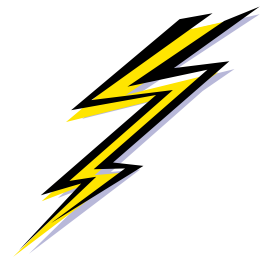




HOT FLASHES



Newsletter of the Women's Mid-Life Health Centre of Saskatchewan

January 2011 Edition

Reducing Your Risk of Cancer

By Dr. Vicki Holmes, Medical Director, Women's Mid-Life Health Centre

The 2010 Canadian Cancer Statistics Document of the Canadian Cancer Society, reports the Saskatchewan statistics for cancer of the cervix are 35 new cases and 10 deaths; uterine cancer 120 new cases and 20 deaths; ovarian cancer 70 cases and 55 deaths. Is there anything we can do to reduce our risk? Yes!

Cervical Cancer

Prevention is what is referred to as a "no brainer". There are two vaccines on the market that have shown benefit in preventing cancer of the cervix. Two types of human papilloma virus (HPV 16 and HPV 18) cause 99% of the cases of cervical cancer. 64% of cervical cancers are squamous cell carcinoma. The more dangerous cancer, adenocarcinoma, originates in the cells located higher in the endocervical canal (the length of the cervix) and sadly, the incidence of this cancer is on the rise. Up to 30% of these are diagnosed in women less than 35 years of age. It is more likely to progress rapidly and metastasize early.

Fortunately, 90% of the HPV infections subside within 2 years, however 5% to 7% progress to CIN (abnormal cells), 2/3 of those within 2 years. This is why it is so important to get regular Pap tests. Because the Public Health HPV Immunization program is aimed at teens, many middle aged women do not think to get immunized when they enter a new sexual relationship. This is a mistake. You can get cervical cancer at 65 if your lover had a previous partner with this disease. Condoms do not protect you from this infection—immunization is the only way to effectively protect yourself.

Lifestyle and Cancer

Decrease Obesity: More than 30% of people in Saskatchewan are obese, with their Body Mass Index (BMI) being greater than 30. Women with a body mass index greater than 40 have a 60% higher risk of dying from all cancers than a woman of healthy weight. Uterine cancer rates are 40% higher in obese women. Some studies show a 25-50% reduction if they lose weight and keep it off! In a study in Shanghai China, in 22 years between 1972 and 1994 there was a 75% increase in uterine cancer that paralleled the increase in obesity and lack of activity.

Increase Exercise: Being physically active has been shown convincingly to reduce the risk of colon, breast and endometrial cancer. It is now looking that it has a protective effect for ovarian cancer as well.

Healthy Diet: Excellent sources of information are *Foods that Fight Cancer* by Dr. Richard Beliveau and *Food that Fight Disease* by Leslie Beck. Cruciferous vegetables protect against lung, stomach, colon, rectal, prostate, endometrial, ovarian and cervical cancer. Women with the highest consumption of vegetables had a 23% lower risk of ovarian cancer. Lycopenes and carotinoids contained

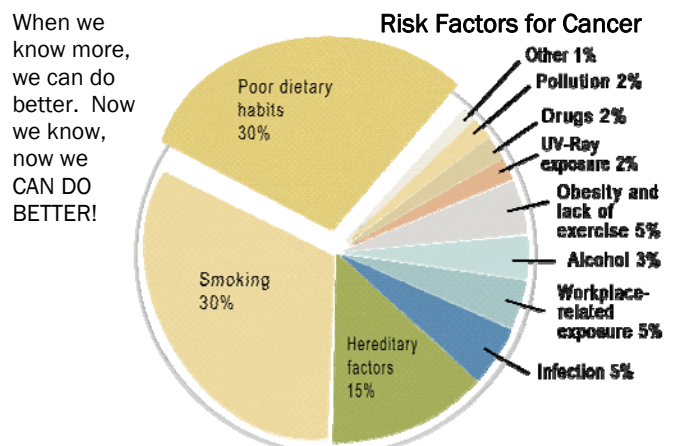
in raw carrots and cooked tomatoes, reduce ovarian cancer by 40-50%.

Cancer	Risk Reduction
Endometrial Cancer	Any exercise reduced risk by 38%, high intensity by 48% <i>Source: John's Hopkins University</i>
	62,000 women were followed for 10 years. Those exercising 90 minutes per day had 38% reduction. <i>Source: Netherlands Cancer Institute 2004</i>
	33,700 women were followed for 25 years. Those who were inactive had a 66% higher risk. <i>Source: Harvard University 2006</i>
	Swedish registry of 1,659 twins showed 80% reduction for those at the highest level of activity.
Ovarian Cancer	In the Netherlands 62,570 women who were followed for 11 years showed a 22-35% reduction after exercising at least 2 hours per week. <i>Source: Cancer Causes Control 2006</i>
	A Danish study of 13,200 women for 14 years found a 67% reduction in those doing vigorous activity.
	A Canadian study showed 33% reduction in those doing moderate activity for all cancers except Mucinous ovarian cancers.
Breast Cancers	MANY studies document 30-40% reduction with exercise.

How are we doing?

In today's society, more than 30% of women are obese. 59% of women are physically inactive. Rarely do we see anyone at the Women's Mid-life Health Clinic who is eating the required 7 fruits and vegetables every day.

Prevention is far easier than treatment and prevention is so easy. It's as easy as getting vaccinated against HPV, reducing our weight, keeping our body mass index lower than 30, and eating more fruits and cruciferous vegetables. How easy is that?



Risk Factors for Cancer chart adapted from "Foods That Fight Cancer"

Preventing Metabolic Syndrome

By Donnelly Morris, Registered Dietitian

The phrase “Metabolic Syndrome” is becoming more and more prevalent these days. But what does it really mean? Metabolic syndrome is a group of conditions that occur together, increasing your risk of heart disease, stroke and diabetes. These conditions are: high blood pressure, elevated fasting blood sugar, high triglycerides, a type of fat found in your blood, low HDL, or good, cholesterol, and abdominal obesity, or too much fat around the waist. Having three of these conditions is a diagnosis of metabolic syndrome. The more of these conditions you have, the greater the risk of developing diabetes and heart disease. A lot of these conditions can be avoided and even reversed with dietary changes. Here are a few suggestions:

Lower your sodium intake

A high salt intake can raise your blood pressure. High blood pressure is a major risk factor for heart disease and stroke. Often called the “silent killer”, many people with high blood pressure don’t even know they have it, which is scary, since over 2 million Canadians have high blood pressure!

To prevent or help in lowering high blood pressure, one key lifestyle factor that you can change is eating less sodium (salt). The average North American can eat upwards of 3500mg of sodium per day, but all our body really needs is 1200mg – 1500mg. The recommended daily upper limit is 2300mg per day, which is just 1 tsp.

In order to lower your intake, sometimes it is as easy as removing the salt shaker from the table and not using it for cooking. Other times, it is not that simple. A lot of the foods that we rely on when we cook, such as canned soup, soup bases, canned beans or canned tomato products are loaded with salt. In these cases, it is just used as a preservative, not for flavour. Thankfully many companies are realizing the health impact their high sodium products are having, and are lowering the sodium content of their canned products. It is very important to read labels for sodium when grocery shopping. A general rule of thumb is if the sodium is less than 200mg per serving, it is a low sodium product. If it is between 200mg and 400mg per serving, it is still alright, but go easy. If it is over 400mg per serving, look out! This is a high sodium product and should not be eaten very often. My challenge to you is to do some label reading next time you’re in the grocery store and see how much sodium is in your favourite canned or pre-made/ready-to-eat product. I think you’ll be amazed – and not in a good way.

Decrease the amount of saturated and trans fat in your diet

In a previous article we looked at the different types of fat and their effect on the body. Saturated and trans fat have the worst effect on your body than any other kind of fat. These fats can raise the level of LDL, or bad, cholesterol in your body. High cholesterol, particularly high LDL cholesterol can lead to blocked arteries – another risk factor for heart disease and stroke.

By limiting your intake of commercially baked goods, deep fried foods, fatty meats, cheese, lard, butter and hydrogenated fats and oils, you can decrease the amount of LDL floating around in

your blood stream. Alternately, by replacing your unhealthy fats with healthy fats such as lean meats, fish, vegetable oils (canola, olive, sesame), nuts and seeds – as long as they are not chocolate covered – can help raise the amount of HDL, or good, cholesterol. Increasing the amount of HDL cholesterol will help lower your LDL cholesterol.

Decreasing the saturated and trans fat in your diet will once again require some label reading at the grocery store. Fortunately, some of it can be common sense – especially when it comes to deep fried products and store bought baked goods like muffins and donuts.

Eat plenty of fruits and vegetables

Fruits and vegetables are not only low calorie and full of vitamins, they are usually high in fibre and contain valuable antioxidants. Antioxidants are compounds found in plant based foods that help protect your cells from damage. They are more abundant in dark and brightly coloured fruits and vegetables such as spinach, sweet potatoes, berries and tomatoes.

Fibre has multiple benefits. It can help you feel full faster and longer, which can prevent overeating. Soluble fibre, like those found in bran cereals, oatmeal, and fruits and vegetables, can also help lower your LDL cholesterol. Finally, it can help control the release of sugar into your blood stream after a meal. This last part is of particular importance if you have been diagnosed with diabetes or have elevated blood sugars.

Metabolic syndrome, if left alone, can lead to much more serious health issues. The good news is that eating a healthy, balanced diet can help reverse some of the conditions. To catch some of these conditions before it is too late, make sure you get a yearly physical check-up with blood work and keep track of your results. If your doctor prescribes medication to help combat some of these issues, make sure to take them as prescribed. It is important to take an active role in your health – you only live once!

Babsi’s Broccoli Soup

2 cups	Chopped broccoli (stems and florets)
2 cups	Low sodium chicken broth
1 cup	Buttermilk
1/2 tsp	Dried basil
1/2 tsp	Dried tarragon
	Salt and black pepper to taste
	Small broccoli florets, lower-fat plain yogurt, chives, or shredded cheddar cheese for garnish



1. In a saucepan over medium-high heat, cook broccoli in chicken broth for 10 minutes or until tender. Refrigerate in broth until chilled.
2. In a food processor or blender, puree chilled mixture, buttermilk and seasonings until smooth. Taste and adjust seasonings. Reheat just to serving temperature, or chill and serve as cold soup.
3. Serve garnished with broccoli, yogurt, chives or cheddar cheese.

Makes 6 servings

Nutrients Per Serving	Calories: 38,
Protein: 3 g, Fat: 0.9 g, Carbohydrate:	
5 g, Saturated Fat: 0.5 g	

Hormone replacement therapy: Some facts for women

By Laura Lee McFadden, MD, CCFP, FCFP is Medical Director of The Medspa and The Women's Clinic Oshun House

Recent media coverage on hormone replacement therapy (HRT) has fueled the ongoing misconception about true risk to an individual woman for treating symptoms of menopause. The Society of Obstetricians and Gynecologists of Canada (SOGC) has recently sent a message to all of its physician members across the country in an attempt to present facts and put risks and benefits into perspective for our individual patients. I would like to touch on some of those facts.

Reports from the most recent North American Menopause Society meeting in Chicago indicate that there was a statistically significant reduction in mortality and a positive benefit for women started on HRT in the first decade after onset of menopause.

The recent media coverage exaggerating the individual risk of breast cancer associated with HRT has denied women safe and effective hormone therapy for their distressing symptoms.

The ratio that is often used to scare women is that "one in eight women will get breast cancer this year." This is misleading because it represents cumulative risk over a lifetime to age 85. Let me put this in perspective. Cardiovascular diseases are much more likely to account for death and disease. For example, between age 50 and 59, deaths from breast cancer affect 5 women out of 1000 while 55 will die from other causes; between 60 and 69, breast cancer deaths affect seven out of 1000 while 126 die from other causes. Surveys show that women consistently overestimate their personal breast cancer risk and underestimate the impact of cardiovascular disease

The increased risk for the development of breast cancer in users of HRT is approximately the same as the risk for women who consume alcohol, fail to exercise regularly, or become overweight after menopause. The risk associated with HRT is actually lower than the breast cancer risk that results from a late first pregnancy (after age 30) or failure to breastfeed.

The decision to use HRT after menopause is an individual one and has to include a careful assessment of risk and benefits with a woman and her physician.

Unbalanced information in the media about HRT has led many health-care providers to abandon this approach in favour of untested and largely ineffective complementary and alternative therapies. Symptomatic women have, for the most part, remained dissatisfied and prescriptions for selective serotonin reuptake inhibitors (anti-depressants) in Canada have soared as hormone therapy prescriptions fell after 2002.

The decision to use HRT after menopause is an individual one and has to include a careful assessment of risk and benefits with a woman and her physician. Some complementary treatments especially ones that focus on lifestyle and healthy eating can improve a woman's quality of life and health during this time and any time in life. The source of a hormone and the way in which it is taken can be important and must be considered when prescribing treatments.

Many professionals in Saskatoon focus on women's health issues and are experts in the area of menopause symptoms. They range from family physicians, nurses, compounding pharmacists, nutritionists, physiotherapists, psychologists, personal trainers, and many more. The Women's Mid-life Health Centre of Saskatchewan (www.menopausecentre.org) is a fabulous resource for patients and physi-

cians in the province. The SOGC (www.menopauseandu.ca) provides all Canadian women with support and up-to-date information.

Each woman is responsible for seeking information about her specific situation and for reading more than just the tabloid headlines and celebrity endorsements. Lifestyle is still the most important factor in a women's health. Healthy eating, exercise, weight control, and reducing risks such as smoking, excessive alcohol intake, and stress are far more important in most cases than what is written on a prescription pad.

My opinion and that of many of my colleagues is that HRT is an important and safe option for many women when treating distressing symptoms of menopause.

Dr. McFadden can be contacted at 343-1799 or see www.oshunhouse.com



"as printed in the Saskatoon Express Dec 8, 2010. Used with permission."

Cherishing Your Grandchildren's Smiles

By Julie Laberge-Lalonde, Dental Health Educator, Oral Health Program, Public Health Services

Approaching menopause brings with it challenges and rewards. It is an opportunity to use one's life experiences and knowledge to positively affect good physical, mental, and social health for our children, grandchildren, and even our own parents!

To have a healthy body, one must have a healthy mouth. This is true for us, and for our grandchildren as well. Baby teeth are important because they help our grandchildren to eat properly, speak clearly, maintain space to help adult teeth grow in properly, and to feel good about themselves and have a beautiful smile!

Tooth decay and gum disease is almost 100% preventable. It doesn't need to happen! These prevention tips can keep our mouths healthy:

- brush twice a day with a fluoride toothpaste (removes 60% of the plaque)
- floss once every day (removes 40% of the plaque)
- eat a well-balanced diet
- avoid tobacco
- have regular annual dental check-ups

How can you make a difference to your grandchildren's oral health? Here are some ideas:

- serve nutritious snacks like lower-fat yogurt, cheese strings, fruit or veggies with low-fat dip or spread, such as hummus, low-fat sour cream or yogurt mixed with herbs or seasonings.
- substitute water for sugary drinks which can cause cavities. Each sip causes a 20 minute acid attack. Even diet, sugar-free sodas contain acid which harms the teeth.
- offer cheeses such as Cheddar, Swiss, Monterey Jack, Mozzarella, Brie, and Gouda. These contain calcium, protein, fat, and phosphorus, all of which protect teeth from acids and help them stay strong.
- serve unsweetened 100% fruit juice in a cup with a meal or a snack, not in-between meals. Sipping juice throughout the day can cause cavities.
- beware of using food or sweet treats as a reward or for displaying affection - as this increases the risk of cavities and obesity.
- substitute sweet treats at special occasions such as Valentine's, Halloween, Christmas, and Easter with sugarless gum or candy, packages of seeds, nuts, or cheese. Non-food items: colorful pencils, erasers, toys, stickers, temporary tattoos, bracelets, beads, hair barrettes, seasonal socks, puzzles, chapter books, and coloring books.
- promote the use of mouth guards and helmets when your visiting grandchildren are using bikes, in-line skates or scooters.
- keep a special toothbrush at your home for visiting grandchildren.
- avoid exposing grandchildren to second-hand tobacco smoke.
- read dental storybooks to your grandchildren that will help them develop a positive attitude towards dental health.

As a role model, you can help your grandchildren make healthy lifestyle choices that will follow them into their adult years. Cherish your grandchildren's smiles!



Light, Life, and Laughter
Laugh Breathe Succeed

Coaching, Presenting, Teaching
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Bring more laughter into your life and direct this energy
towards your goals and what's right for you.
Find out about a complementary session

Hot Flashes Now Available Electronically

Like other charities, the Women's Mid-Life Health Centre works to keep up with the times on a limited budget. We're combining both in our offer to send your copy of the Hot Flashes newsletter via email.

Please contact us at info@menopausecentre.ca if you prefer this delivery option.



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