HELPING OTHERS WHO HAVE COVID-19 

COOKING AT HOME: PANTRY STAPLES 

MEN: THE BENEFITS OF SOCIAL CONNECTION 

TEEN HEALTH: PREDIABETES ON THE RISE 

GAME ON 
OFF-COURT, NBA GREAT STEPHEN CURRY REVS UP HIS FAMILY HEALTH FOUNDATION TO HELP THOSE IN NEED DURING THE CORONAVIRUS PANDEMIC
“I’VE ALWAYS HAD CONCRETE END DATES OR TARGET DATES FOR WHEN I NEED TO BE READY TO PLAY, BUT RIGHT NOW THERE’S SO MUCH THAT’S UNKNOWN.”
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JUL/AUG/SEPT 2020
In so many ways, the COVID-19 pandemic has impacted the world. We’ve seen such bravery from people on the front lines who risk their lives to save ours. We’re forever grateful to the grocery store workers, the truck drivers, the delivery people, bus drivers—everyone who has sacrificed to keep our world running.

As we head into a new school year we want to take a moment to express our deep gratitude to all the teachers who take such pride in educating the next generation. We have a new appreciation for everything you do.

As the world continues to find its new normal WebMD is here to help ensure you stay up to date. Here are some online resources to help you navigate this new normal.

Stay safe and well,

Kristy Hammam
Editor in Chief
kristy@webmd.com

For more, go to www.webmd.com/coronavirus
Back to School

KIDS SPEND NEARLY 7 HOURS EACH WEEKDAY IN CLASS WHEN SCHOOL IS IN SESSION. WHAT IMPACT DOES THAT HAVE ON THEIR HEALTH?

- 50% Percentage of their calories kids get at school.
- 7.6% Percentage improvement in academic performance of elementary students who nap for 30 to 60 minutes at midday, three or more times a week.
- 10% Percentage maximum amount of their body weight students should carry in their backpack.
- 45% Percentage improvement in teenagers’ average grades when they have a later school start time.
Stay Informed

We continue to bring you vital information about the coronavirus pandemic throughout this issue. Some highlights. “Myths & Facts” (page 38) pinpoints some misinformation that continues to swirl about COVID-19, from supplements to avoid to what you really need to know about hand-washing and mask-wearing. “Symptom Check” (page 40) spells out how many respiratory illnesses, such as asthma, allergies, and the flu, are different from COVID-19 and what your particular symptoms may be telling you. And because isolation is one of the most difficult factors of this pandemic—especially for older people, who face a greater risk for depression, anxiety, and mental decline—finding ways to keep in touch is vital. Check out “Distance Watch” (page 43) for a number of clever ideas you can start today. You might be surprised how many ways you can connect while maintaining social distancing. Please stay safe and healthy everyone. — COLLEEN

CORONAVIRUS UPDATE

1 IN 3
Number of people admitted to the hospital for COVID-19 who had one or more pre-existing health conditions, such as diabetes and heart disease.

SOURCE: CDC

EYE DISEASE AND COVID-19
Pink eye may be another symptom of COVID-19, the illness caused by the coronavirus. In a small sample of people with coronavirus, 1 in 3 also had pink eye or other eye infections. These eye symptoms occurred most often in people with more severe cases of COVID-19. The new discovery suggests that coronavirus can spread through tears, eye exams, or touching your eyes and then touching another person. This underscores the importance of federal guidelines to avoid touching your face and wash your hands often.

SOURCE: JAMA Ophthalmology

QUIT NOW!
Smokers are at higher risk of getting COVID-19. And their cases tend to be more severe. Secondhand smoke increases risk of infection for others, too. Still, the thought of kicking the habit amid the stress of the outbreak may only add to your anxiety. But you don’t have to do it all on your own. A recent review of smoking cessation treatments reminds smokers that there are many proven methods that can help you quit. Nicotine replacement therapy; behavioral therapy by phone, internet or printed materials; and gradual tapering off are all effective methods that you could try.

SOURCE: Cochrane Special Collections
A GUT FEELING
The Mediterranean diet, which emphasizes vegetables, fruits, herbs, nuts, beans and whole grains, might slow the aging process by changing the makeup of the gut. Researchers analyzed the intestinal bacteria of 612 older adults in five European countries. Then, half the group followed the Mediterranean diet for 1 year. After a year, researchers checked the adults’ gut microbes again. Those who had followed the diet now had higher levels of bacteria linked to lower inflammation (a precursor to many chronic diseases) and age-related frailty and sharper thinking skills.

SOURCE: BMJ

PEE PATROL
Some babies will gladly haul a full diaper around for hours without complaint, until they get a painful rash, that is. For those tykes, MIT researchers have developed a low-cost, disposable “smart” diaper that pings your smartphone whenever it’s wet. (But your own tots may be well beyond potty-trained before this hits stores.)

SOURCE: IEEE Sensors Journal

768 MILLION
Number of vacation days that went unused in the U.S. in 2018.

SOURCE: U.S. Travel Association
HEART HEALTH

When arteries stiffen, a sign of risk for heart disease, the heart may not pump and move blood very well. This can damage the heart and other organs. Aging, as well as a buildup of cholesterol, fats, and calcium, can stiffen the arteries. Menopause may contribute, too, a new study shows. Researchers tracked women’s heart health until they reached menopause. They found that the gradual stiffening process speeds up during the change of life. Talk to your doctor about how you can maintain optimum heart health during and after menopause.

SOURCE: Arteriosclerosis, Thrombosis, and Vascular Biology

THE SHIRT OFF THEIR BACK

Do you wear your significant other’s shirt to bed when you’re not together? It’s not crazy! Some 155 people in committed relationships slept alone in a lab for 4 nights. Researchers measured sleep quality with wrist monitors and questionnaires. For 2 nights, their pillowcase was a plain white T-shirt their partner had worn for 24 hours. The other 2 nights, it was a different plain white T-shirt. They fell asleep faster and stayed asleep longer with their head on their partner’s shirt. The shirt improved sleep about as much as the common sleep aid melatonin does.

SOURCE: Psychological Science

CORONAVIRUS UPDATE

VACCINE RESEARCH UNDERWAY

The race is on to discover a coronavirus vaccine. Multiple candidates in development work in different ways. The University of Pittsburgh’s contender is like the flu shot. Scientists created proteins in a lab like those on the surface of the virus. When these proteins enter the bloodstream, the immune system recognizes them as a virus and produces substances called antibodies to fight it. That way, when the actual coronavirus tries to infect a person who’s had the vaccine, the body will know just how to respond. So far, the vaccine has worked as expected in mice—a promising first step.

SOURCE: EBioMedicine

CORONAVIRUS UPDATE

Average number of days it takes to develop symptoms after coronavirus infection.

SOURCE: Annals of Internal Medicine

Number of U.S. adults who rate their mental and physical health as good.

SOURCE: Gallup

7 IN 10

THE SHIRT OFF THEIR BACK

Do you wear your significant other’s shirt to bed when you’re not together? It’s not crazy! Some 155 people in committed relationships slept alone in a lab for 4 nights. Researchers measured sleep quality with wrist monitors and questionnaires. For 2 nights, their pillowcase was a plain white T-shirt their partner had worn for 24 hours. The other 2 nights, it was a different plain white T-shirt. They fell asleep faster and stayed asleep longer with their head on their partner’s shirt. The shirt improved sleep about as much as the common sleep aid melatonin does.

SOURCE: Psychological Science

CORONAVIRUS UPDATE

Number of U.S. adults who rate their mental and physical health as good.

SOURCE: Gallup

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CORONAVIRUS UPDATE

Average number of days it takes to develop symptoms after coronavirus infection.

SOURCE: Annals of Internal Medicine
WHERE THE GRASS IS GREENER
Women who live in the greenest neighborhoods may start menopause up to 18 months later than others. Stress reduction and other mental health benefits of green spaces may be the cause.

SOURCE: Environment International

BREAKING UP IS HARD TO DO—IN THE DIGITAL AGE
For the brokenhearted, exes may be unavoidable online. College students who unfriended, blocked, or “took a break”—an option social media offers when you change your relationship status—from exes still saw them all over their networks, a new study shows.

Old photos of happier times with the ex sneaked into the “memories” feature. The ex’s relatives showed up in “People You Might Know.” Even when heartsick users blocked the person completely, untagged photos still crept into their newsfeed. The only antidote to what researchers call “algorithmic insensitivity” may be to break up with social media, too.

SOURCE: Proceedings of the Association for Computing Machinery

SODA TAX
A year after Philadelphia, the City of Brotherly Love, implemented a 1.5 cent-per-ounce soda tax, only 1 in 3 residents had reduced their consumption. Even with the tax, these drinks are cheaper than healthier options. And, untaxed sodas are easy to find outside the city limits.

SOURCE: International Journal of Environmental Research and Public Health

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**https://www.bls.gov/ooh/office-and-administrative-support/financial-clerks.htm#tab-6, 10/3/19
76,043
Estimated number of head and neck injuries over the last 20 years related to texting and walking!
SOURCE: JAMA Otolaryngology

PLANT POWER
Cutting out meat in favor of a plant-based diet could counteract gut bacteria that may promote heart disease, according to a study of 800 women.
SOURCE: Journal of the American College of Cardiology

DIGITAL ABUSE
One in 4 teens face “digital dating abuse.” The significant other looks in their phone without permission; prevents them from using their own phone; threatens them via text; shames them online; or posts private pictures publicly.
SOURCE: Journal of Interpersonal Violence

TALK THERAPY
Want to lose weight? Counseling, also called behavioral therapy, might work better than dieting only. Researchers studied the medical records of 2,097 obese women at a clinic who wanted to lose weight. Over 7 months, those who met with a registered dietitian for medical nutrition therapy, in addition to their diet program, lost weight. Those who tried dieting only gained. The talk therapy group also saw drops in body mass index, blood sugar, and the need for prescription medications. Therapy sessions were weekly for 1 month, every other week for the next 6 months, then monthly for another 6.
SOURCE: Family Practice
Run For Life

POUNDING THE PAVEMENT FOR JUST A FEW MINUTES A WEEK MIGHT HELP YOU LIVE LONGER

RUNNING STRENGTHENS YOUR HEART AND REDUCES YOUR CHANCE OF DYING PREMATURELY—and you don’t have to go the distance to see results. A 2019 study of more than 232,000 people published in the *British Journal of Sports Medicine* linked any amount of running to a 30% lower chance of dying from cardiovascular disease, a 23% lower chance of dying from cancer, and a 27% lower chance of premature death overall. As little as 50 minutes a week—less than 10 minutes a day—improved health and longevity, according to the study. If running on pavement is hard on your knees, use an elliptical trainer to eliminate the impact. —STEPHANIE WATSON
IN A RECENT, YET-TO-BE-PUBLISHED STUDY, RESEARCHERS REPORT THAT GOLFERS OLDER THAN 50 live longer than people who don’t play the game. One reason, the authors speculate, may be obvious: Golf involves exercise, and exercise benefits the heart. But they offer another possible explanation: Golf’s a social sport, and getting together with others provides a positive for health. Another study, published in November 2019, linked social isolation with memory loss among the elderly. Highly isolated men saw a decline in memory three times greater than men whose isolation the researchers considered average.

Both studies add to what experts recently have begun to learn about the impact of loneliness. Their timing couldn’t be better, says Teresa Murray Amato, MD.

“As the population ages, we’re probably going to see an increase in older men that don’t have a spouse and feel isolated,” says Amato, director of geriatric emergency medicine at Northwell Health in Manhasset, NY. “Isolation can have an impact on sleep, on depression, and on cognitive function.”

Amato points out that simply being alone does not necessarily mean you’re lonely. Some people thrive on their own. But if you feel lonely and isolated, you should pay attention. Amato’s biggest concern: suicide.

“The No. 1 most successful group in attempting suicide is single, older men,” she says. “Depression’s a real red flag for someone who’s single, older, and male.”

For many men, isolation may begin at retirement, Amato says. She says it is more than simply the loss of coworkers and camaraderie that explains the negative feelings that often arise.

“It’s the loss of a title and the loss of a purpose,” Amato says. “For some people, that type of life change can lead to depression or feelings of loss or grief, and sometimes that can snowball into being more isolated.”

She wants more primary care doctors and other physicians to add loneliness to their checklist of questions for older patients. “We need to start asking these questions. Not just do you live alone, but do you feel lonely and isolated?”

It may be hard, but if your doctor doesn’t ask you, raise the issue yourself if you feel lonely. And do it on a regular basis, Amato advises. You want to catch it early, before it can do real harm. Amato points out that loneliness has been linked to early death.

One recommendation to counter isolation: Join a gym. You’ll get exercise and contact with others, and both will build on each other. “The less isolated you are, the more likely you are to exercise,” Amato says. “Together, that’s likely to decrease depression and cognitive losses.”

Q Where can I look for opportunities to connect with others?
Check with your local community center or other local organizations that offer group activities. You might like Men’s Shed, available in select areas of the U.S., a nonprofit that brings men together to pursue hobbies and other activities.

Q What are some signs that loneliness has taken a toll?
If you have developed difficulties with tasks like paying bills or balancing your checkbook, it could be a sign of loneliness and depression rather than dementia.

Q How will you diagnose my loneliness?
Your primary care doctor can screen for depression, loneliness, and social isolation, but you may have to bring it up yourself. If you have access to a geriatrician, make an appointment.

Q Will I need to see a therapist?
Your doctor may recommend that. A therapist can help you address your loneliness and depression through talk therapy and, if appropriate, medication.
WEAR A MASK

The CDC now recommends that everyone—sick or healthy—wear a face mask in places where it’s hard to stay 6 feet apart, like grocery stores. That’s because people who don’t have symptoms can still spread coronavirus.

You can buy a premade mask or make one yourself from a breathable fabric like cotton, silk, or linen. Sew the fabric into a mask, tie it around your face, or fold it and use hair ties for ear loops.

Before you put on the mask, wash your hands with soap and water for at least 20 seconds. Secure the mask behind your head or ears, and fit it around your nose, mouth, and under your chin. Remove the mask after you’ve worn it or if it gets damp. Wash reusable masks with hot water and detergent or soap after each wear.

—Stephanie Watson

OUT & ABOUT

Safe Travels

HOW TO RUN YOUR DAILY ERRANDS AND STAY HEALTHY

BY Arefa Cassoobhoy, MD, MPH, WebMD Senior Medical Editor

AS THE CORONAVIRUS CONTINUES TO SPREAD, you may be leaving your home only for essential errands.

Key reasons to enter public spaces are to get groceries, medicine, takeout food, or gas for your car. Much of this may be doable by delivery or mail order to your home, depending on your location and the cost. That means cutting out all of the “nice to have” services and activities. Sitting down in a restaurant or bar, exercising at a gym, and getting a haircut may not yet be safe excursions.

Even your doctor’s appointments may not be essential to do in person. Call your doctor before going in. Many doctors are moving to telehealth options and postponing elective procedures and surgeries.

If you are at risk for serious complications from COVID-19 because of your age or medical issues, take extra precautions. Ask a friend or family member to help you with errands. Look for online options or delivery services. Volunteers may be nearby ready to help you stay home, safe, and healthy.

WHEN YOU LEAVE YOUR HOME

For trips outside, plan and be organized. Have your list of supplies ready so you can get in and out of stores quickly. Plan for items you’ll need over the next 1 to 2 weeks, so you can limit the number of outings. This includes food, cleaning supplies, medications, and other items like contact lenses. Don’t forget the fun stuff like books, board games, and treats.

Go out during quiet times. Many grocery stores have early morning times dedicated to serving customers age 60 and older. That is also when the store is likely cleanest, because many stores close early to deep clean at night.

While you are out, stay at least 6 feet away from others. This can be tricky in the grocery aisle, but many stores are trying to accommodate as best they can.

Keep your hands as clean as possible and don’t touch your face. Use hand sanitizer as you enter and exit places. Wipe down your shopping cart handle with a disinfectant wipe. Use your own pen or stylus to sign receipts and touch keypads. When you get home, wash your hands with soap and water for 20 seconds and clean your reusable bags.

It’s still OK to go outdoors. Enjoy the sunshine and nature, play with your dog and get some exercise. Just stay out of crowded areas and maintain a 6-foot distance from others.
Making Waves

IS IT SAFE TO GO TO THE BEACH OR POOL DURING A PANDEMIC?

BY Stephanie Watson

REVIEWED BY Michael W. Smith, MD, WebMD Chief Medical Editor

TO PREVENT THE SPREAD OF COVID-19, health experts have advised people to practice social distancing—staying at home as much as possible and maintaining a safe space between you and the next person when we do go out. Most of the guidelines say it’s fine to go outside, but what about beaches and pools?

The safety of these waterside spots is a legitimate concern, especially at the height of summer. Some beaches remain closed, but should you head to the ones that are still open?

CAN THE NEW CORONAVIRUS SURVIVE IN WATER?
The CDC says there’s no evidence you can get COVID-19 from swimming in a pool, or hanging out in a hot tub. Chlorine and other chemicals used to sanitize the water kill the virus pretty effectively.

Research from the CDC shows that viruses and other germs can stay alive, and infectious, in freshwater bodies. So in theory, you could get infected if you swim in a lake or river.

CDC scientists still don’t know whether the virus remains viable in saltwater. Most viruses—including coronaviruses—that spread in the ocean are from fecal material in sewage that’s made its way into the water.

The bigger risk at a pool or beach is close contact. With the virus spreading easily through the air whenever people talk, cough, or sneeze, crowds of sunbathers could quickly pass it around. That’s why many towns have closed their beaches, and will likely keep them closed until the virus stops spreading widely.

CAN YOU GO TO THE BEACH?
That depends. A trip to an uncrowded beach is probably fine, provided you don’t have to travel far and you can go in your own car. The CDC warns against taking trips to areas where the coronavirus is spreading. Older adults and people with chronic conditions like lung disease, heart disease, or diabetes—who are at greater risk of getting sick—are better off staying at home. And if you have any symptoms, definitely wait to go until you feel better.

If your area isn’t on lockdown, a walk on an empty beach is a good chance to get some exercise and fresh air, and work off some stress. But follow the same social distancing rules you’d practice anywhere right now—keep at least 6 feet between you and the nearest walker.

Bring a family member (preferably one who lives in your home with you) to keep you company, but don’t gather in a group. You’re safer meeting up with friends on social media right now. And as soon as you return home, wash your hands with soap and water for at least 20 seconds.

• Check your health. Don’t go out if you feel sick.

• Take six. Even outdoors, social distancing is critical to avoiding infection. Stay at least 6 feet away from other walkers, joggers, and bike riders.

• Sanitize. Wash your hands with soap and water for at least 20 seconds when you get home. If you plan to picnic, make sure you have somewhere to wash up, or bring your own alcohol-based hand sanitizer.

• Play keep away. Keep your hands away from your face until you’re able to wash them.
At-Home Workouts

SHORE UP YOUR IMMUNE SYSTEM AND MAKE THE MOST OF YOUR SURROUNDINGS WITH CREATIVE EXERCISE IDEAS FROM A CERTIFIED PERSONAL TRAINER

BY Kara Mayer Robinson
REVIEWED BY Michael W. Smith, MD, CPT, WebMD Chief Medical Editor

ACCORDING TO RECENT STUDIES, AN active lifestyle lowers your risk of getting a communicable disease. By getting more exercise, you can help ward off viral and bacterial infections.

Can’t get out? Not a problem. You can get a full workout even if you’re home all day, says Sylvia Nasser, an NASM-certified personal trainer.

STREAM IT
If you love group gym classes, try the next best thing: live online workouts. “Follow your favorite instructors or fitness media channels," Nasser says. “Many now host Zoom, Instagram, Facebook, and YouTube livestreams."

Look online for gyms or personal trainers offering live workouts that you can join on your computer or on your smartphone. Or, try prerecorded workouts on YouTube or one of many fitness websites.

GO SOCIAL
Schedule a Zoom workout with friends or family. Having exercise buddies is great for connection and socialization, Nasser says. Plus, it keeps you accountable. If you know everyone’s jumping on the computer at 8 a.m., you have extra reason to show up.

PLAY CARDS
In a pinch, Nasser says, reach for a deck of cards and let it be your fitness instructor. Each suit represents one body weight exercise, like squats or lunges. Each number represents the number of reps. If hearts represent squats and you pull a 10 of hearts, you do 10 squats. Jokers can be dealer’s choice or one-offs like 60 seconds of jumping jacks. “You can do this with very simple exercises," Nasser says. “Have fun with it.”

USE YOUR STUFF
“Get creative with things around your home,” Nasser says. “One of my favorites is taking a school bag and filling it up, then wearing it while you do lunges and lower body exercises.” Get your arms involved by holding onto the straps and doing bicep curls or wearing it as you do push-ups.

DEVISE A CIRCUIT WORKOUT
Create stations around your home and move through each one for a full-body workout. Your home is filled with exercise-ready objects. Think stairs, chairs, and walls, Nasser says. Run up and down the stairs. Use chairs for tricep dips, pushups, and step-ups. Lean against the wall for wall sits.

TRY REP CHALLENGES
Pick a number and challenge yourself to complete that amount of reps for a variety of simple exercises. For example, aim for 50 or 100 reps of 4 to 5 body weight exercises. Start with 50 squats. Then do 50 lunges, 50 pushups, 50 mountain climbers, and 50 sit-ups. When you reach your goal, your workout is done.

4 TOOLS

BODY WEIGHT EXERCISES LIKE SQUATS AND PLANKS MAKE FOR EASY, EFFECTIVE AT-HOME WORKOUTS, SAYS PERSONAL TRAINER SYLVIA NASSER. TO MIX IT UP, SHE RECOMMENDS THIS BASIC GEAR.

1. DUMBBELLS
   - Try adjustable dumbbells, which take up less space than a full set of weights. To adjust the weight, you load and unload plated weights or flip a switch.

2. RESISTANCE BANDS
   - Bands come in all lengths and resistance levels, are excellent for building strength, and take up very little space in your home. Simply toss them in a drawer when you’re done.

3. YOGA MAT
   - Make your workout comfy and cushiony with a mat, which is especially handy if you have hard floors. After each workout, wipe it clean and roll it up.

4. TECH OPTIONS
   - A Fitbit, Apple Watch, or any watch with a timer makes a good workout buddy. Use it to time your exercises, count your steps, and see your progress.
A NEW STUDY FROM RESEARCHERS AT THE University of California-San Diego suggests that if you feel you have a purpose in life, you’re more likely to feel both physically and mentally well on a daily basis.

The researchers surveyed more than 1,000 adults ranging in age from 21 to older than 100, using questionnaires designed to assess their physical and mental well-being, as well as other questionnaires aimed at identifying the degree to which they found or sought meaning in their lives. They found that people who felt that they had meaning in their lives were more likely to feel physically and mentally healthy, while those who were “searching” for meaning were less likely to feel that way. These associations were particularly strong among older people in the study.

“The basic finding that having a sense of meaning in life is important to health, and that it becomes even more important as we get older, makes a lot of sense,” says psychologist Simon Goldberg, PhD, assistant professor in the department of Counseling Psychology at the University of Wisconsin’s Center for Healthy Minds, which conducts research into improving mental well-being for people around the globe.

And maybe it’s easier to find meaning in life than we think. (No meditating at a monastery required.) “What this study does suggest is that we should emphasize activities and pursuits that we love, that are meaningful to us, and see those not as ‘something extra’ that we only pursue when we have spare time, but as essential sources of health and well-being.”

What’s more, “Well-being is a skill, and it’s one we can practice,” he adds. “The scale the researchers use in the study for finding meaning includes statements like ‘My life has a clear sense of purpose.’ It doesn’t say what that purpose has to be.”

PURPOSE CHECK

3 WAYS YOU CAN FIND MEANING IN YOUR LIFE, ACCORDING TO SIMON GOLDBERG, PhD.

RELATIONSHIPS WITH FAMILY AND FRIENDS

“Our social relationships are an incredible source of meaning for human beings,” Goldberg says. “It’s worth it to invest time in them.” That lunch with your best friend you’ve been putting off because you’re just too overscheduled? Consider it just as important as your next doctor’s appointment.

HOBBIES OR ACTIVITIES THAT BRING YOU JOY

Make yourself a “prescription” for chess at the community center, an hour in the garden, an afternoon teaching your child to cook.

FOCUS ON OTHERS

“At [my] center, we emphasize the power of kindness to improve our own mental wellness,” Goldberg says. “It doesn’t have to be something huge like donating a kidney, but rather daily habits like opening a door, making breakfast for a child, or giving a compliment. Make kindness a regular, conscious practice.”

Search for the slideshow 15 Ways to Be Happier at WebMD.com.
Now Trending

VITAMIN C SERUMS ARE AS POPULAR AS EVER, THANKS TO PROPERTIES THAT PROTECT SKIN FROM UV DAMAGE WHILE REDUCING WRINKLES AND BROWN SPOTS

THESE SERUMS AREN’T NEW BUT THEY’RE HOTTER THAN EVER. Why? you ask. “Because it works,” says Carol Clinton, MD, a dermatologist in Columbus, OH. A wide body of research suggests vitamin C stimulates collagen; minimizes scars, fine lines, and wrinkles; and improves brown spots. Because it’s an antioxidant, it also protects against sun damage. But all serums aren’t created equal. Look for one with at least 15% to 20% vitamin C, or L-ascorbic acid, so your skin can absorb it properly. Extra ingredients like vitamin E, hyaluronic acid, and ferulic acid boost its effectiveness while minimizing side effects, Clinton says. For best results, apply it in the morning, after you wash your face and before moisturizer and sunscreen. —KARA MAYER ROBINSON
Best Foot Forward

IN THE DOG DAYS OF SUMMER, YOU WANT TO FEEL GREAT ABOUT SHOWING OFF YOUR FEET. WE ASK AN EXPERT FOR BEST CARE PRACTICES.

BY Kara Mayer Robinson  REVIEWED BY Mohiba Tareen, MD, WebMD Medical Reviewer

WITH SUMMER’S OPEN-TOE SANDALS AND SUNNY BEACH DAYS, it’s a great time for your feet to look and feel their best. We asked Ciro Martins, MD, a dermatologist at Belcara Health in Baltimore how to care for them.

Q How can I keep my feet soft and smooth?
MARTINS “Exfoliate with a pumice stone, foot scraper, or emery board once or twice a week. Moisturize after you shower and at bedtime. Cream is better than lotion. Eucerin, Cetaphil, and Aveeno are all very good, easy to find, and inexpensive. Moisturize your cuticles with products like Cútemol cream or Aquaphor.”

Q How do I keep my toenails in good shape?
MARTINS “Keep them short, clean, and exposed to the air as often as possible. Clip them every 3 to 5 weeks. Don’t clip the corners too short or they may become ingrown. Limit how often you do the following: clean under the edge of your nails, wear tight shoes, wear high heels, wear nail polish, and go for long runs.”

Q What can I do for an ingrown nail?
MARTINS “An ingrown nail develops if you clip the corners of your nail too short or wear shoes that are too tight. Try hot water soaks for 10 minutes, four times a day. You can also wedge a very small cotton ball under the corner of the nail to elevate it away from the flesh. In time, your nail will grow over the cotton ball.”

Q How can I treat a blister?
MARTINS “The best thing is to keep the blister intact, without rupturing it. If you feel pain, it means it’s open and raw. Keep it clean by washing the area with water and soap, covering it with Aquaphor or petroleum jelly, and applying a bandage. Never apply Neosporin or antibiotic ointment.”

Q How can I treat corns and calluses?
MARTINS “Corns and calluses develop as a protection of skin from repetitive pressure and rubbing. First, stop the repetitive trauma and relieve the pressure. Try daily, gentle scrubbing in the shower with a pumice stone or filing device. Over-the-counter salicylic acid medications speed up exfoliation. You can also try cushioning devices. If a corn is caused by a bony abnormality, see a podiatrist.”

Q What can I do about athlete’s foot?
MARTINS “For 30 days, apply an over-the-counter antifungal cream like LamisilAT after showering. Apply it to the top and bottom of both feet, even if only one is affected, and between your toes. Avoid walking barefoot in public wet spaces like locker rooms, pools, and showers. Dry your feet and the spaces between your toes after every shower. I recommend using a blow-dryer.”
DESPITE THE WELL-KNOWN DANGERS AND REPEATED WARNINGS ABOUT UV DAMAGE, some people can’t resist the allure of a suntan. For those who love the look of bronzed skin but want to avoid the health risks of sun exposure, self-tanners are the answer. “Sunless tanners are the only safe way to appear tan. Any pigment from the sun—a tan or a burn—is sun damage,” says Deanne Mraz Robinson, MD, an assistant clinical professor of dermatology at Yale School of Medicine. “Unprotected sun exposure is a proven risk factor for developing skin cancer, and it also breaks down collagen and elastin in our skin accelerating the signs of aging.”

But the risks of looking orange or streaky can make some feel hesitant about attempting to do the job on their own. The good news is that with a few expert tips, and a little patience, a faux glow is the best way to go.

UNDERSTAND THE TAN
First, it helps to understand how sunless tanner works. The ingredient that turns your skin bronze is a plant-based sugar molecule called dihydroxyacetone (DHA). The DHA reacts
with amino acids in your skin to form brown compounds called melanoidins that stain your skin. As the surface skin cells rub off over the course of 7 to 10 days, the tan wears away.

**AVOID ALCOHOL**
Robinson advises opting for an alcohol-free tanner because alcohol is not only drying but can also trigger skin reactions including dermatitis and rosacea flares.

**PATCH TEST**
“As with any topical product, you risk an allergic reaction,” Robinson warns. “It’s always wise to test an application on a small area before coating yourself in it.” Doing a patch test serves another purpose—it will help you determine how the color will develop. “I recommend always to do a spot test first to check the shade level and how it reacts with your unique skin tone,” says Courtney Claghorn, founder of Sugared + Bronzed spray tanning salons.

**START SMOOTH**
DHA deposits into the dead surface layer of the skin, so you want to remove the flaky layers that are about to shed—any dry patches will react with the tanner and look darker than other areas. That’s why preparation is crucial, explains Fabiola Trujillo, owner of Sobe Tan in Miami. She advises exfoliating ahead of time with a washcloth or loofah in the shower to ensure

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**DIRTY SECRET**
“I don’t use an antiaging eye cream.”

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**SPREAD ON THICK**
“An eye cream is a good idea because each is formulated to be thicker so it won’t run into the eyes. In general, eye creams are designed to penetrate without a lot of liquidity, which helps to avoid burning or irritation.”

**YOU’RE THIN-SKINNED**
“Antiaging treatments can be especially beneficial because the eye area is the first to show signs of aging—the skin is much thinner and it’s a dynamic spot due to smiling and squinting. Eye creams can be formulated with peptides or growth factors to build collagen or retinoids to repair and brighten.”

**SPOT TREAT**
“You can use a standard facial moisturizer on your eye area if you opt for a serum or gel that stays put and won’t migrate into your eyes. But my advice is to use an antiaging product designed for the eyes containing retinoids and peptides or growth factors and layering SPF on top during the day.”

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**PRODUCT PICK**
**GLYTONE ACNE TREATMENT MASK** ($36)
“This sulfur-based formulation contains kaolin and bentonite clays to help acne-prone skin. Sulfur helps control sebum production from the oil glands, quiets sensitive skin, and fights inflammatory acne.”
Melanie Palm, MD, dermatologist and cosmetic surgeon, Solana Beach, CA

**PRODUCT PICK**
**OLAY MASKS CLAY STICK PORE DETOX** ($13)
“This combination of charcoal and kaolin clay comes in a stick, so it’s not as messy as traditional clay masks. I also like that it leaves your skin feeling well-moisturized as opposed to too dry and tight.”
Sapna Palep, MD, dermatologist, New York City

**PRODUCT PICK**
**REVISION SKINCARE BLACK MASK** ($45)
“This is my favorite mask that’s suitable for all skin types. It’s made from silt from European freshwater lakes and contains two natural clays, kaolin and bentonite, to diminish the appearance of pore size and absorb excess oil without leaving skin dry or irritated.”
Young McMahan, MD, dermatologist, Waco, TX

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you have a smooth surface so the tanner can uniformly dye the skin. Exfoliation will also prolong the life of your tan. “Since the formulations work with the outermost layer of the skin, getting the newest cells possible to the surface for application will help extend how long the tan lasts,” Robinson says.

WATCH ROUGH PATCHES
While you’re exfoliating, focus on rough, scaly areas like the heels, knees, and elbows because the DHA will deposit more heavily there. Those areas are prone to thicker patches of dead skin cells, Robinson explains, so they absorb more DHA. Plus, those areas shed more slowly than the rest of the body.

APPLY A BARRIER CREAM
Before you apply a tanner, Robinson suggests applying a light layer of barrier cream like Aquaphor in your nostrils, on your lips, around your cuticles and on any rough patches to avoid those areas getting too dark.

TAKE YOUR TIME
Trujillo’s warning is to always take your time—being in a rush makes it more likely you’ll miss a spot. She suggests doing tanner in the evening and waiting overnight before doing anything else. “You should never do self-tanner when you’re in a hurry,” she says. “You always need to give it time to dry and develop properly.”

WEAR A MITT
The experts suggest wearing a mitt designed to apply self-tanner. Not only do mitts provide a smooth surface to help blend the tanner more seamlessly than your hands, they prevent your palms from turning orange, Robinson says.

MOVE IN CIRCLES
Claghorn says applying in a circular motion, working in small sections will help avoid streaks. “You don’t
need to apply a lot of pressure when applying a self-tanner,” she says. “A gentle but consistent pressure over the body while easing up over the knees, elbow, neck, and wrists will do the trick.”

REACH YOUR BACK
And if you can’t enlist a friend to help with your back, Trujillo suggests heading to the kitchen. Her trick is to slip a tanning mitt over a spatula and use that to apply Tanner to the areas on your back that are out of arm’s reach.

SKIP THESE SPOTS
Avoid applying Tanner to your heels and your ears. Trujillo says it will just stain and look unnatural.

ALLOW TIME TO DRY
Just because you’ve applied the Tanner, your work isn’t done. Ideally, you should wait at least 15 minutes before putting clothes on and then you should stay in loose-fitting clothing for the next few hours, Trujillo advises. This allows the Tanner time to absorb. Getting wet, sweaty, or wearing anything too tight will cause the Tanner to wear off and look splotchy and uneven.

WAIT A DAY
This is also the time when patience is crucial—you need at least 24 hours to determine how the self-tanner will fully develop on your skin and see the complete results, Trujillo explains. “One application may not be enough, but it’s better to build the color than start with a shade that’s too dark and unnatural for you,” she says.

MOISTURIZE
“Moisturizing is key for a Tanner to work on your skin,” Trujillo says. Keeping your skin moisturized helps slow down the natural shedding process to help extend the life of your tan.

DON’T FORGET SPF
“What people often get wrong about self-tanner is thinking it protects them from the sun—it does not,” Robinson says. Just because your skin looks bronzed, you don’t have any additional protection and the same SPF application guidelines apply, she says.

THE SCOOP
BRIGHT IDEAS
HEED THESE EXPERT TIPS FOR PROTECTING YOUR EYES FROM THE SUMMER SUN

BAN THE RAYS
Your summer wardrobe should include a pair of sunglasses that block UVA and UVB rays. “It’s important to protect the eye from UV light to prevent cataract formation and retina-aging diseases,” says Sumitra Khandelwal, MD, an associate professor of ophthalmology at Baylor College of Medicine in Houston. You can take your shades to an optician to have the UV rating checked if you’re not sure.

GLARE TACTICS
Khandelwal says polarized lenses can also shield sensitive eyes because they bend and redirect the light to reduce glare. “It’s surprising the amount of glare and UV light exposure you get indirectly when it reflects off a surface like water or pavement,” she explains.

SHADY BEHAVIOR
Consult your doctor to see which color of lens will best suit the outdoor activity you’re going to be doing. A gray tint is particularly helpful for driving because it offers the best color recognition.
Nail It!

 manicures can be tough on your nails, says  
Caren Campbell, MD, a dermatologist in San Francisco.  
Give them a gentler treatment with her top product picks.

BY Kara Mayer Robinson  
REVIEWED BY Karyn Grossman, MD, WebMD Medical Reviewer

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SERVICE, OR TREATMENT.

EASY OFF
Karma Naturals Nail Polish Remover with Soybean Oil & Lavender, $12
“Acetone is very drying to your skin and nails. Acetone-free Karma is less drying.”

STRIKE IT RICH
Neutrogena Norwegian Formula Hand Cream, $5
“This thick, heavy hand cream is good for moisturizing dry nails. After washing your hands, apply it to your hands, nails, and cuticles.”

BASE CAMP
Zoya Anchor Base Coat, $10
“Polish can stain nails, particularly red or darker polishes. A base coat from Zoya, which is free of common allergens like formaldehyde, can help prevent it.”

CUTTING EDGE
Tweezerman Combo Clipper Set, $11
“Nail clippers are the best way to trim nails and prevent peeling, breakage, and thin nails. These are stainless steel and come with two in each set—one for fingernails and another for toenails.”

GENTLER THAN GEL
Essie Gel Couture, $12
“Avoiding gel nails and UV lamps is important for nail health. This is a nice compromise for long-wearing polish.”

Search for the quiz Nail Problems Solved at WebMD.com.
Fathers who take time to help with childcare-related tasks on workdays—rather than just playing with the kids—develop the closest relationships with their children.

A new study of 80 fathers of 3-year-olds found that the amount of time they spent with their children varied widely, but that variation didn’t seem to affect the strength of the bond between father and child. What the dads were doing with their kids, and when they were doing it, did have an impact. When fathers were involved with weekday caregiving tasks like feeding breakfast or dinner, getting dressed and giving baths, rather than just playtime, the bond was stronger.

Does that mean dads shouldn’t play with their kids during the week? No, but it shouldn’t take the place of the hard daily tasks of parenting. “Workdays for working families with young children often require a great deal of caregiving in a relatively short and inflexible period of time,” the study authors write. “Some fathers who overrely on play during workdays may be doing more harm than good if they focus exclusively on play at the expense of caregiving.” —GINA SHAW
Lowdown on Leaks

WHAT DOES IT MEAN WHEN YOUR DISCHARGE CHANGES COLOR AND TEXTURE?

BY Stephanie Watson

ALL Sorts of WEIRD, WONDERFUL, AND SOMETIMES SURPRISING CHANGES take place in your body during pregnancy. Your breasts swell, your veins enlarge, your feet lengthen, and your skin takes on that “pregnancy glow.” You might come across another unexpected pregnancy change if you happen to peer into your underwear.

Every woman has discharge, whether she’s pregnant or not. Discharge is made up of fluid and dead cells. It’s a natural way for the cells of your vagina and cervix to renew themselves. During the early months of your pregnancy, you might see much more than usual.

“A lot of women really notice it in the beginning part of their pregnancy,” says Susan Hernandez, CNM, MSN, chief nurse-midwife at Massachusetts General Hospital. “It’s what we always get asked about.”

The extra discharge is due to a boost in estrogen production and increased blood flow early in pregnancy, she says. When normal, it should be somewhat thick, clear to white in color, and odorless.

A very strong odor, itching, or burning could be signs of a bacterial or yeast infection, which are more common during pregnancy because of hormonal changes, Hernandez adds. A green or yellow color to the discharge is another sign of infection.

Some women go overboard on the hygiene in an attempt to rid themselves of the extra discharge, with the opposite result of what they had intended. “They wash profusely or use stronger soaps. Those things can cause an imbalance in the pH of the vagina and cause infections,” Hernandez says. She advises washing with a warm, wet washcloth only. Avoid douching or using any strong cleaning products that contain perfumes, dyes, or harsh chemicals.

Have your doctor evaluate any discharge symptoms—especially a bad smell and color changes. In some women, a bacterial infection may increase the risk for premature rupture of the membranes and early delivery. Depending on your risk, your doctor may want to treat an infection with antibiotics.

Near the end of your pregnancy, you might start to see a steadier stream of mucus from your vagina. It can be clear to cloudy or whitish in color or have a slight pink color. Or, one large glob of mucus might pop out. This is your mucus plug, which blocked the opening to your cervix to prevent bacteria from entering during your pregnancy. “As the cervix gets ready [for labor], it loses the mucus plug that’s been protective up to this point,” Hernandez says.

At any point in pregnancy, if you’re concerned or just unsure about the state of your discharge, call your doctor’s office. “It’s one of those things women don’t talk about, but we encourage women to talk to their provider or midwife,” Hernandez adds.
Skip the Bed

MANY PARENTS AREN'T FOLLOWING EXPERT ADVICE DESIGNED TO KEEP INFANTS SAFE. SLEEP WITH BABY IN YOUR ROOM BUT PUT HIM IN A SEPARATE CRIB OR BASSINET.

BY Barbara Brody  REVIEWED BY Hansa Bhargava, MD, WebMD Senior Medical Editor

SINCE 2016, THE OFFICIAL AMERICAN ACADEMY OF PEDIATRICS (AAP) POLICY has been that infants should share a room but not a bed with their mothers. Are moms getting the message? According to a new study, the answer is largely no.

The research, published in the journal Pediatrics, surveyed 3,260 mothers of infants who were 2 to 6 months of age and found that fewer than half (45%) were room-sharing without bed-sharing. Moms who were breastfeeding (which the AAP highly recommends) were among those who were more likely to keep their babies in bed with them overnight.

“The official stance of the AAP is that no parent should be bed-sharing with their infant because of the risk of suffocation,” says Whitney Casares, MD, MPH, FAAP, a pediatrician in Portland, OR, and author of The New Baby Blueprint: Caring for You and Your Little One. “A baby’s nervous system is very immature, so they’re unable to react” in the event that a parent accidently rolls over or a pillow ends up on top of them, she explains. In her practice, an infant sadly died after a dad’s arm accidentally ended up over the baby’s face during the night.

Parents should never bed-share if they’re under the influence of alcohol, illegal drugs, or prescription medication that might make it hard for them to wake up, and smokers should not bed-share, either (even if they’re not smoking in bed). Babies younger than 4 months are especially at risk for bed-sharing.

The ideal scenario is to keep baby in your room but in a separate crib or bassinet. That’s actually safer than letting your baby snooze in a nursery down the hall, because even if you have a monitor you’re missing some of the “human to human” monitoring that can help keep your baby safe, Casares says. Keeping your baby in your room may decrease the risk of sudden infant death syndrome (SIDS) by as much as 50%, plus it makes it easier for you to feed and calm your baby during the night.

Other smart moves: Always put babies less than a year old to sleep on their backs, even if they tend to spit up. (Their gag reflex will prevent choking.) Don’t put anything besides sheets—including toys and blankets—in the crib or bassinet, and make sure the sleep surface is flat and firm.

If your baby is having trouble sleeping, Casares recommends swaddling and using a white noise machine or app. “These can be really effective ways to mimic the feeling of being in the womb,” she says.

Last, try to take care of yourself, and don’t be afraid to lean on your partner, family, and friends. If you can afford it, you might consider hiring some extra help. “We know sleep deprivation is common, but it’s a major factor for postpartum depression and anxiety,” Casares says. “The more we can get new moms what they need, the better they can handle the sleeplessness.”

3 SAFE STEPS

1. SHARE A ROOM, NOT A BED
   Bed-sharing with newborns can be dangerous.

2. KEEP IT BARE
   Babies don’t need bumpers, pillows, or blankets; these items may increase the risk of suffocation.

3. PUT INFANTS TO SLEEP ON THEIR BACKS
   It reduces the risk of sudden infant death syndrome (SIDS).
School-Age Shots

AS YOU ROUND UP NEW PENCILS, NOTEBOOKS, AND BACK-TO-SCHOOL SHOES, CONFIRM THAT YOUR KIDS HAVE HAD ALL THEIR VACCINATIONS

BY Erin O'Donnell REVIEWED BY Hansa Bhargava, MD, WebMD Senior Medical Editor

BACK-TO-SCHOOL IS AN IDEAL TIME TO VISIT on their vaccinations. Stan Spinner, MD, chief medical officer and vice president at Texas Children’s Pediatrics and Texas Children’s Urgent Care, explains which shots are due for children in the school years.

FOR ALL AGES
Spinner urges parents of school-age children to get them a flu shot every fall. Some children under 9 need two doses. Multiple flu strains circulate each year, and the vaccine can protect against several strains, but doesn’t always cover all of them. “It may not prevent your child from getting the flu, but it will likely prevent them from getting hospitalized because of it,” Spinner says. Flu can progress into pneumonia, a serious lung infection.

BEFORE KINDERGARTEN
Most children ages 4 to 6 need a DTaP booster, which protects against diphtheria, tetanus, and pertussis. The polio vaccine has eradicated polio in the United States, but it still exists in other parts of the world and can cause paralysis and permanent disability. This age group also receives a dose of the MMR vaccine, which protects against measles, mumps, and rubella. Measles is highly contagious, Spinner says, and can lead to complications including life-threatening pneumonia.

The varicella (chicken pox) vaccine is also recommended for the kindergarten crowd. Highly contagious, chicken pox is usually a mild illness with an itchy, uncomfortable rash that can lead to secondary skin infections. Contracting chicken pox raises your risk of developing the painful rash known as shingles at some time in your life, Spinner says.

MIDDLE SCHOOL
Around age 11, kids are due for a DTaP booster, and their first vaccine against meningococcal disease, which can affect the bloodstream, brain, and spinal cord, and is a particular risk in college dorms.

At age 11, the American Academy of Pediatrics also recommends that all children—girls and boys—receive their first dose of the HPV (human papillomavirus) vaccine, although kids may receive it as early as 9, Spinner says. All kids need two doses separated by 6 to 12 months. HPV causes cervical cancer in women and head and neck cancers in both men and women. “To be clear, this is a cancer vaccine,” Spinner says, which can protect your child against these cancers as an adult.

HIGH SCHOOL
Your child will be ready for a booster of the meningococcal vaccine at age 16. Spinner adds that many families choose at this age to have their teens vaccinated against meningitis B as well.

QUESTIONS TO ASK YOUR PEDIATRICIAN

Q What can I do to make vaccinations less painful for my child?
Pediatrician Stan Spinner, MD, recommends distraction at shot time: Chat with your child about their day or show them a funny YouTube video. Spinner once worked with a nurse who gave kids shots first thing during their appointment, giving them less time to feel nervous. Other doctors apply a topical anesthetic called 4% lidocaine cream on the child’s arm before the shots.

Q What’s at stake if I don’t vaccinate my child?
Failure to vaccinate puts your child—and the community—at risk for potentially serious diseases, Spinner says. Ask your doctor what you can expect if your child contracts one of these diseases. “Vaccines are safe and provide significant protection,” Spinner says. “Next to clean water, vaccines are the No. 1 thing that protects the health of the community.”

Q Where can I get good information about vaccines and childhood diseases?
For reliable information, Spinner recommends healthychildren.org, the site for parents from the American Academy of Pediatrics, and cdc.gov, from the Centers for Disease Control and Prevention.
Base Camp
WAYS TO KEEP KIDS ACTIVE WHEN YOU’RE ALL COOPED UP AT HOME BECAUSE OF CORONAVIRUS SOCIAL DISTANCING OR ANY OTHER REASON
BY Stephanie Watson  REVIEWED BY Hansa Bhargava, MD, WebMD Senior Medical Editor

THE NEW CORONAVIRUS HAS DISRUPTED EVERYONE’S SCHEDULE. Parents are home from work and their kids are home from school. Screens may be your children’s default entertainment during these long stay-at-home days, but it’s not like you can yell, “Stop playing those video games and go outside to play with your friends!”

Letting kids sit around all day isn’t an option, either. Kids need at least 60 minutes of exercise daily. Too much sedentary time can lead to obesity, and diseases like type 2 diabetes that go along with it.

With no gym class or sports practices in the foreseeable future, how do you get kids off the couch and moving without driving yourself crazy in the process? Here are a few ideas.

TAKE 10
You need activity just as much as your kids do. Set reminders on your smartphone for every couple of hours. Each time the alarm goes off, join them for a 10-minute exercise break. If weather allows, walk around the block or kick the soccer ball back and forth. On rainy days, run up and down the stairs or dance along to a favorite music video.

MAKE IT COMPETITIVE
Challenge your kids to see who can do the most sit-ups, push-ups, or jumping jacks, or who can hold a wall sit the longest. Keep a tally of the daily results. At the end of the week, give the winner a prize like one less chore to do, or the movie of their choice.

MOVE FAMILY GAME TIME OUTDOORS
Play a game of soccer, toss around the football or frisbee, or play hide-and-seek or badminton in the backyard. It’s OK to invite a couple of neighborhood friends, as long as they stay at least 6-feet apart and they don’t go inside your house. Have your kids wash up or use hand sanitizer as soon as they get back indoors.

GO FOR A RIDE OR HIKE
A bike ride or hike on a less-traveled trail is a good way to get a change of scenery. Just set some rules for the kids about keeping their distance from fellow hikers and bikers. And if the trail starts to get crowded, head home.

TURN ON A FITNESS VIDEO
Sites like YouTube and Amazon Prime are full of free exercise videos—some that are tailored to kids. Look for ones that are age-appropriate, and that challenge children’s bodies in different ways—like aerobics, strength training, Zumba, and yoga.

PLAY A GAME
Hide objects around the house and set up a scavenger hunt to see who can find them first. Or, build an obstacle course out of couch cushions, chairs, and other furniture and race each other to the end.

UNTIL THE CRISIS HAS PASSED AND YOUR KIDS CAN GET BACK TO THEIR NORMAL ROUTINE, HERE ARE SOME RELAXATION TECHNIQUES TO HELP THEM (AND YOU) STAY CALM.

1. PRACTICE DEEP BREATHING
You can do this anytime and anywhere. Have your children put one hand on their chest and the other on their stomach. Then, tell them to breathe in slowly, hold their breath for three seconds, and slowly breathe out.

2. MEDITATE
Start with the basic deep breathing technique, but then instruct your kids to focus on their breath or repeat a word (mantra) to calm their mind.

3. PRACTICE YOGA
This ancient exercise program combines deep breathing with a series of poses to simultaneously work the body and quiet the mind. If you don’t have experience with yoga, use a video to guide your child’s practice.
Almost one in five young people 12 to 18 years old now have slightly elevated blood sugar, a condition known as prediabetes. It may not sound like a big deal, but these statistics worry doctors. “We know that prediabetes is the best predictor for future type 2 diabetes,” says Melanie Cree-Green, MD, PhD, a pediatric endocrinologist from Children’s Hospital Colorado.

When children develop type 2 diabetes, research shows that the disease can progress faster than it typically does with adults, she adds. Type 2 diabetes also raises a child’s risk, or chance, of having serious health problems such as heart disease, kidney disease, and stroke.

Most teens with prediabetes don’t have symptoms, although in some cases they develop darker, velvety skin on the back of their neck or in their armpits, a condition known as acanthosis nigricans. If you notice this on your teenager, mention it to your pediatrician, Cree-Green says.

Diagnosing prediabetes requires blood tests including hemoglobin A1c, fasting blood sugar, or a glucose tolerance test. Teens should be checked for prediabetes if they are overweight or have a family history of type 2 diabetes, or if they are Hispanic, African American, Native American, or Asian American, since prediabetes is more prevalent in these groups.

But prediabetes can be reversed when teens carrying excess weight lose some of it. Just getting more physical activity—even if it doesn’t lead to weight loss—“can be really helpful in bringing blood sugars down,” Cree-Green says. The American Academy of Pediatrics recommends that kids aim to move at least an hour a day most days of the week. Cree-Green says that for some of her patients, joining a sports team, like recreational league volleyball, helps. She also recommends brainstorming ways to get your family more active, such as after-dinner walks.

As for food, Cree-Green suggests that parents and teens start considering ways they might eat better. For some families, that means reducing the amount of juice or sugary coffee drinks they consume. She also recommends maintaining a good relationship with your child’s pediatrician, who can help you determine smart food changes that would suit your family. “A pediatrician will have a couple of their favorite tricks and a wider array of suggestions that your family can try to implement,” Cree-Green says.

She urges families to tackle prediabetes before children become adults. “Trying to turn this around as a teenager is super important,” she says. “This is the best time to help them establish health habits that they can keep as they transition to adulthood.”

Questions to Ask Your Pediatrician

1. Is my teenager at risk for prediabetes?
   Risk factors in teens include carrying excess weight, a family history of type 2 diabetes, and being African American, Hispanic, Native American, Asian American, or Pacific Islander.

2. What blood sugar levels count as prediabetes?
   Doctors currently use these ranges to diagnose prediabetes: a hemoglobin A1c of 5.7% to 6.4%, a fasting blood sugar of 100 mg/dL to 125 mg/dL, or a glucose tolerance test result of 140 mg/dL to 199 mg/dL. But Melanie Cree-Green, MD, PhD, notes that these are the adult ranges; researchers haven’t yet confirmed what counts as prediabetes in teens. “We may learn that we need to intervene sooner in kids,” she says.

3. Should my teenager with prediabetes be tested for type 2 diabetes?
   Yes. Kids with prediabetes should be tested for type 2 diabetes once a year—or sooner if they show signs of diabetes such as increased thirst, frequent urination, or fatigue.
Fur Care

REGULAR GROOMING IS NOT JUST FOR DOGS THAT GET SPECIAL HAIRCUTS AND ACCESSORIES LIKE RIBBONS. IT CAN ALSO KEEP YOUR DOG HEALTHY.

BY Jodi Helmer

REVIEWED BY Will Draper, DVM, WebMD Medical Reviewer

BATHING AND GROOMING REMOVE DIRT and promote airflow to your pet's skin. Cleaning the fur and skin also prevents the overgrowth of bacteria that can create problems like painful, itchy hotspots, according to Terese DeManuelle, DVM, veterinary dermatologist and owner of Northwest Animal Allergy and Dermatology in Portland, OR.

Certain breeds such as poodles and cocker spaniels have oilier skin and might need more regular baths to keep the “dog smell” in check. Beware of bathing your dog too frequently, however. DeManuelle notes that bathing more than once a week could strip too much oil from the coat, causing dandruff and itching. Use shampoo formulated for pets.

“Human shampoos have more detergents that can strip the oils from your pet's coat and make it dry,” she says.

If your pet has allergies or skin conditions, a veterinary dermatologist might recommend prescription shampoo.

Brushing your dog removes dead hair and matted fur. It's especially important for breeds such as Labrador retrievers, German shepherds, and golden retrievers because their thick undercoats get matted more easily.

A dog that goes on regular hikes or trips to the dog park will need more frequent brushing than one that sleeps on the sofa all day, DeManuelle says. Boxers, dachshunds, and other short-haired breeds may only need to be wiped down with a wet washcloth instead of bathed or brushed.

Although you can bathe and brush dogs at home, DeManuelle recommends leaving nail trims to the pros.

“If you cut the quick, you could cause them pain,” she says.

Don’t forget about your cats. Certain long- and medium-haired breeds, including Persian and Himalayan cats, should be brushed two to three times per week to prevent painful matting. If you want to have your cat professionally groomed, DeManuelle suggests finding a certified cat groomer to do the job.

4 QUESTIONS FOR PET GROOMERS

Q What safety measures are in place?
“Your groomer should use secure restraints to ensure your dog cannot jump out of the tub or jump off the grooming table,” says Terese DeManuelle, DVM.

Q Which products do you use?
“A lot of people want to know that their groomer is using cruelty-free products,” DeManuelle says.

Q What are your health protocols?
A good groomer will require all of their clients to provide proof (from their veterinarian) that their pets are up-to-date on vaccinations and preventive medications, including flea control. “You don’t want your dogs to come home with fleas,” DeManuelle says.

Q How do you disinfect your tools?
Following proper disinfecting protocols can help prevent the spread of contagious infections like ringworm and giardia.
The coronavirus pandemic inspired NBA great STEPH CURRY to power up his family foundation to make sure families—especially those with children—get enough to eat.
IN THE MIDST OF THE CORONAVIRUS CRISIS, BASKETBALL superstar Steph Curry has a message he wants everyone to hear. “It’s important to be in the know, have the right information, and act accordingly.”

On March 26, he brought those words to his more than 30 million Instagram followers, with help from a new acquaintance: Anthony Fauci, MD, the director of the National Institute of Allergy and Infectious Diseases (NIAID) and the medical face of the federal government’s response to the coronavirus.

The two talked for 30 minutes via video chat. First, they joked about the toy basketball hoop that Fauci, 79, a former high school basketball team captain, had in his office. Then, the conversation turned serious.

“I wanted to speak to the younger demographic, the one that looks to social media to get their news, hopefully from reliable sources,” Curry explained the following week, “so they understand the urgency and the responsibility that we all need to take individually to protect ourselves, our families, and the people around us.”

Curry has played for the Golden State Warriors since 2009, the entirety of his professional career. He’s been an NBA All-Star six times. Twice he’s been voted NBA Most Valuable Player. And with his help, the Warriors have won three NBA championships. Now, though, the coronavirus has led him to carve a new role for himself off the court as he lives in lockdown with his family in Atherton, CA, an upscale suburb in the Bay Area. He’s still getting used to it, and he assumes his fans are as well.
“I’m sure it was a shock to see me interviewing the head of the NIAID,” he says, with a laugh that indicates he remains a bit shocked himself. “But I hope some people perked up and said this is real, even if it might not yet be affecting them and their inner circle.”

Before it exploded across the country and stay-at-home suddenly became the new normal, the impact of the virus was felt mostly on the West Coast, particularly in the Seattle area. By early March, though more states had begun to announce their first cases. Governors soon started to declare states of emergency. Then, the virus came for the NBA.

On March 11, it was announced that Utah Jazz center Rudy Gobert had tested positive for the novel coronavirus, the first player in the league to receive a diagnosis. Shortly after that, NBA Commissioner Adam Silver made a dramatic call: The remainder of the basketball season would be postponed. COVID-19, the illness caused by the coronavirus, had shut down a major American institution.

This shocked everyone, including the players, who had just been told they would play games in empty stadiums.

“We were trying to get our heads around how the game would actually happen and what it would look like and feel like and all that,” recalls Curry, 32. “Then, 12 hours later, Adam Silver stepped up and made his announcement.”

At the time, Curry had other concerns on his mind. Two or three days before the shutdown, he had started to feel sick. That made him nervous. “I don’t usually get sick all that often from the flu, the seasonal flu, so getting sick worried me for sure,” he says.

He tested positive for influenza A, but to be certain that was all he had, he received a coronavirus test. It took four days to get the results.

“I was kind of in limbo,” he says. “And I was absolutely worried, especially for my family, my three young kids here in the house. At that point there wasn’t a lot of understanding on how the virus worked and how it spread and what the actual symptoms were.”

MEALS FOR SCHOOLKIDS

Shortly after he got the all clear, the Bay Area went into lockdown mode, issuing a multicounty order for residents to remain indoors. Curry and his wife, Food Network host and cookbook author Ayesha Curry, immediately stepped up to help.

Last summer, the couple launched Eat. Learn. Play., a nonprofit foundation that focuses on nutrition, education, and physical activity for children in Oakland, the Bay Area, and beyond.

More recently, in response to the coronavirus, their foundation donated a million meals to ensure that kids get the food they need despite school closings throughout the area. They partnered with the Alameda County Community Food Bank, the Oakland Unified School District, the World Central Kitchen, and the anti-hunger organization Feeding America.

“These kids rely on their schools for two meals a day, sometimes three meals day,” Curry says. “When that’s taken away, that only heightens the need.”

Pediatrician Dominique Williams, MD, MPH, agrees. “All of those kids could be struggling in the short term,” says Williams, based at the Center for Healthy Weight and Nutrition at Nationwide Children’s Hospital in Columbus, OH.
1 IN 7
The number of food insecure households with children, according to the U.S. Department of Agriculture.

43.4%
Percentage of the federal government’s Supplemental Nutrition Assistance Program (SNAP) participants who are children.

30 MILLION
The number of meals provided by the federal government’s National School Lunch Program every day.
“For the period of the pandemic, it’s likely that, unless they get the meals they need, our kids are going to have behavioral issues, fatigue, and the aches and pains of not having enough food or the right balance of nutrients.”

Insufficient food also makes it more difficult for kids to focus on their home-schooling lessons during the pandemic, Williams says, and it likely will cause them to act out, contributing to the stress of their parents or caregivers.

“It can be a challenge for the best of us.”

TIME FOR FAMILY
Curry and his wife worried that, among all the fallout resulting from the virus, children’s meals would get overlooked. Not on their watch, he insists.

“This is important work, and we’ll continue it as long as the shutdown continues.”

When Curry isn’t talking to health experts or working to keep local kids fed, he can be found around the house, doing what needs doing, trying to keep busy, just like his neighbors and much of the rest of the country. [At press time, many states and cities were under stay-at-home advisories.]

“First of all,” he says, “I have an understanding and appreciation of the fact that me and my family have the ability to just be at home. Most families don’t have the option to just camp up at home for however long this is.”

His 7-year-old daughter, Riley, spends part of each day doing distance learning that her school has arranged, while his younger daughter, Ryan, 4, does her own thing around the house. But what about 1-year-old son Canon?

“He’s the happiest guy in the world!” Curry says. “Both parents are home all day, so he’s loving the attention.”

Curry and his wife travel a lot for work, and while Curry misses the game intensely, he and Ayesha are getting something that’s all too rare for them: nonstop family time.

“This is the most time that we’ve been together as a unit at home, you know, in a very, very long time,” Curry says. “Mostly because we have our three kids looking to us, there’s no excuse to not enjoy this moment. We’ll probably never ever again in our lifetimes get this kind of personal time with the kids.”

Curry spends part of each day in his home gym, where he can FaceTime with the Warriors athletic staff or do a workout via Zoom. Every morning, he and his teammates, along with folks on the Warriors staff, can get on their Peloton bikes and compete in virtual races. But the uncertainty of when he’ll return to the court weighs on him.

“I’ve always had concrete end dates or target dates for when I need to be ready to play, but right now there’s so much that’s unknown,” Curry says. “That makes
it tougher to try to stay in shape and challenge myself on the daily to work out and try to find ways to get shots up. I say that with the full understanding that our issues are easier to solve than what most people are going through.”

One project he assigned himself: setting up a basketball hoop: “It’s crazy I didn’t have one in my house until 3 days ago.”

Favorite family activities include Nintendo Wii’s Just Dance, bike rides around the neighborhood, and doing housework while grooving to DJ D-Nice’s “Club Quarantine” dance parties on Instagram Live. At night, he and Ayesha catch up virtually with family in Dallas and North Carolina. The girls love cooking with Ayesha, and Curry loves what she cooks. Left to his own devices at the grocery store, he’d fill his cart with popcorn and other junk food. “My wife just side-eyes me the whole time,” he says, laughing again. “I have to grow up a bit in that department.”

But the pandemic’s always in the background, and Curry finds that it takes its toll. “I’ve had a couple days where you just get frozen, very unproductive, not really knowing what to do and feeling overwhelmed with the lack of control that you have,” he explains. “That has kind of crept up on me occasionally.”

What does he do? He follows his sister’s advice: “She’s always said, it’s OK to be overwhelmed sometimes. Be OK with it, but be aware of it. If you need to, lay on the couch for a couple of hours, clear your head, and have a moment for yourself. That’s all right.”

To keep it together, he keeps himself busy, makes sure he’s there for his kids, to answer their questions, to reassure them, to be OK, if not for himself then for them.

“If we’re kind of down in the dumps and don’t have any energy and kind of let the situation overwhelm us, that’s going to trickle down,” Curry says.

It’s a heady blend of emotions, laced with fear, realistically facing what the future might bring, and yet, as much as possible, he stays positive.

“We’re right in the thick of it right now. It’s hard, it’s really hard to see the light at the end of the tunnel,” he says. “It’s going to be all right. We’re going to get through it. But it’s going to be tough. We know that.”
Avoid misinformation pitfalls about the coronavirus

By WebMD Editorial Staff  Reviewed by Michael W. Smith, MD, WebMD Chief Medical Editor

As the coronavirus continues to spread across the United States and around the world, it carries with it a serious threat: misinformation. Now more than ever, it’s critical to distinguish the truth about this virus from the rumors. Following the wrong information could lead to wasted efforts, at best. At worst, it could make you and your family more vulnerable to getting sick.

Experts debunk several of the biggest rumors running rampant, to help you separate COVID-19 fact from fiction.
**MYTH: Drinking water every 15 minutes will help prevent you from catching the virus.**

**FACT:** This falsehood making the rounds on social media is based on supposed advice from Japanese doctors treating COVID-19. Its premise? Drinking water flushes the virus into your stomach, where acid kills it, thus preventing it from making its way into your windpipe and lungs.

No evidence exists to support this claim, though there is good reason to drink plenty of water to prevent dehydration while you’re sick. “It is very important to stay both hydrated and well rested when recovering from any infection,” Susan Wootton, MD, associate professor of pediatrics at McGovern Medical School at UTHealth and infectious disease pediatrician with UT Physicians said in a news release.

**MYTH: Coronavirus will disappear once the temperature rises**

**FACT:** The truth is, doctors don’t know whether COVID-19 will act like the flu and vanish during the summer months. The two viruses are very different, and only time will tell whether the new coronavirus is a seasonal illness. Scientists do know that heat kills the virus, but the lab temperatures that wiped out other coronavirus strains were much hotter (132° F) than the average summer day. And the virus has circulated pretty effectively in countries with hot and humid climates. It’s safer to bet on social distancing and good hygiene than to wish on a change in the weather.

**MYTH: Using hot water to wash your hands will remove germs better than cold water**

**FACT:** The temperature of the water is less important than the length of time you wash. “It’s really the mechanical scrubbing action that’s cleaning your hands,” says Michael Chang, MD, assistant professor of pediatrics at McGovern Medical School and an infectious disease pediatrician with UT Physicians. “You can use warm or cold water. You have to be sure you wash/scrub long enough (at least 20 seconds) and completely dry your hands.”

**MYTH: Vitamin C and zinc can prevent COVID-19**

**FACT:** Those immunity-boosting supplements you might take to prevent colds are no match for the new coronavirus. In fact, most studies show they do little to nothing to prevent respiratory infections. While vitamin C in large doses may shorten colds by a day or two, there’s no evidence that either supplement can shield against COVID-19.

**MYTH: Wearing a mask can protect you from getting infected**

**FACT:** Initially, the CDC and World Health Organization (WHO) recommended that healthy people not wear masks, in an attempt to preserve the limited available supply for the health care workers who need them most. That guidance has changed, as researchers have found that people without symptoms are able to transmit the virus.

**MYTH: Garlic will protect you against the virus**

**FACT:** Sprinkle it liberally on your pasta if you like the flavor, but don’t expect this pungent spice to protect you from COVID-19. Although studies show that garlic has germ-killing capabilities, it’s never been tested against the coronavirus. Plus, ingesting garlic keeps it far from the virus, which resides in your respiratory tract.

**MYTH: Rinsing your nose with saline will flush out the virus**

**FACT:** A salt-water wash can help clear out your nasal passages and relieve some of the stuffiness that makes it hard to breathe when you have a cold, but it’s pretty much useless against coronavirus. The virus sticks so well to cells in your respiratory tract that a liquid is unlikely to dislodge it. Rinsing could be counterproductive, because it can wash away some of the protective immune substances that shield you from illness.

**SHOULD YOU AVOID IBUPROFEN?**

This idea does have a scientific theory behind it—but there’s no evidence that it’s true. A letter in the medical journal, The Lancet, suggested that over-the-counter painkillers like ibuprofen (Advil, Motrin) and aspirin increase the number of receptors on cells that the coronavirus attaches to. More receptors allegedly means the virus that causes COVID-19 could attach more strongly to cells, causing more severe symptoms. Many medical experts have come out strongly against this contention, noting there’s no evidence to support the notion that it causes more severe symptoms.

Initially, the WHO recommended against the use of ibuprofen for COVID-19 symptoms. However, after further consideration, they changed their direction and no longer recommend against its use. If you have COVID-19 symptoms, ask your doctor what makes sense for you. If you want to be extra cautious, acetaminophen (Tylenol) is the way to go. Just be careful not to take more than the amount recommended on the label, as too much can cause liver damage.
Is it COVID-19 or another respiratory infection? Here’s how to tell the difference.
YOU’VE COME DOWN WITH A COUGH AND FEVER, two common symptoms of the new coronavirus. Your mind spirals back to the last few days. Were you exposed to the virus in the supermarket checkout line? Did you get too close to a COVID-infected person while out on your daily walk?

Not necessarily. Coronavirus is a respiratory illness, and its symptoms—fever, cough, chills—can be confusingly similar to those of other respiratory infections, like colds and the flu.

With coronavirus tests in limited supply [as of press time], confirming that you’ve been infected will be at the discretion of your doctor and local health department.

In the meantime, you may be able to figure out what’s ailing you by taking a closer look at your symptoms. Because no self-diagnosis is perfect and there’s always the chance that it could be coronavirus, it’s best to stay home and avoid contact with anyone else while you have any type of respiratory symptoms.

COVID-19 vs. Colds
Coronavirus primarily affects the chest and lungs, which is why so many people who are infected complain of a cough and shortness of breath. A cold is an upper respiratory infection that mainly affects the nose and sinuses, causing congestion and a runny nose. While nasal symptoms are possible in people with COVID-19, they’re uncommon. If your symptoms are mainly in your nose and you don’t have a fever, chances are you have a cold.

COVID-19 vs. the Flu
Symptoms of COVID-19 and the flu do overlap, but there are some key differences in how people do after they get sick. Coronavirus symptoms like a fever, dry cough, tiredness, body aches, headaches, sore throat, and breathing problems overlap with the flu. But unlike the flu, coronavirus is more likely to cause breathing problems.

While flu symptoms strike fast, COVID-19 tends to come on gradually. Both conditions can turn serious, but coronavirus even more so. Current information indicates that only 1% to 2% of people with the flu require hospitalization.

COVID-19 vs. Pneumonia
Pneumonia is another type of respiratory infection, which inflames the air sacs in the lungs. Both bacteria and the same viruses that are responsible for colds and the flu can cause pneumonia.

Pneumonia is also a possible complication of coronavirus. A severe COVID-19 infection can damage the lungs to the point where they become more vulnerable to other germs. Pneumonia symptoms like shortness of breath, fever, fatigue, and chest pain mirror those of coronavirus, but the cough in pneumonia is more productive at bringing up phlegm.

It’s important to stay vigilant for these symptoms, because pneumonia can be a very serious infection. A doctor usually has to determine whether you have pneumonia or COVID-19.
If you develop a new fever and you’re having trouble breathing, your doctor may order an X-ray or CT scan. If you do have pneumonia, your health care team will give you treatments like antibiotics, steroid medicines, and breathing support.

**COVID-19 vs. Allergies**

Hay fever, also called nasal allergies, affects the upper respiratory system—mainly the nose and sinuses. Allergies cause sneezing, congestion, and a runny nose.

These symptoms aren’t commonly seen in people with COVID-19, but they are possible. And if hay fever causes an asthma attack, you can also have shortness of breath, which is easy to confuse with coronavirus. But if you already know you have allergies and your symptoms are mainly in your nose (especially if your eyes are itchy too), chances are you have hay fever.

**COVID-19 vs. Bronchitis**

Symptoms of coronavirus and bronchitis caused by another type of virus or bacteria can be hard to tell apart. Coronavirus can both cause bronchitis and produce similar symptoms, like a cough. The difference is that COVID-19 is more likely to also cause shortness of breath and fever.

During the outbreak, if you develop a cough, it’s best to take extra precautions and treat yourself as if you have coronavirus. If your symptoms are mild, stay home and rest until you’ve recovered. Isolate yourself and stay away from others until your doctor gives you the all-clear, so that you don’t spread the virus. If you develop shortness of breath or fever, call your doctor to see if you should be tested for coronavirus.

**COVID-19 vs. Asthma**

People with asthma need to be especially vigilant. If they get coronavirus (COVID-19), they’re at higher risk for severe symptoms. Both coronavirus and asthma affect the lower respiratory tract—the airways in the chest and lungs. Both infections also cause shortness of breath. However, almost everyone with severe coronavirus symptoms will have a fever, while asthma typically doesn’t cause a fever.

If you have asthma and you get an attack with shortness of breath but no fever, chances are it’s not coronavirus, especially if your symptoms improve when you use your asthma inhaler. If you have a fever or your shortness of breath doesn’t get better, check in with your doctor to see whether you should have a coronavirus test.

**QUESTIONS TO ASK YOUR DOCTOR**

**What should I do if I have symptoms of coronavirus?**
Call your doctor for advice. The best thing you can do is stay put. Most people are able to recover from coronavirus at home. Going out could risk infecting others. If you have trouble breathing, pain or pressure in your chest, or a bluish color to your lips or face, call for medical help right away.

**Should I get tested?**
Check with your doctor, or call your state or local health department to find out if you should get tested. Their answer might depend on your symptoms and the availability of COVID-19 tests in your area.

**Do I need to self-isolate?**
If you’re not sure whether you have coronavirus, stay in a separate room away from other members of your household to avoid infecting them. Wear a mask if you do have to be near other people, and wash your hands often.
DISTANCE WATCH

How to care for loved ones while keeping a safe distance during the coronavirus outbreak

By Stephanie Watson  Reviewed by Brunilda Nazario, MD, WebMD Senior Medical Editor

COVID-19 HAS CHANGED THE WAY WE INTERACT WITH OUR FAMILIES. With older adults urged to stay away from other people as much as possible, popping in to see mom and dad is not an option.

It can be hard to keep away from your elder loved ones while the coronavirus is a threat, but it’s important. As people age, their immune systems weaken and they’re not as able to fight off the virus. People 60 and older, especially those with conditions like heart and lung disease, are in greater danger of serious illness due to COVID-19. They’re more likely to be admitted to the hospital and to die from the disease.
People who are infected with the virus don’t always show symptoms. Even if you and your kids feel fine, you could unknowingly bring it into your parents’ home.

But staying away can cause problems, too. People who are isolated are at greater risk for depression, anxiety, heart disease, and mental decline.

So it’s time to get creative. Here are a few things you can do to keep elderly loved ones from feeling lonely, but still keep them safe.

-green icon-Send Them a Care Package

The CDC recommends that everyone stock up on enough food and other supplies to stay home for a few weeks. Because it might be hard for older people to get to the store, put together a care package of things you know they’ll need, such as:

- Foods that will last for several weeks, like canned fruits and vegetables, cereal, and soup
- Over-the-counter medicines to treat a fever, cough, and other symptoms
- Health and medical supplies such as tissues, toilet paper, bandages, and oxygen if needed
- Disinfecting cleaning sprays and wipes

Drop off these items at your loved ones’ front door, or order them from an online store that ships.

Also make sure older people have at least a 30-day supply of their prescription drugs on hand. Offer to reorder from the drugstore when they run low, and pick up the medicine for them if you live close enough.

-green icon-Schedule a Weekly Video Call

When you can’t be there in person, a video call is the next best thing. Communication tools like Skype and free apps like Zoom, WhatsApp, and FaceTime can make you feel like you’re together, even when you’re thousands of miles away. Research finds that interacting through technology improves symptoms of isolation and depression in older adults.

Schedule a time each week for a video call to check in with each other. Ask your kids to sing a song or tell a story. Or play a board game together virtually to keep the family connection alive.

-green icon-Watch a Movie Together

You might not be able to sit side-by-side on the couch right now, but you can still take in a movie with your loved ones. Streaming services like Netflix Party and Metastream will let you chat with each other while you watch your favorite flicks.
Doctors still don’t know if pregnant women are more likely than others to get infected with COVID-19, or to have serious complications from the virus. Here are some ways you can help pregnant friends and relatives stay healthy, from Neha Pathak, MD, WebMD Medical Editor.

+ **Promote social distancing.** Pregnant women should stay home and away from other people as much as possible. Hold off on throwing a baby shower, which could increase her risk of exposure to the virus.

+ **Send a care package.** Soap and hand sanitizer can be hard to find these days. Ship her a box of these and other essentials, like tissues, toilet paper, and nutritious, unprocessed foods.

+ **Take a walk.** Walking outside is fine to do, as long as you keep your distance from each other, and from other people.

+ **Offer support.** This is a stressful time for everyone. Pregnancy only adds to that stress. Call often to check in on your friend or family member. If she seems especially upset, suggest that she get help from a professional.
Berry Good

In a season bursting with blueberries and more, the blackberry is unfairly overlooked. Reacquaint yourself with this bite-size berry.

Juicy, ripe blackberries are one of the true treats of summer, pairing delicious flavor with impressive nutrition. One cup of fresh blackberries offers 31% of an adult’s daily value of fiber (key for digestion) and 50% of the daily value of vitamin C (an immune system booster). Blackberries are also loaded with potent plant pigments known as anthocyanins, which give these gems their glossy dark color and may support heart health and blood vessel function. Toss blackberries into spinach salads. Bake them into cobblers and crumbles, or simmer them with lemon juice and honey to make a tasty compote to ladle over frozen yogurt. Or simply eat fresh blackberries on their own, for a peak summer experience. —Erin O’Donnell
Grain Bowls

Combine a grain or couscous, colorful seasonal veggies, and a protein, give it a drizzle of dressing, and you’ve created the perfect meal for warm summer nights.

BY Erin O’Donnell
RECIPES BY Kathleen Zelman, MPH, RD, LD

SUPERFOOD SUPPER

Vegan Power Bowl

This vegan, gluten-free meal will help you power through active summer days. Be sure to use firm tofu here, and roast two sweet potatoes before you start the recipe. If you’d prefer your vinaigrette with a little less kick, leave out the chili flakes.

MAKE IT

Pat half a block of tofu dry. Cut into ½-inch cubes. Make dressing:

In a small jar, combine ¼ cup fresh lime juice, lime zest, 1 clove garlic, minced, 1 tsp chili powder, ½ tsp red chili flakes, ⅓ cup olive oil, 2 tsp maple syrup, and ¼ tsp kosher salt and freshly ground black pepper to taste. Divide 4 cups baby kale among 4 bowls. Drain and rinse a can of black beans, and divide among bowls. Next, add ½ cup quinoa, tofu, chopped avocado, sliced radishes, and chopped sweet potatoes. Drizzle with vinaigrette. Garnish with slivered almonds and pomegranate seeds. SERVES 4

Per serving (about 3 cups vegetables and grain, with ½ cup tofu cubes) 570 calories, 23 g protein, 62 g carbohydrate, 29 g fat (4 g saturated fat), 0 mg cholesterol, 14 g fiber, 7 g sugar, 234 mg sodium. Calories from fat: 44%
**Thai Salmon Bowl**

This bowl features the colorful crunch of two types of cabbage (napa and red), as well as the superfood soybeans known as edamame, available in the freezer case of supermarkets. It’s all topped with an easy-to-make peanut sauce.

**MAKE IT** Prepare a grill or griddle pan with cooking spray. Heat to medium high. Season salmon with ½ tsp each of smoked paprika and coriander, a pinch of kosher salt, and a few turns of freshly ground black pepper. Place fish skinless side up on grill for 4 to 6 minutes until seared, then flip. Cook an additional 4 minutes. Remove from heat; set aside. Make the dressing: whisk together 1 tbsp each of creamy peanut butter, rice wine vinegar, and low-sodium soy sauce. Add 1 tsp honey, 2 tsp minced fresh ginger, and 1 to 2 tbsp water. Place shredded cabbage in 4 bowls. Top each with ½ cup barley, some shredded carrots and shelled edamame, and a handful of red pepper strips. Place warm salmon in center of bowl. Drizzle with peanut sauce. Garnish with peanuts and scallions. **SERVES 4**

**PER SERVING** (about 3 cups vegetables and grains, with 16 oz salmon fillet): 578 calories, 41 g protein, 40 g carbohydrate, 29 g fat (6 g saturated fat), 92 mg cholesterol, 8 g fiber, 10 g sugar, 359 mg sodium. Calories from fat: 44%.

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**MEDITERRANEAN-STYLE MEAL**

**Grilled Shrimp Couscous Bowl**

Israeli couscous, the central ingredient of this bowl, is not technically a grain. Instead, it’s tiny, ball-shaped pasta with a deliciously chewy texture. When shopping for shrimp for this recipe, select large ones (16 to 20 shrimp per pound). They should be peeled and deveined before you start the recipe.

**MAKE IT** Prepare a grill or griddle pan with cooking spray. Heat to medium high. Cut 2 zucchinis into ½-inch slices. Toss shrimp and zucchini with 1 tbsp olive oil and a pinch of paprika. Grill shrimp 2 to 3 minutes per side until firm and pink, and zucchini 3 minutes per side, until grill marks appear. Remove from heat. Make the dressing: whisk together ½ cup nonfat plain Greek yogurt, 1 tbsp light mayonnaise, 1 tsp each garlic powder and honey, 1 ½ tbsp fresh lemon juice, ¼ cup crumbled feta cheese, ¼ tsp kosher salt, freshly ground pepper to taste, and 1 tbsp minced dill. Divide 4 cups arugula among 4 bowls. Top each with ½ cup couscous, halved tomatoes, zucchini, chopped onion, and shrimp. Drizzle with dressing. Garnish with fresh dill. **SERVES 4**

**THE MIX**

COOKED WHOLE-GRAIN ISRAELI COUSCOUS + ZUCCHINI, 1½ LB SHRIMP, OLIVE OIL, PAPRIKA, NONFAT PLAIN GREEK YOGURT, ARUGULA, RED AND YELLOW CHERRY TOMATOES, RED ONION, FRESH DILL

**THE MIX**

COOKED BARLEY + 4 SALMON FILLETS, SMOKED PAPRIKA, CORIANDER, NAPA CABBAGE, RED CABBAGE, CARROTS, EDAMAME, SWEET RED PEPPER, UNSALTED PEANUTS
Eat Your Greens

FROM BRACINGLY BITTER TO SLIGHTLY SWEET, LEAFY GREENS OFFER A VARIETY OF FLAVORS AND TEXTURES THAT YOU CAN PAIR WITH WHATEVER IS ON YOUR PLATE

BY Matt McMillen  REVIEWED BY Arefa Cassoobhoy, MD, MPH, WebMD Senior Medical Editor

WHEN THE CDC RANKED THE POWERHOUSE FRUITS AND VEGGIES THAT BOASTED THE MOST NUTRITION, 17 leafy greens made it into the top 20. But that's only one reason to make them part of your daily diet. They also taste great and, for most, simple preparations—cooked or raw—bring out the best in them, says Chip Flanagan, chef at Ralph's on the Park in New Orleans. Here are six of his favorites.

**CHARD**

"Large, bright, often with colorful stems, these soft and tender leaves can be cooked in about 20 seconds in a hot skillet, finished with a dash of vinegar. Plate them alongside shrimp or scallops."

**COLLARD GREENS**

"These hardy yet mild greens need some time to soften, so plan a braise with loads of onions, garlic, a bit of sugar, and a splash of cane vinegar."

**MUSTARD GREENS**

"Really tender and spicy, with just a little heat, mix these with other milder greens like spinach to add a little bite to a salad. Look for smaller leaves if you plan to serve them raw."

**BABY KALE**

"Very tender, slightly sweet and salad-ready when raw, they're also quick to cook: a few seconds in a hot skillet with a little water or wine to wilt. Serve with an Italian cheese and roasted hazelnuts."

**BOK CHOI**

"Very mild, these crunchy greens take on the flavors of whatever you cook with them. Add to soups and stir-fries, or toss on the grill with salt, pepper, and a little oil."

**TURNIP GREENS**

"Especially good when cooked with turnips and a ham hock, these earthy greens have a little peppery zing, and they benefit from braising. Look for the freshest you can find."
Barbecue

WHETHER YOU CALL IT BARBECUING OR GRILLING, THIS METHOD OF COOKING IS MADE FOR THE SUMMERTIME. LEARN SOME CRUCIAL PRO TIPS TO MASTER YOUR NEXT COOKOUT.

BY Matt McMillen
REVIEWED BY Arefa Cassoobhoy, MD, MPH, WebMD Senior Medical Editor

“OUTDOOR COOKING IS THE BEST WAY TO COOK, BAR NONE,” says Elizabeth Karmel, author of the 2019 cookbook, Steak and Cake, and founder of the website, www.girlsatthegrill.com. “Everything you cook on a grill tastes great.” Here, Karmel shares some techniques to improve your grill game, whether you cook low and slow or hot and fast.

MAKE IT

- Keep it clean. Warm up your grill, then scrape the grate clean with a grill brush before cooking. The heat helps the debris release more easily. Repeat when you’re done.
- Oil your food. If you oil the grate it will burn off right away, and your food will stick to it like glue.
- Say no to lighter fluid. It changes the way your food tastes—for the worse. Use a chimney-style starter if you have a charcoal grill.
- Go natural. Look for natural hardwood charcoal. If you buy briquettes, the only filler it should have is natural lime. Avoid those with other fillers.
- If your food cooks quickly—less than 20 minutes—cook directly over a single layer of coals.
- Leave the vents at least partially open to feed oxygen to the coals. The more you open the vents, the hotter the coals become.
- Stay safe. Have a fire extinguisher on hand in case of emergencies.
- For gas grills, preheat for 15 minutes with all burners on high. Then, set to the cooking temperature your recipe requires.
- Don’t flip too soon. If your meat won’t budge, wait a little longer. It will naturally release from the grill when it’s ready.
- Cook safe. Use an NSF-approved instant-read thermometer to be sure you’ve cooked meat to a germ-killing temperature.
- Let it rest. Don’t eat the meat hot off the grill. Give it a minimum of 5 minutes rest, and longer for larger pieces of meat. For example, a whole tenderloin should rest for 20 to 30 minutes.

BUILD A BETTER

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BEFORE COVID-19, PANTRY STAPLES WERE THE SUPPORTING CAST. Now, as you limit trips to the market and wait for grocery delivery, they’re the star of the show. Anyone can boil a box of pasta and call it dinner. Healthy meals take a little more thought and effort. But it’s worth it to give your body what it needs without stressing yourself out.

In an ideal scenario, you’d have a balance of fruits, vegetables, whole grains, lean protein, and dairy at every meal. It might be hard to pull that off now, and that’s OK. What you eat affects your physical and mental health, and both are a priority. Start with what you have and fill in the gaps.

TAKE STOCK OF YOUR PANTRY
First, get your pantry in good shape. Group similar products and toss out expired items. Share products you don’t plan to use with others who need them.

Make a mental or actual list of what you have. Use these categories as a guide:
- Canned soups and broths
- Canned fruits
- Canned vegetables
- Canned beans and legumes
- Condiments
- Canned meat and fish
- Dried beans
- Rice and pasta

MAKE A MEAL LIST
Instead of a meal plan, which is based on preparing certain dishes on certain days of the week, make a list of meals you can make any time based on what you have.

To keep stress low in the kitchen, plan your meal list for a few days or a week. That way you won’t have to decide on the spot what to have for every meal, every day—especially when you’re hungry.

Keep these things in mind:
Balance. Work in as many fruits and vegetables as you can. Protein (tuna, chicken, beans, nuts, seeds) will help you feel full longer.

Variety. You’ll get bored quickly if you do beans, rice, repeat. Think about themes or ethnic cooking styles to help you mix it up, including Asian, taco Tuesday, Mediterranean, pasta night, and breakfast for dinner.

Leftovers. You don’t have to create an entirely new meal every day. Pick a few options for breakfast, lunch, and dinner and rotate them. If your food reserves allow, make double or triple batches of meals, and freeze the extras for later.

Flexibility. Pantry meals are very forgiving. Substitute one bean, vegetable, or grain for another and rely on your spice rack to amp up the flavor.

Use these ideas or vary them based on what you have in your pantry, fridge, and freezer:
- Sliced apples with peanut or almond butter
- Banana, yogurt, and granola
- Whole-grain cereal with shelf-stable milk
- Scrambled eggs with frozen peppers, tortillas, salsa
- Frozen berry smoothie made with spinach and shelf-stable milk
- Tuna salad with whole-grain crackers
- Black beans with diced tomatoes, onion, and chili spices
- Canned chickpeas with quinoa, baked tofu, lemon, and soy sauce
- Whole-wheat pasta with chicken sausage, jarred artichokes, and olive oil
- Chicken and salsa cooked in the slow cooker, served with brown rice and avocado
- Frozen salmon with canned green beans and a baked sweet potato
Attention Deficit Hyperactivity Disorder

SCHOOL, HOME LIFE, AND RELATIONSHIPS CAN BE TOUGH FOR KIDS WITH ADHD. DIFFERENCES IN BRAIN DEVELOPMENT AND ACTIVITY MAKE IT HARD TO PAY ATTENTION, SIT STILL, AND CONTROL BEHAVIOR.

THE EXACT CAUSE OF ADHD ISN’T CLEAR. Family history; exposure to toxins, such as lead in paint; and a mother’s tobacco, alcohol, and drug use during pregnancy can play a role.

New research uncovers other risk factors related to a mother’s health. In a study of 2,134 mothers, those who were low on vitamin D during pregnancy were more likely to have a child with ADHD. Another study, which included 220,685 women, found that children who are born to mothers younger than age 20 also have a higher risk for the condition.

Researchers now have a better understanding of genetic risk for ADHD as well. An international team compared the genetic makeup of 20,000 people who have the disorder to 35,000 who do not. They discovered several gene variants (different forms of the same gene) that are more common in people with ADHD. This knowledge can help doctors measure risk for the condition before symptoms arise. It could also help scientists develop targeted medications to regulate these genes.

Certain ADHD medications, most commonly stimulants, and therapy with a mental health professional can help kids manage and live with their symptoms and is the best comprehensive treatment. According to new research, stimulants may have long-term benefits beyond symptom control. Researchers analyzed three studies that included more than 560 adolescents and young adults, including those who do and do not take these drugs for ADHD.

The researchers found that people who take stimulants for ADHD are less likely to develop depression, anxiety or bipolar disorder; repeat a grade in school; have a car accident; smoke cigarettes; or develop a substance use disorder.

—SONYA COLLINS
TELEMEDICINE INVOLVES THE USE OF TECHNOLOGY to help provide clinical services without requiring an in-person visit. The World Health Organization (WHO) refers to telemedicine as “healing from a distance.”

Although telemedicine has been around for decades, the actual use of telemedicine has increased dramatically in the last few months in an effort to preserve social distancing while also making sure you can still get medical care.

There is a role for telemedicine in almost every medical specialty. For example, you can use it to have a dermatologist look at a suspicious mole or rash; your family physician can check and see if you have pink eye; mental health professionals can use telemedicine to help address anxiety and depression, your obstetrician can even check a pregnant woman’s heart rates with some special equipment.

In addition, all the smart watches and wearable technologies provide useful information such as physical activity levels, blood sugar, nutrition status, and heart rate that your doctor can use to manage your care in telemedicine appointments.

However, in some cases telemedicine is not a good idea. Don’t use it if you think you are having a heart attack or stroke, or if you are involved in an accident and might have broken bones. For these, you need to go to the emergency room.

For most conditions, telemedicine offers a convenient way to get care without leaving your home. These five tips will help you get the most out of your telemedicine visit.

**Schedule it.** You are likely used to texting, calling, and even videoconferencing friends, colleagues, and families spur-of-the-moment. A telemedicine visit with your doctor is just like any other appointment. You need to schedule it and be on time. Don’t think of telemedicine as trying to catch your doctor when he or she is free.

**Make sure you are in a quiet and well-lit space.** Privacy is as important for telemedicine as it is in-person. Don’t try to do it while you are out running errands. Think about the space prior to the visit and make sure it has good lighting. Your doctor can learn a lot by seeing you and might need to look at parts of your body. Light does help get a good view. Be ready to move the camera around.

**Explain upfront what the visit is for just as you would for an in-person visit.** Is it for a new condition or a chronic disease you and your doctor are already managing? Is it to refill a medicine or to go over lab results? Start your visit with this information.

**Write questions down to help manage time.** When using new technologies, you can easily get side-tracked. Jot down your concerns so you don’t forget to ask.

**Manage expectations.** Although telemedicine can provide many services, it cannot do everything. If you have never done a telemedicine visit before, there’s a learning process.

Questions? Comments? Email me at john@webmd.com.
Psoriasis
TIPS TO PREVENT AND RELIEVE SYMPTOMS

BY Matt McMillen
REVIEWED BY Michael Smith, MD, WebMD Chief Medical Editor

“Stress plays a huge role in psoriasis. Consider doing activities to alleviate stress such as meditation, yoga, or tai chi. Lack of sleep also produces higher levels of stress hormones. Try to practice good sleep hygiene such as no screen time 30 minutes prior to bed and avoiding caffeine, alcohol, or nicotine.”

KYLE CHENG MD, MS dermatologist, assistant clinical professor, UCLA Division of Dermatology, and director, UCLA Psoriasis Specialty Clinic, Los Angeles

“Dry skin can make psoriasis painful and uncomfortable, so apply moisturizer as needed to hydrate your skin. Use a thick moisturizer rich in ceramides, hyaluronic acid, and glycerin. Moisturize your skin while it’s damp to lock in moisture and keep your skin hydrated.”

MICHELE S. GREEN, MD dermatologist, Lenox Hill Hospital, New York City

“‘If you are overweight or obese, you may see improvements to your psoriasis if you lose weight. If possible, see a nutritionist to develop an effective weight loss plan. In general, this plan would include decreasing or stopping sugary drinks and empty calories, while increasing natural foods such as vegetables, fruits, and nuts.”

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Painless Slumber

WHEN YOU HAVE RHEUMATOID ARTHRITIS, HERE’S HOW TO SLEEP WELL WHEN YOUR JOINTS KEEP SOUNDING THE ALARM

BY Stephanie Watson
REVIEWED BY Michael Smith, MD, WebMD Chief Medical Editor

SLEEP IS A COMMODITY THAT’S IN SHORT SUPPLY. By one estimate, more than a third of American adults don’t get the recommended seven or more hours nightly. For people with rheumatoid arthritis (RA), rest is even harder to come by. Studies show that up to 70% of people with RA struggle to fall asleep or stay that way throughout the night.

4 TIPS

1. BUY THE RIGHT BED
   - A mattress and pillow made from memory foam or another cushioning material may be more comfortable on sore joints.

2. EXERCISE, BUT NOT TOO LATE
   - Regular workouts can both help you sleep better and relieve RA pain, but if you do your routine too close to bedtime, it could keep you awake.

3. RESERVE YOUR BED FOR SLEEP AND SEX
   - Don’t watch TV or use your devices.

4. TRY COGNITIVE BEHAVIORAL THERAPY
   - Research suggests it improves both sleep and pain in people with arthritis.

Joint pain is the most obvious reason for disrupted sleep, but it’s not the only explanation. More than half of people with RA also have a sleep disorder like obstructive sleep apnea, restless legs syndrome (RLS), or insomnia. Inflammation from RA, as well as inflammatory substances called cytokines, disrupt sleep regulation and quality.

A lack of sleep leaves you groggy the next day, but that’s not all. When you’re exhausted, your body’s production of stress hormones ramps up, which leads to more flares—and more pain. Poor sleep can also compromise your ability to manage your disease.

“There is this bidirectional relationship between RA and sleep. A lot of mechanisms associated with RA can affect sleep, but we also know and have shown that sleep can affect pain, fatigue, and quality of life in patients,” says Faith Luyster, PhD, an assistant professor in the University of Pittsburgh School of Nursing. She also studies the effects of sleep disorders on people with chronic conditions like RA.

Getting on the right arthritis treatment will help ease the pain that steals your slumber. Some studies have shown that biologics and other disease-modifying drugs have a positive effect on sleep quality. Also, make sure your doctor is addressing your sleep issues directly.

“We all have times in our life when we sleep poorly for various reasons,” Luyster says. “But if it gets to the point where it’s chronic in that it’s starting to interfere with your daily life, your job, your school, and your relationships, that indicates you may need to seek a diagnosis and then potentially treatment.”

Your primary care doctor or rheumatologist may refer you to a sleep specialist for testing. A sleep study in a lab or at home can pinpoint whether you have a disorder like RLS or sleep apnea.

If you don’t have a treatable sleep disorder, look to your sleep routine for solutions. Get into a consistent schedule by going to sleep at the same time each night and waking up at the same time each day. Keep your bedroom optimal for sleep—cool, quiet, and dark.

To ward off late-night joint pain, take pain medication before you go to bed. Ask your doctor to recommend the right dose. “Ideally, you would like it to work throughout sleep and not stop halfway through,” Luyster says.
Breathe Easier

These specialists are there for every breath you take.

BY Jodi Helmer REVIEWED BY Arefa Cassoobhoy, MD, MPH, WebMD Senior Medical Editor

With each breath, your lungs draw in fresh oxygen and expel carbon dioxide. When problems arise, your primary care doctor will treat respiratory issues such as colds and mild asthma. But he or she might refer you to a pulmonologist to treat long-term, complex issues such as pulmonary fibrosis or severe chronic obstructive pulmonary disease (COPD). You may also need a referral for a persistent cough, trouble breathing, shortness of breath, wheezing, or chronic bronchitis.

Beyond the lungs

Pulmonologists are more than “lung doctors.” These specialists focus on the entire respiratory system, which extends from the windpipe to the bronchial tubes then to the lungs. They use X-rays, CT scans, spirometry (a test to measure the amount of air you can take into your lungs), and bronchoscopes (a tube inserted through the nose or mouth to look at the airways in the lungs) to diagnose and treat respiratory diseases.

Their field of medicine is a subset of internal medicine and they undergo the same training as an internist. After a residency in internal medicine, they devote several years to a fellowship focused primarily in pulmonology but also in such areas as critical care and sleep medicine. They must pass rigorous exams before receiving board certification.

As they start their medical careers, some choose to focus on specific conditions such as asthma, pulmonary fibrosis, and COPD, while others choose to treat certain groups like children or older patients.

Pulmonologists also work in emergency rooms and critical care settings to tend to patients who require ventilators or life support to breathe.

Teamwork

Pulmonologists often work closely with respiratory therapists, cardiologists, and surgeons to develop treatment plans that can include medication, surgery, and pulmonary rehabilitation to help patients breathe easier.

Because lung diseases can be serious, even debilitating, conditions that require care over a long period, pulmonologists routinely work with patients, their family, and entire healthcare team on a treatment plan.

By the numbers

33.2 million
Number of adults diagnosed with chronic lung disease.

14,675
Number of board-certified pulmonologists in the U.S.

1,400
Estimated shortage of pulmonologists by 2025.
Eye Care

HOW TO PROTECT YOUR EYES WHILE THE CORONAVIRUS SPREADS

BY Stephanie Watson  REVIEWED BY Michael W. Smith, MD, WebMD Chief Medical Editor

YOUR NOSE AND MOUTH Aren’T THE ONLY CORONAVIRUS TRANSMISSION ROUTES.
Michael Berenhaus, OD, founder of Bethesda Vision Care, explains why you need to be extra careful about eye care now.

Q Can you catch coronavirus through your eyes?
BERENHAUS Yes. If someone talks, coughs, or sneezes, and particles that are in the air come in contact with your eye, you can get the virus. You can also conceivably catch it if you touch a surface that contains the virus and then rub your eye. One reason is that your eyes are connected to your nose. You can see that when you’re teary-eyed and your nose gets stuffed. Once the virus gets into your eye it can drain into your nose and lungs.

Q How can wearing glasses protect you?
BERENHAUS Eyeglasses act as a shield or barrier. One, they prevent you from rubbing your eyes. And then if someone sneezes or coughs, they serve as an eye mask to protect your eyes. A larger pair of glasses will block more. It’s not a perfect block, but they’ll keep out at least some of the virus particles.

Q Can I still wear contact lenses?
BERENHAUS You’re better off wearing glasses. Contact lenses are not a shield, they’re a sponge. They will soak in debris that’s in the air, whether it’s a virus or air pollution. That’s why you get buildup on the lenses. Also, if you don’t wash your hands perfectly and there’s some of the virus on your finger and it touches the contact lens, you’ll expose your cornea. While you’re in the house it’s fine to wear contacts. But if you’re going out, it’s better to have the protective barrier of glasses.

Q Does coronavirus cause pink eye?
BERENHAUS It can cause conjunctivitis (pink eye), but it’s rare. Only about 1% to 3% of people with coronavirus will develop pink eye. You can get this infection whenever your body’s defenses are down. That’s why you’re also more likely to get pink eye when you have the common cold, which can also be caused by the family of coronaviruses. Remember that there are three types of conjunctivitis—viral, bacterial, and allergic. If you start to experience itchy, watery eyes, you shouldn’t assume you have COVID-19. It’s more likely allergic conjunctivitis.

Q Is it safe to go to the eye doctor right now?
BERENHAUS If you have an eye problem, call the office first and speak to the doctor. The doctor will try to treat whatever condition you have over the phone or via telehealth. If you do have to go into the office, wear a mask to protect yourself and the doctor.

4 TIPS

FOLLOW THIS ADVICE FROM MICHAEL BERENHAUS, OD, TO PROTECT YOUR EYES AND AVOID COVID-19.

1. BE CAREFUL WITH EYE DROPS
Wash your hands before you handle the dropper. And never touch the tip of the dropper to your eye.

2. CUT YOUR NAILS SHORT
Viruses can live underneath and get into your eye when you apply drops or put in contact lenses.

3. WHEN IN DOUBT, CALL
Contact your eye doctor if you have any eye problems.

4. PRACTICE SOCIAL DISTANCING
If you have to visit the eye doctor while coronavirus is spreading, ask to wait in the car until your doctor is ready to see you. Wear a mask if the CDC still recommends that people do so. And bring your own pen.
Adapting to Change
A MILLENNIAL USES HER TYPE 2 DIABETES JOURNEY TO INSPIRE OTHERS

BY Mila Clarke Buckley  REVIEWED BY Brunilda Nazario, MD, WebMD Senior Medical Editor

MY STORY

I ALWAY THOUGHT IN THE BACK OF MY MIND THAT I MIGHT GET TYPE 2 DIABETES. I just assumed it would happen after I got pregnant. My mother had gestational diabetes that turned into type 2 after her pregnancy, and so did my grandmother. When my symptoms started at age 26—dizziness, blurred vision, getting up to go to the bathroom every hour at night—I just figured I was working too much. I was social media manager for a nonprofit, putting in 50 to 60 hours a week.

I lived with symptoms for about 4 months. Finally, it got to the point where I felt really bad and tired. That forced me to go to the doctor to find out what it was.

My doctor did a physical exam, checked my blood pressure and weight, and did an A1c test of my blood sugar. My A1c was 12%, which was way higher than normal. My doctor said, “If you stay on this path, you’re going to do a lot of damage to yourself. You need to shape up and change your life.”

I changed what I eat to adapt to my blood sugar level. I’m now on a long-acting insulin, which prevents me from getting blood sugar spikes at mealtimes. I also exercise more. I run, take a boxing class twice a week, and practice yoga. At my last checkup, my A1c was 6.1%—in the healthy range.

I started my blog, Hangry Woman, in 2016 to give people a sense of what life with type 2 diabetes looks like. You can live a pretty healthy and happy life. You have to work pretty hard at it for sure, but it’s achievable and possible.

MILA’S TIPS

1. MAKE SMALL STEPS
Sometimes when you try to think of the big picture, it can scare you. Take it one day at a time so you don’t get overwhelmed.

2. FIND A COMMUNITY
A lot of people get diagnosed in isolation. They don’t have anyone to turn to about their frustrations. Find a diabetes support group. Just listening to other people talk can be helpful.

3. MAKE INCREMENTAL CHANGES
When you get that diagnosis, you don’t have to change every single thing about your life. Make small changes and you’ll really see your successes.

4. FOCUS ON THE GOOD
You’ll have good days and bad days. Focus on the good ones. It’s important for people to know that there are positive aspects to having this condition.
1. LAST YEAR, AFTER HAVING 3 SEIZURES, YOU HAD OPEN HEART SURGERY. HOW DID IT CHANGE YOU?
I feel great. I take heart medications—a pill for this and that. But it made me smell the flowers a little more, appreciate the sunrise, the sunset. It sounds cornball, but what else is there but to realize that it could be over?

2. IN YOUR NEW BOOK, BETSEY: A MEMOIR, YOU TALK ABOUT DISCOVERING BREAST CANCER IN 1999 AFTER YOUR BREAST IMPLANTS WERE REMOVED. HOW DID THAT HAPPEN?
I had these silly B-cup implants. I never liked them. Out of the blue one day, one of them deflates. I chose to take them out and went back to just having my regular breast tissue. I thought that was the end of it. Then after 2 months, I noticed a little, hard, smaller-than-a-green-pea bump next to the incision. I go to the doctor, then the next doctor, then the next doctor, and I’m on the operating table within four days. I had a lumpectomy.

3. WHAT HELPS YOU STAY HEALTHY?
• Moderation. I don’t eat too much. I don’t drink too much. I don’t do anything too much. I don’t try to learn waterskiing now at my age. I’m not very Malibu in that I don’t run the beach, I don’t walk five miles every morning. I do yoga in bed, in my head, if I can’t sleep. I know when I feel good. It’s about finding some kind of balance where you just know your body’s happy.

4. WHAT ARE YOUR GUILTY PLEASURES?
• I know it isn’t the best thing in the world for me, but I want to continue enjoying wine. I’m also enjoying those health food bars that are covered with chocolate. I used to feel so guilty having chocolate.

5. YOU LIVE IN MALIBU WITH VIEWS OF THE PACIFIC OCEAN. DO YOU ENJOY CALIFORNIA LIVING?
I do much better out here, happy-wise, body-wise, because there’s more green around than in New York. I can feel it. I’m very affected by nature. That’s why I love flowers. I always have flowers around.

6. HOW DO YOU FEEL ABOUT AGING?
• I do think that as you get older, it’s all in your head. You really do feel how your spirit tells you to feel. I want to look as good as I can and feel as good as I can. Tina Turner was my idol. I thought, ‘Oh my god, if I can only look and feel as good as Tina Turner when I get older!’

7. YOU LAUNCHED YOUR OWN CLOTHING LABEL IN 1978 AND EVENTUALLY HAD 65 RETAIL STORES. WHAT MOTIVATED YOU TO CREATE AND BUILD YOUR OWN BRAND?
I knew it was time for me, after 12 years of working for other companies and freelancing. It was like, ‘I gotta go on my own.’ It was scary! Our second season we were practically penniless and out of business. Basically, you can’t let go. You have to keep holding onto that rope.

8. HOW DO CLOTHES IMPACT YOUR LIFE?
Clothing, I feel, 100% moves your state of mind around—up and down. I believe and so wish that people discover the different sides of themselves by taking a chance once in a while and trying something new.

9. WHAT’S YOUR BEST ADVICE FOR PURSUING YOUR DREAMS?
The key in anything is: You gotta love it, you gotta really work hard at it, and you gotta pray you’ve got some talent to help it along. I’ve always believed it should be as happy a climb as possible. Your body, your mind, your heart, and soul get done in by taking mistakes and failures too seriously. It’s just a longer way up if you let yourself fall down that far.

10. HOW DO YOUR DAUGHTER, LULU, AND YOUR GRANDDAUGHTERS, LAYLA AND ELLA, AFFECT YOUR LIFE?
They make my days, they make my nights, they make my everything.
—KARA MAYER ROBINSON