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Office on Women's Health

U.S. Department of Health and Human Services,

A Lifetime of Good Health



Your Guide to Staying Healthy

About Us	2
Understanding Risk Factors	4
Preventive Screening Tests and Immunizations	6
Medicare-Covered Preventive Services	16
Heart Disease and Stroke Prevention	18
Heart Attack and Stroke Warning Signs	20
Diabetes	22
Coping with Many Chronic Health Conditions	24
Physical Activity for Health	26
Healthy Eating	28
Fighting the Flu	31
Cervical Health	32
Reproductive Health	34
Preconception Health	35

Pregnancy	36
Breastfeeding	39
Menopause	41
Finding Breast Cancer Early	44
Jrinary Tract Health	46
Colorectal Health	48
Healthy Eyes and Ears	49
Healthy Bones	51
Quitting Smoking	53
Oral Health	55
Healthy Skin	57
Stress	59
Mental Health	61
Dealing with Violence	64
Falking with Your Doctor or Nurse	65
Checklist of Questions to Ask Your	
Doctor or Nurse	66

About Us

What is the U.S. Department of Health and Human Services?

The U.S. Department of Health and Human Services (HHS) is the federal agency responsible for protecting the health of all Americans. Its headquarters are based in Washington, DC. HHS is the publisher of *A Lifetime of Good Health: Your Guide to Staying Healthy*.



What is the Office on Women's Health?

Established in 1991, the Office on Women's Health (OWH) is part of the Office of the Assistant Secretary of Health within HHS. OWH wrote and produced this guide. Our mission is to improve the health and well-being of all U.S. women and girls. We lead and coordinate the efforts of all the HHS agencies and offices involved in women's health. We create and sponsor innovative programs that focus on the health of women and girls. We educate health professionals, such as physicians, dentists, researchers, therapists, and nurses. Our publications, websites, and special events reach out to you, the public. We work to educate and motivate people to live healthier lives by giving them trustworthy, accurate health information.

How can I get more information?

We offer two award-winning comprehensive websites, http://www.womenshealth.gov and http://www.girlshealth.gov. These two websites provide reliable, accurate, commercial-free information on the health of women and girls. They cover more than 800 topics on issues ranging from adolescent health to reproductive health to healthy aging. We also offer free assistance by phone through our information referral center. Call 800-994-9662, toll free, and our trained Information

Specialists can answer your calls in either English or Spanish. For individuals who are hearing impaired and use TDD, call 888-220-5446

Whichever way you use our services, you'll get:

- Clear answers to frequently asked questions
- Links to thousands of health publications
- Statistics on women's health

Call for free health publications: {

- An online glossary of health terms
- · Daily news on women's health
- A National Breastfeeding Helpline with trained peer counselors
- Health information in Spanish

How are womenshealth.gov and girlshealth.gov different from other websites on women's and girl's health?

Womenshealth.gov and girlshealth.gov are sponsored by the federal government with your tax dollars. We don't represent any special commercial interests. We don't allow advertisements on our sites. We don't try to sell you products, magazines, or anything else. We screen all health information for accuracy before it ever appears on our websites or in our publications. Our Information Specialists are trained to help you, whether it's referring you to the right organization, mailing you free information, or even coaching new moms on how to breastfeed their infants.

Womenshealth.gov and girlshealth.gov exist to help you and your loved ones get the reliable and accurate health information you need to get, or stay, healthy.

What is Healthy People 2020?

Healthy People 2020 provides science-based, 10-year goals from the U.S. government for improving health and stopping disease. Learn more at http://www.healthypeople.gov/hp2020.

What is the Affordable Care Act?

The Affordable Care Act, also called "health care reform," is a new law that is helping keep Americans healthy. It helps by making health insurance available to more people, by offering screenings and tests at no out-of-pocket cost to you, and more! Learn all about it at http://www.healthcare.gov.

What can I do if I don't have health insurance?

If you need health insurance, visit http://www.healthcare. gov to learn what options you have under the new health reform law.

Understanding Risk Factors

Part of learning how to take charge of your health requires understanding your risk factors for different diseases. Risk factors are things in your life that increase your chances of getting a certain disease. Some risk factors are beyond your control. You may be born with them or exposed to them through no fault of your own. Some risk factors that you have little or no control over include your:

- Family history of a disease
- Sex/gender male or female
- Ancestry
- Age
- Health having one health problem may raise your risk of having another (for instance, having diabetes increases your chances of getting heart disease)

Some risk factors you can control include:

- · What you eat
- · How much physical activity you get
- · Whether you use tobacco
- How much alcohol you drink
- Whether you use illegal drugs

Whether you use your seat belt

In fact, it has been estimated that almost 35 percent of all U.S. early deaths in 2000 could have been avoided by changing just three behaviors:

- Stopping smoking
- Eating a healthy diet (for example, eating more fruits and vegetables and less red meat)
- Getting more physical activity

Having more than one risk factor

You can have one risk factor for a disease or you can have many. The more risk factors you have, the more likely you are to get the disease. For example, if you eat healthy, exercise on a regular basis, and control your blood pressure, your chances of getting heart disease are less than if you are diabetic, a smoker, and inactive. To lower your risks, take small steps toward engaging in a healthy lifestyle, and you'll see big rewards.

Inheriting risk — your family health history

Rarely, you can inherit a mutated gene that alone causes you to get a disease. Genes control chemical reactions in our bodies. If you inherit a faulty gene, your body may not be able to carry out an important chemical reaction. For instance, a faulty gene

may make your blood unable to clot. This problem is at the root of a rare bleeding disorder. More often, you can inherit genes from one or both of your parents that put you at higher risk of certain diseases. But having a gene for a certain disease does not always mean you will get it. There are many unknown factors that may raise or lower your chances of getting the disease.

How do I find out my disease risks?

It is important to talk to your doctor or nurse about your individual health risks, even if you have to bring it up yourself. And it's important for your doctor to know not just about your health, but your family health history as well. Come to health care visits armed with information about you, your children, siblings, parents, grandparents, aunts and uncles, and nieces and nephews, including:

- · Major medical conditions and causes of death
- Age of disease onset and age at death
- Ethnic background
- General lifestyle information like heavy drinking and smoking

What if I have a family history of a disease?

People with a family health history of chronic disease may have the most to gain from making lifestyle changes. You can't change your genes, but you can change behaviors that affect your health, such as smoking, inactivity, and poor eating habits. In many cases, making these changes can reduce your risk of disease even if the disease runs in your family. Another change you can make is to have screening tests, such as mammograms and colorectal cancer screening. These screening tests help detect disease early. People who have a family health history of a chronic disease may benefit the most from screening tests that look for risk factors or early signs of disease. Finding disease early, before symptoms appear, can mean better health in the long run.

Preventive Screening Tests and Immunizations

Prevention is important to living long and living well. Getting preventive screenings and immunizations are among the most important things you can do for yourself. Take time to review these guidelines for screening tests and immunizations. Use the

charts on the next few pages to remind yourself of when you need to see your doctor, based on your personal health profile. Make an appointment today!

General Screenings and Immunizations for Women

Screening tests	Ages 19-39	Ages 40-49	Ages 50-64	Ages 65 and older
General health: Full checkup, including weight and height. Ask your doctor or nurse about health topics such as: Overweight and obesity Tobacco use Alcohol use Depression Thyroid (TSH) testing	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.
HIV test	At least once to find out your HIV status. Ask your doctor or nurse if and when you need the test again.	At least once to find out your HIV status. Ask your doctor or nurse if and when you need the test again.	At least once to find out your HIV status. Ask your doctor or nurse if and when you need the test again.	Discuss with your doctor or nurse.
Heart health: Blood pressure test	At least every 2 years	At least every 2 years	At least every 2 years	At least every 2 years
Cholesterol test	Start at age 20, discuss with your doctor or nurse.	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.

Please note: These charts are guidelines only. Your doctor or nurse will personalize the timing of each test and immunization to meet your health care needs. Check with your insurance plan to find out which tests are covered. These charts are current as of February 2011.

General Screenings and Immunizations for Women

Screening tests	Ages 19–39	Ages 40-49	Ages 50-64	Ages 65 and older
Bone health: Bone mineral density test			Discuss with your doctor or nurse.	At least once. Talk to your doctor or nurse about repeat testing.
Diabetes: Blood glucose or A1c test	Discuss with your doctor or nurse.	Start at age 45, then every 3 years.	Every 3 years	Every 3 years
Breast health: Mammogram (x-ray of breast)		Every 1–2 years. Discuss with your doctor or nurse.	Every 1–2 years. Discuss with your doctor or nurse.	Every 1–2 years. Discuss with your doctor or nurse.
Clinical breast exam	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.
Reproductive health: Pap test	Every 2 years starting at age 21. Women 30 and older, every 3 years.	Every 3 years	Every 3 years	Discuss with your doctor or nurse.
Pelvic exam	Yearly beginning at age 21. Younger than 21 and sexually active, discuss with your doc- tor or nurse.	Yearly	Yearly	Yearly
Chlamydia test	Yearly until age 24 if sexually active. Age 25 and older, get this test if you have new or multiple partners.	Get this test if you have new or multiple partners.	Get this test if you have new or multiple partners.	Get this test if you have new or multiple partners.
Sexually transmitted infection (STI) tests	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.
Colorectal health: Many tests can screen for colorectal cancer.			Talk to your doctor or nurse about which test is best for you and how often you need it.	Talk to your doctor or nurse about which test is best for you and how often you need it.

General Screenings and Immunizations for Women

Screening tests	Ages 19-39	Ages 40-49	Ages 50-64	Ages 65 and older
Eye and ear health: Comprehensive eye exam	Discuss with your doctor.	Get a baseline exam at age 40, then every 2–4 years or as your doctor advises.	Every 2–4 years until age 55, then every 1–3 years until age 65, or as your doctor advises	Every 1–2 years
Hearing screening	Every 10 years	Every 10 years	Every 3 years	Every 3 years
Oral health: Dental and oral cancer exam	Routinely; discuss with your dentist.	Routinely; discuss with your dentist.	Routinely; discuss with your dentist.	Routinely; discuss with your dentist.

Immunizations	Ages 19-39	Ages 40-49	Ages 50-64	Ages 65 and older
Influenza vaccine	Every fall (or winter)			
Pneumococcal vaccine	If you smoke or have a chronic health problem, ask your doc- tor or nurse if you need this vaccine.	If you smoke or have a chronic health problem, ask your doc- tor or nurse if you need this vaccine.	If you smoke or have a chronic health problem, ask your doc- tor or nurse if you need this vaccine.	You need 1 dose at 65 (or older) if you have never been vaccinated. You may also need a second dose.
Tetanus, diphtheria, pertussis (Td,Tdap) vaccine	Get a Td booster every 10 years. Ask if you need 1 dose of Tdap instead of Td booster to prevent whooping cough.	Get a Td booster every 10 years. Ask if you need 1 dose of Tdap instead of Td booster to prevent whooping cough.	Get a Td booster every 10 years. Ask if you need 1 dose of Tdap instead of Td booster to prevent whooping cough.	Get a Td booster every 10 years. Ask if you need 1 dose of Tdap instead of Td booster to prevent whooping cough.
Hepatitis B vaccine	Discuss with your doctor or nurse.			
Hepatitis A vaccine	Discuss with your doctor or nurse.			
Human papillomavirus (HPV) vaccine	You need this vaccine if you are 26 or younger and have not already completed the vaccine series.			

General Screenings and Immunizations for Women

Immunizations	Ages 19–39	Ages 40-49	Ages 50-64	Ages 65 and older
Measles, mumps, rubella (MMR) vaccine	If you have not had at least 1 dose of MMR, ask your doctor or nurse if you need this vaccine.	If you have not had at least 1 dose of MMR, ask your doctor or nurse if you need this vaccine.	If you were born in 1957 or later and have not had at least 1 dose of MMR, ask your doctor or nurse if you need this vaccine.	
Varicella (chickenpox) vaccine	If you have never had chick- enpox or you have been vac- cinated but only got 1 dose, ask your doctor or nurse if you need this vaccine.	If you have never had chick- enpox or you have been vac- cinated but only got 1 dose, ask your doctor or nurse if you need this vaccine.	If you have never had chick- enpox or you have been vac- cinated but only got 1 dose, ask your doctor or nurse if you need this vaccine.	If you have never had chick- enpox or you have been vac- cinated but only got 1 dose, ask your doctor or nurse if you need this vaccine.
Meningococcal vaccine	You need this vaccine if you are a young adult planning to live at college or if you have certain medical conditions. Discuss with your doctor or nurse.	You may need this vaccine if you have certain medical conditions. Discuss with your doctor or nurse.	You may need this vaccine if you have certain medical conditions. Discuss with your doctor or nurse.	You may need this vaccine if you have certain medical conditions. Discuss with your doctor or nurse.
Zoster (shingles) vaccine			Starting at age 60, you need a single dose of this vaccine.	Starting at age 60, you need a single dose of this vaccine.

What is the Affordable Care Act?

The Affordable Care Act, also called "health care reform," makes sure that you can get the tests, vaccines, and other services that may help keep you from getting sick. And, it does this without any additional out-of-pocket cost to you!

For example, depending on your age, you may have free access to things like:

- Blood pressure, diabetes, and cholesterol tests
- Mammograms and colonoscopies
- Counseling on quitting smoking, losing weight, eating well, treating depression, and reducing alcohol use
- · Routine vaccinations against diseases

such as measles, polio, or meningitis

- · Flu and pneumonia vaccines
- Counseling, screening, and vaccines to ensure healthy pregnancies
- Regular well-baby and well-child visits, from birth to age 21

Learn more at http://www.healthcare.gov.

This chart lists screenings, tests, or exams you might need more often or earlier because of having high-risk factors or things in your life that increase your chances of developing a condition or disease.

if it applies	Does your family history include?	Then ask your doctor or nurse if you need the fol- lowing screenings, tests, exams, or vaccines more often or at a younger age:
	High blood pressure	Blood pressure test
	High cholesterol	Cholesterol test
	Heart disease or heart attack	Blood pressure test, cholesterol test
	Diabetes	Diabetes test
	Breast cancer (in female or male relatives)	Mammogram, clinical breast exam, genetic counseling
	Colorectal cancer or colon polyps	Colonoscopy or other screening tests, genetic counseling
	Ovarian cancer	Genetic counseling
	Broken hip in either your mother or father	Bone mineral density test

if it applies	Does your family history include?	Then ask your doctor or nurse if you need the fol- lowing screenings, tests, exams, or vaccines more often or at a younger age:
	Thyroid disease or thy- roid cancer	Thyroid test, genetic counseling
	Gum (periodontal) dis- ease	Oral exam
	Hearing problems or deafness	Hearing screening
	Vision problems, eye disease, or blindness	Eye exam
	Cancer, heart disease, diabetes, or any health problem at an unusu- ally young age (10 to 20 years before most people get the health problem)	Genetic counseling, screening tests

Please note: These charts are guidelines only. Your doctor or nurse will personalize the timing of each test and immunization to meet your health care needs. Check with your insurance plan to find out which tests are covered. These charts are current as of February 2011.

if it applies	Does your family history include?	Then ask your doctor or nurse if you need the fol- lowing screenings, tests, exams, or vaccines more often or at a younger age:
	Rare types of cancer, two or more relatives with the same type of cancer or with certain combinations of cancers, such as: Breast and ovarian cancers Colorectal and endometrial cancers	Genetic counseling, screening tests
	Birth defects or genetic disorder (you or your partner)	Genetic counseling, screening tests

What is a risk factor?

Risk factors are things in your life that increase your chances of developing a condition or disease. They can include things like family history, exposures to things in the environment, being a certain age or sex, being from a certain ethnic group, or already having a health condition. If you do have risk factors, your doctor or nurse will most likely want you to be screened or immunized at a younger age or more often than what is recommended. Check with your doctor or nurse to find out if you need to have specific health screenings and how often you will need them. (See the section on Understanding Risk Factors on page 4 for more information.)

if it applies	Are you?	Then ask your doctor or nurse if you need the fol- lowing screenings, tests, exams, or vaccines more often or at a younger age:
	African-American	Eye exam, screening for sickle cell trait
	American Indian or Alaska Native	Flu vaccine
	Ashkenazi Jewish descent	Genetic counseling for certain disorders that are passed down in families, such as Tay-Sachs disease, if you want to become pregnant; genetic counseling for BRCA1/2 mutation if you have a family history of breast or ovarian cancer
	Age 65 or older	Flu vaccine, pneumococcal vaccine
	Pregnant	Flu vaccine, depression screening, prenatal tests
	A smoker	Blood pressure test, cholesterol test, bone mineral density test, oral exam, pneumococcal vaccine

if it applies	Are you?	Then ask your doctor or nurse if you need the fol- lowing screenings, tests, exams, or vaccines more often or at a younger age:
	Overweight	Body mass index, blood pres- sure test, cholesterol test, dia- betes test
	Thin, weighing less than 127 pounds	Bone mineral density test
	A college student living in a dormitory	Meningococcal vaccine and other vaccines
	Living in long-term care	TB test, flu vaccine, pneumo- coccal vaccine and other tests or vaccines
	A health care worker	TB test, flu vaccine, MMR vaccine, Td/Tdap vaccine, varicella vaccine, hepatitis B vaccine and other tests or vaccines
	A member or former member of the military	Depression screening

if it applies	Do you have or have you had?	Then ask your doctor or nurse if you need the follow- ing screenings, tests, exams, or vaccines more often or at a younger age:
	High blood pressure	Blood pressure test, cholesterol test, diabetes test, eye exam
	High cholesterol	Blood pressure test, cholesterol test, diabetes test
	Heart disease	Blood pressure test, cholesterol test, diabetes test, other tests or exams, flu vaccine, pneumococcal vaccine
	Diabetes	Blood pressure test, cholesterol test, blood glucose and A1c tests, eye exam, urine test, other tests or exams, flu vaccine, pneumo- coccal vaccine
	Breast cancer	Mammogram, clinical breast exam, breast self-exam, pelvic exam, other imaging or lab tests, genetic counseling
	Dense breasts	Digital mammogram
	Cervical, endometrial (uterine), or vaginal cancer	Pap test, pelvic exam, other imaging or lab tests, genetic counseling

if it applies	Do you have or have you had?	Then ask your doctor or nurse if you need the follow- ing screenings, tests, exams, or vaccines more often or at a younger age:
	Ovarian cancer	Pelvic exam, other lab or imaging tests, genetic counseling
	An abnormal Pap test	Pap test, HPV test, HPV vaccine
	Menopause before age 45	Bone mineral density test
	Colon polyps, colon can- cer, inflammatory bowel disease	Colonoscopy or other screening tests, genetic counseling
	An autoimmune disease (such as lupus, rheumatoid arthritis, scleroderma, multiple sclerosis, psoriasis, type 1 diabetes, inflammatory bowel disease, thyroid disease)	Flu vaccine, pneumococcal vaccine, bone mineral density test, thyroid test, TB test, eye exam, other vaccines or tests
	Steroid (glucocorticoid) treatment, such as prednisone, for more than 3 months	Bone mineral density test

if it applies	Do you have or have you had?	Then ask your doctor or nurse if you need the follow- ing screenings, tests, exams, or vaccines more often or at a younger age:
	Chronic lung disease (such as chronic obstructive pulmonary disease or asthma)	Flu vaccine, pneumococcal vaccine
	Chronic liver disease	Hepatitis A and B vaccines, flu vaccine, pneumococcal vaccine, bone mineral density test
	Thyroid nodule	Thyroid funtion or imaging tests
	Gum disease (periodon- titis)	Oral exam
	Intellectual disability	Vision and hearing screening, oral exam, thyroid test, TB test, hepatitis B vaccine, flu vaccine, other vaccines, tests, or exams
	Eye injury or disease	Eye exam
	Ear injury or prolonged exposure to loud noise	Hearing screening

if it applies	Do you have or have you had?	Then ask your doctor or nurse if you need the follow- ing screenings, tests, exams, or vaccines more often or at a younger age:
	A broken bone as an adult	Bone mineral density test
	HIV/AIDS	CD4 count, viral load, drug-resistance screening, hepatitis screening, TB test, STI tests, flu vaccine, pneumococcal vaccine, hepatitis A and B vaccines, varicella vaccine, eye exam, Pap test, blood pressure test, cholesterol test, diabetes test, depression screening, exam to discuss family planning, other vaccines, tests, or exams

if it applies	Do you have or have you had?	Then ask your doctor or nurse if you need the follow- ing screenings, tests, exams, or vaccines more often or at a younger age:
	Risk factors for hepatitis C, including having ever: Had signs of liver disease Injected illegal drugs Received blood or organ transplant before 1992 Received clotting factors made before 1987 Needed long-term dialysis	Hepatitis C test
	Multiple sex partners (or a partner who has or had multiple sex partners) or history of not using condoms	STI tests, HIV test, hepatitits B vaccine, HPV vaccine

if it applies	Do you have or have you had?	Then ask your doctor or nurse if you need the follow- ing screenings, tests, exams, or vaccines more often or at a younger age:
	Eating disorder	Blood pressure test, bone mineral density test, dental exam, mental health screening, full physical exam
	Alcohol abuse or dependence	Flu vaccine, pneumococcal vac- cine, mental health screening, liver tests, bone mineral density test
	Injection drug use or drug addiction	Hepatitis A and B vaccines, hepatitis C test, STI tests, HIV test, TB test, mental health screening
infection exam	STI tests, HIV test, Pap test, pelvic exam, hepatitis B vaccine, HPV vaccine	
	Lived or worked with someone with active tuberculosis	TB test
	A deep or dirty wound	Td/Tdap vaccine
	A baby within the last year	Postpartum depression screening

Medicare-Covered Preventive Services

Check this chart to see what screenings and immunizations are covered under Medicare for individuals who are entitled to and enrolled in Medicare Part B coverage. Costs for these screenings and immunizations may only be partially covered. For some of these services, you might have to pay a deductible, coinsurance, and/or copayment. These amounts vary, depending on the type of services you need and the kind of Medicare health plan you have. For more information, call 800-MEDICARE or visit http://www.medicare.gov.

Did you know that Medicare covers...?

Bone Mass Measurements These measurements help to see if you are at risk for broken bones.	Medicare covers these measurements once every 24 months (more often if medically necessary) for people with Medicare at risk for osteoporosis.
Cardiovascular Screenings Doctors test your cholesterol, lipid, and triglyceride levels so they can help you prevent a heart attack or stroke.	Medicare covers tests for cholesterol, lipid, and triglyceride levels every 5 years.

Colorectal Cancer Screenings These tests help find colorectal cancer early, when treatment works best. If you are a person with Medicare who is age 50 or older, or is at high risk for colorectal cancer, one or more of the following tests are covered by Medicare:

- Fecal occult blood test
 - Screening colonoscopy
- · Flexible sigmoidoscopy
- Barium enema

How often Medicare pays for these tests is different, depending on the test. You and your doctor decide which is best for you, based on your level of risk for this cancer.

Diabetes Screenings

Diabetes steelings
Diabetes means that your
blood glucose (sugar) is too
high. Your blood always has
some glucose in it because the
body uses glucose for energy.
It's the fuel that keeps you
going. Too much glucose in
the blood is not good for your
health.

Medicare covers tests to check for diabetes or pre-diabetes. These tests are available if you have any of the following risk factors:

- · High blood pressure
- History of abnormal cholesterol and triglyceride levels (dyslipidemia)
- Obesity
- · A history of high blood glucose

Tests are also covered if you have two or more of the following characteristics:

- Age 65 or older
- Overweight
- Family history of diabetes (parents, brothers, sisters)
- A history of gestational diabetes (diabetes during pregnancy) or delivery of a baby weighing more than 9 pounds

Diabetes Screenings (continued from page 16)	Based on the results of these tests, you may be eligible for up to two screenings every year. Talk to your doctor for more informa- tion.
Flu Vaccines These shots help prevent influ- enza or flu virus.	Medicare covers these vaccines once a flu season in the fall or winter for all people with Medicare. You need a new flu vaccine each new flu season.
Glaucoma Tests These tests help find the eye disease glaucoma.	Medicare covers these tests once every 12 months for people with Medicare who are at high risk for glaucoma.
Hepatitis B Vaccines This vaccine (given in 3 doses) helps protect people from get- ting hepatits B.	Medicare covers these vaccines for people with Medicare at high or medium risk for hepatitis B.
Medical Nutrition Therapy Services Nutrition therapy helps you choose the right foods to eat for your health condition.	Medicare may cover medical nutrition therapy if you have diabetes or kidney disease, and your doctor refers you for the service. Talk to your doctor for more information.
Pap Test and Pelvic Exam (includes clinical breast exam) These exams check for cervical and vaginal cancers. As part of the pelvic exam, Medicare covers a clinical breast exam to check for breast cancer.	Medicare covers these exams every 24 months for all women with Medicare, or once every 12 months for women with Medicare at high risk.

	Physical Exam (one-time "Welcome to Medicare" physical exam) All adults should visit their health care provider from time to time, even if they are healthy. The purpose of these visits is to: Screen for diseases Assess risk of future medi- cal problems Encourage a healthy life- style Update vaccinations Maintain a relationship with a doctor in case of an illness	Medicare covers a one-time review of your health and for education and counseling about preventive services, including certain screenings, vaccines, and referrals for other care if needed. Medicare will cover this exam only within the first 12 months you have Medicare Part B coverage.
	Pneumococcal Vaccine This vaccine helps prevent pneumococcal infections (like certain types of pneumonia).	Medicare covers this vaccine for all people with Medicare Part B. Most people only need this vaccine once in their lifetime. Talk with your doctor.
	Screening Mammograms A mammogram is a type of x-ray to check for breast cancer.	Medicare covers mammograms once every 12 months for all women with Medicare age 40 and older.
	Smoking Cessation (counseling to quit smoking) Counseling is available for people with Medicare who smoke and who are diagnosed with a smoking-related illness or are taking medicines that may be affected by tobacco.	Medicare will cover up to eight face-to-face visits during a 12-month period. These visits must be ordered by your doctor and provided by a qualified doctor or other Medicare-recognized practitioner.

Heart Disease and Stroke Prevention



Many women may not be aware that heart disease and stroke are major threats to their health. But heart disease is the most common cause of death among women in the United States, and stroke is the third most common cause of death. Heart disease and stroke also are major causes of long-term disability.

The most common form of heart disease is coronary artery disease (CAD). In CAD, plaque builds up on the walls of the arteries that carry blood to the heart. Over time, this buildup causes the arteries to narrow and harden. This keeps the heart from getting all the blood it needs. Blood clots may develop.

If a clot mostly or completely blocks blood flow to the **heart**, it causes a **heart attack**.

If a clot mostly or completely blocks blood flow to the **brain**, it causes a **stroke**. Stroke happens when the brain doesn't get enough blood. Without enough blood, brain cells start to die.

The good news is that you can take steps to lower your chances of having a heart attack or stroke, or other heart problems. Here are some things you can do:

 Don't smoke. Smoking hurts your heart and increases your risk of stroke. If you smoke, try to quit.

- Get more exercise. Try to do at least 2 hours and 30 minutes of aerobic exercise each week, and muscle-strengthening exercises on at least 2 days each week.
- Eat heart-healthy foods. Focus on eating fruits and vegetables, whole grains, fat-free or low-fat dairy products, fish, beans, peas, nuts, and lean meats.
- **Eat less salt.** Use spices, herbs, lemon, and lime instead of salt to flavor your food.
- If you drink alcohol, don't have more than one drink each day. Too much alcohol raises your blood pressure and can raise your risk of stroke and other illnesses.
- Get a blood pressure test. If it is high, talk to your doctor about how to lower it.
- Get your cholesterol tested. If it is high, talk to your doctor or nurse about losing weight (if you're overweight), getting more exercise, eating foods low in cholesterol and saturated fat, and possibly taking medicine to help.
- Get tested for diabetes. If you have diabetes, keep an eye
 on your blood glucose levels. High blood glucose levels can
 play a role in cardiovascular disease (see box).
- Take your medicine. If your doctor has prescribed medicine to help you, take it exactly as you have been told to.



Understanding heart disease

Cardiovascular disease includes high blood pressure, stroke, heart failure, and coronary artery disease (CAD). CAD is caused by a narrowing of the arteries near the heart due to fatty buildups of plaque. It's likely to produce angina (chest pain), heart attack, or both.

Heart Attack and Stroke Warning Signs

Heart Attack

A heart attack happens when the heart does not get enough blood flow. During a heart attack, heart muscle can be permanently damaged. Many people think a heart attack is sudden, like a "movie" heart attack, where someone clutches her chest and falls over. But the truth is that many heart attacks start slowly as mild pain or discomfort. These feelings may even come and go. For both women and men, the most common sign of a heart attack is pain or discomfort in the center of the chest. The pain or discomfort can be mild or strong. The discomfort may be constant or it may come and go over several minutes.

For women, though, chest pain may not be the first sign that your heart is in trouble. Before a heart attack, women have reported unusual tiredness, trouble sleeping, heartburn, a cough, heart flutters, or loss of appetite.

These are symptoms that could mean a heart attack is happening:

 Chest discomfort. Most heart attacks involve discomfort in the center of the chest that lasts more than a few minutes, or that goes away and comes back. It can feel like uncomfortable pressure, squeezing, fullness, or pain.

Get help right away

If you have signs of a heart attack or stroke, call 911. Call right away — in 5 minutes or less. Learn more about heart attack symptoms in women at http://www.womenshealth.gov/heartattack.

- Discomfort in other areas of the upper body. Symptoms can include pain or discomfort in one or both arms, the back, neck, jaw, or stomach.
- **Shortness of breath.** This may occur with or without chest discomfort.
- Other signs. These may include breaking out in a cold sweat, nausea, or lightheadedness.

Stroke

A stroke happens when part of the brain doesn't get the blood it needs. Brain cells can die during a stroke. There are two kinds of stroke:

 An ischemic (iss-KEE-mik) stroke happens when blood is blocked from getting to the brain. A hemorrhagic (heh-muh-RA-jik) stroke happens when a blood vessel in the brain bursts, and blood leaks into the brain.

A person might also have a "mini-stroke," or a transient ischemic attack (TIA). This happens when, for a short time, less blood than normal gets to the brain. You may have some signs of a full stroke, or you may not notice any signs at all. A TIA can last a few minutes or up to 24 hours. Then you're back to normal.

TIAs are important warning signs to reduce your risk because they are a sign that a stroke will likely occur in the future. TIAs can occur days, weeks, or even months before a major stroke. In about half the cases, the stroke happens within 1 year of the TIA.

The signs of a stroke come on all of a sudden and are different from the signs of a heart attack. Signs include **sudden:**

- Numbness or weakness of the face, arm, or leg, especially on one side of the body
- Confusion, trouble speaking or understanding
- Trouble seeing in one or both eyes
- Trouble walking, dizziness, loss of balance or coordination
- Severe headache with no known cause



Diabetes

Diabetes means that your blood glucose (sugar) is too high. Your blood always has some glucose in it because the body uses glucose for energy. It's the fuel that keeps you going. But too much glucose in the blood is not good for your health.

When you take steps to prevent diabetes, you also lower your risk of heart disease, stroke, kidney disease, blindness, and amputation. Small changes in your lifestyle can make a difference.

Steps you can take:

- Get moving. Although health benefits can be gained from any increase in your physical activity, the most significant health benefits may be gained by doing the following each week:
 - 2 hours and 30 minutes of moderate-intensity aerobic physical activity

or

1 hour and 15 minutes of vigorous-intensity aerobic physical activity

or

A combination of moderate- and vigorous-intensity aerobic physical activity

and

- Muscle-strengthening activities on 2 days
- Stay at a healthy weight. Being overweight raises vour risk of diabetes. If you're overweight, start making small changes to your eating habits by adding more whole-grain foods, fruits, and vegetables. Start exercising more, even if taking a short walk is all you can do for now. If you're not sure where to start, talk to your doctor. Even a small amount of weight loss — 10 to 15 pounds — has been proven to delay or even prevent the onset of type 2 diabetes.



You can prevent the health problems caused by diabetes!

- **Eye disease and blindness.** Control your blood glucose and blood pressure and get a dilated eye exam once a year.
- Heart health. To protect your heart and blood vessels, eat right, increase your activity, don't smoke, and keep healthy blood glucose, blood pressure, and cholesterol levels. Eat a healthy diet that is low in salt and high in non-starchy vegetables. Work with a dietitian to plan healthy meals. If you're overweight, talk about how to safely lose weight. Ask about a physical activity (or exercise) program. Quit smoking if you currently do. Get a hemoglobin A1C test at least twice a year to determine what your average blood glucose level was for the past 2 to 3 months. Get your blood pressure checked at every doctor's visit (or at least once a year). Get your cholesterol checked at least once a year. Take medications if prescribed by your doctor.
- Kidney disease. Control blood glucose and blood pressure. See your doctor if your urine is cloudy or bloody, if you feel like you have to urinate often, if you have pain or burning when you urinate, or if you have back pain, chills, and fever. Have a urine test once a year.

- Foot problems. Check your feet every day for cuts, sores, bumps, blisters, or red spots. Wash your feet daily and dry them carefully. Ask your doctor to check your feet at every office visit. Have a complete foot exam four times a year.
- Mouth problems. Twice a year, have a dentist clean your teeth
 and check your gums. Use dental floss at least once a day. Brush
 your teeth with a soft toothbrush after every meal.
- Nerve damage. You can help keep your nervous system
 healthy by keeping your blood glucose as close to normal as
 possible, getting regular physical activity, not smoking, taking
 good care of your feet each day, having your doctor or nurse
 examine your feet at least four times a year, and getting your
 feet tested for nerve damage at least once a year.
- Flu and pneumonia. Get a flu vaccine every year. Ask your doctor about getting a vaccine to protect you from pneumonia.
 Being sick can raise your blood glucose. Moreover, illness can stop you from eating properly, which further affects blood glucose. Watch your blood glucose carefully if you are sick with the flu or a cold.

Coping with Many Chronic Health Conditions

What are chronic diseases?

Chronic diseases are illnesses that you can't catch and that last a long time, do not get better suddenly, and are rarely cured completely. Examples of chronic diseases include heart disease, cancer, stroke, diabetes, and arthritis. Although chronic diseases are more common among older adults, they affect people of all ages.

Many chronic diseases share the same risk factors. (See Understanding Risk Factors on page 4 for more information). For example, smoking can contribute to heart disease, diabetes, and stroke. If you can get rid of a risk factor — by quitting smoking, for example — then you can generally lower your chances of developing many chronic diseases.

Dealing with more than one chronic disease

Having more than one chronic disease at a time is called having "multiple chronic conditions," or MCC. If you have MCC, you may be stressed just keeping up with your doctor visits. You likely need to see different specialists for your many issues. You may get confused by the different instructions and medications you get from each doctor. Also, it can cost a lot of money to have MCC, because you may need to take several prescription medications. Costs can add up quickly.

Steps you can take:

- Take notes when you visit each doctor, so you remember important instructions
- Ask your doctor's office to send a letter after each visit to your other doctor(s), so everyone is up to date on your health care
- Use an organizer to sort your medication so you take the right medicines each day



Preventing chronic diseases

Chronic diseases are the most common and cost the most of all health problems, but they are also the most preventable. Much of the illness, disability, and early death related to chronic diseases are caused by one of four things:

- Tobacco use
- · Lack of physical activity
- Poor eating habits
- Too much alcohol use

By making some changes in your lifestyle — like quitting smoking, getting more exercise, eating better, and drinking less alcohol — you can prevent many chronic conditions. If you already have more than one chronic condition, making these changes may help you to feel better and prevent more health problems.



Physical Activity for Health

You have probably heard by now that physical activity is good for you. Well, the news in favor of regular physical activity keeps coming in! An active lifestyle can lower your risk of early death from a lot of causes. There is strong evidence that regular physical activity can also lower your risk of:

- Heart disease
- Stroke
- · High blood pressure

What is metabolic syndrome?

Metabolic syndrome is a group of conditions that put you at risk for heart disease and diabetes. These conditions are

- High blood pressure
- High blood glucose levels
- High levels of triglycerides, a type of fat, in your blood
- · Low levels of HDL, the good cholesterol, in your blood
- · Too much fat around your waist

- Unhealthy cholesterol levels
- Type 2 diabetes
- Metabolic syndrome (see box)
- Colon cancer
- Breast cancer
- Falls
- Depression



Regular activity can help you reach and stay at a healthy weight. It can also improve your cardiorespiratory (heart, lungs, and blood vessels) and muscular fitness. For older adults, activity can improve mental function.

It's never too late to begin physical activity. If you haven't been active for a while, though, check with your doctor before starting an exercise program.

Physical activity may also help:

- Improve functional health for older adults (your healthrelated quality of life)
- Reduce waistline size
- · Lower risk of hip fracture

- · Lower risk of lung cancer
- Lower risk of endometrial cancer
- Keep a healthy weight
- Increase bone density, which can lower your risk of bone loss
- Improve sleep quality

So what do you need to do to be active? Health benefits are gained by doing the following each week:

2 hours and 30 minutes of moderate-intensity aerobic physical activity

or

 1 hour and 15 minutes of vigorous-intensity aerobic physical activity

or

A combination of moderate- and vigorous-intensity aerobic physical activity

and

 Muscle-strengthening activities on 2 or more days (like working out with hand weights)

You can gain even more benefits by boosting activity to 5 hours of moderate-intensity or 2 hours and 30 minutes of vigorous-intensity aerobic physical activity each week.

Examples of moderate and vigorous physical activities		
	Moderate activities	Vigorous activities
Leisure activities	Walking at a brisk pace, ballroom dancing, leisure- ly bicycling, roller skating, canoeing	Jogging, running, bicycling fast or uphill, jumping rope, swim- ming continuous laps
minton, downhill skiing, voll Frisbee playing ketl		Singles tennis, beach volleyball on sand, bas- ketball game, soccer, cross-country skiing
Activities at home	Pushing a power lawn mower, gardening, raking leaves, shoveling light snow, moderate housework, hand washing/waxing a car, actively playing with children, riding a stationary bike	Pushing a hand mower, heavy or rapid shov- eling (more than 10 pounds per minute), carrying items weigh- ing 25 pounds or more up a flight of stairs
Activities at work	Maid service, waiting tables, feeding or groom- ing farm animals, manu- ally milking cows, pick- ing fruits or vegetables, walking while carrying a mailbag	Teaching an aerobic dance class, heavy farm work

Healthy Eating

Eating a healthy diet full of nutrients can help you stay at a healthy weight and may help protect you from certain diseases. A nutrient is anything in food that:

- Provides energy
- Helps your body "burn" another nutrient to provide energy
- Helps build or repair tissue



Making healthy choices can sometimes be hard, but there are easy changes you can make to eat better. To help prevent heart disease, stroke, and perhaps other diseases, you should eat mainly:

- Fruits and vegetables
- Grains (at least half of your grains should be whole grains, such as whole wheat, oatmeal, and brown rice)
- Fat-free or low-fat versions of milk, cheese, yogurt, and other milk products
- Fish, skinless poultry, lean red meats, beans, eggs, and nuts
- Polyunsaturated and monounsaturated fats (some foods that have these "good" fats include salmon, avocados, olives, walnuts, and olive oil)

An unhealthy diet and not exercising help make someone overweight or obese. Being overweight raises the risk of having some health problems like heart disease, type 2 diabetes, high blood pressure, stroke, breathing problems, arthritis, gall-bladder disease, osteoarthritis, and some cancers.

You can avoid unhealthy foods by limiting:

 Saturated fat (Saturated fat is the main dietary cause of high blood cholesterol. It is found mostly in foods from animals and some plants.)

- Trans fat (The amount of trans fat content in foods is printed on the Nutrition Facts label. Keep trans fat intake to less than 1 percent of total calories. For example, if you need 2,000 calories a day, you should consume less than 2 grams of trans fat.)
- Cholesterol
- Sodium
- Added sugars

To stay at a healthy weight, you need to balance the calories you eat with the calories you use up (burn). To lose weight, you need to burn more calories than you eat. A healthy diet and physical activity can help you control your weight.

Steps you can take:

- Focus on fruits. For a 2,000-calorie diet, you will need 1½
 to 2 cups of fruit each day (like one small banana, one large
 orange, and ¼ cup of dried apricots or peaches).
- Vary your veggies. Eat more dark green veggies (such as broccoli, kale, spinach, and other dark leafy greens); orange veggies (like sweet potatoes or carrots); and beans and peas. For a 2,000-calorie diet, you will need 2 to 2½ cups of vegetables each day (like 12 baby carrots and 1 cup of cooked spinach).
- Get your calcium-rich foods. Get 3 cups of low-fat or fatfree milk (or the same amount of low-fat yogurt and/or lowfat cheese) every day. One cup of milk equals 1½ ounces of

- hard cheese or one regular container (8 ounces) of yogurt. Lactose-free milk products and/or other calcium-fortified foods and drinks (like orange juice, salmon, spinach, and cereals) can give you calcium if you don't drink regular milk.
- Make half your grains whole. Eat at least 3 ounces of wholegrain cereals, breads, crackers, rice, or pasta every day. One ounce is about one slice of bread, 1 cup of breakfast cereal, or ½ cup of cooked rice or pasta. Eat whole-wheat bread instead of white bread or brown rice instead of white rice.
- **Eat fish.** Broil, bake, steam, or grill your fish instead of frying it. Fish and shellfish contain a type of fat called omega-3 fatty acids it's good for you! Research suggests that eating omega-3 fatty acids lowers your chances of dying from heart disease. Fish that naturally contain more oil (such as salmon, trout, herring, mackerel, anchovies, and sardines) have more omega-3 fatty acids than lean fish (such as cod, haddock, and catfish). You can also get omega-3 fatty acids from plant sources, such as:
 - Canola oil
 - Soybean oil
 - Walnuts
 - · Ground flaxseed (linseed) and flaxseed oil
- Go lean with protein. Choose lean meat, poultry, and fish.
 Bake it, broil it, or steam it. Mix up your protein sources with more beans, peas, nuts, and seeds.

- Limit saturated fats and trans fats. Get less than 10 percent of calories from saturated fats. Most of the fats you eat should come from foods such as fish, nuts, and vegetable oils. When cooking meat, poultry, and fish, choose lean cuts. When having milk products, choose low-fat or fat-free kinds. Avoid trans fats, which are found in some processed foods (such as packaged cakes and cookies). Saturated fats, trans fats, and cholesterol tend to raise "bad" (LDL) cholesterol levels in the blood, which in turn increases the risk of heart disease. To lower risk of heart disease, cut back on foods containing saturated fats, trans fats, and cholesterol.
- Limit salt. Eat less than 2,300 mg of sodium (about 1 teaspoon of salt) each day. If you are older than age 51, or if you are African-American (at any age), or if you have hypertension, diabetes, or chronic kidney disease, you should eat less than 1,500 mg of sodium each day. Most of the salt we eat each day actually comes from processed foods rather than salt that we add to foods that we cook. Cut back on frozen dinners, pizza, packaged mixes, canned soups or broths, and salad dressings these often have a lot of sodium. Make sure to check the sodium content on the Nutrition Facts label when buying food.

- Limit added sugars. Since sugars contribute calories with few, if any, nutrients, look for foods and beverages low in added sugars. Read the ingredient list and make sure that added sugars are not one of the first few ingredients. Some names for added sugars include sucrose, glucose, high fructose corn syrup, corn syrup, maple syrup, and fructose.
- Watch your portion sizes. Eating too many calories, even
 if they come from healthy foods, can lead to weight gain. If
 you are eating in a restaurant, split your meal with a friend if
 it's large. At home, use small plates for your meals.
- Balance your calories. Remember that the calories that come in should be burned. Too many calories will lead to weight gain if they are not burned by exercise.

How many calories should I eat?

Use the Interactive Tools at My Pyramid.gov at http://www.mypyramid.gov. They will show you the number of calories you need to eat each day to keep your current weight. If you are overweight, eat fewer calories than you burn to lose weight.

Fighting the Flu

"Flu" refers to sickness caused by a number of different influenza viruses. Most healthy people recover from the flu without problems, but certain people are at high risk for serious complications. Some people may even die from the flu. Pregnant women are especially at risk for serious complications from the flu.

Flu symptoms may include:

- Fever
- Coughing
- Sore throat
- · Runny or stuffy nose
- Headaches
- Body aches
- Chills
- Fatigue

In H1N1 flu infection, vomiting and diarrhea may also occur.

Annual outbreaks of the seasonal flu usually occur during the late fall through early spring. Flu is contagious — that means it can be spread from person to person. Because flu viruses change from year to year, people may not have natural immunity (protection); therefore, a seasonal flu vaccine is available. Vaccination is the best protection against getting the flu. Flu



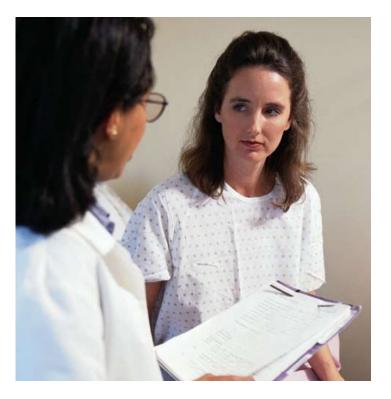
vaccines are safe and recommended for all individuals 6 months of age and older. Flu vaccines are also safe during pregnancy and can be received during the first, second, or third trimester of pregnancy.

Steps you can take:

- Cover your nose and mouth with a tissue when you cough or sneeze. Throw the tissue in the trash after you use it.
- Wash your hands often with soap and water, especially after you cough or sneeze. You can also use alcohol-based hand cleaners.
- Avoid touching your eyes, nose, or mouth. Germs spread this way.
- Try to avoid close contact with sick people.
- Stay home if you are sick until at least 24 hours after you no longer have a fever (100°F or 37.8°C) or signs of a fever (without the use of a fever-reducing medicine, such as Tylenol). Ask your doctor about how long to stay away from others.

For current information on the flu, visit **www.flu.gov**.

Cervical Health



Cervical cancer happens when normal cells in the cervix change into cancer cells. Before the cells turn into cancer, abnormal cells develop on the cervix that can be found by a Pap test. Treating the cervix before the abnormal cells become cancerous can prevent cancer.

Most cases of cervical cancer are caused by the human papillomavirus (HPV). HPV is a virus that is passed from person to person through genital contact, most often during vaginal and anal sex. You are more likely to get HPV if you have more than one partner. However, any woman who has ever had genital contact with another person can get HPV. Most women infected with HPV will not get cervical cancer. Pap tests look for changes in the cervical cells that could become cancerous if not treated.

Steps you can take:

 Get a Pap test. The best time to get a Pap test is between 10 and 20 days after the first day of your last period. Do not have the test done when you have your period, and don't use douches, vaginal medicines (unless your doctor tells you to), spermicide foams, creams, or jellies 2 days before your Pap test. Talk to your doctor about how often to get Pap tests.

- If you have sex, stay with one partner who only has sex with you. HPV is a group of viruses that can be passed through sexual contact. HPV can cause changes on the cervix that can lead to cervical cancer. Using condoms every time you have sex may reduce your chances of getting HPV. HPV can also be passed by skin-to-skin contact with sores or infected genital skin that looks normal.
- Ask your doctor about an HPV test. In combination with a Pap test, an HPV test helps detect the types of HPV that cause cervical cancer.
- Depending on your age, get the HPV vaccine. Scientists
 have made two vaccines (shots) that help stop certain types
 of HPV. The vaccines help protect against the types of HPV
 that most often cause cervical cancer. The HPV vaccines
 (called Gardasil and Cervarix) are recommended for females
 ages 9 to 26. One of these two vaccines is given in three

- doses (shots) over a 6-month period. It is very important to get all three doses. Women who are pregnant should not get the HPV vaccine until after the baby is born.
- Don't smoke.

How common is HPV?

Genital HPV is the most common sexually transmitted infection (STI) in the United States. About 20 million Americans ages 15 to 49 currently have HPV. And at least half of all sexually active men and women get genital HPV at some time in their lives. You are more likely to develop cervical cancer if you smoke, have HIV or reduced immunity, or don't get regular Pap tests.

Reproductive Health

Did you know that your reproductive system is one of the most fragile systems of your body? It can easily get infected or injured, and, if it does, you might have long-term health problems, including difficulty getting pregnant or carrying a pregnancy.

Taking simple steps to prevent getting or spreading HIV/AIDS and other sexually transmitted infections (STIs) will pay off both for you and for those you love. Taking control and getting treatment is very important. It's not only important because it will keep you from spreading the infection, but getting treatment may also stop serious problems, including infertility and even death.

Steps you can take:

- Know that many methods of birth control, like birth control pills, shots, implants, or diaphragms, will not protect you from HIV or other STIs. If you use one of these methods, be sure to also use a latex condom or dental dam (used for oral sex) correctly with each sex act.
- Don't share needles or IV drug equipment for illegal drugs like heroin and cocaine, or for legal drugs like insulin. If you get a tattoo or body piercing, make sure you do so at a place that properly sterilizes the equipment and needles.
- Talk frankly with your doctor or nurse and your sex partner(s) about any STIs you or your partner have now

- **or have had.** Talk about any sores or discharge in the genital area. If you are living with HIV, be sure to tell your partner and your doctor.
- Have regular pelvic exams. Talk with your doctor about how often you need them. Ask your doctor to test you for STIs.
- If you are pregnant, get tested for chlamydia, gonorrhea, hepatitis B and C, HIV, and syphilis. Get tested as soon as you think you may be pregnant. If you have HIV and are pregnant, you can greatly lower the chances of giving HIV to your baby by taking medicine. Talk to your doctor.

For more information, call:

CDC National STD & AIDS Hotlines

- 800-CDC-INFO or 800-232-4636 English Service (24 hours a day, 7 days a week)
- 800-CDC-INFO or 800-232-4636 Spanish Service (24 hours a day, 7 days a week)
- 888-232-6348 TTY Service (24 hours a day, 7 days a week)

Preconception Health

Preconception health is a woman's health before she becomes pregnant. It includes knowing how health conditions and risk factors could affect a woman or her unborn baby if she becomes pregnant. For example, some foods, habits, herbs, and medicines can harm your baby — even before he or she is conceived. Some health problems, such as diabetes, also can affect pregnancy.

Every woman should be thinking about her health whether or not she is planning pregnancy. One reason is that about half of all pregnancies are not planned. Unplanned pregnancies have a greater risk of preterm birth and low-birth-weight babies. Another reason is that, despite important advances in medicine and prenatal care, about 1 in 8 babies is born too early. By taking action on health issues and risks before pregnancy, you can prevent problems that might affect you or your baby later.

Steps you can take:

• Take 400 to 800 micrograms (400 to 800 mcg or 0.4 to 0.8 mg) of folic acid every day if you are planning or capable of pregnancy. This will lower your child's risk of some birth defects of the brain and spine, including spina bifida. All women need folic acid every day. Talk to your doctor about your folic acid needs. Some doctors prescribe prenatal vitamins that contain higher amounts of folic acid.



- · Stop smoking and drinking alcohol.
- If you have a medical condition, be sure it is under control. Some conditions that can affect pregnancy or be affected by it include asthma, diabetes, lupus, oral health, obesity, thyroid disease, blood clotting disorders, or epilepsy.
- Talk to your doctor about any over-the-counter and prescription medicines you are using. These include dietary or herbal supplements. Be sure your vaccinations are up to date.
- Avoid contact with toxic substances or materials that could cause infection at work and at home. Stay away from chemicals and cat or rodent feces.
- **Take care of your teeth and gums.** Infections in your teeth and gums can be dangerous during pregnancy.

Pregnancy

If you know you are pregnant, or think you might be, call your doctor as soon as possible and set up a visit. You will need to visit your doctor many times during your pregnancy. Follow your doctor's schedule for visits and don't miss them!

You will notice your body is changing in many ways. These changes may be strange at first, but they are all normal. Try to stay as healthy as you can — for you and your new baby!

Steps you can take:

- Stop smoking, drinking alcohol, and doing drugs. These can cause long-term damage to your baby. Ask your doctor for help.
- Eat healthy foods. This includes lots of fruits, vegetables, whole grains, and calcium-rich foods. You need 1000 milligrams (mg) of calcium per day. (If you are a teen, you need at least 1300 mg of calcium each day.) Avoid eating a lot of fatty foods such as butter and fatty meats. Choose foods lower in fat, like chicken and turkey (without the skin) and fish. Check with your doctor to find out how much weight gain during pregnancy is healthy for you.
- Don't eat uncooked or undercooked meats or fish. Do not eat any shark, swordfish, king mackerel, and tilefish (also called golden or white snapper) because these fish have high

- levels of mercury. Do not eat more than 6 ounces of "white" or "albacore" tuna or tuna steak each week.
- Limit caffeine from coffee, tea, sodas, medicines, and chocolate.
- Drink water. Water helps prevent constipation, hemorrhoids, excessive swelling, and urinary tract or bladder infections. Aim for 8 cups of fluids each day. If you drink enough fluid so that you rarely feel thirsty and produce 1.5 liters (6.3 cups) or more of colorless or slightly yellow urine a day, your fluid intake is probably good.
- Take at least 400 micrograms of folic acid daily. This will help prevent certain types of birth defects. Your doctor may prescribe a daily vitamin that has it, or you can buy folic acid pills. Eat foods high in folic acid like orange juice, leafy green vegetables, beans, peanuts, peas, and whole-grain products.
- Tell your doctor about all of the medicines you take. This
 includes prescriptions, over-the-counter medicines you buy
 without prescriptions, and herbals. Ask if they are safe to
 take while you are pregnant. Most of the time, the medicine
 a pregnant woman is taking does not affect her baby. But
 sometimes it can, causing damage or birth defects. Talk with
 your doctor about which drugs and supplements are safe.

- helps you in many ways. It prevents a lot of extra weight gain. It helps you have good posture, which will help you feel better later in your pregnancy. It can help you sleep better and have a shorter, easier labor. If you were physically active before getting pregnant, you can keep doing mild-to-moderate activity, like low-impact aerobic dance, swimming, or walking. If you were not physically active before getting pregnant, you still can become active, but start slowly. Try walking at first, then build up to more. Mild stretching, easy yoga poses, and weight training on exercise machines is okay. Talk to your doctor about which activities are good for you.
- Take care of your teeth and gums. If you are pregnant and have not had regular checkups, have a complete oral exam early in your pregnancy. Because you are pregnant, you might not receive routine x-rays. But if you must have x-rays for a dental problem needing treatment, the health risk to your unborn baby is small. Pregnant women may have changes in taste and develop red, swollen gums that bleed easily. This condition is called pregnancy gingivitis (jin-juh-VYT-uhss). It can be caused by both poor oral hygiene and higher hormone levels during pregnancy. So remember to brush and floss regularly!
- Avoid toxic chemicals. These include paint, paint thinners, cleaning products, and those used to kill bugs or that con-



- tain lead or mercury. Read the product label to see if it has a pregnancy warning.
- Avoid hot tubs, saunas, and unnecessary x-rays. Be sure to tell your doctor that you are pregnant if you need an x-ray. The doctor or nurse will recommend whether the x-ray is necessary.
- Avoid changing cat litter. It can carry and cause an infection that can cause birth defects. Wear gloves when gardening in areas cats may visit.
- Clean, handle, cook, and chill food properly to prevent food-borne illness.
- **Get enough sleep.** Try to get 7 to 9 hours of sleep every night.
- **Control the stress in your life.** Don't be afraid to say no to requests for your time and energy.
- Buckle up. Wearing a seat belt during car and air travel is safe while pregnant. The lap strap should go under your belly and across your hips. The shoulder strap should go between your breasts and to the side of your belly. Make sure it fits snugly.
- Learn all you can. Read books, watch videos, go to a childbirth class, and talk with other moms.



Breastfeeding

Breastfeeding is more than a lifestyle choice — it's an important health choice. Breastfeeding lowers the risk of certain health problems in both babies and mothers. It is also a joyful bonding experience.

Why breastfeed?

- Breastfed babies are more able to fight off infection and disease, such as diarrhea, ear infections, and respiratory illnesses such as pneumonia. They are sick less often and have fewer visits to the doctor.
- Breast milk has the perfect amount of fat, sugar, water, and protein to help your baby grow just right.
- Most babies find breast milk easier to digest than formula.
- A mother can satisfy her baby's hunger right away with breastfeeding.
- Breastfeeding encourages a mother to take some quiet relaxed time for herself and her baby, helping them bond.
 Physical contact is important to newborns and can help them feel more secure, warm, and comforted. Breastfeeding mothers may have increased self-confidence and feelings of closeness and bonding with their infants.
- Breastfeeding helps the uterus to get back to its original size and lessens any bleeding a woman may have after giving birth.

For detailed information on breastfeeding please visit http://www.womenshealth.gov/breastfeeding.

- When you breastfeed, there are no bottles and nipples to sterilize.
- Breast milk is free.

Steps you can take:

- Put your baby to the breast to nurse as soon as possible after birth. Frequent breastfeeding helps your body make even more milk for the baby.
- Give your baby only breast milk for the first 6 months of life.
 It is even better for your baby to breastfeed for 12 months or longer.
- You can give solid foods when your baby is 6 months old, while you keep breastfeeding.
- Be patient with yourself! What works for one mom might not work for you. Relax and try to find a routine and positions that work for you and your baby. It will get easier with time.



Did you know?

The Affordable Care Act (also called "health care reform") requires companies to provide reasonable, unpaid break time and a private, non-bathroom space for breastfeeding mothers to express milk for the first year of a child's life. Learn more at http://www.healthcare.gov.

Breastfeeding is linked to a lower risk of these health problems: In infants: Ear infections Stomach viruses Diarrhea Respiratory infections · Atopic dermatitis, also known as eczema or very itchy, dry skin Asthma Obesity Type 1 and type 2 diabetes Childhood leukemia Sudden infant death syndrome or SIDS · Necrotizing enterocolitis, a disease that affects the gastrointestinal tract in preterm infants In moms: Type 2 diabetes Breast cancer Ovarian cancer Postpartum depression

Menopause

Menopause is a normal change in your life when your periods stop. During menopause, your body slowly makes less of the hormones estrogen and progesterone. As you near menopause, you may have symptoms from the hormone changes in your body. Many women wonder if these changes are normal, and many are confused about how to treat their symptoms. You can feel better by learning all you can about menopause and by talking with your doctor about your health and your symptoms.

Steps you can take:

- Hot flashes. Avoid hot environments, eating or drinking hot or spicy foods, alcohol, caffeine, and stress, all of which can bring on hot flashes. Dress in layers, and keep a fan in your home or workplace. Regular exercise might also bring relief. Ask your doctor about taking an antidepressant medicine. These medicines can be helpful for some women.
- Vaginal dryness. Use an over-the-counter vaginal lubricant.
 There are also prescription estrogen replacement creams that your doctor might give you. If you have spotting or bleeding from estrogen creams, see your doctor.
- Problems sleeping. Avoid alcohol, caffeine, large meals, and working right before bedtime. Try to keep your bedroom at a comfortable temperature. Avoid napping during the day,



and try to go to bed and get up at the same times every day. Exercise can also help. But avoid exercise close to bedtime.

 Memory problems. Ask your doctor about mental exercises you can do to improve your memory. Try to get enough sleep and to be physically active. Mood swings. Try to get enough sleep and to be physically active. Ask your doctor about relaxation exercises you can do. Ask your doctor about taking an antidepressant medicine, which could help.

There are a lot of ways to stay healthy during this time in your life:

- Be active and get more exercise. Try to get at least 2 hours and 30 minutes of moderate exercise each week and 2 days of muscle-strengthening exercise. Try weight-bearing exercises, like walking, running, or dancing. (See the section on Physical Activity for Health on page 26 for more details.) All older adults should avoid inactivity. Some physical activity is better than none, and older adults who participate in any amount of physical activity gain some health benefits.
- **If you smoke, quit.** Ask your doctor for help. (See page 53 for more ideas on Quitting Smoking.)
- **Eat healthy.** Eat lots of whole-grain products, vegetables, and fruits. Choose foods low in fat and cholesterol.
- **Get enough calcium to keep your bones strong.** Before age 50, you need about 1,000 mg of calcium per day. After age 50, you need 1,200 mg per day.

- If you drink alcohol, drink moderately. Limit it to no more than one drink per day.
- Control your weight.
 Ask your doctor what a healthy weight is for you.
- Talk to your doctor about bone health. Ask if you're getting enough calcium and vitamin D. Get a bone density test if you're older than 65, or if your doctor says you have a high chance of getting osteoporosis. Ask about taking medicine to help preserve bone and slow down bone loss.
- Get preventive screenings. Have your blood pressure, cholesterol, and blood glucose checked.



Have regular clinical breast exams and mammograms (a breast x-ray).

To help control the symptoms of menopause, some women can take hormones, called menopausal hormone therapy (MHT). Once a woman reaches menopause, MHT currently is recommended only as a short-term treatment of moderate to severe symptoms such as hot flashes or night sweats. Women who have problems with vaginal dryness can try lower dose estrogen products, such as vaginal creams, rings, and tablets. Long-term use of MHT is no longer advised, and doctors very rarely prescribe MHT to prevent certain chronic diseases, like osteoporosis. Postmenopausal women **should not** take MHT as they grow older to prevent problems like heart disease. In fact, combination hormone therapy can increase the risk of heart disease in healthy postmenopausal women. A woman should talk about the benefits and risks of using MHT with her doctor to decide if MHT is right for her.

When using menopausal hormone therapy (MHT)

- Use at the lowest dose that helps
- Use for the shortest time needed

Who should NOT use MHT for menopause:

Women who:

- Think they are pregnant
- Have problems with vaginal bleeding
- Have had certain kinds of cancers (such as breast and uterine cancer)
- Have had a stroke or heart attack
- Have had blood clots
- Have liver disease

Finding Breast Cancer Early

Breast cancer is the second most common type of cancer in women (the first is skin cancer). The older a woman is, the greater her risk. Most women who develop breast cancer have no special risk factors for the disease, so it is critical that you talk with your doctor and work out a plan that meets your needs.

Reasons to call your doctor include:

- A lump in or near your breast or under your arm
- · Thick or firm tissue in or near your breast or under your arm
- A change in the size or shape of your breast
- Nipple discharge (fluid that is not breast milk)
- Nipple changes, such as a nipple that points or faces inward (inverted) into the breast
- Changes to your breast skin, areola, or nipple, such as itching, redness, scaling, dimples, or puckers
- Wanting to talk to your doctor about breast cancer screening

Keep in mind that most breast changes are not cancer. For instance, nipple discharge can be caused by birth control pills, some medicines, and infections. Or, a breast lump could be a cyst, which is a fluid-filled lump that is not cancer. Early breast cancer usually does not cause pain. Still, any breast changes or

pain should be checked out by a doctor. If you notice a change in your breast, call your doctor and schedule a visit. Don't wait until your "next checkup."

Steps you can take:

- Get a mammogram. It is the best way to find out if you have breast cancer. A mammogram is an x-ray picture of the breast. It can find breast cancer that is too small for you or your doctor to feel. Starting at age 40, women should talk with their doctor and make a decision about whether to have screening mammograms and how often to have them. Recommendations vary, but they should be at least every 2 years. Depending on factors such as family history and your general health, your doctor may recommend a mammogram more frequently. Discuss how often you need a mammogram with your doctor. If your mother or sister had breast cancer, insist that you have a mammogram. Have the mammogram done right after your period because it might be less painful and more accurate than during your period.
- Get a clinical breast exam (CBE) if you have concerns about anything you find in your breast. This is a breast exam done by your doctor or nurse. He or she will check

your breasts and underarms for any lumps, nipple discharge, or other changes. Ask your doctor if you need a CBE.

Get to know your breasts. Some women check their own breasts for changes. If you find a change, it's important to call your doctor or nurse for a visit. Make sure to watch the change you found until you see your doctor or nurse. Although research data do not support an official recommendation that all women do breast self-exams, knowing your body is key to pointing out any concerns to your doctor.





Lump



Skin dimpling



Change in skin color or texture



Change in how the nipple looks, like pulling in of the nipple



Clear or bloody fluid that leaks out of the nipple

UrinaryTract Health

Proper functioning of the urinary system is a natural part of your day. It is something that you probably don't think about until you have a problem. The urinary tract makes and stores urine. There are three main parts of the urinary tract – the urethra (which directs the urine from the bladder out of the body, the bladder (which collects and holds urine until you are ready to urinate), and the kidneys (which clear wastes from the body). Bacteria (germs that get into your urinary tract) can cause a urinary tract infection, or UTI. Most of the germs come from the anal area. They can enter through the urethra, go into the bladder, and even go up into the kidneys and cause infection. A UTI can involve any of the parts of your urinary tract — the kidneys, the bladder, and the urethra.

There are steps you can take to try to prevent a UTI. Following these steps can decrease your chances of getting a UTI. These steps may not always be enough, so if you have symptoms of a UTI such as pain, bleeding, or frequent urination, call your doctor.

Steps you can take:

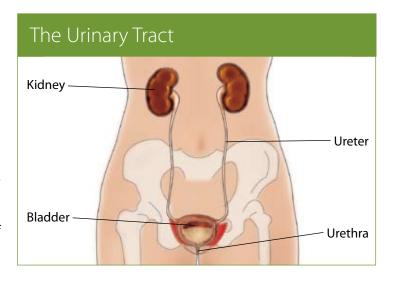
 Urinate when you need to. Don't hold it. Holding urine allows bacteria to grow and cause problems.

- **Urinate before and after sex.** If you use a diaphragm for contraception make sure to empty your bladder after sex and after removal of the diaphragm, too.
 - Drink water every day.
 Drinking six to eight
 glasses of water each day
 can help keep your bladder
 healthy. You can also drink
 cranberry juice, which may
 fight infection. However,
 don't drink cranberry juice
 if you're taking the bloodthinning medication warfarin. Possible interactions
 between cranberry juice
 and warfarin may lead to
 bleeding.



 Clean your anus and the outer lips of your vagina each day. The anus is the place where a bowel movement leaves your body, located between the buttocks. Make sure to wash from front to back and rinse well with water.

- Wipe from front to back. Doing so after urinating and after a bowel movement helps prevent bacteria in the anal region from spreading to the vagina and urethra.
- Don't use douches or feminine hygiene sprays. These can contain perfumes and chemicals that irritate the area and may increase the chance of infection.
- If you get a lot of UTIs and use spermicides or creams that kill sperm, talk to your doctor about using other forms of birth control.
- Wear underwear with a cotton crotch. Keep the area dry as much as possible.
- Take showers instead of tub baths. Bubble bath detergents can irritate the urinary tract and increase the chance of infection.



Colorectal Health

Colorectal refers to the colon and rectum. Colorectal cancer is often called a "silent" disease because symptoms don't always develop until it is difficult to cure. The good news is that colorectal cancer is preventable and mostly curable when detected early through regular screening tests.

Screening tests help your doctor find polyps, before you have symptoms. Polyps are growths that may turn into cancer. Finding and removing polyps may prevent colorectal cancer. Also, treatment for colorectal cancer is more likely to be effective when the disease is found early.

To find polyps or early colorectal cancer:

- People in their 50s and older should be screened.
- People who are at higher-than-average risk of colorectal cancer should talk with their doctor about whether to have screening tests before age 50, what tests to have, the benefits and risks of each test, and how often to schedule appointments.

Steps you can take:

Adopt a diet low in fat and high in vegetables and fruit.
 Diets high in vegetables and fruits have been linked with lower risk of colon cancer. Diets high in processed and/or red meats have been linked with a higher risk.

- Consider taking calcium pills. Higher intakes of calcium have been linked to reduced risks of colorectal cancer. Talk to your doctor or nurse about whether this is a good idea for you.
- Try to stay at a healthy weight. Ask your doctor about a healthy weight range for you.
- **Limit alcohol.** For women, drink no more than one alcoholic drink per day.
- If you smoke, quit. Ask your doctor or nurse for help.
- Get regular physical activity. See page 26 for more information.
- When you turn 50, start getting regular colorectal screening exams. These include yearly rectal exams and stool blood tests, as well as sigmoidoscopy every 5 years and colonoscopy every 10 years. If your family members developed cancer at a young age, talk with your doctor or nurse about testing before age 50.
- Consider genetic counseling and testing. People with a strong family history of colorectal polyps or cancer should consider genetic counseling to determine whether genetic testing may be right for them. If needed, this kind of testing can help you decide about getting tested and treated at an early age.

Healthy Eyes and Ears

Vision and hearing losses can happen as you age. Other problems with your eyes and ears can happen as you work and play. Prevention, early detection, and proper treatment for injury or disease to your eyes and ears will help you enjoy independence and a better quality of life.

Steps you can take:

- Get your eyes examined according to this schedule:
 - If you are between the ages of 18 and 39, discuss with your doctor when you should have a comprehensive dilated eye exam.
 - Get a baseline exam at age 40, then every 2 to 4 years (or as your doctor advises) until age 49.
 - Have an exam every 2 to 4 years until age 55, then every
 1 to 3 years until age 65, or as your doctor advises.
 - At ages 65 and older, get an exam every 1 to 2 years.

People at higher risk for eye diseases need to be examined more often. For example, adults with diabetes should have a dilated eye exam at least once a year. African-Americans over age 40, people with a family history, and everyone over age 60 are at higher risk for glaucoma and should have a dilated eye exam every 1 to 2 years. Eye diseases often have no warning signs in their early stage and can only be detected by an eye care professional.

- Have regular dilated eye exams. This is the best thing you
 can do to make sure your eyes are healthy and you are seeing your best. Your eye care professional will tell you how
 often you need to have one.
- Wear sunglasses to protect your eyes from harmful ultraviolet (UV) rays when outdoors. Choose sunglasses with 99 to 100 percent UVA and UVB protection, to block both forms of ultraviolet rays.



- Wear protective eyewear, such as polycarbonate safety glasses, safety goggles, or face shields, when working outdoors or with materials that can harm eyes and when playing sports.
- Eating a diet rich in fruits and vegetables, particularly dark leafy greens such as spinach, kale, or collard greens is important to keep your eyes healthy.
- Reduce eyestrain by adjusting your computer monitor appropriately, taking rest breaks when working on a computer, and sitting upright with your feet flat on the floor when working on a computer.
- Prevent hearing loss from noise. Pay attention to sounds around you that are at or above 85 decibels, such as concerts, fireworks, or lawn mowers. If you are around loud sounds for too long, wear earplugs or move away from the sound.
- **Get a hearing exam** every 10 years between the ages of 18 and 49 and every 3 years after that.
- Prevent ear infections. You can help prevent upper respiratory infections and a resulting ear infection by washing your hands often. Also, get a flu vaccine every year to help prevent flu-related ear infections.

- Ask your doctor if your medicines may hurt your ears.
 Some medicine (like certain antibiotics) can damage hearing.
- Be careful when listening to music through headphones.
 Many devices that people use today have noise levels much higher than 85 decibels. For example, an MP3 player at maximum level is roughly 105 decibels. Scientists recommend no more than 15 minutes of unprotected exposure to sounds that are 100 decibels. In addition, regular exposure to sounds at 110 decibels for more than 1 minute risks permanent hearing loss.



Healthy Bones

Women of all ages need to take steps to keep their bones strong. Unfortunately, millions of women already have or are at risk for osteoporosis (oss-tee-oh-puh-RO-sis). Osteoporosis means that your bones get weak, and you're more likely to break a bone. Because there are no symptoms, you might not know your bones are getting weaker until you break a bone! There are steps you can take to stop your bones from becoming weak and brittle.

Steps you can take:

 Get enough calcium each day. You can easily get it through many foods, including dairy products like milk, cheese, and yogurt, fortified cereals, oatmeal, spinach, and white beans.



If you don't eat enough of these foods, you can get extra calcium from calcium pills. Talk with your doctor to see if you need a calcium pill, and which kind is best for you. Remember:

- Adults under age 51 need 1,000 mg of calcium daily.
- Adults 51 and over need 1,200 mg of calcium daily.
- Get enough vitamin D each day. You can get vitamin D through sunlight and foods like salmon, low-fat or fat-free milk, and some yogurt with added vitamin D. Check food labels to see how much vitamin D you are getting. Talk to your doctor before taking vitamin D pills. Remember:
 - Adults ages 19 to 70 need 600 IU of vitamin D daily.
 - Adults ages 71 and older need 800 IU of vitamin D daily.
- Get moving. Being active helps your bones by slowing bone loss, improving muscle strength, and helping your balance.
 Weight-bearing exercises, like walking, dancing, jogging, stair-climbing, racquet sports, and hiking, can help prevent osteoporosis.
- **Eat a healthy diet.** You can get the nutrients you need by eating foods like lean meats, fish, low-fat or fat-free milk, green leafy vegetables, and oranges.

- **Don't smoke.** Smoking damages your bones.
- **Limit alcohol.** If you drink, do not drink more than one alcoholic drink per day.
- Make your home safe. Reduce your chances of falling: use a rubber bathmat in the shower or tub, remove throw rugs, and install grab bars in the bath or shower.
- **Get your bones tested.** If you are age 65 and older, get a bone density test. If you are between ages 60 and 64, weigh less than 154 pounds, and don't take estrogen, get a bone density test. Your doctor may recommend a bone density test if you are younger than 60 and have one or more risk factors for osteoporosis.
- Talk to your doctor about medicine. Some medicines can prevent or treat bone loss.
- Teach your daughter early. Making good choices for healthy bones should start in childhood and become habits that last. For more information, visit http://bestbonesforever.gov.



Quitting Smoking

Smoking is the number one cause of preventable illness and death in the United States. If you're a long-time smoker, you may think it's too late. But it's never too late to benefit from quitting. If you quit smoking, you are likely to add years to your life. You may also breathe more easily, have more energy, and save more money.

Other benefits include:

- Reduced cancer, heart attack, and lung disease risk
- · Better blood circulation
- · No smoke odor in your clothes and hair
- A better sense of taste
- A more sensitive sense of smell
- No more second-hand smoke for your family members

Steps you can take:

Research has shown that these five steps will help you to quit for good.

 Pick a date to stop smoking. Before that day, get rid of all cigarettes, ashtrays, and lighters everywhere you smoke. Do not allow anyone to smoke in your home. Write down why you want to quit, and keep this list as a reminder.

- Get support from your family, friends, and coworkers.
 Studies have shown you will be more likely to quit if you have help. Let the people important to you know the date you will be quitting, and ask them for their support. Ask them not to smoke around you or leave cigarettes out.
- Find substitutes for smoking and vary your routine. When you get the urge to smoke, do something to take your mind off smoking. Talk to a friend, go for a walk, or go to the movies. Reduce stress with exercise, meditation, hot baths, or reading. Try sugar-free gum or candy to help handle your cravings. Drink lots of water and juices. You might want to try changing your daily routine as well. Try drinking tea instead of coffee, eating your breakfast in a different place, or taking a different route to work.
- Talk to your doctor or nurse about medicines to help you quit. Some people have withdrawal symptoms when they quit smoking. These symptoms can include depression, trouble sleeping, feeling irritable or restless, and trouble thinking clearly. There are medicines to help relieve these symptoms. Most medicines help you quit smoking by giving you small, steady doses of nicotine, the drug in cigarettes that causes addiction. Talk to your doctor or nurse to see if one of these medicines may be right for you:

- **Nicotine patch:** worn on the skin and supplies a steady amount of nicotine to the body through the skin
- Nicotine gum or lozenge: releases nicotine into the bloodstream through the lining in your mouth
- Nicotine nasal spray: inhaled through your nose and passes into your bloodstream
- Nicotine inhaler: inhaled through the mouth and absorbed in the mouth and throat
- Bupropion (byou-PRO-pee-on): an antidepressant medicine that reduces nicotine withdrawal symptoms and the urge to smoke
- Varenicline (var-e-NI-kleen): a medicine that reduces nicotine withdrawal symptoms and the pleasurable effects of smoking
- Be prepared for relapse. Most people relapse, or start smoking again, within the first 3 months after quitting. Don't get discouraged if you relapse. Remember, many people try to quit several times before quitting for good. Think of what helped and didn't help the last time you tried to quit. Figuring these out before you try to quit again will increase your chances for success. Certain situations can increase your chances of smoking. These include drinking

- alcohol, being around other smokers, gaining weight, stress, or becoming depressed. Talk to your doctor or nurse for ways to cope with these situations.
- Get more help if you need it. Join a quit-smoking program
 or support group to help you quit. These programs can help
 you handle withdrawal and stress and teach you skills to
 resist the urge to smoke. Contact your local hospital, health
 center, or health department for information about quitsmoking programs and support groups in your area.

Hotlines and websites to help you quit

- Call the National Cancer Institute at 877-44U-QUIT to talk to a counselor.
- Call 800-QUIT-NOW (800-784-8669) to be connected to the hotline for your state. You can talk to a counselor and, in some cases, get free nicotine replacement therapy.
- Smokefree.gov (http://women.smokefree.gov) provides free information and professional help to women who are trying to quit smoking.

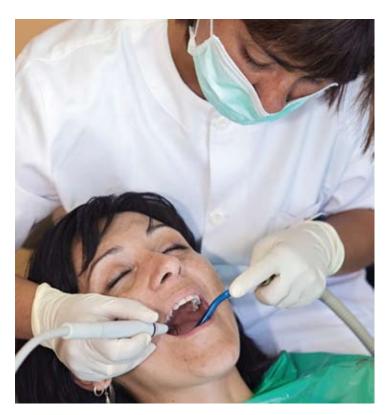
Oral Health

Good oral health does not just mean you have pretty teeth. Your whole mouth needs care to be in good health. The word "oral" refers to the mouth, which includes your teeth, gums, jawbone, and supporting tissues. Oral health can affect the health of your whole body.

The health of your mouth can be a sign of your body's health. Mouth problems are not just cavities, toothaches, and crooked or stained teeth. Many diseases, such as diabetes, HIV, cancer, and some eating disorders, can cause oral health problems. For instance, people with diabetes can develop tooth and gum problems if their blood glucose stays high. Regular dental exams help you maintain good oral health and avoid related health problems.

Steps you can take:

- Get regular checkups. Have an oral exam once or twice a year. Your dentist may recommend more or fewer visits, depending on your oral health. At most routine visits, the dentist and a dental hygienist will treat you. During regular checkups, dentists look for signs of diseases, infections, problems, injuries, and oral cancer.
- Brush your teeth. Brush at least twice each day with fluoride toothpaste. Aim for first thing in the morning and before going to bed.



- Floss every day. Once a day, use floss to clean food your toothbrush missed.
- Drink water that contains added fluoride if you can.
 Fluoride protects against dental decay. Most public water systems in the United States have added fluoride. Check with your community's water or health department to find out if there is fluoride in your water. You also may want to use a fluoride mouth rinse, along with brushing and flossing, to help prevent tooth decay.
- Change your toothbrush. Use a new toothbrush every 3
 months, or earlier if the toothbrush looks worn or the bristles spread out. A new toothbrush removes more plaque.
- Clean your dentures. If you wear dentures, be sure to remove them at night and clean them before putting them back in the next morning.
- **Eat healthy meals.** Cut down on tooth decay by brushing after meals. Avoid snacking on sugary or starchy foods between meals.
- Don't smoke. It raises your risk of gum disease, oral and throat cancers, and oral fungal infections. It also affects the color of your teeth and the smell of your breath.
- Limit alcohol use to one drink per day for women. Heavy

- alcohol use raises your risk of oral and throat cancers. Using alcohol and tobacco together raises your risk of oral cancers more than using one alone.
- Limit how much soda you drink. Even diet soda contains acids that can erode tooth enamel.
- If you have another health problem, think about how it may affect your oral health. For instance, if you take medicines that give you a dry mouth, ask your doctor or nurse if there are other drugs you can use. Have an oral exam before starting cancer treatment. And if you have diabetes, practice good oral hygiene to prevent gum disease.



Healthy Skin

The skin, your body's largest organ, protects you against heat, light, injury, and infection. Tanned skin is not a sign of good health. It means that your skin has been hurt by the sun's ultraviolet (UV) rays. Too much sun without protection can cause skin damage, eye problems, and more serious health problems such as skin cancer and lip cancer. The good news is that you can take steps to protect your natural beauty and your health.

Steps you can take:

- Avoid the rays. Stay inside or in the shade when the sun's rays are the strongest. This is between 10 a.m. and 4 p.m. UV rays can also reach you on cloudy days and during any season.
- Apply lots of sunscreen. Use sunscreen on all exposed skin that has a sun protection factor (SPF) of at least 15. Your sunscreen should protect you from both ultraviolet A (UVA) and ultraviolet B (UVB) rays. Reapply every 2 hours, even on cloudy days, and after swimming or sweating. Do not forget to apply sunscreen to your lips, ears, feet, hands, bald spots or a part in your hair, and the back of the neck. Also, apply it under bathing suit straps, necklaces, bracelets, and sunglasses. You should put on 1 ounce of sunscreen every 2 hours. Use more if you are swimming or sweating. A small tube

- containing 3 to 5 ounces of sunscreen might only be enough for one person during a day at the beach.
- Accessorize. Wear protective clothing, such as a wide-brimmed hat, long-sleeved shirt, and long pants. If you can't wear long shirts and pants, try to stay in the shade and wear sunscreen. Keep your eyes safe with wraparound sunglasses with 100 percent UV ray protection.



- Avoid sun tanning and tanning beds. UV light from tanning beds and the sun cause skin cancer and make your skin look wrinkled. If you want to look like you've been in the sun, think about using a self-tanning lotion. Remember that you still need to use sunscreen, even if you use a self-tanning lotion!
- Check your skin often. Look for changes in size, texture, or color of moles or birthmarks or patches on the skin that look

dry, scaly, reddish, and slightly raised. See your doctor right away if you find anything unusual.

Get vitamin D safely. Vitamin D is an important vitamin that your body produces when you are out in the sun But there are other ways to get vitamin D that don't require you to be in the sun's rays. You can get vitamin D through fortified milk and orange juice, cheese, butter, cereals, and fish. You can also get vitamin D through vitamin supplements. Talk to your doctor or nurse if you have questions about vitamin D.

Did you know that too much sun exposure can cause:

Melanoma

Melanoma (mell-ah-NOH-ma) is the most serious form of skin cancer. Be aware of any unusual skin rashes or of any change in the color or size of a mole, and talk to your doctor or nurse about it. Finding a melanoma early can save your life! Check your skin each month for new or changing moles.

Nonmelanoma skin cancers

Nonmelanoma (non-mell-ah-NOH-ma) skin cancers are not as serious as melanoma. However, they can still cause health problems and need to be treated by a doctor. There are two kinds:

Basal cell carcinomas — these are small tumors on the skin that look like small fleshy bumps

Squamous cell carcinomas — these are small tumors on the skin that might appear as red, scaly patches

Actinic keratoses

Actinic keratoses (ack-TIN-ick ker-ah-TOE-sees) are growths on the skin caused by the sun. They are usually found on the face, hands, forearms, and the "V" of the neck. They are usually rough and scaly. See a doctor right away if you notice these growths.

Early aging of the skin

Being in the sun — or laying in a tanning bed — without proper protection causes the skin to become thick, wrinkled, and leathery.

Read "Steps you can take" on page 57 for ideas on how to protect your skin from the sun!

Stress

Women today have busy, demanding lives! You may feel pulled in different directions and experience stress from dealing with work, family, and other matters, leaving little time for yourself. Learning to balance your life with time for yourself will give you big rewards.

Caregiver stress

Caregivers usually take care of the medical needs of their loved ones. You may be taking care of a child with medical needs, or you may be caring for your aging parents. Maybe you've already raised your own child and now you're raising your grandchild. You might be taking care of your spouse, or a sibling. Whomever you care for, your health can be affected by the stress of taking care of someone else. The stress that caregivers are under may lead to missed work or lost free time, strained relationships with people who may not understand the situation, and physical and mental exhaustion.

Stress from caregiving can make it hard to cope with a loved one's medical problems. It is important that people caring for those with medical disorders also take care of themselves.

Steps you can take:

 Relax. Try deep breathing, yoga, meditation, or massage therapy.



- Make time for yourself. Set aside at least 15 minutes each day to do something for yourself, like taking a walk or calling a friend.
- Sleep. Sleeping helps both your body and mind. Try to get 7 to 9 hours of sleep every night.
- Eat healthy. Try to fuel up with fruits, vegetables, and whole-grain foods, such as whole-grain crackers and breads.

- Get moving. Believe it or not, getting physical activity not only helps relieve your tense muscles but helps your mood too!
- Talk to friends. This can help you work through your stress.
- Get help from a professional if you need it. Don't let stress lead to more serious problems.
- **Compromise.** Sometimes, it's not always worth the stress to argue. Give in once in awhile.
- Write down your thoughts. Keeping a journal can be a great way to get things off your chest and work through issues.
- **Help others.** Helping someone else can help you. Help your neighbor, or volunteer in your community.
- Get a hobby. Give yourself time to explore your interests.
- Set limits. Set limits with yourself and others. Don't be afraid to say no to requests for your time and energy.



Mental Health

Good mental health is an important part of a woman's overall health. All women feel worried, anxious, or sad from time to time. But a true mental health disorder makes it hard for a woman to function normally. It's important to remember that mental health disorders are real medical illnesses that can't be willed or wished away! They affect both the mind and the body; it's not just "all in your head." In fact, most mental health disorders do not have a precise cause. They come from a combination of life events, brain chemicals, genes, hormones, and illness.

Anxiety Disorders

Anxiety is a normal reaction to stress. It can help you cope with a hard situation. When anxiety becomes an extreme, irrational fear of everyday situations, it can be disabling. Anxiety disorders include:

- Obsessive compulsive disorder
- Panic disorder
- Generalized anxiety disorder
- Social phobia (or social anxiety disorder)
- Specific phobias

Like depression, these conditions can be helped with all the "Steps you can take" described on page 63. All of these disorders can improve with treatment.

Post-Traumatic Stress Disorder (PTSD)

PTSD is a real illness. You can get PTSD after living through or seeing a dangerous event, such as war, a hurricane, a bad accident, or violence and abuse. PTSD makes you feel stressed and afraid even after the danger is over. PTSD can be treated.

Anorexia, Bulimia, and Binge Eating Disorder

A woman with an eating disorder eats too much, too little, or causes herself to throw up food. Eating disorders can include:

- · Anorexia nervosa
- Bulimia
- Binge eating disorder

Because eating disorders can be physically dangerous, it is important to talk with your doctor or nurse if you (or someone you know) may have an eating disorder. Eating disorders can be treated.

Depression

When a person has a depressive disorder, it hurts their daily life, and normal functioning and causes pain for both the person with the disorder and those who care about him or her. Depression is a common but serious illness, and most women who have it need treatment to get better.

Symptoms of depression include:

- Sad, anxious, or "empty" feelings that won't go away
- · Feelings of hopelessness and/or pessimism
- Feelings of guilt, worthlessness, and/or helplessness
- · Irritability, restlessness
- Loss of interest in activities or hobbies once pleasurable, including sex
- · Fatigue and decreased energy
- Difficulty concentrating, remembering details, and making decisions
- Insomnia, early-morning wakefulness, or excessive sleeping
- Overeating, or appetite loss
- · Thoughts of suicide, suicide attempts

 Aches or pains, headaches, cramps or digestive problems that do not get better, even with treatment

Depression, even the most severe cases, can be treated. The sooner treatment begins, the more effective it is. The first step to getting treatment for depression is to visit a doctor.

Postpartum Depression

Postpartum depression is when a new mother has a major depressive episode within 1 month after delivery. Ten to 15 percent of women have postpartum depression after giving birth. It can make you feel restless, anxious,



very tired, and worthless. Some new moms worry they will hurt themselves or their babies. Researchers think that changes in your hormone levels during and after pregnancy may lead to postpartum depression. If you think you have it, tell your doctor. Medicine and talk therapy can help you get well.

Steps you can take:

If you are depressed, you may feel exhausted, helpless, and hopeless. It may be very hard to do anything to help yourself. But it is important to realize that these feelings are part of the depression and do not reflect real life.

After you see a doctor and begin treatment, negative thinking will fade. In the meantime:

- Engage in mild activity or exercise. Go to a movie, a ballgame, or another event or activity that you once enjoyed. Participate in religious, social, or other activities.
- · Set realistic goals for yourself.
- Break up large tasks into small ones. Set priorities and do what you can as you can.
- Try to spend time with other people and confide in a trusted friend or relative. Try not to isolate yourself, and let others help you.

- Expect your mood to improve gradually, not immediately. Do not expect to suddenly "snap out of" your depression.
 Often during treatment for depression, sleep and appetite will begin to improve before your depressed mood lifts.
- Postpone important decisions, such as getting married or divorced or changing jobs, until you feel better.
 Discuss decisions with others who know you well and have a more objective view of your situation.
- Be confident that positive thinking will replace negative thoughts as your depression responds to treatment.

Are you thinking about suicide?

If you are thinking about hurting or killing yourself, please ask for help! You can call:

- 911
- 800-273-TALK (8255)
- 800-SUICIDE

You can also check your local phone book or look online for the number of a suicide crisis center.

Dealing with Violence

Women of all ages and backgrounds are at risk for many different types of violence. It doesn't matter what race or culture you come from, how much money you have, or if you have a disability. It is most common among women between ages 15 and 54, but it can happen at any age. If you are being abused or have a loved one who is abused, or think there is abuse, get help as soon as you can.

In fact, millions of women in this country have experienced violence. Violence greatly affects the lives and health of women: the effect can last for years — even a lifetime. But there are places to turn for help, ways to protect yourself, and hope for healing and a better future. It's important to talk to a service provider about how to protect your safety. The hotlines listed on this page can connect you to local resources.

Steps you can take:

- **Don't keep it to yourself.** Get help. Talk with someone: a family member, friend, colleague, or faith counselor.
- If you've been hurt, get medical attention and call the police. Abuse is a crime and you have rights.
- Set aside some money and choose a place to go. If you
 decide to leave, you'll be prepared. Put important papers
 marriage license, birth certificates, checkbook, and other papers
 and items in a place where you can get them guickly.

- Contact your family court or domestic violence court.
 Get information about a civil protection order.
- If you're in an abusive relationship, be careful when using the Internet. Your computer use can be tracked. It is impossible to fully erase the websites you have visited. If you think someone is tracking your computer use, please use a safer computer. You may be able to use a friend's computer or a computer at your local library.
- If someone touches, grabs, or makes sexual comments to you at work, speak up. Tell your employer or human resources department. If this is not possible, call the police.

To get immediate help and support:

National Domestic Violence Hotline Web address: http://www.thehotline.org 800-799-SAFE (7233) or TTY 800-787-3224

National Sexual Assault Hotline Web address: http://www.rainn.org 800-656-HOPE (4673)

National Sexual Assault Online Hotline Web address: https://ohl.rainn.org/online

Talking with Your Doctor or Nurse

Knowing how to talk to your doctor or nurse will help you get the information you need to make better health care decisions. Here are some tips:

- Make a list of health concerns and questions to take with you to your visit. Share the list with your doctor or nurse.
- Describe symptoms clearly and briefly. Say what the symptoms are, when they began, how they make you feel, what triggers them, what (if anything) makes them stop, and what you've done to help them. This helps your doctor decide the best course of treatment, along with any tests you may need.
- Tell your doctor or nurse what prescription and over-the-counter medicines, vitamins, herbal products, and other supplements you're taking. Be honest about your diet, physical activity, smoking, alcohol or drug use, and sexual history. Discuss allergies to drugs, foods, or other things. Tell your doctor or nurse if you are being treated by another doctor or nurse, including a mental health professional.
- Don't be afraid to ask questions and don't feel embarrassed about discussing sensitive topics. Your doctor or nurse is used to talking to people about personal concerns.

- Don't leave something out because you're worried about taking up too much time.
- Be sure you understand everything before you leave. This includes treatment recommendations and any follow-up tests or referrals. If you don't understand something, ask to have it explained again.
- Bring a family member or friend with you to take notes and offer moral support. An extra pair of eyes and ears can help you remember your questions as well as the answers.
- Make sure you can see and hear as well as possible. Many
 older people use glasses or need aids for hearing. Remember to
 take your eyeglasses to the doctor's visit. If you have a hearing
 aid, make sure that it is working well and wear it. Tell the doctor
 and staff if you have a hard time seeing or hearing. For example,
 you may want to say: "My hearing makes it hard to understand
 everything you're saying. It helps a lot when you speak slowly."
- Find an interpreter if you know you'll need one. If the doctor you selected or were referred to doesn't speak your language, consider bringing an interpreter with you.

Checklist of Questions to Ask Your Doctor or Nurse

General Health and Wellness Questions		Medical Test Questions	
	How often do I need a physical exam, breast exam, pelvic exam, and Pap test?		What will we know after the test is done?
	Do I need a flu vaccine or other immunizations?		How do I find out the results? How long will it take to get the results?
	Will changing my lifestyle (diet, exercise, smoking, drinking) help me avoid certain diseases?		What does the test involve? What do I do to get ready for it?
۵	What can I do to be healthier? Is there any reading material or videotapes on these topics? Are there support groups or		Are there any dangers or side effects with the test?
	community services that can help?		nptoms and Diagnosis Questions
			Could my symptoms be caused by or related to something other than my current condition?
			What may have caused my current condition?

Checklist of Questions to Ask Your Doctor or Nurse

Treatment Ouestions Medication Questions (you can also ask your pharmacist) ☐ How is this condition treated or managed? What long-term effects (if any) will it have on my life? ■ What are the side effects? How soon should treatment start? How long will it last? What should I do if I miss a dose? Are there other treatments available? Are there foods, drugs, or activities I should avoid while taking this medicine? ☐ How much will the treatment cost? Is it covered by insurance? Is there a generic brand available at a lower price? What are the treatment's risks and side effects?

Notes



U.S. Department of Health and Human Services

Office on Women's Health 200 Independence Ave, SW Room 712E Washington, DC 20201







womenshealth.gov

800-994-9662 • TDD: 888-220-5446

Scan this code with your smartphone to go directly to womenshealth.gov



