetes screening for all women above 18 years whose blood pressure is higher than 135/80 mmHg.

POST MENOPAUSAL HEALTH ISSUES

If you are a woman in mid forties or early fifties, you may experience some uncomfortable changes due to a natural and inevitable change known as "menopause." After the menopausal transition, there may be some major health issues that need to be taken care of. While many symptoms can be dealt with lifestyle modifications, like having an active lifestyle, eating healthy, practicing mind body approaches, such as yoga and meditation, some major issues listed below should be given attention.

OSTEOPOROSIS



Osteoporosis is a condition in which bones become very weak and can break easily. The hormone estrogen plays a vital role in building new bones; therefore decline in this female hormone during menopause leaves many older women at risk of developing osteoporosis.

Some women are more at risk of developing osteoporosis than others. Risk factors (things that increase your chances of osteoporosis include):

- A family history of osteoporosis
- A fracture in the middle age
- Being thin or having a small body frame
- Early menopause
- Extended bed rest
- Insufficient calcium intake throughout life
- Long-term heavy drinking
- Surgery to remove both ovaries before natural menopause
- Smoking
- Using certain medicines, such as glucocorticoids or some anticonvulsants, for long periods of time

If you have any of these risk factors or are concerned about the health of your bones, talk to your doctor about what you can do to protect them.

CARDIOVASCULAR DISEASE

After decline in the hormones with menopause, women are placed at a high risk of having heart diseases. Heart disease kills 11 times more women than breast cancer every year. That is why it is important for women to take steps to reduce their risk.

Common cardiovascular diseases include atherosclerosis, angina, heart attack, and stroke. High blood pressure and high blood sugar levels put you at a higher risk for cardiovascular disease and stroke. Make sure your blood cholesterol, blood pressure, and blood sugar are at normal levels.

During a regular checkup your physician will look for five signs of metabolic syndrome:

- Waist size greater than 35" in women
- Blood pressure reading of 130/85 mmHg or higher
- Fasting blood sugar of 100 mg/dL (milligrams /deciliter) or higher
- High triglycerides (over 150 mg/dL)
- Low HDL cholesterol (less than 50 mg/dL in women)

URINARY PROBLEMS

Sometimes urinary problems, such as frequent infections and urine leakage also develop at this time. While these changes are not unusual, these may or may not be related to menopause. You should still see your gynecologist, who may be able to help you control any of these problems. Some of the effective treatments may include bladder control training, medicines, implants, or surgery.

WOMEN AND DIABETES

Diabetes currently affects over 246 million people worldwide and over half of them are women. Already considered an "epidemic," researchers expect these rates to increase to 380 million by 2025.

Diabetes can be especially hard on women. The burden of diabetes on women is unique, because the disease can cause difficulties during pregnancy, such as a miscarriage or a baby born with birth defects. Women with diabetes are also more likely to have a heart attack, and at a younger age, than women without diabetes.

What is gestational diabetes?

Gestational diabetes happens during pregnancy and occurs in about 1 in 20 pregnancies. During pregnancy your body makes hormones that keep insulin from doing its job. To make up for this, your body makes extra insulin. But in some women this extra insulin is not enough to keep normal blood glucose levels, so they get gestational diabetes.



Some interesting facts

- For women who do not currently have diabetes, pregnancy brings the risk of gestational diabetes. Gestational diabetes develops in 2 to 5 percent of all pregnancies, but disappears when a pregnancy is over.

- Women who had gestational diabetes or have given birth to a baby weighting more than 9 pounds are at an increased risk for developing type 2 diabetes later in life.
- The prevalence of diabetes is at least 2-4 times higher among African American, Hispanic/Latino, American Indian, and Asian/Pacific Islander women than among white women.
- Diabetes is a more common cause of coronary heart disease among women than men. Among people with diabetes, the prognosis of heart disease is worse for women than for men; women have poorer quality of life and lower survival rates than men do.

Am I at Risk For Diabetes?



The risk factors for type 1 diabetes are unknown. Things that can put you at risk for type 2 diabetes include:

- **Age** — being older than 45 years
- **Overweight or obesity**
- **Family history** — having a mother, father, brother, or sister with diabetes
- **Race/ethnicity** — your family background is African-American, American Indian/Alaska Native, Hispanic-American/Latino, Asian-American/Pacific Islander and Native Hawaiian
- **Having a baby with a birth weight more than 9 pounds**
- **Having diabetes during pregnancy (gestational diabetes)**
- **High blood pressure** — 140/90 mmHg or higher. Both numbers are important. If one or both numbers are usually high, you have high blood pressure
- **High cholesterol** — total cholesterol over 240 mg/dL
- **Inactivity** — exercising less than 3 times a week
- **Abnormal results in a prior diabetes test**
- **Having other health conditions that are linked to problems using insulin, like polycystic ovarian syndrome (PCOS)**
- **Having a history of heart disease or stroke**

What are the signs of diabetes?

Persistently having some or all of the following symptoms may be a sign for diabetes

- Being very thirsty
- Urinating a lot
- Feeling very hungry
- Feeling very tired
- Losing weight without trying
- Having sores that are slow to heal
- Having dry, itchy skin
- Loss of feeling or having tingling in the hands or feet
- Having blurry vision
- Having more infections than usual

If you have one or more of these signs, see your doctor.

Women and Diabetes: Frequently Asked Questions

What are the complications of using birth control pills while having diabetes?

Birth control pills may raise your Blood Glucose (BG) levels. Using them for longer than a year or two may also increase your risk of complications. For instance, if you develop high blood pressure while on the pill, you increase the chance that eye or kidney disease will worsen.

Will menopause affect my diabetes?

Yes. The changes in hormonal levels and balance, may lead to BG levels that are out of control. Women with diabetes are also at risk of developing premature menopause and consequent increased risks of cardiovascular disease.

What are the BG levels for women that are pregnant?

BG levels	Whole Blood	Plasma
Fasting	60-90 mg/dL	69-104 mg/dL
Before meals	60-105 mg/dL	69-121mg/dL
One hour after meals	100-120 mg/dL	115-138 mg/dL
2 a.m. - 6 a.m.	60-120 mg/dL	60-138 mg/dL

Can women with diabetes breastfeed their babies?

Unless your health care team advises you otherwise, yes. Breast milk provides the best nutrition for babies and breastfeeding is recommended for all mothers with either preexisting diabetes or gestational diabetes.

What should my A1C (Hemoglobin A1C) be while I am pregnant?

An A1C (Hemoglobin A1C) is a blood test that can predict average blood glucose levels for about 8-12 weeks. People without diabetes generally have an A1C of less than 6 percent, though this usually drops to less than 5 percent during pregnancy. Women with diabetes should strive for "near normal" A1C prior to, as well as during, pregnancy.

RECIPE OF THE MONTH

WARM BAKED APPLES WITH DRIED CHERRIES, RAISINS, AND BLUEBERRIES



Serves 6

Ingredients

- 6 Golden Delicious or Granny Smith apples
- 3 tablespoons frozen orange juice concentrate
- 1 cup dried cherries, blueberries, and raisins
- ½ cup light brown sugar
- 6 teaspoons honey
- 2 tablespoons safflower or canola oil

Procedure

Brush 6 cupcake molds with the oil to prevent sticking.

Use melon baller to scoop the stem and the core of each apple, poke a few holes into the top of the apple with a fork to prevent the heat from splitting them, and then place into cupcake molds.

Place a half tablespoon of orange juice concentrate each into the center of each apple. Fill with dried fruits and sprinkle brown sugar over the tops.

Drizzle with honey and bake at 300°C for 30 minutes or until apple is soft. Serve warm.

HEALTH QUIZ

1. How many women over age 50 years will have an osteoporosis-related fracture in their lifetime?

- a) 1 in 2 b) 1 in 3 c) 1 in 4 d) 1 in 5

2. Which of the following could be the symptoms of high blood glucose levels (hyperglycemia)?

- a) Flatulence, back problems, and excessive appetite.
b) Mania, constipation, headaches, and gallstones.
c) Tiredness, excessive thirst, blurred vision, and frequent urination.

3. What are some of the long-term complications that can be caused by diabetes?

- a) Heart disease, kidney damage, eye damage, and impotence.
b) Gall bladder damage, ear damage, bad breath and thyroid disease.
c) Loss of taste, throat damage, nerve damage to lungs, and appendicitis.

4. What are the main aims of diabetes management?

- a) Control blood glucose levels, blood pressure, weight, and cholesterol.
b) Have the pancreas surgically removed to cure diabetes.
c) Eliminate carbohydrates from the diet.

5. What are the main features of type 1 diabetes?

- a) Being overweight, high blood pressure, and occurs mainly in adults.
b) Weight gain, occurs mainly in adults, can be controlled with diet.
c) Autoimmune disease, generally occurs in children, adolescents and young adults, requires insulin.

Answers: 1. a) 2. c) 3. a) 4. a) 5. c)