## healthlines

## Press&Dakotan

## Monday, 3.4.13 ON THE WEB: www.yankton.net HEALTHLINES: news@yankton.net

**Breast Cancer And Impacts Of Perilous Chemicals** 

**BY SANDY BAUERS** © 2013 The Philadelphia Inquirer

Every year billions of dollars are spent on breast cancer research.

Still, the disease rages on, although more women are surviving.

A major naconcluded that a key to reducing breast cancer would be to shift some of the focus — and increase funding — to prevention.

One recommendation was to intensify the study of environmental factors that might affect whether a woman gets cancer and how long she survives afterward. The group's broad definition

of environment included lifestyle behaviors, such as exercise, alcohol consumption, and maintaining proper weight.

But the committee also took note of pesticides, bisphenol A, flame retardants, and other endocrine-disrupting chemicals thought to affect the breast.

To Jeanne Rizzo, president of the Breast Cancer Fund, a national advocacy group, and cochair of the committee that released the report, the findings validated what her group had been saying for years.

"We are all exposed to a cocktail of carcinogens and endocrine disrupters every day that puts us at great risk for breast cancer," she said. Preventing exposures may keep "many people from ever having to get the devastating disease." Here are some of the num-

bers:

The National Institutes of Health alone spent \$2.4 billion on breast cancer research from 2008 to 2010. Nongovernment groups funded \$1.5 billion in research.

But only 10 percent of the money went to projects looking at prevention or environmental factors.

And still breast cancer takes a toll. Last year, about 227,000 women were diagnosed; 44,000 women died. Costs surpassed \$17 billion.

The 270-page report is said to be the largest analysis yet of peer-reviewed literature on breast cancer and the environment.

The panel members included representatives of federal agencies, nonfederal scientists and physicians, and advocates.

Michele Forman, who chaired the panel and is an epidemiologist at the University of Texas at Austin, said the new

"We can no longer ignore the major research gaps in under-

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mantra is "prevention."

standing the role of the environment in breast

cancer," she said. The report also identified vulnerable peri-**JEANNE RIZZO** 

ods in a female's life, when breast tissue is changing rapidly. They include early

childhood, puberty, pregnancy, and lactation. "There's rapid cell development going on during those periods," Rizzo said. "The breast is in a stage where it's more vulnerable to exposures.

While estrogen-disrupting chemicals are believed to play a part in breast cancer, most experts think the biggest factor driving modern breast cancer trends is changes in childbearing. Having fewer children and at later ages affects lifetime exposure to estrogen, known to promote breast cancer.

Other "estrogenic" chemicals the report listed include nonylphenols in cleaning compounds and the linings of food cans, the pesticides DDT and dieldrin, plus the perfluorooctanoic acid (PFOA) that is in nonstick coatings and that make products grease- and waterproof.

"I'd say, take precaution and avoid exposure," Rizzo said. "Especially at vulnerable times."

Not that there's "compelling proof" they cause cancer, she said, "but we weigh risks every day.'

If there was a 10 percent chance your chicken sandwich was spoiled, would you take a bite?

So Rizzo and others urge women to avoid using plastic food containers, which may contain bisphenol A. Wash hands before eating, because cash register receipts can contain bisphenol A. Seek personal-care products advertised as phthalate-free. Avoid nonstick cookware.

Ultimately, she and others hope researchers will find ways to better assess exposure to not just one chemical, but many, which is what actually happens.

"You have all these insults that can happen that sets the breast up to be more reactive to these other insults," Rizzo said. "Every exposure, everything that happens in your system, has an impact on whether the message is 'grow properly' or 'don't

# **Smaller Snacks Really Satisfy**

BY MICHAEL ROIZEN, M.D., AND MEHMET OZ. M.D. King Features Syndicate

The world's largest potato crisp (a processed, stackable type) measures 24 inches by 14 inches and packs 920 calories. That sure adds a whole new challenge to the slogan, "Bet you can't eat just one!"Unfortunately, far too many folks go for such super-snacking: Men in the U.S. eat more than 900 calories a day from snack foods with little or no nutritional value and women chow down about 625 empty calories!

But if you're snacking to keep your energy up, hunger down and blood sugar steady (a smart thing to do), there's good news. Turns out your body can feel just as satisfied with five to 10 times FEWER snacking calories than you might be nibbling now. And the study that revealed all this used apple pie and potato chips, as well as chocolate — not quite the perfect nosh! But if you combine that news with our suggestions for energy-boosting, heart-loving, wrinkle-preventing snacks, you'll see your RealAge get younger and your mind and body get sharper and stronger.

-Enjoy high protein snacks such as a cup of fat-free, no-sugar-added, plain Greek vogurt and six walnut halves; 3 ounces of grilled chicken breast (no skin); a hard-boiled egg; or 1 tablespoon of peanut butter on a celery stick.

-Try high-fiber foods like an apple or a bowl of 100 percent whole-grain cereal with 3 ounces of skim or almond milk topped with a banana to feel full longer.

You'll lose the calories and gain the energy you're looking for from your between-meal snacks.

#### SPERM'S DOWN FOR THE COUNT

What do you do if you're watching TV and a doctor comes on the screen and tells you a recent study proves that watching TV lowers your sperm count?

Well, do what we do: qualify, qualify, qualify. The study talks about "too much TV" as more than 20 hours a week, and we agree. We'd recommend 7-10 hours max. (That leaves plenty of time to watch "The Dr. Oz Show.") And the study looked at men ages 18-22 who don't watch much TV and exercise for 15 hours a week (an energetic bunch — they're getting in 10,000 steps a day or the equivalent) versus men that age who watch more than 20 hours a week and hardly ever get up off the couch. Those extreme couch potatoes' sperm were down for the count by 44 percent — and what's left is low quality. (It's always the little ones who suffer the most, isn't it?)

Wanna boost sperm quantity and quality? The best bet is to only watch TV while on a treadmill or elliptical machine. But if you're sitting in a comfy chair viewing TV for more than a couple hours a day, move away from the screen and head for the front door. Now open it and walk outside, even if it's snowing. Shovel the front walk or go to the gym or pool. Not only will you stop diabetes, heart disease, dementia and depression from taking hold, you'll make your little swimmers happy. And healthy sperm

For Many Patients, **Testing Not Helping** 

**BY ERYN BROWN** © 2013 Los Angeles Times



## **OZ AND ROIZEN**

Dr. Mehmet Oz and Dr. Michael Roizen

often are partners with a happy intimate relationship.

### HOW GENEROSITY IS LIFE-EXTENDING

"There is no exercise better for the heart than reaching down and lifting people up," said poet John Albert Holmes. He got that right! Generosity is an essential nutrient. It fuels the body with good energy and strengthens not just relationships, but the heart, immune system and your desire to be good to yourself, too!

How does generosity benefit the giver? It provides an emotional and physiological buffer against harmful stress triggered by job loss, financial troubles or the death of a loved one, for example. Chronically elevated stress hormones, such as cortisol, raise blood pressure and blood sugar, which may damage blood vessels. They also weaken your immune system and damage neural connections, clouding your memory and judgment. Generosity cools down your mood and bodywide inflammation.

Want to reap the personal benefits of gen-erosity? Start by being more generous to yourself: Set aside 10 minutes a day to meditate; it decreases stress and opens you up to new possibilities in your life. Also, start a walking program with a buddy — you can help each other reach 10,000 steps daily. Then decide to perform a simple act of generosity: Make time to help a neighbor, friend or family member with a daily challenge. It can be as simple as running an errand, cooking a meal, housecleaning or providing transportation or child care. If done frequently, you'll feel stress dissolve and your resolve to live a more generous and healthier life come into focus. That's a "two for you" that makes your RealAge younger!

#### **EXERCISING FOR SPOUSAL AROUSAL**

You and your spouse have vowed to stick with each other "through sickness and in health," but today let's focus on the health part. We know that partners who play together, stay together. Just look at Reese Witherspoon and Jim Toth; they're often photographed jogging together - sometimes with the kids! And Andre Agassi and Steffi Graf have played together both on and off the court for the past 10 years.

Seems when you and your true love share sweat (from exercise, we mean), you build strong emotional bonds along with strong mus-

cles. Working out with your partner demonstrates that you care about his or her physical health as well as your own; it lets him or her know that you like to spend time together; and it builds trust and interdependence as you both work to expand your endurance and physical abilities.

Another plus: When you and your honey work out together, you're more likely to stick with the exercise routine, whether it's walking, biking, golfing or swimming, and to make lasting lifestyle upgrades in other areas, too — eating better, not smoking and becoming less stressed.

But if those aren't reasons enough to form an exercise duo, listen up! Exercise stimulates the production of make-you-happy brain chemicals and increases your libido and your feelings of arousal. That's right: Couples who exercise together regularly report better and more frequent sex.

Hey, putting out a little effort together can give you improved overall health and a better sex life, too! What's not to like? So repeat after us: "Honey, grab your sneakers!"

#### **BREAKFAST BOOSTS KIDS' BRAIN POWER**

When Uncle Buck (John Candy in the movie of the same name) rustled up a redwood-size stack of chocolate-covered pancakes for young Miles' (Macaulay Culkin) birthday breakfast, you can bet he wasn't thinking, "Well, this'll help him excel in school today!" And with all that sugar and refined carbs, Miles was more likely to become Sleepy and Grumpy (two of Snow White's favorites, we hear).

But breakfast can have magical powers IF you stack up 100 percent whole grains and lean protein. New research shows that eating breakfast every day improves your child's verbal skills, increases the ability to get assignments done and boosts overall IQ by almost five points. And that's not all! It helps prevent diabetes and reduces the risk of — get this — lead poisoning. That's quite a mouthful!

If it's tough to get your child to eat a healthy breakfast, try these morning menu tricks:

-Offer a make-your-own smoothie: Set out fresh or frozen strawberries, blueberries, blackberries, mangoes and bananas, plus canned pineapple or (our favorite) green veggies. Blend with a dash of milk or fresh juice and ice!

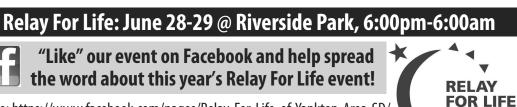
Make 100 percent whole-grain pancakes or steel-cut oatmeal. Tip: Instead of a breakfast smoothie, blend up some fresh fruit and spread on the pancakes or cereal in place of syrup or sugar.

–Always offer some protein and healthy fats; try peanut butter on 100 percent wholegrain toast or ground flaxseed in the smoothie or hot cereal. It helps control midmorning hunger and gets your young scholar to a healthy lunchtime.

Mehmet Oz, M.D. is host of "The Dr. Oz Show," and Mike Roizen, M.D. is Chief Wellness Officer and Chair of Wellness Institute at Cleveland Clinic. To live your healthiest, visit sharecare.com.

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I'heir mission was to review the current science, look at funding, and make recommendations. (Read the report at http://www.niehs.nih.gov/about/ boards/ibcercc/.)

## Peterson Set To Speak At YMC



Yankton Medical Clinic, P.C. Physical Medicine and Rehabilitation physician, Dr. Judith Peterson, has been invited to speak at the Annual Assembly of the American Academy of Physical Medicine and Rehabilitation. The Assembly will be held in October in National Harbor, Maryland.

Dr. Peterson's presentation is titled "Updates in Preventing Non-Contact Anterior Cruciate Ligament Injuries in the Athlete.'

Peterson

The 2013 Annual Assembly brings the physiatric community together with over 100 educational sessions organized into five topic tracks: Musculoskele-

tal and Sports Medicine; Neurological Rehabilitation; Pain and Spine Medicine; Practice Management and Leadership; and General Rehabilitation

The specialty of Physical Medicine and Rehabilitation empha-sizes the prevention, diagnosis, treatment, and rehabilitation of disorders, particularly those of the neuromusculoskeletal system that may produce temporary or permanent impairment. Common conditions treated include spine arthritis, neck and back pain, tendonitis, and hip, knee, and shoulder pain. Dr. Peterson also treats conditions such as carpal tunnel syndrome and peripheral neuropathy. She is trained in nerve conduction techniques and electromyography to help in the diagnosis and treatment of these conditions.

Dr. Peterson began seeing patients at Yankton Medical Clinic, P.C. in January. She sees patients in consultation for spine pain, neck and back pain, sports injury, spasticity, and musculoskeletal pain syndromes. She has specific expertise in performing arts medicine and the treatment of injured dancers and instrumentalists.

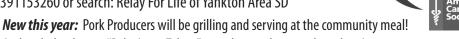
A lot of us find our way to the doctor with strange aches and pains that are very, very unlikely to be caused by serious illness – headaches, back pains or stomach troubles, to name a few. To be on the safe side, physicians will often order tests to rule out the scary stuff and, the thinking goes, provide reassurance.

But a recent examination of 14 randomized, controlled trials found that ordering diagnostic tests for people who have a low risk of serious illness didn't really reassure patients or resolve their anxiety and symptoms.

The University of Edinburgh's Alexandra Rolfe and the University of Aberdeen's Dr. Christopher Burton reported the findings of their meta-analysis online Monday in the journal JAMA Internal Medicine. Reviewing results collected from 3,828 patients who had been randomized into groups that would receive tests (such as endoscopy for stomach discomfort and scans for back pain) and groups who would not, they discovered that patients who did receive tests did not display significant reduction in concern over being ill, either over the short or long term. Anxiety and symptoms were not significantly different between the two groups.

While follow-up visits did decline somewhat among patients who received testing, Rolfe and Burton determined that the number of patients who would have to be tested to avoid a single doctor visit later on varied from 16 to 26,

488898391153260 or search: Relay For Life of Yankton Area SD



And with the theme, "Relay's got Talent" – we have to have a talent show!

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For more information on how you can get involved: Be a Sponsor, Rally a Team, Help at the Event, Purchase a Luminaria, Make a donation, Register as a Survivor, Share a talent, or just plain Relay with us, contact Darla Gullikson (605-668-8850) or Lindsey Holmquest (1-800-660-7703).

depending on the symptom. In an invited commentary on the research, also published online in JAMA Internal Medicine, Dr. Kurt Kroenke, an investigator at the Regenstrief Institute, a research organization affiliated with Indiana University in Indianapolis, calculated that amount of testing would run from \$4,000 to \$16,000, conservatively.

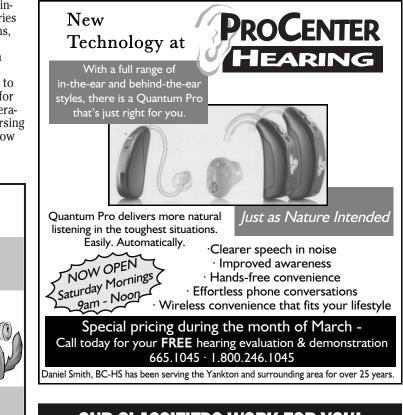
Rolfe and Burton concluded in their report that "physicians overestimate the value of testing when the probability of serious disease is low" and urged doctors and healthcare organizations to "limit tests to those that influence clinical management." In his commentary, however, Kroenke noted that this might be hard to do. Diagnostic tests are reimbursed at higher rates than consultations that involve collecting patient histories and conducting in-office exams, even though the latter have higher "diagnostic yield" than tests.

"Just as we are still trying to reduce patient expectations for antibiotics induced by a generation of overprescribing, reversing the tide of testing will be a slow process," he wrote.









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