

HOW TO LOWER YOUR RISK OF DEMENTIA PAGE 36

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JUNE
2019

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GRAIN BOWLS

THE BEST
NATURAL
SKIN-CARE
OPTIONS

FEARLESS & FABULOUS

EMMA THOMPSON

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FEELS VERY
HARD-WON
AND PRECIOUS
AT THE
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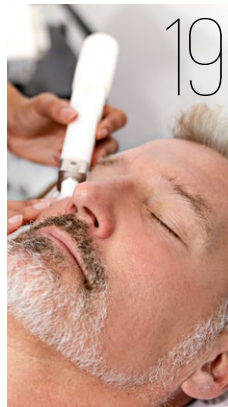
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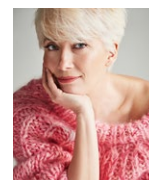
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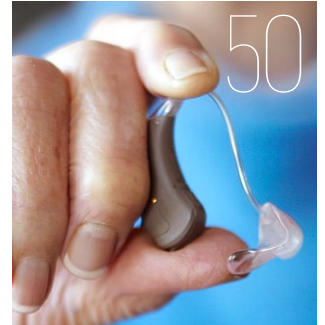


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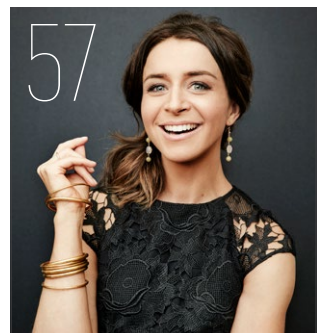


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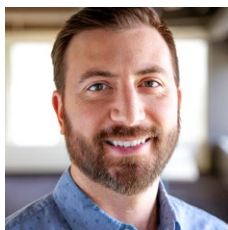
Health advice comes from seemingly everywhere, whether we're shopping, browsing our social media feeds, using fitness trackers, listening to podcasts, or, of course, talking to our health care professionals. But perhaps the tips that make the biggest impression and stick with us the longest are those we get from our parents, both in terms of words and actions. In our last issue, we asked moms for their healthy advice to kids. This month, in honor of Father's Day, we turn to dads. We asked some of the fathers on our staff to share the healthy guidance they pass on to their kids.

Happy Father's Day to all of our WebMD dads.

Kristy Hammam
Editor in Chief
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FROM THE WEBMD TEAM

What healthy advice do you pass along to your kids?



JOHN CASSARAS
WebMD Senior Video
Producer

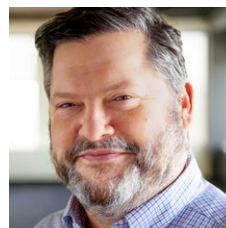
I teach my kids that healthy stuff comes first. We need to take care of ourselves with exercise and healthy food, and if we do a good job of that, then we can sometimes have treats and screens. But this can be a double-edged sword. There are times I just want to relax for a bit, and my daughter tells me, "Get off your phone, Daddy!"



TOM ROSEBERRY
WebMD Senior Director,
Audience Growth

I try to pass along healthy habits and routines: A consistent bedtime helps you recharge your battery; eating fruits and veggies gives you energy to run and play. My 4-year-old generally follows this really well—but does like to debate whether a fruit snack is a healthy snack. I say, you can have snacks you like if you have them with healthy snacks. It leads to many interesting combinations like blueberry graham cracker sandwiches.

My sons, Max and Carter, are naturally good-hearted. I tell them: Honor yourself, not someone else's idea of you. You're fantastic! Peer pressure is for the weak—don't accept it. People will respect you for it later. Clean underwear, clean teeth, clean nails. Kid, meet soap. Soap, meet kid. You two need get to know each other better.



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WebMD Senior
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FOR THE GUYS

Healthy Dads

June marks Father's Day, an ideal time for fathers, grandfathers, and all men to take stock of their health



34%

Percentage by which a man's risk of developing thinking problems is lowered if he eats at least six servings of vegetables a day.

1.07

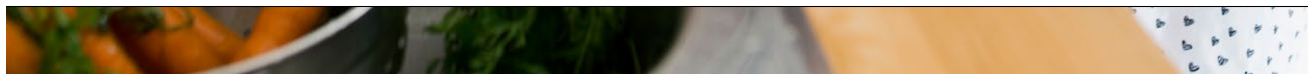
How much a man's body mass index (BMI) improves over a six-year period when he's in a healthy marriage. A good marriage is also linked to lower LDL (unhealthy) cholesterol in men.

18%

Percentage by which older men with high blood pressure can reduce their risk of dying earlier by getting fit (doing moderate aerobic exercises at least 30 minutes a day, three to six days a week), compared to those who exercise very little.

22%

Percentage of 65-year-old men who can expect to reach age 90.





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IN THE NEWS

Can You Ward off Dementia?

When it comes to dementia, none of us can escape one risk factor: getting older. But is there anything you can do to avoid this frightening decline in thinking skills that affects mood, memory, language, and other brain functions? The answer is yes, according to some compelling recent research. “It’s not yet definitive, but in the past six years, we’ve made progress on identifying modifiable risk factors for which the evidence is pretty strong,” says one of the experts we consulted for our story, **“Guarding the Mind” (page 36)**. Things like better sleep; controlling blood pressure, diabetes, and high cholesterol; exercising regularly; and making strong social connections all seem to play a role in minimizing dementia risk. See what you can do in your own life to beat the odds. —Colleen



THE PRIZE GOES TO ...

San Francisco is the healthiest U.S. city for its health-care quality, availability of healthy foods, fitness of its residents, and available park space. Seattle and San Diego follow close behind.

SOURCE: Wallet Hub

PAINKILLER PREFERENCE

Only one in three parents asks their pediatrician for alternatives to opioid painkillers when prescribed—even though non-opioids are less addictive and many are equally effective.

SOURCE: American Society of Anesthesiologists

BRAIN HEALTH

Four aerobic workouts a week for six months improved brain function and increased brain volume—that’s a good thing—in adults of all ages.

SOURCE: Neurology

WOMEN IN CONTROL

Do you put off your annual mammogram? Would you be more willing to go if you could control that medieval torture device that flattens your breast into a pancake? New research suggests there’s no reason you shouldn’t control it. In a study of 549 women, half had a traditional mammogram and half compressed their breasts themselves after the technician positioned them in the machine. When radiologists rated the quality of the images, they found no difference between the patient-controlled scans and the regular ones. What’s more, the women in control of the machine reported less pain than the others.

SOURCE: JAMA Internal Medicine



ALTERNATIVE PAIN RELIEF

Long-term, or chronic, pain can be difficult to treat. Opioid painkillers are addictive and not necessarily effective for pain that lasts longer than a few days. A couple of non-drug alternatives could help. Among 21 clinical trials that included more than 2,000 people, both mindfulness-based stress reduction—a form of meditation—and talk therapy were effective treatments for long-term pain. People reported improved physical function, less pain, and less depression after receiving one of the two treatments. Most people in the study were women. Forty percent had endured pain for more than 10 years.

SOURCE: BMJ



27%

Percentage of adults ages 50 to 64 who worry they won’t be able to afford health insurance next year.

SOURCE: National Poll on Healthy Aging

ROCK-A-BYE, BABY

When 18 healthy young adults slept in a lab for three nights, on the nights that their beds rocked them to sleep, they fell asleep faster, spent more time in memory-consolidating deep sleep, and performed better on a memory test the next day.

SOURCE: Current Biology

4%

Percentage of people admitted to ERs for e-scooter injuries who had been wearing a helmet.

SOURCE: JAMA

NEW CONNECTION

Up to 72% of amputees have sometimes-debilitating phantom pain. It happens when severed nerves, once connected to the tissue that was removed, form pinched nerves or nerve tumors called neuromas. While this diminishes in most people, 25% end up with chronic pain. Surgeons at The Ohio State University have found they can re-route the severed nerve endings to other muscles and establish a new connection. The experimental procedure drastically reduced or eliminated pain in the first 22 people to receive it.

SOURCE: Plastic and Reconstructive Surgery

1 IN 25

Number of cancers caused by obesity worldwide.

SOURCE: CA: A Cancer Journal of Clinicians

PUSH-UP POWER

Active, middle-aged men who can do 40 push-ups, compared to those who can’t finish 10, are far less likely to have heart disease and other heart problems 10 years from now.

SOURCE: JAMA

80%

Percentage of Americans who rate their health-care quality as excellent or good.

SOURCE: Gallup



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POT AND DEATH RATES

Live in a state where pot is legal? Be careful on the roads. In these states, traffic deaths increase by an additional one death per million residents in the year following legalization. The effect spills over into neighboring states, too, as people cross state lines to buy marijuana then drive home under its influence. Traffic deaths don't spike like this in states that only authorize medical use of the plant. Deaths drop. This may be because medical marijuana, once available, often replaces more dangerous forms of self-medication, such as alcohol.

SOURCE: *Addiction*

READING SPEED AND DRY EYE

Do you pass your vision test with flying colors but feel you read more slowly than most people? Do you struggle to spend more than 30 minutes at a time reading? It could be chronic dry eye. In a test of reading speed, people with dry eye syndrome read 32-words-per-minute less than those who do not have the condition. And, because long periods of visual concentration—as in reading, driving, or drawing—slow your blink rate, your eyes become dryer over the duration of the activity. Ophthalmologists and optometrists can recognize dry eye and refer you for the right care.

SOURCE: *Optometry and Vision Science*

THE TRUTH ABOUT AVOIDING COLDS

At least half of parents follow unproven “folk” advice to prevent kids’ colds: stay indoors, don’t go outside with wet hair, take vitamin C. But there’s no proof these methods work. Strategies that hold up are frequent handwashing and avoiding people who are sick.

SOURCE: C.S. Mott Children’s Hospital National Poll on Children’s Health

PREGNANCY RISKS

Giving birth may raise women’s heart disease and stroke risk by up to 14% over those who’ve never had a baby, says a review of 10 studies that followed more than three million women for up to 52 years. While the reason is unclear, the researchers speculate that pregnancy could trigger inflammation, cause the heart to work harder, or lead to belly fat that lasts long after pregnancy. They suggest that women use pregnancy as an opportunity to adopt healthy habits and stick with them for life.

SOURCE: *European Journal of Preventive Cardiology*



ANXIETY MEDS ON THE RISE

Prescriptions for anxiety medications called benzodiazepines—think Xanax and Valium—have doubled in the last 10 years. These drugs can be addictive, and overdoses are on the rise.

SOURCE: *JAMA*



SLEEP AS ALZHEIMER'S PREVENTION

Just one lost night of sleep causes a protein called tau in spinal cord fluid to spike. Too much tau is a marker of Alzheimer's disease. Researchers took spinal cord fluid samples from a group of adults at two different times: after a good night's sleep and after staying up all night. Tau levels after sleep deprivation were more than 50% higher than after a restful night. The findings help confirm that tau accumulates during waking hours. Too many waking hours lead to too much tau. Sufficient sleep, the researchers say, should be a part of Alzheimer's prevention.

SOURCE: *Science*

LAUGHTER IS THE BEST MEDICINE

As if the prospect of brain surgery weren't nerve-racking enough, for some surgeries, the patient has to stay awake. Neurosurgeons at Emory University have discovered a way to relieve anxiety right at the source. When they stimulate a specific part of the brain during awake brain surgery, the person laughs spontaneously and then feels calm and happy. Stimulating other parts of the brain can trigger laughter but not the accompanying calm. The surgeons have successfully used the brain-tickling technique in at least three surgeries so far.

SOURCE: *Journal of Clinical Investigation*

GUNS AND KIDS

Gun-related injuries are the third-leading cause of death among U.S. children. While gun ownership has declined in the last decade, gun-related death rates among children have risen. The rise in deaths, new research finds, is linked to a shift in the types of guns people own. Three in four gun-owning families today own a small handgun, not a large hunting rifle. What's more, 5 million kids live in homes where a gun is kept loaded and unlocked. The small curious hands of a child and an easily accessible, operable, and loaded handgun, the researchers say, are an extremely dangerous combination.

SOURCE: *Pediatrics*



LEARN WHILE YOU DREAM

While a group of healthy young adults slept, researchers played a recording of nonsense words followed by their supposed translations (e.g., tofer: house; arel: cork) four times, alternating the order of the words within each pair. They used made-up words rather than a foreign language to ensure that no one had ever learned the words before. A word-matching test after their nap showed that the young people had learned many of the words. A brain MRI confirmed that they had made associations between the new words and their translations.

SOURCE: *Current Biology*

THE STATUS OF STATINS

Millions of people around the world take cholesterol-lowering drugs called statins to help prevent heart disease, heart attack, and stroke. But doctors don't know whether they are safe and effective for adults older than age 75. New research suggests the pills do far more good than harm. A review of numerous major clinical trials found that even patients who were age 75 and up when they started statins saw big reductions in heart attacks, strokes, and the need for bypass surgeries. Contrary to doctors' previous concerns, the medication didn't increase the risk of non-heart-related death or cancer at any age.

SOURCE: *The Lancet*





MEMORY LANE

Say It to Store It

NEXT TIME YOU HEAD TO THE STORE, A SIMPLE TECHNIQUE MAY HELP YOU REMEMBER WHAT TO TOSS INTO YOUR CART

DON'T JUST JOT DOWN YOUR SHOPPING LIST—READ IT ALOUD. According to researchers at the University of Waterloo in Ontario, when you say something aloud, it's more likely to stick in your long-term memory. There's something powerful about the one-two punch of reading the words and hearing yourself say them at the same time. The researchers report that speaking aloud trumped reading silently, hearing someone else say the words, or listening to a recording of yourself. With this new trick, you're sure to remember the cherry tomatoes and—say it with us!—the red peppers, the barbecue sauce, the plastic forks. ... —KARA MAYER ROBINSON

Fatherhood After 40

NEW RESEARCH SUGGESTS THAT FATHERING A CHILD LATER IN LIFE MAY COME WITH RISKS

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



Sign up for the **Men's Health** Newsletter at WebMD.com.

OVER THE LAST FOUR DECADES, THE NUMBER OF MEN OLDER THAN 40 WHO FATHER A CHILD HAS MORE THAN DOUBLED. But only recently have researchers begun to explore what impact a dad's age may have on his unborn children.

A study published in *BMJ* in October 2018 found that children of men ages 45 to 54 have a 14% higher risk of premature birth and low birth weight compared with those fathered by men between the ages of 25 and 34. Early births increase a child's vulnerability to long-term physical and mental health problems, while low birth weight may require a stay in the hospital's newborn intensive care unit. Previous research has suggested that a dad's older age boosts the risk of miscarriage as well as his child's chances of developing autism and schizophrenia.

What explains the link between a man's age and the health of his children? Michael Eisenberg, MD, the *BMJ* study's lead author and an associate professor of urology at the Stanford University School of Medicine, offers two possibilities: DNA mutations that accumulate as men age and harms that may result from obesity, poor diet, lack of exercise, and other lifestyle factors. "Those could potentially put

a pregnancy at risk," says Eisenberg, "but we don't know for certain at this point."

Eisenberg doesn't want his research to scare men over 40 away from having children. He points out that although the risk of complications does appear to rise with age, the overall risk of birth problems remains low. Still, age and health do influence your chances of conceiving a child in the first place. It often takes older men longer to impregnate a woman, for example, while obesity and physical inactivity appear to degrade semen quality, says Eisenberg.

While you can't stop time, you can—and should—take good care of yourself. Your health will benefit, and so may the health of your future children. "I talk to fathers-to-be about exercising as well as maintaining a good diet and a healthy bodyweight," Eisenberg says. "Anything that affects your heart will affect your fertility."

Most attention has been focused on the risks associated with mom's age and health, but Eisenberg emphasizes that men need to better understand their own role in reproduction. "Keep in mind that fertility is a team sport," he says.

ASK YOUR DOCTOR

Q Do I have health risks that could affect a child I want to father?

In addition to age, your weight, diet, and physical activity level may contribute to your child's health, so get a thorough checkup that will identify any concerns.

Q How can I improve my ability to father children?

Be upfront about smoking, alcohol, and illicit drugs, which can harm your fertility. Also, have your doctor review your medications. Some drugs affect fertility.

Q Should I have a semen analysis?

It's worth considering, to make sure everything's normal. For example, if you learn that you have a low sperm count, you could consider fertility assistance sooner than you otherwise might.

Q Am I too old?

While certain risks may rise with age, men continue to produce sperm throughout their lives and can father healthy children into old age.





PCOS Primer

POLYCYSTIC OVARY SYNDROME IS TRICKY TO DIAGNOSE, OFTEN MISUNDERSTOOD, AND MORE COMMON THAN YOU MIGHT THINK

BY Rachel Reiff Ellis REVIEWED BY Arefa Cassoobhoy, MD, MPH, WebMD Senior Medical Editor

EVEN IF YOU’VE NEVER HEARD OF POLYCYSTIC OVARY SYNDROME (PCOS), CHANCES ARE YOU PROBABLY KNOW SOMEONE WITH IT. “In a room of 10 women of childbearing age, one is likely to have it—that’s a high percentage,” says Anuja Dokras, MD, PhD, professor of obstetrics and gynecology at the Hospital of the University of Pennsylvania and director of the Penn PCOS Center in Philadelphia.

In fact, it’s the most common endocrine condition (which affects the system of glands that release hormones in the body) in women ages 15 to 44, affecting about 5% to 10%. But despite how frequently it happens, PCOS can still be overlooked and misunderstood.

Breaking it down

The word “polycystic” means “many cysts,” but surprisingly, PCOS often doesn’t involve cysts. “The name was coined 70 years ago when gynecologists didn’t understand as much about what was happening in the body,” says Dokras. Doctors now know there is growth of an unusual number of structures called “follicles.” In the normal ovulation process, ovaries make one follicle that produces hormones as it grows. Then it releases an egg. When you have PCOS, the ovary makes many small follicles instead of one big one. As a

result, your hormone levels can get out of balance, throwing off your ovulation and causing irregular periods. Doctors don’t know why this happens for some women.

In addition to its complicated name, PCOS also has a complex cause. “We know it’s inherited, because we find that there are family members who have it, but we don’t know the exact mutation or change,” Dokras says. Environmental and lifestyle factors can also increase the number of PCOS features you have and how severe they are. For example, she says, weight gain can be what makes your PCOS show up for the first time or make it worse.

This combination of genetic and environmental causes creates a hormone imbalance in your body and gives you higher than usual levels of certain hormones such as insulin and androgen, the “male hormone.” Even though women secrete androgen hormones normally, having higher levels than usual causes the symptoms of PCOS, including:

- Irregular periods
- Hair growth on the face or chin
- Hair loss similar to a man’s
- Acne on the face, chest, and back that continues past the teenage years
- Weight gain
- Trouble getting pregnant without help from a doctor

Diagnosing PCOS

Doctors don’t have a diagnostic test for PCOS because it’s a syndrome—a collection of certain signs and symptoms. “It’s not like diabetes, where you can use a blood test to read a hemoglobin A1c,” says Dokras. A blood test is just one piece of the puzzle.

Your doctor will take a medical history, check your hormone levels, do a physical exam—including a pelvic exam—and may also do an ultrasound. They will have to be able to check off at least two of three symptom boxes to diagnose you with PCOS: irregular periods, extra androgen hormone, and follicles on the ovaries. This clue-finding aspect is part of what makes a PCOS diagnosis tricky, says Dokras: “It’s challenging, because if your physician doesn’t put all the pieces together, it may get missed for a little while.”

PCOS and pregnancy

Some women get their PCOS diagnosis in the process of trying to get pregnant. Because one of the symptoms of PCOS is irregular periods, it can be harder to predict when you’re ovulating, and therefore make it harder to get pregnant. But it doesn’t mean you can’t get pregnant—you may just need some medical help.

“These are actually easier patients for infertility specialists like myself to treat because there are healthy eggs there, it’s just a matter of getting them to release,” says Dokras. In fact, she says, one-third of women with PCOS get pregnant on their own without issues. The other two-thirds usually respond well to fertility medications. Losing weight can also help improve fertility.

Living with PCOS

PCOS doesn’t have a cure, but it’s possible—and important—to treat its symptoms, not only for short-term relief but for long-term health. “When you have irregular periods, it means you’re not shedding the lining of the uterus every month,” says Dokras. Over time, this can thicken your uterine lining and raise your risk of cancer. PCOS is also associated with



GETTY IMAGES

4 MYTHS

ANUJA DOKRAS, MD, PhD, DISPELS SOME PCOS MISINFORMATION.

1. IT CAUSES PAIN
Follicles on the ovaries in PCOS measure only about 2 to 10 millimeters. They don’t rupture, and they don’t cause pain like ovarian cysts can.

2. IT MEANS YOU’RE INFERTILE
The number and quality of your eggs isn’t affected by PCOS, but you may need medications to get them to release regularly so you know when your fertile window is. Losing weight can also help fertility issues.

3. IT GIVES YOU LEVELS OF TESTOSTERONE LIKE A MAN
PCOS does mean slightly higher levels of testosterone, but they’re nowhere near the range for men, which is typically 10 times a woman’s normal range.

4. IT ONLY NEEDS TREATMENT IF YOU’RE TRYING TO GET PREGNANT
The hormone imbalance caused by PCOS raises your risk of diabetes, cancer, and high cholesterol. Treating it helps improve your overall health in important ways.

Search for the slideshow **A Visual Guide to PCOS** at [WebMD.com](#).

the tendency to gain weight and develop diabetes, sleep apnea, and high cholesterol.

The main goal of PCOS treatments is to correct hormone imbalance. Common treatments include:

- Birth control pills or progestin therapy to regulate your cycle, reduce hair growth, improve acne, and lower your endometrial cancer risk
- Metformin (a diabetes medication) to help regulate periods—but only in about half of women who take it
- Anti-androgens to block hormones that cause some PCOS symptoms such as acne and facial hair
- Topical or oral acne medications to control skin breakouts
- Laser hair removal or electrolysis for getting rid of excess hair

As with most health issues, a focus on a healthy lifestyle—regular exercise, stress reduction, and a nutritious diet—can reduce your symptoms and make you feel better in general.

Last but not least, be sure you don’t ignore your emotional well-being. Outward symptoms like acne and excessive hair growth can affect mental health, says Dokras. “It’s important that we don’t ignore these features,” she says. “Women with PCOS have an increase in depressive and anxiety symptoms that stem from body image issues and distress. It’s not just cosmetic. Women need treatment as well as education and counseling about the long-term impact of the syndrome.”



CALM YOURSELF

STRESS AND ANXIETY CAN WREAK HAVOC ON THE HUMAN BODY. LEARNING TO BETTER HANDLE LIFE'S TENSE MOMENTS AND BOUTS OF WORRY CAN LEAD TO A HEALTHIER, HAPPIER YOU.

HEART TROUBLE

In a Nurses' Health Study, women with the highest levels of phobic anxiety were 59% more likely to have a heart attack and 31% more likely to die from one than women with the lowest anxiety levels.

INSOMNIA

More than 40 million Americans suffer from chronic, long-term sleep disorders, with stress and anxiety causing or making them worse, according to the National Institutes of Health.

ABDOMINAL PAIN

While stress doesn't cause irritable bowel syndrome, it can make symptoms—including excessive cramping, bloating, and diarrhea—worse, according to the Mayo Clinic.

PANIC ATTACKS

Panic disorder affects 6 million American adults, or 2.7% of the American population, according to the Anxiety and Depression Association of America. Women are twice as likely to be affected as men.

Mind the App

SMARTPHONE APPS THAT TEACH MINDFULNESS AND MEDITATION TECHNIQUES ARE ALL THE RAGE. BUT DO THEY TRULY BENEFIT YOUR HEALTH?

BY Lauren Paige Kennedy

REVIEWED BY Patricia A. Farrell, PhD, WebMD Medical Reviewer

ARE YOU ONE OF MILLIONS OF AMERICANS WHO USE A SMARTPHONE APP TO EASE STRESS AND ANXIETY? Popular choices include Calm, Headspace, Breathe2Relax, and Happify.

These apps give instruction on relaxation techniques that aim to decrease symptoms of anxiety and related health conditions, including depression, sleep and digestive disorders, and substance use. They deliver daily, weekly, and/or monthly programs that users listen to like a podcast—and rely on like a personal life coach in their pockets.

Interestingly, their popularity parallels an upward tick in anxiety: The American Psychiatric Association's annual poll on U.S. anxiety levels shows a five-point jump between 2017 and 2018, from 46 to 51 on a zero to 100 scale. Research published last year in the *Journal of Developmental and Behavioral Pediatrics* revealed a 20% increase in diagnoses of anxiety among children ages 6 to 17 between 2007 and 2012. Another recent study connects smartphone usage to peoples' collectively anxious state.

Technology, thus, can be a double-edged sword with its non-stop, alarmist news alerts, online arguments, and “fear of missing out.” Can it also help address—and even correct—the problem?

Author and mindfulness instructor Tamara Levitt, who writes and records guided meditations for the Calm app (and who has studied and practiced the art for three decades), believes meditation, no matter how it's delivered, can yield powerful results. “Mindfulness is the act of paying attention to the present moment,” she says. People get in trouble with stress and anxiety, she adds, because staying present can be difficult. “Our minds are often in the future, worrying about something that's going to happen, or we're ruminating about

the past,” she says. “Meditation brings us back to the moment we're in.”

Focusing on breathing techniques, Levitt says, is fundamental because the breath anchors our attention. “We battle anxiety because our minds are filled with fearful thoughts. Mindfulness keeps us in the present, where we can calm ourselves down,” she says.

But do users of these apps truly reap health benefits? While different forms of meditation have been practiced across cultures for thousand of years, Harvard physician Herbert Benson first introduced “the relaxation response” in the 1970s. This technique has gained widespread acceptance by therapists and doctors as a way of relieving symptoms from stress and anxiety disorders.

While such smart apps vary, and the American Psychiatric Association counsels caution when choosing one, many incorporate deep breathing and relaxation techniques. According to a 2018 study published in the journal *mHealth*, they can serve as helpful and accessible supplements to in-person therapy, which can be costly, for better mental health.

Mind Your Manners

FOLLOW OUR ETIQUETTE GUIDE TO KEEP THE GYM CONSIDERATE AND SAFE FOR ALL

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

SURE, YOU'RE AT THE GYM TO BETTER YOURSELF. But if you aren't aware of the people around you, you may be committing a fitness no-no or two. Next time you work out at your fitness facility, keep a few good habits in mind.

Mind your weights

"One of the most annoying things gym members do is not put their weights back," says Christa DiPaolo, a group fitness instructor at Equinox. "It can be a real pain scouring the gym floor to find the weights you want."

Leaving equipment around isn't just rude—it's an accident waiting to happen. Someone can trip and injure themselves on a misplaced dumbbell or plate. Always re-rack your weights and tidy up your space.

Pipe down

"Talking on the phone or texting on the gym floor is a big no-no," says DiPaolo. Ditto for loud conversations with workout buddies, grunting for the entire gym to hear, and singing loudly with your headphones on. Loud noises are concentration-killers. If you need to express yourself, take it into the hallway, locker room, or—better yet—outside.

Wipe it down

Sweating is good. But leaving it around isn't. Not only is it gross, it can spread infections and illnesses like MRSA and ringworm. Always wipe down your bench, cardio machine, or other equipment after you use it. Many gyms provide clean towels or

disposable wipes. Take advantage. Drop them in the used-towel bin or trash bin as you leave.

Watch the clock

"Be conscientious of how long you're on a machine or bench if others are waiting," says DiPaolo. "Everyone's time is valuable. Being considerate goes a long way."

Limit your cardio machine time to intervals suggested by your gym. When you're strength training, it's OK to take breaks between sets. But be mindful and allow others to work in between sets.

Stay clean

Avoid wearing the same (unclean) gym clothes over and over to avoid potential skin infections from bacteria. Have three to four clean sets available. Wash them regularly. Keep fresh clothes and deodorant in your locker or gym bag.

Space it out

Try not to crowd or get in the way of others. Instead of standing in front of the weight rack, take your dumbbells and step back, clearing the way for others. The same goes for mirrors—leave space for others to look at their form. And remember: Mirrors can help you check your form; they are not there for an impromptu photo shoot. Keep the selfies to yourself.

Finally, when in doubt, says DiPaolo, follow the golden rule: "Treat others how you want to be treated."



Search for the article
**Good Hygiene
Habits at the Gym** at
WebMD.com.

EXTRA CREDIT

WANT TO GO ABOVE AND BEYOND? AVOID THESE OTHER GYM BLUNDERS.

1. DON'T APPROACH

If you spot a friend or acquaintance at the gym, don't make a beeline to say hi and catch up. Give them space and approach only when they're on a break.

2. DON'T BANG

Some people like to bang their weights together after a repetition. Don't let that be you. It's loud and distracting—and it can damage the weights.

3. DON'T GYM-SPREAD

Ever see someone take over an extra bench or machine just for their water bottle, towel, or book? It's a no-no. Keep your stuff at your side or leave it in the locker room.

4. DON'T BE CLUELESS

It's easy to get used to paying more attention to your phone than your surroundings, but at the gym, put it away so you can focus on people in your vicinity.





SKIN CARE

Coal Rush

DIG INTO THE DETAILS OF CHARCOAL, A NEW INGREDIENT IN SKIN-CARE AND BEAUTY PRODUCTS

CHARCOAL HAS MADE ITS WAY FROM THE BACKYARD BARBECUE TO THE BEAUTY AISLE. You can now find activated charcoal—coal that has been heated up with steam—in everything from cleansers to face masks. But does it work? “Unlike regular charcoal, activated charcoal is porous, filled with many tiny sponge-like spaces or pores,” says Fayne Frey, MD, a dermatologist in West Nyack, New York. “All these little spaces within activated charcoal create a large surface area that is helpful for soaking up substances.” The idea is that a product made with activated charcoal is able to mimic a magnet to attract and absorb dirt, oil, toxins, and pollutants. But don’t go out and switch all of your products for charcoal-based versions, Frey says. “Although there is no scientific evidence proving the benefits of topically applied activated charcoal, there is also no evidence finding it harmful, either.” Bottom line: Have fun with the trendy skin-care ingredient—in moderation. —AYREN JACKSON-CANNADY

Guy Buys

FROM SKIN-CARE SUPPLIES TO SHAVING GEAR, THESE EXPERT-APPROVED GROOMING PRODUCTS FOR THE MAN IN YOUR LIFE ARE RECOMMENDED BY

JOSHUA ZEICHNER, MD, DIRECTOR OF COSMETIC AND CLINICAL RESEARCH AT THE DEPARTMENT OF DERMATOLOGY AT THE MOUNT SINAI HOSPITAL

BY Ayren Jackson-Cannady

REVIEWED BY Karyn Grossman, MD,
WebMD Medical Reviewer



1. BUMP BLOCKER St. Ives Blackhead Clearing Face Scrub, \$5

"The beta hydroxy acid in this scrub helps remove excess oil and enhances shedding of dead cells from the surface of the skin to keep the pores clear. It's particularly useful on the nose, chin, and forehead."

2. SCREEN STAR Aveeno Positively Radiant SPF 30, \$14

"Double up this moisturizer as both an aftershave lotion and a daily sunscreen. It hydrates the skin to prevent razor burn after shaving, gives broad-spectrum UV light protection, and contains a skin-brightening soy complex."

3. PROTECT AND SERVE Vaseline Clinical Care Extremely Dry Skin Rescue Lotion, \$6

"This light lotion delivers a heavy punch with a special lipid complex that softens the outer skin layer and helps repair a damaged barrier. It's great for hair-bearing areas like the legs, and I have even used it for extra help for shaving irritation."

4. RAZOR SHARP Gillette Fusion Proshield, \$20

"This razor has five individually spring-mounted blades to adjust to contours of the skin. It also has lubricating strips before and after shaving and technology to help lift the hair from the skin for easy shaving."

5. NIGHT SHIFT Neutrogena Rapid Wrinkle Repair Serum, \$24

"What's better than the gift of a youthful glow? Retinol is the best-studied ingredient we have over the counter to rev up collagen production, which strengthens the skin's foundation and fights off the appearances of lines and wrinkles."



Search for the slideshow
Easy Skincare Tips for Men
at WebMD.com.

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DERM Q&A

Spotting Your Age

THEY'RE OFTEN CALLED AGE SPOTS, BUT THE BROWN DOTS THAT DEVELOP ON YOUR SKIN OVER TIME COULD BE CALLED SUN SPOTS. WHAT CAN YOU DO ABOUT THEM?

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

AH, THE SUN—OUR BELOVED SOURCE OF LIGHT, WARMTH, AND VITAMIN D. If only it didn't have such destructive effects on your skin.

Age spots, or the benign, light-brown flat spots that develop on your skin as you age, are a bit of a misnomer. While they do develop over time, they're often the result of the sun. The technical term is a solar lentigo. **Jerome Garden, MD**, professor of clinical dermatology at Northwestern University Medical School, explains.

Q What are age spots and does the sun alone cause them?

GARDEN Age spots are common benign skin spots with clearly defined edges on your face or other sun-exposed areas. They usually form due to exposure to the sun. Other sources of UV light, such as tanning beds, can also be a source. Some types of spots and growths also occur as we age, which people may refer to as age spots. All of these should be evaluated by a dermatologist to rule out a more serious type of pigmented spot.

Q What at-home treatments are available—and do they work?

GARDEN Most over-the-counter skin lighteners contain a retinoid or hydroquinone ingredient, which can be mildly effective in some patients. But long-term hydroquinone use—beyond a few months—may result in darkening of the skin, and

retinoids may be irritating to sensitive skin, so they should be monitored by a dermatologist. If you don't see the results you want, a dermatologist can prescribe a prescription-strength cream.

Q What in-office treatments can I try?

GARDEN The most effective treatment is a laser that specifically targets pigment. After one or two treatments, it can significantly lighten and even remove brown spots. But lasers have potential risks, including burns, scars, and color change, so they should only be used by a trained physician. Another procedure is cryotherapy, which uses liquid nitrogen to injure the cells in the age spot. It can be a bit painful, but very quick. Risks include scarring and skin lightening or darkening, but they're low when performed by your dermatologist.

Q Are results permanent?

GARDEN Since most therapies will only fade the spots, you may need touch-up therapy as time passes, regardless of which therapeutic approach you use.

Q When should I see a doctor?

GARDEN It's a good idea to see a board-certified dermatologist to accurately diagnose a brown spot. Brown spots can also potentially be a dangerous skin cancer. Once a diagnosis is made, you can decide whether to use an over-the-counter approach or something more aggressive.

4 TIPS

THE NUMBER-ONE THING THAT PREVENTS AGE SPOTS IS PROTECTION FROM THE SUN, SAYS DERMATOLOGIST **JEROME GARDEN, MD**. HERE'S WHAT TO DO.

1. DON'T WAIT

"No matter your age, your older self will thank you if you start protecting your skin now," says Garden.

2. WEAR SUNSCREEN

Apply sunscreen every day with an SPF of at least 30, preferably higher. Reapply it every two to three hours.

3. COVER UP

Wear sun-protective clothing. Even if it's warm, wear a lightweight cover-up to shield your skin. Top it off with a wide-brimmed hat.

4. PREVENT A REPEAT

"Even if your spots fade with treatment, the residual spots will become darker with ongoing sun exposure," says Garden. Protect them from the sun to prevent a repeat.



LEAFY BENEFITS
Gotu kola (also known as centella asiatica) contains chemicals that promote skin healing.

BEAUTY SMARTS

7 Best Natural Ingredients

IF YOU'RE LOOKING FOR NATURAL OPTIONS TO COMPLEMENT YOUR SKIN-CARE REGIMEN, TRY THESE TOP PICKS FROM THE PROS

BY Liesa Goins REVIEWED BY Mohiba K. Tareen, MD, WebMD Medical Reviewer

THE BEAUTY WORLD IS BRIMMING WITH HIGH-TECH DEVICES AND CUTTING-EDGE INGREDIENTS, but when it comes to handling some of the most common skin-care problems, newer isn't always better. In some cases, simple natural options might be as effective as scientifically engineered solutions.

"Many of my patients practice 'clean' eating and want to extend that philosophy to their skin-care routine," says Papri Sarkar, MD, a dermatologist in Brookline, Massachusetts. "Finding effective clean beauty products isn't as simple as finding organic produce at the grocery store, but it's easier than ever before to find something that will fit your needs."

We asked the experts to share the ingredients that are the best of both worlds—naturally based and science-backed.

INGREDIENT: COCONUT OIL

Benefits: Hydration, anti-inflammatory
There's growing science supporting the use of this plant fat as a topical skin soother. Recent research shows that extra virgin coconut oil suppresses some of the body's natural inflammatory agents while enhancing the skin's barrier function. "Many people love coconut oil products to help fight dry, itchy skin and skin diseases such as eczema and psoriasis," says Laurel Naversen Geraghty, MD, a dermatologist in Medford, Oregon. "Some of my psoriasis patients swear by overnight coconut oil scalp treatments worn under a plastic shower cap." However, Geraghty warns against applying coconut oil on blemish-prone areas because it is naturally comedogenic and may worsen acne.

FIND IT IN: Jars in the cooking aisle.

INGREDIENT: GOTU KOLA (ALSO KNOWN AS CENTELLA ASIATICA)

Benefits: Wound-healing
This ancient herb often used in Asian cuisine has become integrated into modern skin care due to its wound-healing benefits, says Michelle Wong, PhD, a cosmetics chemist and creator of the Lab Muffin Beauty Science blog. The plant contains chemicals that increase blood supply to injury sites and strengthen the skin. Researchers have found that when skin injuries in rats are treated with centella asiatica, the sites showed significantly higher healing. The combination of amino acids, beta carotene, fatty acids, and phytochemicals help support the skin's regenerative properties to speed healing time, making it a helpful way to treat injury sites.

FIND IT IN: Wong likes La Roche-Posay Cicaplast Baume B5 Soothing Repairing Balm (\$15) and Dr. Jart+ Cicapair Tiger Grass Cream (\$48).

GETTY IMAGES

INGREDIENT: GREEN TEA

Benefits: Photoprotection, antiaging
The connection between drinking green tea and improved health has been suggested for years, but there is also a potential benefit to topical use of the plant. "Green tea has good results in terms of photoprotection and anti-aging benefits," says Jeanine Downie, a dermatologist in Montclair, New Jersey. The polyphenols in green tea have antioxidant properties as well as soothing abilities that help treat sun-damaged skin and offer a way to address the signs of sun damage, says Downie.

FIND IT IN: Downie likes sunscreen containing green tea, such as Paula's Choice Skin Balancing Ultra-Sheer Daily Defense Broad Spectrum SPF 30 (\$23).

INGREDIENT: OATMEAL

Benefits: Anti-inflammatory, eczema relief
"Oatmeal contains anti-inflammatory and anti-irritant chemicals called avenanthramides," Wong says. "It also has moisturizing beta glucans and starches. It's the reason why oatmeal baths are so effective for conditions like eczema and rashes." But not all oatmeal is created equal, Geraghty says. "Colloidal oatmeal is powder that's derived from grinding and preparing oats into very tiny, specific sizes," she says. This

size and quality of oats is what makes the ingredient so therapeutic and able to blend with water to form the soothing paste when mixed with water.

"I like colloidal oatmeal products because they're gentle and safe and studies show they don't tend to cause allergies or irritation," Geraghty says. "I've found that if my eczema patients develop gentle skin-care habits and regularly slather on a thick moisturizer containing colloidal oatmeal, they don't need topical steroids as much or as often."

FIND IT IN: Wong likes Aveeno colloidal oatmeal products like their Soothing Bath Treatment, (\$10).

INGREDIENT: SHEA BUTTER

Benefits: Anti-inflammatory, itch relief
Derived from the nut of a shea tree, shea butter is an ingredient in many moisturizers. "It seems to hydrate skin effectively because it's loaded with fatty acids," Geraghty says. These nutrients have a calming and anti-inflammatory effect on the skin. But Geraghty says shea butter might be the most useful for treating and soothing eczema. Clinical studies using shea butter as a treatment for eczema in children showed reduced itch within four weeks, and another study with adults

showed improvement in two weeks. Geraghty points out another plus of the natural moisturizer—shea butter doesn't seem to cause skin allergies often, which makes it appropriate even for the most sensitive skin types.

FIND IT IN: Geraghty likes Dove Cream Oil Shea Butter Body Lotion (\$6) and L'Occitane Pure Shea Butter (\$38).

INGREDIENT: SOY
Benefits: Inhibit pigmentation, improve collagen production

Soybeans contain a variety of plant-based chemicals that impact the skin. Among them are antioxidants, fatty acids, and isoflavones. The legume also produces plant-derived estrogens or phytoestrogens that address skin conditions related to menopause.

"One of the reasons we believe that a woman's skin turgor and brightness decreases after menopause is because of decreased estrogen," she says. "Topical estrogens have been shown to help decrease UV-induced pigmentation and can improve collagen synthesis." Sarkar explains that soy won't offer as robust results as retinoids, but they offer another option to patients looking to address these conditions. The isoflavones in soy also offer photoprotective benefits that can help

Continued on page 22

THE SCOOP



GETTY IMAGES

SPLIT UP WITH SPLIT ENDS

FIGHT YOUR HAIR'S NUMBER-ONE ENEMY WITH THESE PRO TIPS FROM **SHAUN SURETHING**, LEAD STYLIST AND CO-OWNER OF SEAGULL SALON IN NEW YORK CITY.

FINE HAIR

For all hair types, but especially fine hair, sleeping with a humidifier is an absolute must. Hair splits because it is dry, and fine hair splits the easiest. "If you can take the financial leap, a good humidifier with a digital display is great," says Surething. "Keeping the humidity level higher will help keep moisture in the hair and prevent it from splitting."

WAVY HAIR

Swap your cotton pillowcase for satin, which allows waves to glide freely over the pillow rather than snag on cotton fibers. If you prefer cotton pillowcases, consider wrapping your hair in a satin scarf before you drift to sleep, Surething suggests.

CURLY HAIR

As fun as it is to change the look of your hair, remember that excessive use of hot tools and styling tools can cause ends to split. Surething says to always start gently, from the bottom, when combing or brushing. Never yank at tangles because it can cause tearing and splitting of the strand. Shield ends from heat with a thermal-protecting spray.

COARSE HAIR

On coarse, kinky hair, it's more difficult to maintain levels of moisture, so weekly masks and hydrating conditioners are paramount. "These products lock in moisture and keep a barrier between your hair's cuticle and the elements, including rain, snow, and sun," says Surething.

Continued from page 21

“TEA TREE OIL ... MAY HELP REDUCE THE INFLAMMATORY TYPE OF BLEMISHES.”

address pigmentation to keep skin even, according to research.

FIND IT IN: Sarkar likes Aveeno Positively Radiant Daily Moisturizer (\$13).

INGREDIENT: TEA TREE OIL

Benefits: Anti-microbial, blemish-fighting

The herbal remedy derived from tea tree leaves has antimicrobial and anti-inflammatory effects that help combat a range of pathogenic germs, fungus, and bacteria, Geraghty says. “The fact that tea tree oil helps combat bacteria-driven acne means it may help reduce the inflammatory type of blemishes—the tender pustules or inflamed pink papules,” she says. However, the topical treatment doesn’t have much

effect against deep cystic acne or comedones. Geraghty also warns about the potential for irritation when using tea tree oil as a topical treatment. She suggests monitoring areas for signs of redness or signs of a rash.

FIND IT IN: Geraghty likes Biossance Squalane + Tea Tree Detox Mask (\$39).

A FINAL NOTE

As is the case when trying any new treatment, it’s always a good idea to run something by your dermatologist to make sure a natural therapy is being used appropriately, Geraghty says. “Coconut oil can worsen breakouts, for example, and some treatments are completely unproven—they wouldn’t be worth it.”



GETTY IMAGES



RELATIONSHIPS

Moral Support

RAISE KIDS WHO ARE MORE LIKELY
TO DO THE RIGHT THING

NEARLY 30% OF KIDS IN GRADES SIX TO 12 HAVE BEEN BULLIED. When someone steps in, that bullying quickly stops more than half the time. Now, a new study suggests that children of parents who foster positive relationships with them will be more likely to intervene. Researchers surveyed nearly 900 sixth and ninth graders about their home lives. Those most willing to stand up to bullies had parents who set clear rules. When the kids broke those rules, their parents calmly talked with them and helped them understand what they'd done wrong. They also said their parents knew what they were up to when they were not at home, and they received praise from their parents when they did well in school and elsewhere. Such nurturing, the researchers speculate, helps strengthen kids' sense of right and wrong as well as their sense of responsibility to intervene when bullies threaten others. —MATT McMILLEN

Back on Track

IF YOUR PREGNANCY IS A PAIN IN THE BACK, TRY THESE DOCTOR-APPROVED TIPS TO GET SOME RELIEF

BY Colleen Oakley REVIEWED BY Nivin C.S. Todd, MD, WebMD Medical Reviewer

YOUR BABY BUMP IS GROWING BY THE DAY, BUT YOUR NEW BODY SHAPE OFTEN BRINGS NEW ACHES AND PAINS—ESPECIALLY IN YOUR BACK. “A woman’s body is in a constant state of change during pregnancy, and the spine is no exception,” says Neel Anand, MD, professor of orthopaedic surgery and director of spine trauma at Cedars-Sinai Spine Center in Los Angeles.

As your center of gravity shifts, your body compensates by leaning backwards, increasing the natural curve of your lower spine, which can lead to back pain. While it’s extremely common—50% to 70% of all women encounter back pain at some point during their pregnancy—you don’t have to suffer. Ease the ache with these simple tips.

Stand up straight. This sounds like a simple and obvious solution, but it can become more difficult as pregnancy progresses, says Anand. To train your back muscles, sit up straight in a chair with your hands on your thighs and your shoulders down. Pull your shoulders back and squeeze the shoulder blades together and hold for 5 seconds. Repeat this three or four times daily to perfect your posture and help relieve pressure on your lower back.

Jump in the pool. Or lake. Or go for a walk. “Exercise can be one of the best ways to relieve back pain during pregnancy because it strengthens muscles and increases flexibility, so your spinal muscles will be more ready and willing to take on whatever changes come their

way,” says Anand. Walking, swimming, or riding a stationary bike are all great, low-impact options when you have a baby on board.

Kick off your heels. Improper shoes—whether unsupportive or too high—alter the alignment of your pelvis, which can cause back pain even when you’re not pregnant, says Anand. Instead, opt for comfy flats or tennis shoes that have adequate cushioning and a supportive arch—at least until the baby comes.

Perfect your pillow placement. The best position for sleeping while pregnant is on your side, with a pillow between your knees. This takes pressure off your lower back. But you can experiment with different pillow placements to see what works best for you—like one between your arms if you have upper back pain, or as pregnancy progresses one under your abdomen for even more back support. “And, of course,” says Anand, “some pregnant women prefer a full body pillow to help support all these key areas of the body.”

Talk to your doctor. For many women, back pain during pregnancy is bound to happen, and not all cases require a visit to the OB/GYN. “But, as always, listen to your body and don’t be afraid to seek help if you feel you need it,” says Anand. “Your physician can help evaluate your pain and make the best recommendations for treatment—giving you the best chance for bouncing back after childbirth.”



Search for the article **Back Pain in Pregnancy** at WebMD.com.

3 STRETCHES

PRENATAL YOGA IS A GREAT WAY TO PREVENT AND RELIEVE PREGNANCY BACK PAIN. CAN’T GET TO A CLASS? TRY THESE SIMPLE STRETCHES, ADVISES **NEEL ANAND, MD.**

1. CAT STRETCH

Get on your hands and knees and gently round out your back as you pull in your stomach. Do 10 reps holding this position for at least 10 to 20 seconds each, depending on your comfort level.

2. STANDING PELVIC TILT

While standing straight up against a wall with your feet shoulder-width apart, push the small of your back against the wall. Do 10 reps at a time to help stretch and strengthen your lower back muscles.

3. FITNESS BALL STRETCH

Sit on the floor with a fitness ball at your back in front of a wall. Lean your back against the ball, until it supports your weight, keeping your knees bent, feet flat on the floor, and your hands on your hips with your elbows out. Push the small of your back upward into the fitness ball and hold for 10 to 20 seconds before going back into the starting position. Do 10 reps.



Sensors for Sleep?

NEW MONITORS CAN KEEP WATCH ON AN INFANT'S BREATHING DURING SLEEP, BUT RESEARCH SUGGESTS THAT THEY COULD PUT BABY AT RISK

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



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IF YOU HAVE A NEWBORN IN THE FAMILY, you may be tempted by a new type of baby monitor designed to check vital signs while the child sleeps. Some of these devices are worn on the infant's foot or ankle and feature a pulse oximeter that monitors heart rate and oxygen level, sending the information to the parent's smartphone. An alarm sounds if the readings are abnormal.

As good as this may sound to anxious parents hoping to reduce the risk of sudden infant death syndrome (SIDS), the American Academy of Pediatrics (AAP) warns against using these devices. The AAP has reviewed the existing research on apnea monitors and found no evidence that they impact the prevention of SIDS in healthy babies. And a recent study found the new wearable monitors are often inaccurate, sending panicked parents and their babies to the hospital for unnecessary procedures.

The study suggests that the technology in these monitors isn't reliable. One of the brands tested detected low oxygen levels sometimes, but not consistently, while another brand missed all instances of low oxygen. False alarms about pulse rate were common. "These consumer devices aren't held to the same regulatory standard as medical care devices," says Liz Foglia, MD, MSCE, a neonatologist at the Children's Hospital of Philadelphia and the

Hospital of the University of Pennsylvania, who coauthored the study.

She hopes companies keep working to develop new types of reliable home devices; some babies with health problems do need monitoring. "I would love to see manufacturers get to a point that they get FDA approval so we have confidence that their device works," she says.

She worries that the current wearable monitors give parents a false sense of security, making them too relaxed about proven safe sleep habits. The AAP's recommendations include always putting your baby to sleep on their back on a firm surface with a tight sheet and no excess bedding.

Babies should sleep in the same room with their parents, but not on the same bed, and parents should keep their baby away from smokers and people using alcohol or drugs.

A mom herself, Foglia understands the worry that leads some parents to use sleep monitors. The newborn period can be overwhelming, given all the responsibility of keeping your baby safe and healthy, she says. But Foglia's work as a physician and researcher gives her an additional perspective: "I think parents can feel empowered by the fact that there are proven practices that put your baby at the lowest possible risk for SIDS," she says.

ASK YOUR DOCTOR

Q What do you think of wearable baby monitors?

Despite the advice against these monitors, neonatologist Liz Foglia, MD, MSCE, acknowledges that they remain popular among new parents. If you decide to use a wearable monitor on your baby, have an honest conversation with your pediatrician. Have they had any experience with them? Have other families in their practice used them?

Q If I use one of these monitors, how should I respond to an alarm?

Ask your pediatrician what you should do if the alarm sounds. What signs or symptoms should you look for? In what situations would they want you to seek medical attention for your baby?

Q How should the wearable monitor affect the way I put my baby down to sleep?

Foglia is concerned parents will think they can use a monitor and then place baby on her stomach to sleep, or co-sleep. It's essential to stick with safe sleep practices proven to reduce SIDS risk. "These monitors should not change your behavior at all," Foglia says.



Your Child's Brain on Music

LEARNING TO PLAY AN INSTRUMENT CAN BOOST BRAIN CONNECTIONS AND IMPROVE ACADEMIC TEST SCORES

BY Lisa Marshall

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

WANT TO GIVE YOUR CHILD AN EDGE IN MATH AND ENGLISH? Enroll them in music lessons.

That's the takeaway of a recent study finding that elementary-schoolers who studied an instrument for at least 18 months not only did better on tests of memory, planning, reasoning, focus, and self-control, they also vastly outperformed non-musical peers on arithmetic, language, and IQ tests.

"Learning an instrument provides a full-brain workout, stimulating growth and building connections in various regions throughout the brain," says lead author Artur Jaschke, PhD, a clinical neuropsychologist at the University of Amsterdam. "Our study provides some of the strongest evidence yet that the cognitive skills developed during music lessons can influence children's abilities in completely unrelated subjects, too."

Parents and educators have long assumed that exposure to music is good for a child's brain, but research on its impact on academic performance has been mixed and controversial.

In 2007, a comprehensive review firmly debunked the "Mozart effect," concluding that merely listening to music cannot, as some had professed, make you smarter. While some research has shown that students who play an instrument do better on standardized tests, some studies have shown no link at all or have been criticized for being too short or too small.

With funding for arts education dwindling in the United States and Europe, Jaschke and his colleagues set out to "close the gap" with a larger, longer study.

They divided 150 children, ages 5 to 10, into four groups, providing

4 TIPS

ARTUR JASCHKE, PhD,
SUGGESTS WAYS TO
TURN YOUR CHILD ON
TO MUSIC.

1. START WHEN THEY'RE BABIES

One recent study found that 9-month-old babies taught to tap out rhythms in time with music showed improvements in brain regions associated with detecting patterns and processing language.

2. INTRODUCE INSTRUMENT LESSONS BY GRADE SCHOOL

While listening to music has its benefits, playing an instrument produces more cognitive rewards, studies show. Starting between ages 5 and 12, when the brain is rapidly changing, can have the most impact.

3. STICK WITH IT Some benefits, including heightened academic test scores, don't kick in until after a child has played for a year.

4. DON'T DISCRIMINATE

Ask your child what instrument and what genre they are most interested in. Whether they play violin, piano, or guitar or choose classical, jazz, or punk, the benefits are similar, says Jaschke.

some with structured music lessons that included learning an instrument in school or at home, some with visual arts classes, and some with no arts schooling. Then they followed them for two and a half years, giving them a battery of tests every six months.

Notably, there was little difference between groups after one year.

After 18 months, however, the music groups started to score higher than the other children on cognitive tasks such as planning, memory, and problem solving. After two-and-a-half years, the differences became pronounced, with those in the music groups also scoring 14% to 18% higher on arithmetic and language tests and about 15 points higher on IQ tests than the no-arts group.

Jaschke hopes such research will help demonstrate the broader value of music education.

"To play an instrument, you need to plan, have motor control, remember, exercise patience, and understand the emotions behind the music," he says. "In passively training all those brain areas, which can be really enjoyable, you build connections that can improve performance in many areas of life."



Search for the
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Benefits of Music**
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Vaping Risks

WITH E-CIGARETTE USE AMONG ADOLESCENTS SOARING, OFFICIALS ARE WARNING OF A "PUBLIC HEALTH CRISIS" AND CALLING ON PARENTS TO HELP PREVENT A NEW GENERATION OF NICOTINE ADDICTS

BY Lisa Marshall

REVIEWED BY Neha Pathak, MD, WebMD Medical Editor



Search for the article
**How Do E-cigarettes
Affect Your Body?**
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THINK SMOKING ISN'T COOL ANYMORE? THINK AGAIN. A decade after the electronic cigarette was introduced in the United States as a potentially less-harmful, more-discrete alternative for adult smokers, public health experts are warning that use among youth has reached "epidemic proportions" and could ignite a new generation of nicotine addicts.

"We are actually getting more young people's brains exposed to nicotine today than we have in years," says Stanford University tobacco researcher Judith Prochaska, noting that use of combustible cigarettes had been rapidly declining in the early 2000s. "This is an unusual shift and very concerning."

In 2011, just 2% of high-schoolers said they had tried e-cigarettes, or vaping (using a battery powered device that heats up often-nicotine-infused liquid and turns it into a vapor). Today, two in five high-school seniors say they have vaped.

The meteoric rise prompted the U.S. Surgeon General in December to issue a rare advisory warning of the "epidemic." "We have never seen the use of any substance by America's young people rise as rapidly as e-cigarette use is rising," said Health and Human Services Secretary Alex Azar in a statement.

While many teens believe they are just inhaling flavored vapor, they're often really inhaling nicotine, an addictive drug that can be uniquely harmful to

the developing brain. The most popular device, the sleek black flash-drive-shaped Juul, doesn't come in a nicotine-free variety and can contain 20 times the nicotine that a combustible cigarette does.

They taste better, don't smell like cigarettes, and are easier to conceal from parents, making them even more appealing to teens, says Prochaska. Even nicotine-free vaping devices have raised some concerns. The vapor often contains propylene glycol, a lung irritant that can impact behavior and the central nervous system, and diacetyl, a chemical linked to a debilitating respiratory disease known as "popcorn lung." With more than 7,000 largely unregulated varieties—from cotton candy to Katy Perry cherry—it's impossible to know what's safe, she says.

Even more concerning, studies show teens who vape are three times as likely to take up smoking real cigarettes.

Prochaska notes that because they don't emit the carbon monoxide that comes with combustion, e-cigarettes may be less hazardous than conventional cigarettes—and could be a good option for an adult trying to wean off the real thing. "But you are getting young people who would never have picked up cigarettes exposing their developing brain to this addictive drug; that's a real concern," Prochaska says.

She encourages parents to talk to their kids about vaping, make sure they know the risk, and set a good example by not smoking around them.

BY THE NUMBERS

38%

Percentage of high school seniors who say they vaped in the past year (up from 28% in 2017). 32% of 10th graders and 18% of 6th graders also say they vaped.

30%

Percentage of high-school seniors who vape and believe they are inhaling nicotine. 26% say they're inhaling "just flavoring." 13% say they're inhaling marijuana.

1,300

Number of warning letters issued by the FDA to retailers last September for selling e-cigarettes to minors.

1.3 MILLION

Increase in the number of teens who vaped in 2018 compared to 2017.

The Power of Play

TO BUILD THE SKILLS THEY NEED TO THRIVE, KIDS REQUIRE AMPLE TIME TO EXPLORE THE WORLD

BY Lauren Paige Kennedy REVIEWED BY Roy Benaroch, MD, WebMD Medical Reviewer

FOR MILLENNIA, PARENTS HAVE INSTRUCTED THEIR ROWDY KIDS TO “GO OUT AND PLAY!” In doing so, most hadn’t a clue they were actively nurturing the emotional, cognitive, language, and self-regulation skills that build executive function and social aptitude in children, all while enhancing critical brain structures that support pursuing goals and ignoring distractions.

In other words, play is imperative for healthy development. So says a recent clinical report published in the journal *Pediatrics*, which outlines how play advances such skills even as it manages toxic stress. What’s more, playing is shown to support the formation of stable and nurturing relationships with caregivers that kids need to thrive.

While the definition of play is not clear-cut, the researchers agree that play is intrinsically motivated, entails active engagement, and results in joyful discovery. It’s also voluntary, fun, and spontaneous, with no extrinsic goals.

There are different types of play, says Eileen Kennedy-Moore, PhD, a child psychologist and the author of *Growing Friendships: A Kid’s Guide to Making and Keeping Friends*. “Some play is child-directed; it’s about exploring,” she says. “A toddler puts everything in her mouth—she’s curious about the world. Physical play

is rough-and-tumble, with kids running and moving their bodies. Social play may involve a child watching another kid, playing alongside him, which becomes cooperative play with shared goals as they interact. Pretend play is when children take on adult roles. Interestingly, this happens cross-culturally at specific developmental times, primarily during the preschool years.”

Free play enables children to understand their own preferences and interests, the report states. But play guided by an adult, where the child retains his or her own agency, better promotes learning with a specific goal in mind.

Kennedy-Moore agrees: “Adult-guided play is not about an adult lecturing, but rather modeling for children by asking questions. For example, if a parent and a child are doing a puzzle, the adult might say, ‘I notice the color yellow is running through here. Do you see a yellow piece?’ Asking questions instead of giving the answers.” This allows a child to figure it out—and succeed—independently.

Play and stress are closely linked, with high levels of play associated with low levels of cortisol. Play may be especially important for children in high-stress familial situations, according to the report.



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4 GAME CHANGERS

IMPLEMENT THESE PLAY TIPS FROM CHILD PSYCHOLOGIST **EILEEN KENNEDY-MOORE, PhD**, INTO YOUR KIDS’ DOWNTIME FOR OPTIMAL SOCIAL, EMOTIONAL, AND MENTAL DEVELOPMENT.

1. DITCH THE DEVICE

There’s no “right” number of hours for kids to play—but do monitor screen time, Kennedy-Moore says: “Playing a video game virtually with a friend is not the same as a game of tag, where kids negotiate the rules, cooperate, and compete to catch each other.”

2. SOLO PLAY IS GOOD—TO A POINT

“Alone play can be wonderful, and it builds imagination,” Kennedy-Moore says. “For instance, kids love playing alone with Legos.” But if your child always plays solo, it can be a red flag for social isolation.

3. EMBRACE UNSTRUCTURED PLAY TIME

“Kids say, ‘I’m bored!’ and parents leap to the rescue,” Kennedy-Moore says. “If they can resist, the child moans and groans—and, then, something wonderful happens: kids think of something to do. It’s a life skill to follow their own curiosity, entertain themselves, and manage their emotions.”

4. THE PLAY’S THE THING

“Play is important and valuable, in and of itself,” Kennedy-Moore says, “even if it doesn’t always encourage development every time. Play is like art—to be appreciated.”





4 QUESTIONS

WORRIED ABOUT YOUR OLDER DOG'S BRAIN HEALTH? "TELL YOUR VET ABOUT RECENT CHANGES IN YOUR DOG'S BEHAVIOR," SAYS **LETICIA FANUCCHI, DVM**, AND CONSIDER THESE QUESTIONS.

1. DOES YOUR DOG SHOW SIGNS OF COGNITIVE DECLINE?

Don't assume that ignoring commands and having accidents in the house are signs of a defiant dog.

2. COULD OTHER HEALTH ISSUES BE CAUSING THESE SYMPTOMS?

Before diagnosing cognitive decline, Fanucchi says your vet will want to rule out endocrine issues, heart disease, and other medical conditions that could cause similar symptoms.

3. IS MEDICATION AVAILABLE?

There is a medication approved to treat cognitive decline in dogs. Fanucchi suggests talking to your veterinarian about whether it's right for your pet.

4. WILL DIETARY CHANGES HELP?

Research shows that kibble formulated for senior dogs could help improve cognitive function and slow cognitive decline. Ask about brain-protection blends that contain triglycerides, B vitamins, and antioxidants.

connections between different parts of the brain. The tasty reward motivated the dogs to stick with the activity.

While the touchscreen games used in lab research aren't sold in stores (yet), Fanucchi suggests creating your own brain games at home. Offer your dog interactive toys that require her to move a puzzle piece or roll a cube to release a treat. And get your pet outside. Regular walks allow her to explore new sights, sounds, and smells, which can be mentally stimulating, and keeping her active during daylight hours can also help reset a confused sleep/wake cycle.

Don't wait until your pet starts showing signs of doggie dementia to introduce brain-training activities. Fanucchi advocates a preventive approach: "Mental stimulation benefits dogs of all ages and is especially important for older dogs."

PETS

Brain Games

MENTAL STIMULATION HELPS PREVENT CANINE COGNITIVE DECLINE

BY Jodi Helmer

REVIEWED BY Will Draper, DVM, WebMD Medical Reviewer

LONG WALKS AND ROMPS AT THE DOG PARK KEEP YOUR DOG IN TOP PHYSICAL SHAPE, BUT WHAT ABOUT HER MENTAL HEALTH? Like their owners, dogs are susceptible to cognitive decline, according to Leticia Fanucchi, DVM, veterinarian and clinical instructor at Washington State University in Pullman, Washington. "Dogs shouldn't stop being mentally and physically active just because they get older," she says.

Specifically, degenerative brain changes often affect dogs older than 8 years. Signs of canine cognitive dysfunction include disorientation, changes in sleep/wake cycles, housetraining accidents, increased anxiety, and less desire for physical activity and social interaction. Dogs that have memory loss may have forgotten routine commands such as "sit" and "stay."

Medications can help slow this cognitive decline, but a 2018 study found that mental stimulation could also improve brain health. Researchers at Messerli Research Institution in Vienna used a touchscreen to teach dogs simple computer games; the dogs received treats for getting the answers correct.

"These kinds of mental games help wake up areas of the brain that have been inactive," Fanucchi says. The combination of sight, scent, and spatial orientation required to solve the puzzle helped make



RE

BY GINA SHAW

REVIEWED BY NEHA PATHAK, MD
WEBMD MEDICAL EDITOR

PHOTOGRAPHY BY: NICK HADDOW

EMMA THOMPSON REFLECTS ON THE LARGER ISSUES OF LIFE, LOSS, AND RESILIENCE

Emma Thompson is thinking about death.

Having just turned 60 in April, the two-time Academy Award-winning actor and screenwriter is used to the typical media questions about “growing old gracefully” in the film and television world. But she’s more interested in talking about bigger questions.

“With this watershed birthday, I will contemplate what I really want to do next,” she says during an interview from her offices in London, where she’s just wrapped up filming for *Last Christmas*—a romantic comedy inspired by the George Michael song—which she co-wrote with performance artist Bryony Kimmings. “Time is precious, and it is not unlimited. One feels immortal, I think, until one is about 40. Then intimations of mortality come. My big conversation with myself, which has already started, but will go on this year is, ‘How do I feel about dying? Am I ready to look at that?’ We are in such denial about it, and it’s very strange because it’s the one thing we know absolutely will happen.”

A

TALK

Thompson’s life recently has been “dotted with loss,” she says. Her beloved sister-in-law, Clare (who lived just down the road from Thompson and her husband, Greg Wise, in London’s West Hampstead neighborhood), died of cancer in 2017, just a year after the death of Thompson’s close friend and *Love, Actually* co-star Alan Rickman, also from cancer. “My mate Jeremy Hardy, a comedian, died just two weeks ago, and my best mate’s husband died last year. It seems like people are dying all the time in my life. My existence feels very hard-won and precious at the moment. I’m addicted to doing and action and activity, but this year I’m going to look at how it feels to be less addicted to that and more able to sit.”

Emma Thompson? Sit?

Probably not for very long, she acknowledges: “That’s the point of this patch of time. Sixty isn’t 50. Sixty is well into ‘How many more years have I got when I can be active and useful and produce good and worthwhile work?’ Maybe 10 or 15? Going longer, I think maybe you should let everyone else have a go.” She pauses. “But if I’m lucky enough to reach that age and no one’s able to shut me up, you can remind me of this interview.”

A LIFETIME OF ROLES

It's hard to imagine the peripatetic Thompson "just sitting." Since rising to fame with her role as Princess Catherine of Valois opposite her then-husband Kenneth Branagh in *Henry V* in 1989, Thompson has appeared in at least one major movie virtually every year—sometimes several. In 1993, for example, she starred as Beatrice in *Much Ado About Nothing*, as Gareth Peirce in *In the Name of the Father*, and as Miss Kenton opposite Anthony Hopkins in Merchant Ivory's *The Remains of the Day*. Thompson's also a screenwriter: She wrote and starred in both *Nanny McPhee* movies and won an Academy Award for screenwriting for 1995's *Sense and Sensibility*, in which she played Elinor Dashwood. This summer, she reprises her role as Agent O in *Men in Black: International*, and her new film with Mindy Kaling, *Late Night*, which earned praise at the Sundance Film Festival in February, debuts as an Amazon Original Movie.

Thompson's "good and worthwhile work" has defied genre and categorization. For every restrained, enigmatic, emotions-bubbling-under-the-surface character like Miss Kenton or judge Fiona Maye in 2017's *The Children Act*, there's a kooky Sybill Trelawney, the divination teacher in *Harry Potter and The Prisoner of Azkaban* or a passionate, fiery Beatrice in *Much Ado About Nothing*. She loves comedy—she began her career in standup with the Cambridge Footlights, alongside Stephen Fry and Hugh Laurie. And in 2003, she took on the complex dual roles of nurse practitioner Emily and the fantastical Angel in HBO's *Angels in America*.

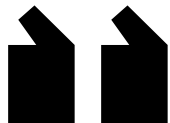
"I've enjoyed the really out-there characters more than anything," she says. "I played a 77-year-old serial killer in *The Legend of Barney Thomson*. That was something special. And maybe the most remarkable experience I've had in the last 10 years was playing Mrs. Lovett on Broadway in the concert version of *Sweeney Todd*. I suppose I'm probably not very good at repeating stuff. I think I would be bored if I had to do things again and again. It's like going on a different walk, and the landscape is different, so you're unlikely not to notice what's going on. And it's vital that you know what's going on when you're creating."

RESILIENCE

Thompson has spoken candidly about plunging into work to help her cope with depression in the 1990s, when she was going through her divorce from Branagh, but says she hasn't had any serious bouts with it recently. "My brain might be changing," she says. "Your brain does change as you get older. And life is kind of settled, in

a way, now. It's so interesting to be allowed to live long enough to survive things like depression. I've got an awful lot of mechanisms that I can use now to cope with it, so I'm much more resilient, I think, than I was before."

Some of her resilience may also come from her passion for activism and focus on the needs of others. Thompson is a longtime supporter of Greenpeace UK and the Food Foundation, which focuses on making a healthy diet more affordable for families. And she's the president of the Helen Bamber Foundation, which provides specialized care for refugees and asylum seekers who have experienced extreme cruelty, such as



**I'VE ENJOYED
THE REALLY
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MORE THAN
ANYTHING.**

TOP RIGHT: COURTESY AMAZON STUDIOS; TOP LEFT: PHOTO 12/ALAMY STOCK PHOTO; MIDDLE: COLUMBIA PICTURES/RONALD GRANT ARCHIVE/ALAMY STOCK PHOTO; BOTTOM LEFT: COURTESY SONY PICTURES ENTERTAINMENT; BOTTOM RIGHT: MOVIESTORE COLLECTION LTD/ALAMY STOCK PHOTO





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DEATH, MEANING, AND YOUR MORNING COFFEE

Spending time contemplating death, as Emma Thompson plans to do in her 60th year, may not sound appealing. But in her research, social psychologist Laura King, PhD, has found the opposite: After reminders of death, people value life more highly and find more meaning in it. "When we remind people of the idea of death, it makes life seem more wonderful, more precious," says King, curators' professor of psychological sciences at the University of Missouri, Columbia.

To find meaning in life in the face of the fact that it's inevitably going to stop one day, you might imagine the need to achieve something great—a lasting contribution to the world. "But 1,000 years from now, all our lives will be as if they never happened," says King. "So our meaning has to be located in our present circumstances."

Indeed, Emma Thompson's description of a recent "perfect day" has nothing to do with receiving her damehood from the Queen of England or getting an Academy Award. "I got up and pootled in my kitchen, and then I went for a long walk and had a coffee in a glass in one of my favorite food shops. I bought my mother some biscuits and then walked home and had a cup of tea with my mum and my sister."

torture and human trafficking. She has also spent many years campaigning for immigrants' rights—her son, Tindye-bwa Agaba, now 30, escaped life as a child soldier in Rwanda.

Always politically outspoken, Thompson says that as time has passed she's become more willing to see things from other people's point of view. "That's a great, great gift, and only time gives you that," she says. But she's still more than willing to put values ahead of career: In late February, she released a powerful letter explaining why she was dropping out of the animated film *Luck* after the producers hired a former Pixar executive accused of inappropriate conduct with women.

"I am well aware that centuries of entitlement to women's bodies, whether they like it or not, is not going to change

overnight. Or in a year," she wrote. "But I am also aware that if people who have spoken out—like me—do not take this sort of a stand then things are very unlikely to change at anything like the pace required to protect my daughter's generation."

For young women like her daughter—Gaia, who's now 18—as well as women of her own age, Thompson has a message: "Summon your powers," she says. "You'll find they are great."

King suggests seeking your own meaning in a similar way:

Don't aim for the gigantic achievement.

Seek meaning in everyday, trivial moments—like Thompson's cup of tea. "We've found that just being in a good mood, playing with the dog, having an enjoyable meal with friends, can promote the sense that life is meaningful," she says.

Love your routine.

That regular morning coffee, the after-work walk with your dog, the glass of wine after dinner? They're more than just mundane. "Everyday habits bring a structure and rhythm to your life that has meaning. They're about the stamp that you put on your day," says King.

Take time to notice. When you're doing your spring cleaning or watching snow fall from your front porch or talking to a friend in the carpool line after school, take a minute now and then to be present. "You don't have to hire a life coach or find that perfect self-help book," King says. "Your life is already meaningful—you just have to see it."

PHOTOGRAPHY BY: NICK HADDOW



Search for the article [Things That Raise Your Chances of Dementia](#) at [WebMD.com](#).

Guarding the Mind

THE LATEST RESEARCH POINTS TO
WAYS YOU CAN LOWER YOUR ODDS OF
DEVELOPING DEMENTIA

BY **MATT McMILLEN**
REVIEWED BY **NEHA PATHAK, MD,**
WEBMD MEDICAL EDITOR

ILLUSTRATIONS: PATRYCJA PODKOŚCIELNY

The number of people around the world with dementia is staggering—and growing. The mind-robbing disease has no cure, but recent research is beginning to show how you may best be able to lower your chances of getting it.

“It’s not yet definitive, but in the past six years, we’ve made progress on identifying modifiable risk factors for which the evidence is pretty strong,” says Kristine Yaffe, MD, professor of psychiatry, neurology, and epidemiology at the University of California, San Francisco.

At least one risk factor, getting older, is unavoidable. But scientists say certain lifestyle choices may lower the odds in your favor. And while it’s never too late to benefit from healthy changes in your life, studies show that starting early may mean extra protection decades later.

“Research from the past two to three years suggests that risk factors need to be focused on in midlife,” says Keith Fargo, PhD, director of scientific programs and outreach at the Alzheimer’s Association.

Consider high blood pressure. In a study published in 2017, researchers followed nearly 16,000 adults ages 44 to 66 for 24 years. They found that people with high blood pressure in midlife had a nearly 40% higher risk of dementia. A 2014 review of previously published studies estimated that midlife high blood pressure leads to as many as 425,000 cases of Alzheimer’s disease in the U.S. each year. Fortunately, according to a 2018 study published in *JAMA* that included nearly 9,500 adults age 50 or older, some evidence shows that controlling blood pressure could reduce the risk of mild cognitive impairment, a precursor to dementia.

“This is the first trial that has demonstrated an effective strategy for prevention of age-related cognitive



impairment,” Yaffe wrote in an editorial published alongside the study.

That said, you should pay attention to your health no matter how young or old you are, says neurologist Douglas Scharre, MD, director of the division of cognitive neurology at Ohio State’s Wexner Medical Center in Columbus, Ohio: “If you have any dementia risk factor identified at any age, that is when you should be addressing or trying to control it.”

The World Health Organization estimates that 82 million people worldwide will have dementia by 2030. In the United States, nearly 14 million will have Alzheimer’s disease—a leading cause of dementia—by 2050, more than double the current number, according to the Alzheimer’s Association.

Dementia causes a slow decline in thinking skills. It affects memory, mood, language, and other functions of the brain. People with dementia eventually become unable to live independently and require around-the-clock care and attention. Alzheimer’s is the leading cause, followed by stroke and other conditions that damage blood vessels and can cause what’s known as vascular dementia.

In addition to maintaining a healthy blood pressure, evidence has been building that keeping other heart-health factors—such as cholesterol and diabetes—in check may lower your risk. In a study released last December, for example, researchers reported that type 2 diabetes appears to cause brain changes that could harm memory and other brain functions. Another from May 2018 found that cholesterol seems to encourage the buildup of proteins in the brain that are believed to play a major role in the development of Alzheimer’s disease.

“Managing your blood pressure, your cholesterol, and, if you have it, your diabetes, will likely lower your risk of dementia later in life,” says Jagan Pillai, MD, PhD, a neurologist with the Cleveland Clinic Lou Ruvo Center for Brain Health in Cleveland, Ohio.

Recent research also has pointed to other things that may contribute to brain health, including:

- Proper sleep
- The use of hearing aids, if necessary
- Prevention of head injuries
- Regular social interaction and other types of mental stimulation

THE LINK TO SLEEP

During sleep, the brain cleans house, flushing out toxic buildups of beta-amyloid, a protein that has been linked to Alzheimer’s disease. Poor sleep hampers the brain’s ability to perform this janitorial work. Over time, the buildup of toxins may lead to dementia.

A study published in June 2018, which included 283 adults whose average age was 77, revealed a link between daytime sleepiness and higher amounts of beta-amyloid. And in a study published in 2017,

researchers reported similar findings in 101 adults whose average age was 63. “We don’t know exactly what explains the link between sleep and dementia, but it does seem that there is something about sleep and the clearing of beta-amyloid,” Yaffe says.

New research also shows such buildups in humans. Two small studies—one published in 2017, the other in 2018—showed an increase in beta-amyloid in people who got a single night’s poor sleep. But, the author of one of the studies points out, experts worry more about chronic sleep problems than one night of tossing and turning.

There likely are other explanations as well. For example, Pillai says uncontrolled sleep apnea may cause numerous small strokes that lead to memory and thinking problems later in life. But recent research raises more questions than it answers. “A lot of the details are unclear regarding how sleep impacts Alzheimer’s disease and dementia in general,” Pillai says. And, says Yaffe, “We still don’t know whether treating your sleep problems would decrease your risk of dementia.”

HEARING AND SOCIAL STIMULATION

In 2017, a major report on dementia added hearing loss to the list of significant modifiable risk factors. (“That’s the most important development of the last year,” Fargo says.) Right now, though, experts don’t know what links hearing loss to dementia. The authors of the report suggest that hearing problems force the brain to work harder to understand what’s being said. Over time, that extra burden may cause harm. Or, the dementia may come from social isolation. If your poor hearing does not allow you to participate fully in conversations, you may lose the brain benefits that come from that type of mental stimulation.

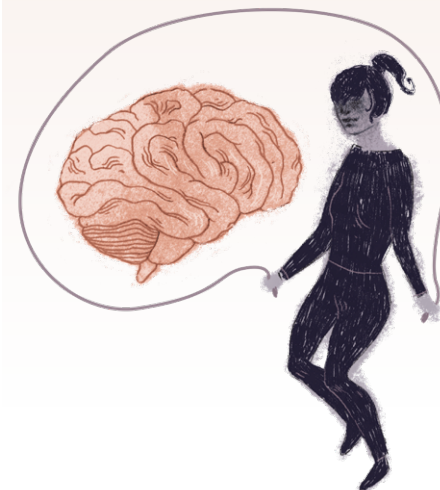
Scharre agrees: “Most hearing loss occurs outside the brain and is not related to the brain, but if you’re not getting input or socialization, that may affect the brain indirectly.”

As with sleep, it’s not yet known whether correcting hearing loss—through the use of hearing aids, for example—will reduce the risk of dementia. But Fargo says that mental stimulation, which includes interacting with others, appears to offer protection against dementia. “Social stimulation is huge,” he says.

Minimize Your Risks

To potentially reduce your risk of dementia, says **Douglas Scharre, MD**, focus on three targets—exercise, mental stimulation, and diet:

- + Get your heart going with frequent aerobic exercise like running, walking, or riding a bike. That may help protect the aging brain. “If you can, you want to get sweaty a few times a week,” says Scharre.
- + Eat right to protect your brain. Scharre recommends the MIND diet, which combines the heart-healthy Mediterranean diet with the blood pressure-lowering DASH diet. “Anything you can do to make better eating choices, you should do,” he says.
- + Keep your brain active, especially by involving others. Play strategy games like mah-jongg, bridge, and hearts; find volunteer opportunities; or simply engage people in conversation. “Social interaction is huge,” says Scharre.
- + Don’t wait. It’s never too soon to begin buttressing your brain health, says Scharre: “Start early and do it continuously to protect your brain.”



PROTECT YOUR HEAD

Head injuries also have been tied to dementia. In a study published in 2018, for example, researchers studied the health records of more than 164,000 people who’d had a traumatic brain injury (TBI). Serious injuries doubled the risk of dementia, while repeated injuries nearly tripled it. Even after more than 30 years, the risk remained 25% higher than normal.

Recent research also suggests that even mild head injuries make dementia more likely. Yaffe and her colleagues studied veterans who had had mild concussions but did not lose consciousness. Their findings, published in September 2018, reports that such injuries more than double the risk of dementia. More severe injuries boost the risk even higher.

Pillai points out that we can’t say if Yaffe’s results would apply to others besides veterans, but, he says, “it opens up a new area of concern.” The relationship between head injuries and dementia makes sense. As Scharre puts it, “Head injuries can’t possibly be helpful for the brain.” Nevertheless, the link is complicated and not well understood. “Injury takes its toll, but we don’t know all of the mechanisms,” says Yaffe.

Genetics may play a role, too. One gene known to increase the risk of Alzheimer’s disease, APOE4, may also contribute to a heightened risk of dementia following a traumatic brain injury, according to a study published in September. “I truly believe that there’s a huge impact from genetics,” Scharre says. “Certain genetics likely make you much more prone to the effects of concussion such that your brain is less able to heal or the inflammatory condition that arises maybe goes overboard and causes more damage.”

Eventually, tests might be able to identify individuals whose genes make it more dangerous for them to play football, a sport in which head injuries commonly occur. Scharre says that by that point we may also know how to modify those genes to reduce risk before the first hit occurs.

In the meantime, though, avoiding injury is your best protection. “From a public health point of view, we need to prevent traumatic brain injuries,” says Yaffe, who is now studying what factors make some people more susceptible to dementia than others after a brain injury. “And if you’ve had one, you don’t want to get another one. We think there’s a cumulative risk.”

MORE QUESTIONS TO ANSWER

All of these dementia risk factors—and more—need to be better understood, and another question also must be answered: How do the risks relate to each other? And how might addressing those risks together influence the development of dementia?

For example, Yaffe says, if you go to the gym, you may not only be more physically active but also more social, both of which are believed to help protect against dementia. That may also reduce your likelihood of developing depression, which some research has linked to dementia as well.

“We’re starting now to do trials where we don’t look at just one factor—we try to look at risk factors together, because often they go together,” says Yaffe, who just began a two-year study that will examine the impact of a combination of risk factors such as social isolation, sleep, and blood pressure, as well as diabetes, exercise, and certain medications.

GOOD FOR YOU

OR JUST

Fishy?




GET THE **FACTS** ABOUT
fish oil supplements

By SONYA COLLINS

Reviewed by NEHA PATHAK, WEBMD MEDICAL EDITOR





If you take a handful of supplements every morning, chances are fish oil is among them. Enthusiasts say it can help with age-related macular degeneration, rheumatoid arthritis pain, high cholesterol, asthma, depression, ADHD, heart disease, and may even help you get gorgeous hair. If that all sounds too good to be true, well, you know . . .

But before you throw out your fish oil like a three-day old fish, consider the facts. It may have some benefits for your heart, your joints, and your brain. But there are caveats.

What is fish oil?

Doctors and scientists first took notice of fish oil when research revealed that cultures that ate more fish—Scandinavians and Inuits, for example—had lower rates of heart disease. (FYI: The global value of the fish oil market is expected to surpass \$4 billion by 2022.) Many types of fish, including salmon, mackerel, herring, lake trout, sardines, and albacore tuna, contain omega-3 fatty acids—a healthy type of fat. Two of the most important

omega-3s in fish are eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA). Researchers wanted to know whether taking fish oil straight—without eating fish—might help the heart.

“In clinical trials, the results are very mixed,” says J.L. Mehta, MD, PhD, a cardiologist and professor at the University of Arkansas for Medical Sciences in Little Rock. “Some show benefits. Many do not.”

Why the mixed reviews?

Early tests showed that fish oil helped the heart in many ways, but researchers have scratched their heads when more recent studies didn’t get the same results.

“This may be because there are so many medications that are now being used to treat high-risk patients. A very large percentage are on aspirin, statins, beta-blockers, and ACE inhibitors, and this may obscure the role of a dietary supplement like omega-3s,” says JoAnn Manson, MD, chief of preventive medicine at Brigham and Women’s Hospital in Boston.

It may also be that Westerners eat more fish today than they once did because they’ve heard it’s good for them, so a supplement wouldn’t help. Plus, different studies also use different fish oil doses and formulations—whether they are equal parts EPA and DHA or heavier on one than the other.

The evidence for fish oil

So what do researchers know so far about fish oil’s benefits? These situations may suggest a supplement might be helpful.

If you’ve already had a heart attack or are at a high risk of having one:

Large prescription-strength doses of pure EPA—not the type you buy off the shelf at the drugstore—can help the hearts of people who have certain conditions that make heart problems more likely. Prescription fish oils lower triglycerides—a type of fat that circulates in the bloodstream. A recent study showed that 4 grams of pure EPA per day for five years significantly cut the risk for heart attack, stroke, bypass, chest pain, and death from sudden cardiac arrest during that time.

But it’s worth noting that the people who saw those benefits already had a host of heart-related health problems. Their LDL,

“FISH OIL IS NOT A MAGIC cure-all.”

or “bad,” cholesterol and triglycerides were high even though they took cholesterol-lowering medications. They also already had heart disease, or they had diabetes and at least one other factor that made heart disease more likely.

For people who’ve never had a heart attack and run a normal risk of ever having one, says Manson, “it’s unlikely that 4 grams a day would be recommended. There’s a threshold at which you’d stop seeing benefits.”

A similar study found that a prescription form of 1.8 grams of EPA per day, in addition to a cholesterol-lowering medication, cut the odds of having heart attacks and other heart problems in people who had high cholesterol. Many of them also had heart disease, diabetes, and/or high blood pressure. Although 1.8 grams is a lot less EPA than 4 grams, the study participants, who were Japanese, already got more fish oil directly from the fish in their regular diet than Westerners do.

So, exactly how much is 1.8 grams of EPA? You’d have to take 10 capsules—five servings—of an average over-the-counter fish oil supplement to get 1.8 grams of EPA. Want the full four grams? You’d need to take about 22 capsules—and no one recommends that. Studies that show benefits of high doses of EPA use prescription-grade pure EPA. Over-the-counter supplements have other ingredients, too, and they are not regulated and safety-tested like FDA-approved prescription drugs.

“Some people take multiple, multiple capsules. But we don’t know that that’s safe,” says Manson. “Unless you’re under the guidance of a clinician, avoid mega-dosing.”

If your heart’s already pretty healthy:

In lower doses, fish oil may help the hearts of people who are in pretty good health. In a study of 25,871 adults older than 50 with an

average risk for heart attack, the ones who took one gram of fish oil—containing 460 mg EPA and 380 mg DHA (just a little more than you might find in a daily over-the-counter dose)—every day for five years had a 28% lower risk for heart attack during that time. However, they did not have a lower risk of stroke or death from heart disease. In fact, many studies that aimed to prove ordinary fish oil supplements lower risk for heart disease have failed to do so.

If it’s not your heart you’re worried about:

Aside from heart health, researchers have studied the effects of fish oil on many other conditions. The benefits are clear for only a few. Fish oil might relieve symptoms of rheumatoid arthritis and reduce the need for pain medications, but only a little, the research shows. And in people who have a higher-than-average risk of getting Alzheimer’s disease because they carry the APOE 4 gene mutation (which indicates a higher risk of developing Alzheimer’s), high doses of DHA before symptoms of the disease arise may make having the condition less likely.

As for other conditions, the benefits of fish oil are either nonexistent or unclear.

Can’t you just eat fish?

Absolutely. The best way to get almost any nutrient, including omega-3, is from your diet. In fact, several studies that show no benefits of fish oil supplements do demonstrate the benefits of eating fish. For example, while fish oil supplements don’t lower the risk of heart disease, studies show that people who eat fish one to four times a week are less likely to die of heart disease than those who rarely or never do. Eating fish and shellfish may cut the risk of stroke and the loss of memory and thinking skills that can lead to dementia.

What’s more, in studies that do show benefits from fish oil supplements, those benefits may be fewer in people who already eat plenty of fish—and more in people who don’t get enough fish. “If there’s a rock-solid reason to supplement, then it’s to fulfill nutrient shortfalls for people who don’t consume enough fish,” says Duffy MacKay,

ND, senior vice president for scientific and regulatory affairs at the Council for Responsible Nutrition, a trade association that represents dietary supplement manufacturers and ingredient suppliers.

For example, take the study that showed that 1 gram of fish oil per day lowered the risk for heart attacks. That was true only for people who didn’t already eat fish. The researchers divided the study participants into two groups—those who ate less than a serving and a half of fish per week, and those who ate that much or more. The ones who ate the least fish had a 19% drop in heart attack, stroke, and heart disease death and a 40% drop in heart attack risk when they took the supplement. “They didn’t already have sufficient fish intake and weren’t already at a threshold where the supplements would have no additional benefit. If they were above 1.5 servings a week, they did not have a clear benefit,” Manson says.

What’s the bottom line?

“Fish oil is not a magic cure-all, but the fact that the evidence is solid in a couple areas shows it is an important nutrient,” says MacKay.

If you already take fish oil at a recommended over-the-counter dose, and you’re doing well on it, no research says you should stop. But don’t take any more than that. There’s no proof that’s safe or helpful.

If you’re not taking fish oil, try to get it from your plate first. The American Heart Association recommends two servings—that’s about 7 ounces—of fish a week, preferably the fatty kind that’s rich in omega-3s.

If you want to start taking fish oil, talk to your doctor about side effects and any interactions it might have with medications you already take. The most common side effects, which 1% to 10% of people have, include belching, indigestion, nausea, bloating, belly pain, constipation, diarrhea, gas, acid reflux, and vomiting.

If you take blood thinners, blood pressure-lowering medications, contraceptives, the weight loss drug orlistat (sold as Alli and Xenical), or vitamin E, talk to your doctor about interactions that could be dangerous before starting fish oil.

5 QUESTIONS

IF YOU’RE INTERESTED IN TRYING FISH OIL, ASK YOUR DOCTOR:

- 1 Do I stand to get any benefits from a fish oil supplement?
- 2 Is it safe to take fish oil with my other medications?
- 3 Is it safe to take fish oil with the health conditions I have?
- 4 Should I take a prescription or over-the-counter fish oil supplement? Can a supplement provide a safe and beneficial dose?
- 5 Are there any risks or side effects of fish oil that I should know about?



GOOD FOR YOU

Juicy Fruit

SATISFYINGLY SWEET BUT LOW-CALORIE, MELON IS A PERFECT SUMMER SNACK—WITH THE ADDED ADVANTAGE OF CONTAINING DISEASE-FIGHTING ANTIOXIDANTS

IF SUMMER'S APPROACH HAS YOU FEELING PARCHED, reach for a cool wedge of melon. Cantaloupe, honeydew, and watermelon, all in season now, are loaded with water. (The aptly named watermelon, for example, is 92% water.) Melons also offer an impressive array of disease-fighting nutrients. One cup of cubed cantaloupe provides 98% of an adult's daily value of vitamin C and 108% of vitamin A, both important for healthy skin and strong immunity. And watermelon is a top source of the antioxidant lycopene—diets high in lycopene may reduce prostate cancer risk. Before slicing a ripe melon, wash the rind well and use a clean knife to prevent the spread of harmful bacteria. Once cut, store melon in the fridge. For a true summer treat, enjoy melon cubes tossed with chopped mint and fresh lime juice. —ERIN O'DONNELL

3 WAYS

Grain Bowls

GRAIN BOWLS MAKE SUPER-HEALTHY SUMMER SUPPERS. START WITH YOUR FAVORITE WHOLE GRAIN, ADD A LEAN PROTEIN AND CHOPPED VEGGIES, AND TOP IT OFF WITH A FLAVORFUL DRESSING.

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

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1



2

3

1 The Vegan Version

California Veggie Bowl
The combo of avocado, quinoa, chickpeas, and kale makes this a filling meal. We recommend baby kale, which is more tender than the larger leaves. Try this dish with different beans in place of the chickpeas; we like white cannellini beans, too.

THE MIX
COOKED RED QUINOA + COOKED CHICKPEAS, BABY KALE, CUCUMBER, CARROTS, AVOCADO, SUN-DRIED TOMATOES, TOASTED WALNUTS

MAKE IT
Prepare the Lemon-Thyme Vinaigrette, above, in a large bowl. Add kale and toss to combine. In each of four bowls, arrange an equal amount of kale, chickpeas, thinly sliced cucumber, shredded carrots, cubed avocado, and quinoa. Serve topped with sliced sun-dried tomatoes and toasted walnuts.
SERVES 4

PER SERVING (½ CUP QUINOA WITH ABOUT 1½ CUPS BEANS AND VEGETABLES)
430 calories, 14 g protein, 50 g carbohydrate, 22 g fat (3 g saturated fat), 0 mg cholesterol, 11 g fiber, 5 g sugar, 361 mg sodium. Calories from fat: 44%

2 The Mediterranean

Greek Tuna Grain Bowl
Grain bowls are fabulously flexible. You can swap out ingredients depending on what you have on hand. For example, this recipe calls for deliciously chewy wheat berries, but you could use farro (another type of wheat) if you prefer. We use lightly cooked tuna steak here, but you can make it with canned tuna, too.

THE MIX
COOKED WHEAT BERRIES + TUNA STEAK, 2 HARD-BOILED EGGS, STEAMED GREEN BEANS, GRAPE TOMATOES, KALAMATA OLIVES, FETA CHEESE

MAKE IT
Spray a heavy-bottom skillet with cooking spray and heat over medium-high heat. Season tuna steak with salt and pepper and add to skillet. Cook, uncovered, for 6 to 9 minutes or until fish begins to flake when tested with a fork but is still pink in the center, turning once halfway through cooking. Remove from heat and cut into 12 slices. Prepare the Lemon-Thyme Vinaigrette, above. In each of four bowls, arrange wheat berries, tuna slices, half an egg, green beans, grape tomatoes, and olives. Spoon dressing over each bowl, garnish with crumbled feta, and serve.
SERVES 4

PER SERVING (1 CUP WHEAT BERRIES AND VEGETABLE WITH ¼ EGG AND 3 OUNCES TUNA)
399 calories, 28 g protein, 31 g carbohydrate, 18 g fat (4 g saturated fat), 152 mg cholesterol, 5 g fiber, 4 g sugar, 400 mg sodium. Calories from fat: 33%

3 Asian-inspired

Thai Salmon Grain Bowl
This bowl is a cool treat on a warm evening. It combines sweet and sour flavors with satisfying crunch. Some of the crunch comes from bok choy, a mild relative of cabbage with wide celery-like stalks and bright green leaves. Find it in most large grocery store produce sections.

THE MIX
COOKED BROWN RICE + COOKED SALMON, STEAMED SHELL EDAMAME, RED SWEET PEPPER, BOK CHOY, MANGO, DRY-ROASTED UNSALTED PEANUTS, CILANTRO, LIME

MAKE IT
Make the dressing: Whisk together 1 tbsp each of lime juice, soy sauce, and peanut butter with 1 tsp rice vinegar. Set aside. In each of four bowls, arrange ½ cup brown rice, 3 oz cooked salmon, edamame, thinly sliced red pepper, chopped bok choy, and cubed mango. Spoon dressing over each bowl, and serve topped with peanuts, chopped cilantro, and a lime wedge.
SERVES 4

PER SERVING (1½ CUPS OF RICE, VEGETABLES, AND FRUIT WITH 3 OUNCES SALMON)
536 calories, 29 g protein, 41 g carbohydrate, 29 g fat (5 g saturated fat), 53 mg cholesterol, 7 g fiber, 12 g sugar, 297 mg sodium. Calories from fat: 47%

LEMON-THYME VINAIGRETTE
Whisk together 3 tbsp extra-virgin olive oil; 2 tbsp white balsamic, cider, or sherry vinegar; 1 tbsp chopped fresh thyme; 1 tbsp fresh lemon juice; ½ tsp prepared Dijon mustard; ¼ tsp salt; and fresh ground pepper. (Recommended for the California and Greek Bowls.)

PHOTOGRAPHY: RICK LOZIER; FOOD STYLING: CHARLIE WORTHINGTON



Frittata

AN ITALIAN VARIATION ON THE OMELET, THE FRITTATA CAN BE MADE IN COUNTLESS DELICIOUS WAYS

BY Matt McMillen

REVIEWED BY Hansa Bhargava, MD, WebMD Senior Medical Editor

FOR MICHAEL RUHLMAN, THE JAMES BEARD AWARD-WINNING COOKBOOK WRITER and author of *Egg: A Culinary Exploration of the World's Most Versatile Ingredient*, cooking began with the frittata. "It was the first meal I made as a child," he says. He was in fifth grade, and he's been making them ever since. "They're simple, anyone can make them, they're nutritious, they're economical, they're delicious, and they make a great meal for breakfast, lunch, or dinner," he says. Follow his tips for a better frittata.

MAKE IT

- Use a non-stick 8- or 10-inch sauté pan so that the frittata easily slides out when done. Make sure it's oven-safe (no plastic handles).
- Keep it light. Plan for two eggs per person and season them with salt when you whisk them.
- Fresh eggs from a farmers market or, even better, from a friend who raises chickens make the best frittatas. But don't worry if those aren't options: You'll do just fine with generic supermarket eggs.
- Personalize it. Let the cheese you use match your taste and mood. Cheddar, Comté, and Emmentaler all shine in a frittata, but if you prefer smoked Gouda or crave a stinky cheese like Taleggio, toss those in.
- Prep your fillings. Some classic fillings—potatoes, mushrooms, and spinach, for example—need to be cooked in advance. Corn, however, can go in raw. Some vegetables, like broccoli, become mushy and should be left out.
- Work in stages. Cook on the stovetop until the edges begin to set, then slide the pan into the oven. To test doneness, give the pan a quick shake. It's ready once the center barely jiggles.
- Serve it in wedges alongside a salad. Having a party? Make it an hors d'oeuvre: Cut it into small squares and serve at room temperature.

SALAD KITS

THE EASIEST SALAD? ONE THAT'S ALREADY MADE, LIKE THESE SALAD KITS SELECTED BY REGISTERED DIETITIAN MELISSA JOY DOBBINS, MS, CDE, HOST OF THE "SOUND BITES" PODCAST.

THE OPINIONS EXPRESSED IN THIS SECTION ARE OF THE EXPERTS AND ARE NOT THE OPINIONS OF WEBMD. WEBMD DOES NOT ENDORSE ANY SPECIFIC PRODUCT, SERVICE, OR TREATMENT.



TRADER JOE'S YELLOW CURRY CHOPPED SALAD KIT

"This delicious Indian-inspired kit, with red and green cabbage, carrots, naan chips, and more, packs a lot of bold flavor in its ginger lime vinaigrette, so consider dressing it to taste."



TAYLOR FARMS SOUTHWEST CHOPPED SALAD KIT

"Love cilantro? This is your salad. The creamy cilantro dressing—no added sugars—pairs perfectly with the green cabbage, romaine lettuce, carrots, pepitas, green onion, and tortilla strips."



WHOLE FOODS 365 SWEET KALE SALAD KIT

"Slightly sweet with only a little added sugar, this salad boasts more fiber than the others with broccoli, Brussels sprouts, green cabbage, radicchio, dried cranberries, and pumpkin seeds and a zesty poppy seed dressing."



TAYLOR FARMS ASIAGO KALE CHOPPED KIT

"The Parmesan croutons and aged Asiago cheese add hints of Italy to this salad of shaved Brussels sprouts, tender kale, and radicchio dressed with lemon garlic vinaigrette."



TRADER JOE'S GOCHUJANG CHOP SALAD KIT

"This Korean-style kit has a spicy yet sweet vinaigrette to flavor its nutritious blend of cabbage, lettuce, carrot, celery, and radishes, while puffed brown rice and black sesame seeds add crunch."

Fresh Herbs

EGGS, SOUPS, PIZZA, PASTA, SALADS, STEWS—REALLY JUST ABOUT ANY DISH YOU PREPARE—TASTE BETTER AND BRIGHTER WITH FRESH HERBS

BY Matt McMillen
REVIEWED BY Hansa Bhargava, MD,
WebMD Senior Medical Editor

FOR NIK SHARMA, CREATOR OF THE POPULAR FOOD BLOG A Brown Table and author of the cookbook *Season: Big Flavors, Beautiful Food*, fresh herbs add flavor and more. “The color contrast they add, those bright greens, makes a dish seem lighter and much more appetizing,” he says. “And they’re such a cheap way to change the flavor profile of what you cook.” Here are his five essential herbs:

1. CURRY LEAVES

“Fragrant and unique, fresh leaves can be ground for marinades, sauces, and, naturally, curries. Or, infuse their flavor into hot oil that can then be used to make a vinaigrette.”

2. FENNEL FRONDS

“This is such an aromatic herb, with its strong anise scent. Add the delicate fronds to seafood dishes or to yogurt and reserve the tough stalks to use in stocks.”

3. CILANTRO

“With faint hints of citrus, this herb works wonderfully as a garnish and in marinades and dressings—both leaves and chopped stems—and it pairs perfectly with cooked spinach.”

4. FLAT-LEAF PARSLEY

“Much more citrus-forward than cilantro, this all-purpose herb should always be on hand. Scatter it on just about everything, especially eggs. Just a little bit amplifies their flavor.”

5. CHIVES

“There are so many kinds to choose from. Their pretty, edible flowers make an ideal garnish, and you can liven up ground beef or ground lamb with the potent flavor of garlic chives.”

PHOTOGRAPHY: RICK LOZIER; FOOD STYLING: CHARLIE WORTHINGTON



Look for the slideshow
Spices and Herbs to
Pump Up the Flavor
at WebMD.com.

THE LATEST

Hearing Loss

HEARING LOSS IS A FRUSTRATING BUT COMMON PART OF GROWING OLDER. ALMOST THREE-QUARTERS OF ADULTS OLDER THAN 70 HAVE SOME TROUBLE HEARING.



ALL TOLD, HEARING LOSS AFFECTS AN ESTIMATED 37.5 MILLION AMERICANS. Yet relatively few adults who could benefit from hearing aids use them. Among those younger than 70, fewer than one in five use hearing aids. Older than 70, just under one in three who are hard of hearing use the devices. But getting help can head off bigger problems down the road.

When you can't hear as well as you used to, needless to say, you miss a lot. That drives many people to think they are losing their memory instead. New research shows that more than half of the people who see their doctor about memory and thinking concerns have a hearing problem. Many don't have memory loss at all.

Trouble hearing, however, can be a precursor to a decline in memory and thinking skills. In a study that followed 1,164 adults around age 73 for up to 24 years, about 70% had some degree of hearing impairment at the start of the study. During the years of follow-up, the older adults took

tests of their brain function. Those with severe hearing loss since the start of the study got the lowest scores on the test, and their thinking skills slipped fastest over the years to come. Any hearing difficulty was linked to swifter decline in thinking than those whose hearing held steady, but education helped make up for mild impairment. In another study of older adults, those who had minor loss were twice as likely as their fully hearing peers to have signs and symptoms of depression.

However, age-related hearing loss is not an irreversible fate. Hearing aids help. Until recently, though, cost, lack of insurance coverage for the devices, and a required medical appointment have put them out of reach for many people. A new federal law is designed to bring lower-cost, over-the-counter hearing aids to the market by the end of 2020. Preliminary studies show that many of the devices that could be available under the new law work just as well as their more expensive, prescription counterparts. —SONYA COLLINS

Quality News

SOME IMPORTANT THINGS TO KNOW ABOUT YOUR MEDICATIONS

RECENT ARTICLES HAVE PROMPTED QUESTIONS REGARDING THE QUALITY OF THE NATION'S DRUG SUPPLY. **Michael Kopcha, PhD, RPh**, director of the Office of Pharmaceutical Quality at the FDA, answers some questions about drug quality.

Q How does the FDA assure the quality of drugs in the U.S.?

KOPCHA All drugs must consistently and safely provide their intended benefit. To do this, drug manufacturers must meet quality standards that ensure every dose of a drug is of the appropriate strength and free of contamination and defects. The FDA assesses a drug—and its manufacturing process—before approving it.

Surveillance programs continue after a drug is on the market so we can check that manufacturers correct any problems as soon as possible. The FDA also conducts inspections of drug manufacturing facilities to ensure compliance with our requirements. We prioritize these inspections based on facilities and drugs that pose the greatest potential risk to patients.

Q Are drugs legally marketed in the U.S. but made outside of the U.S. of lower quality than drugs made domestically?

KOPCHA There is no difference in the quality of drugs legally marketed in the U.S. based only on their origin. The FDA has the same quality standards and conducts the same inspections of manufacturing facilities around the globe. We also did a test. We bought 323 different drugs legally marketed in the U.S. but made around the world—including more than 100 from India. All samples met the tested quality standards regardless of the drug's origin.

Q Are generic drugs of lower quality than brand-name drugs?

KOPCHA Generic drugs have the same risks, benefits, and quality as brand-name drugs. They use the same active ingredients and work the same way. Generic drugs go through a rigorous assessment prior to receiving FDA approval. We conduct inspections of generic drug manufacturing facilities to ensure compliance with good manufacturing practices. The FDA monitors brand-name and generic drugs to make sure manufacturers produce safe, effective, quality medicines for patients.

BY THE NUMBERS

252

Number of drug manufacturing facility inspections in India in 2018, an all-time high.

around
80%

Percentage of manufacturing facilities for active ingredients in drug products located outside the U.S.

around
80%

Percentage of respondents to a WebMD.com survey who felt generic drugs were of equal quality to the prescription brand-name version.

around
80%

How much lower the cost of a generic drug is, on average, compared to a brand-name drug.





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ALMOST HALF OF AMERICANS TAKE AT LEAST ONE PRESCRIPTION DRUG, while more than 12% take five or more prescription drugs, putting pharmacists on the frontlines as health care providers.

EXPERT KNOWLEDGE, ACCESSIBLE ADVICE
 Pharmacists field requests about medications used to treat complex diseases and common conditions. You'll find them in hospitals, medical clinics, and nursing homes, but 45% work in retail pharmacies, dispensing prescription drugs and helping customers find the right over-the-counter medications for ailments such as fevers, headaches, toothaches, and athlete's foot.

These medication specialists advise patients about correct dosing and possible drug interactions. Research shows that having a pharmacist on a health care team helps boost medication adherence (that is, patients taking their prescription drugs when they should in the correct dosage).

BEYOND MEDICATION
 Dispensing medication and advising on correct use is a big part of what pharmacists do, but many also perform blood pressure monitoring, cholesterol screening, and bone density scans; they are also licensed to give immunizations. Pharmacists help patients minimize the financial burdens of filling their prescriptions, offering information about generic alternatives and programs to help cover medication costs.

HIGH-TECH HEALTH CARE PROS
 Pharmacists, who must earn doctoral degrees and pass licensing exams, are passionate about patient care. New technologies tackle manual tasks like counting, sorting, packaging, and dispensing medications to give pharmacists more time to devote to patient education. In fact, robots are becoming more common in hospital pharmacies and may debut in drug stores in the near future.

WHO'S WHO

Pharmacist

IF YOU'VE EVER FILLED A PRESCRIPTION OR ASKED FOR ADVICE ON WHICH OVER-THE-COUNTER MEDICINE TO CHOOSE, YOU'VE BENEFITTED FROM A PHARMACIST'S EXPERT KNOWLEDGE

BY Jodi Helmer

REVIEWED BY Brunilda Nazario, MD, WebMD Senior Medical Editor

BY THE NUMBERS

282,000
 Number of licensed pharmacists in the U.S.

57.5%
 Percentage of female pharmacists.

13%
 Percentage of pharmacists who work in hospitals.

4.7 billion
 Projected number of prescriptions that will be filled in 2021.

GETTY IMAGES

Test Time

FIND OUT WHEN THESE FOUR SCREENINGS CAN BE BENEFICIAL TO YOUR HEALTH



BY John Whyte, MD, MPH,
WebMD Chief Medical Officer

IT'S OFTEN SAID OUR HEALTH CARE SYSTEM IS DESIGNED TO TREAT SICK PEOPLE, NOT PEOPLE WHO ARE DOING FINE. Sometimes that results in missed screening tests people need to have as they get older. Talk to your doctor about these four tests to help minimize your risk of certain health conditions.

1. COLON CANCER SCREENING

I find this is the test that people often cancel at the last minute or simply don't show up to do. I recognize that many people find the thought of the procedure as just too unpleasant. But now we have less invasive tests available, and even the preps used to clean out the colon are easier to drink and more tolerable. Current recommendations by most insurers are that people of normal risk get a colonoscopy every 10 years starting at age 50. Given some data that shows colon cancer is increasing in people younger than 50, the American Cancer Society recently recommended people of average risk start at age 45.

2. ULTRASOUND FOR ABDOMINAL AORTIC ANEURYSM

We often hear about aneurysms in the brain, but they can also happen in the part of the aorta (the main artery in the body) located in the abdomen. If an aneurysm bursts, death is almost always certain. Luckily, we have tests than can help diagnose an aneurysm before it bursts.

If you have a family history of an abdominal aneurysm or if you are a man aged 65 to 75 who has ever smoked cigarettes during your lifetime, you should get an ultrasound of your abdomen at least once.

3. LUNG CANCER SCREENING

We have learned over the years that routine, yearly chest X-rays are not cost-effective for diagnosing lung cancer. However, doctors do recommend a low-dose CT scan for anyone 55 to 80 who has a 30-pack-year smoking history (that is, one pack of cigarettes per day for 30 years) and currently smokes or has quit within the last 15 years.

4. COMPREHENSIVE EYE EXAMS

Vision plays such an important role in everyone's life. Even an inability to read fine print that often occurs as you age can decrease quality of life. Unfortunately, eye conditions such as glaucoma and macular degeneration often have no symptoms until vision loss is significant. That's why it is so important to get comprehensive eye exams. The American Academy of Ophthalmology recommends that most adults have such an exam at age 40. For adults 40 to 54 with no risk factors, the screening recommendation is every two to four years. If you're 55 to 64, you should be screened every one to three years; if you're older than 65, you should receive a comprehensive eye exam every one to two years.

Questions? Comments? Email me at john@webmd.com.

Search for the slideshow
**Over 50? These Problems
Can Sneak Up on You** at
WebMD.com.

Living Liver Donors

HELP FOR THOSE WAITING FOR TRANSPLANTS

BY Matt McMillen REVIEWED BY Hansa Bhargava, MD, WebMD Senior Medical Editor

RIGHT NOW, NEARLY 14,000 PEOPLE ARE ON A NATIONWIDE WAITING LIST FOR A LIVER TRANSPLANT. While the number of liver transplants performed annually has risen significantly during the past decade, the demand still far exceeds the supply. In 2018, fewer than 60% of those on the waiting list received a transplant.

"There are more patients than we have organs," says transplant surgeon Joseph DiNorkia III, MD. "In the U.S., we have a national, well-organized system to procure livers, but even with that there are patients who die on the waiting list. Living donors can play a big role in filling the gap."

A living donor volunteers to have a portion of her or his liver surgically removed for transplant. Most often, says DiNorkia, who directs the Living Donor Transplant Program at UCLA, such a donor is a family member, close friend, or loved one of the recipient, who has end-stage liver disease. But some people offer to donate to strangers, what's called a non-directed donation. "We do see a fair number who just want to do something good," says DiNorkia.

Currently, though, only about 5% of liver transplants come from living donors. Donors who have recently died account for the remaining 95%. Compare those numbers to kidney transplant statistics: 40% of kidney donors are living donors.

DiNorkia says that lack of public awareness about living liver donation explains much of that

dramatic discrepancy. Many people know that they have two kidneys and that, given the right circumstances, they can spare one to save the life of someone in need. "But," says DiNorkia, "people often wonder, *How can I be a living donor when I only have one liver?*"

It's true that you can't live without your liver. It performs too many essential functions as part of your digestive system. However, it has a remarkable ability to regenerate. While recovery times may vary, that means the portion of the donor's liver that gets removed will grow back within a few months. Meanwhile, the transplanted portion will grow into a fully functioning liver in the recipient.

When waiting for a liver from a deceased donor, those most severely ill get highest priority. Living donor programs work differently. They allow doctors to plan procedures when patients who need a transplant are still relatively healthy—compared to the sickest of the sick—and when the benefits of the surgery are more likely to outweigh its risks, says DiNorkia. He calls it "a paradigm shift."

DiNorkia hopes that as awareness grows, so will the ranks of volunteer donors. He finds them quite inspirational. "You can tell them about all the potential risks of complications from surgery, but they don't care," says DiNorkia. "They just want to help."

For more information, go to webmd.com/livingdonor.

QUESTIONS FOR YOUR DOCTOR

DO I QUALIFY TO BE A LIVING DONOR?

Criteria vary, but, in general, you must be a healthy adult, and some facilities require you to have a blood type that matches the recipient's. You will undergo a thorough medical evaluation before you become a donor.

WHAT ARE THE RISKS?

As with any surgery, complications may occur, including infections, bleeding, and blood clots. While rare, it's possible that you would not survive the procedure.

WHO PAYS THE COSTS?

Most commonly, the recipient's insurance will cover all medical fees, but you should confirm that and understand any costs, such as travel, that you might be required to pay.

HOW LONG WILL IT TAKE TO RECOVER?

While it varies, you should expect to spend a week in the hospital, then up to two months recuperating at home before returning to work or regular activities.

Medical Devices

BY Matt McMillen REVIEWED BY Brunilda Nazario, MD, WebMD Senior Medical Editor

 Search for the article **Obstructive Sleep Apnea: Gadgets and Devices** at [WebMD.com](https://www.webmd.com).

**\$156
BILLION**

Size of the **U.S. medical device market**



1/4"
Approximate length
of the **world's
smallest pacemaker**

#1

**Rank of wearable
devices** in 2019
fitness trends

69%

Percentage of **home
blood pressure monitors**
deemed inaccurate

400,000

Number of people with **type 1 diabetes**
who use an **insulin pump**



1984

Year the FDA approved
the **first cochlear implant**

**28.8
MILLION**

Number of U.S. adults who could
benefit from hearing aids



1 IN 3

People with sleep
apnea who **don't use**
their **CPAP device**

2 IN 3

CPAP users whose **sleep**
improved while using
their **device**

1

The number of
**artificial heart
models approved**
by the **FDA**

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On Your Mind

NEARLY ONE IN FIVE AMERICANS—ALMOST 45 MILLION PEOPLE—LIVE WITH A MENTAL ILLNESS. DO YOU KNOW THE DIFFERENCE BETWEEN DEPRESSION, BIPOLAR DISORDER, AND OTHER MENTAL HEALTH CONDITIONS? TAKE THIS QUIZ TO FIND OUT.

BY Stephanie Watson

REVIEWED BY Brunilda Nazario, MD, WebMD Senior Medical Editor

1

IF YOU'VE BEEN SAD FOR A WHOLE WEEKEND, YOU COULD BE DEPRESSED.

☐ TRUE

☐ FALSE

2

BACK PAIN, STOMACHACHES, AND HEADACHES CAN BE SYMPTOMS OF DEPRESSION.

☐ TRUE

☐ FALSE

3

COLD TEMPERATURES CAUSE SEASONAL AFFECTIVE DISORDER (SAD).

☐ TRUE

☐ FALSE

4

PERSISTENT DEPRESSIVE DISORDER IS A SHORT-TERM FORM OF DEPRESSION.

☐ TRUE

☐ FALSE

5

PEOPLE WITH BIPOLAR DISORDER CYCLE BETWEEN PERIODS OF ELATED, DEPRESSED, AND NORMAL MOODS.

☐ TRUE

☐ FALSE

6

SCHIZOPHRENIA CAN CAUSE A "FLATTENING" EFFECT THAT MAKES PEOPLE SEEM DISCONNECTED FROM THE WORLD AROUND THEM.

☐ TRUE

☐ FALSE

ANSWERS

1. FALSE

To qualify for a diagnosis of major depression (also called clinical depression), you need to have severe symptoms that interfere with your daily life for at least two weeks.

2. TRUE

Not all depression symptoms are mood-related. You can also have physical symptoms such as headaches, stomachaches, or weight loss.

3. FALSE

The lack of sunlight throws off your body's natural clock, which leads to depression in the winter months. Shorter days also cause you to overproduce melatonin—a hormone that makes you feel sleepy.

4. FALSE

People with persistent depressive disorder (also called dysthymia) alternate between major depression and milder depressive symptoms, which last for at least two years.

5. TRUE

People with bipolar disorder have severe mood swings. They go from periods of elation to severe depression, sometimes with normal moods in between.

6. TRUE

Along with hearing and seeing things (hallucinations) and having false thoughts (delusions), people with schizophrenia can have a flattening of emotions that looks like depression.

 Search for the **Mental Health Message Board** at [WebMD.com](https://www.webmd.com).



1. YOUR YOUNGER DAUGHTER, PALOMA ("PIPPA"), HAS DOWN SYNDROME (DS). INSTEAD OF TALKING ABOUT THE "RISK" OF HAVING A CHILD WITH DOWN, YOU SAY THAT WE SHOULD TALK ABOUT THE "CHANCE" OF THAT HAPPENING—JUST LIKE THE "CHANCE" OF HAVING A BOY OR A GIRL. WHY IS THAT IMPORTANT?

I want to help people expand their understanding of what it is to love a person who isn't "typical" or who is living with a disability. Down Syndrome is a genetic variation and there are lots of genetic variations. There isn't one particular way that a person should be to have value. Life with Pippa is one of the richest gifts our family has ever received.

2. HOW DID YOU AND YOUR HUSBAND, ROB GILES, REACT WHEN YOU FOUND OUT THAT PIPPA HAD DS?

The truth is that having any child is challenging! You get to know your baby and you figure out her needs just like you do with a typical kid.

3. WHAT IS THE RELATIONSHIP LIKE BETWEEN PIPPA AND YOUR OLDER DAUGHTER, ELIZA, 6?

We wondered if Pippa having DS would affect things between them, but it has really unfolded just like any other sibling relationship.

4. WHAT HAVE YOU LEARNED FROM GETTING INVOLVED WITH A COMMUNITY OF FAMILIES WHO HAVE KIDS WITH DOWN SYNDROME?

They helped me realize that parenting a child with DS is just a learning curve as with any child. And they have so many helpful insights, like the best places to get physical therapy.

5. YOU HELPED OUT WITH YOUR NIECE'S BIRTH AND WORKED WITH A MIDWIFE WHEN YOU FIRST CAME TO LOS ANGELES. WHAT WAS THAT LIKE?

After I was the doula for my sister's home birth, I read the famous guide to natural childbirth by midwife Ina May Gaskin, who founded The Farm Midwifery Center in Tennessee. I was



Caterina Scorsone

Actor, Los Angeles

"I WANT TO HELP PEOPLE EXPAND THEIR UNDERSTANDING OF WHAT IT IS TO LOVE A PERSON WITH A DISABILITY."

so inspired that I decided to go to The Farm and train to be an assistant midwife. Then I came back to Los Angeles to apprentice with some midwives here.

6. DID THAT AFFECT YOUR OWN EXPERIENCE OF PREGNANCY?

Oh, yes! It's fundamentally redefined pregnancy and birth for me, to see it as an incredible, miraculous, powerful thing that women have evolved over millions of years to do really well.

7. HOW ARE YOU MOST AND LEAST LIKE YOUR GREY'S ANATOMY CHARACTER, DR. AMELIA SHEPHERD?

We're alike in eye color, height, and facial structure—that's about it! One of the things I really like about acting is that it helps people develop their capacity for empathy and compassion. Her character began as someone facing addiction and trauma, and over time we've taken her from being stuck in her trauma to someone who's being of service to others. I love portraying that journey of healing.

8. WHAT'S THE ONE THING THAT'S MOST IMPORTANT IN TAKING CARE OF YOURSELF?

I've been practicing yoga since I was 16 years old.

9. DOES YOGA HELP YOU AS AN ACTOR?

Definitely! Breath control and body awareness can be a great way to connect to a character and also to connect to yourself.

10. WHAT ARE YOUR GOALS FOR YOURSELF FOR THE NEXT YEAR?

I want to approach community-building in the present moment and doing small things with care and with love, as opposed to setting my eyes on a later date or a bigger role that might bring community to me later.

—GINA SHAW