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the Magazine | October 2011 \$4.95

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I am an
over-the-counter
overexplainer.



ask me anything about anything.  PHARMACY®

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40 wellness Queen Christina

You know her as gorgeously curvy, feisty Joan on *Mad Men*, and now **Christina Hendricks** is expanding her repertoire with two new movies: *I Don't Know How She Does It*, co-starring Sarah Jessica Parker, and the thriller *Drive*, opposite Ryan Gosling. Hendricks tells WebMD contributing writer **Rebecca Ascher-Walsh** how she stays fit and grounded on and off the set and why this Idaho-born beauty would rather be home cooking than striking a pose on the red carpet. **PLUS:** Christina's tips for learning to love the skin you're in.

cancer 10 Symptoms Women Should Never Ignore

A bit of bloating and feeling fatigued is normal for women, but if both get out of hand, pay attention, health experts say. WebMD contributing writer **Christina Boufis** reports on the top 10 symptoms women should keep on their radar screen when it comes to cancer awareness and prevention efforts. **PLUS:** Three simple ways to reduce your risk today.





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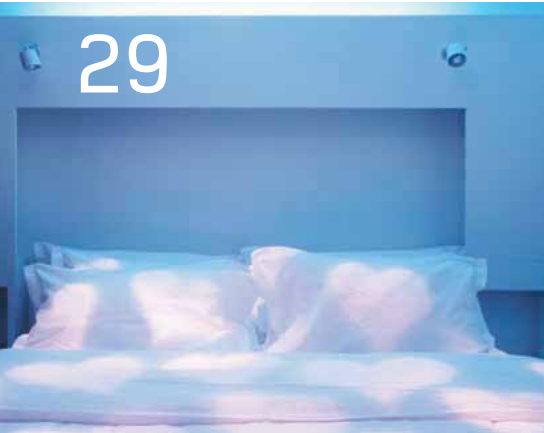


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Giving back. We celebrate those two words in each issue of *WebMD the Magazine*, and this month is no different.

Our cover star, *Mad Men*'s **Christina Hendricks**, might just be the most drop-dead gorgeous secretary in the annals of television, but off the set she couldn't be more down-home (she'd rather be knitting than on the red carpet, loves spaghetti and meat sauce, and she de-stresses in the bathtub). She also spends quality time with sick children through the Latisse Wishes Foundation, an offshoot of Make-a-Wish Foundation, which she first heard

about when she was age 7—a classmate who was ill got to meet a favorite TV star. Hendricks acted on that childhood memory years later. (For her story, see page 40.)

Director **Patty Jenkins** (who directed the award-winning *Monster* in 2003) also drew on past memories, specifically of her grandmother and close friend, while making *Pearl*, one of the films in the anthology *Five*, part of LifetimeTV's "Stop Breast Cancer for Life" initiative, which debuts October 10. Taking an honest look at women's perceptions of the disease is Jenkins' way of giving back to those who have been touched by breast cancer—which, she notes, is just about everyone. (See page 18.)

Kathy Bates tells us how she got a wake-up call about the importance of not taking things in life for granted when she found out she had ovarian cancer—but only after a friend pointed out how unwell she looked. Today, the actor is active with the Ovarian Cancer National Alliance, which helps women pay attention to their bodies and their health, especially when it comes to the subtle symptoms of this cancer. (See page 59.)

Finally, a different kind of "giving back": Nan Forte, the editor in chief and founding editor of this magazine, has moved on to a new opportunity in online travel six years after this publication's launch and 13 years after joining WebMD.

We created *WebMD the Magazine* because we care enormously about you, sitting in your doctor's office with a thousand questions on your mind. Nan understood that more is not necessarily better when it comes to health information. How do you make sense of it all? To that end, she wanted to create a truly helpful waiting room companion, something that would focus, guide, and inspire you to make the most of your visit and help you make better health and wellness decisions for you and your family, every day of your life.

On behalf of the entire WebMD staff, I'd like to say: Thank you, Nan. We are smarter (and healthier!) thanks to you. We will continue to give back generously with every new issue of the magazine.

Colleen Parethy
Colleen Parethy
Executive Editor, WebMD the Magazine



I REFUSE TO SURRENDER TO RA

"I'm taking charge of my fight against RA.
I talked to my doctor about something different."

Linda J. Living with RA since 1989

For adults with moderately to severely active RA after at least one anti-TNF treatment has been used and did not work well.

ACTEMRA IS THE FIRST AND ONLY TREATMENT TO BLOCK THE ACTION OF IL-6. This is one of the substances in the body that can contribute to the signs and symptoms of rheumatoid arthritis (RA), including pain, swelling and joint damage.

- **ACTEMRA HAS BEEN PROVEN TO WORK** for some people who had previously used anti-TNF treatments that did not work well such as Enbrel® (etanercept), Humira® (adalimumab) and Remicade® (infliximab)
— In a 6-month study, about half the patients taking ACTEMRA reduced the signs and symptoms of RA (also known as ACR20)
- **ACTEMRA STOPS JOINT DAMAGE:** In a 1-year study, the progression of joint damage stopped for most patients taking ACTEMRA at the 8 mg/kg dose in combination with methotrexate
- **ACTEMRA CAN CAUSE SIDE EFFECTS**

Read Linda's story at ACTEMRA.com or call (800) ACTEMRA and speak with a nurse, live.

This information does not take the place of talking to your healthcare provider about either your medical condition or your treatment with ACTEMRA. Talk with your healthcare provider if you have any questions about your treatment with ACTEMRA.

INDICATION

ACTEMRA is a prescription medicine called an interleukin-6 (IL-6) receptor inhibitor. ACTEMRA is used to treat adults with moderately to severely active rheumatoid arthritis (RA) after at least one other medicine called a Tumor Necrosis Factor (TNF) antagonist has been used and did not work well.

IMPORTANT SIDE EFFECT INFORMATION

- Some people have serious infections while taking ACTEMRA, including tuberculosis (TB), and infections caused by bacteria, fungi or viruses that can spread throughout the body
- Some people have died from these infections

Other serious side effects of ACTEMRA include tears (perforation) of the stomach and intestines, changes in blood test results (including low neutrophil count, low platelet count, increase in certain liver function tests and increase in blood cholesterol levels), hepatitis B infection becoming an active infection again and nervous system problems.

Serious allergic reactions, including death, can happen with ACTEMRA. These reactions may happen with any infusion of ACTEMRA, even if they did not occur with an earlier infusion. Patients must tell their doctor if they have

had a previous reaction to ACTEMRA. Patients should not take ACTEMRA if they are allergic to it or any of its ingredients.

Common side effects with ACTEMRA in patients with RA include upper respiratory tract infections (common cold, sinus infections), headache and increased blood pressure (hypertension).

Patients must tell their healthcare provider if they plan to become pregnant or are pregnant. It is not known if ACTEMRA will harm an unborn baby. Genentech has a registry for pregnant women who take ACTEMRA. Patients who are pregnant or become pregnant while taking ACTEMRA must contact the registry at 1-877-311-8972 and talk to their healthcare provider.

Patients must call their healthcare provider for medical advice about any side effects. Patients or caregivers may report side effects to the FDA at 1-800-FDA-1088. Patients or caregivers may also report side effects to Genentech at 1-888-835-2555.

Please see the Brief Summary of Prescribing Information on following pages. Please see full Prescribing Information, including **Boxed Warning** and Medication Guide, for additional important safety information.

 **ACTEMRA®**
tocilizumab

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For more information about ACTEMRA, visit ACTEMRA.com or call (800) ACTEMRA.

Once you've completed the questionnaire, detach it and moisten the edges. Refold, seal and mail it back. No postage is required. In order to receive information, you must be over 18 years of age.

Name _____ Address _____

City _____ State _____ ZIP _____ E-mail _____

Phone _____ Year of birth _____ Gender ☐ M ☐ F

Please answer the questions below so that we may provide the communications most relevant to you.

Are you a patient or caregiver?	<input type="radio"/> Patient	<input type="radio"/> Caregiver
Have you/Has the person you care for been diagnosed with RA?	<input type="radio"/> Yes	<input type="radio"/> No
Have you/Has the person you care for been prescribed medication for RA?	<input type="radio"/> Yes	<input type="radio"/> No

Please think about the past week and indicate your ability to perform the following daily activity using the scale below.

In the past week, how able were you to get into and out of a car?			
<input type="radio"/> Without Any Difficulty	<input type="radio"/> With Some Difficulty	<input type="radio"/> With Much Difficulty	<input type="radio"/> Unable to Do

ACTEMRA® (tocilizumab) is a prescription medicine called an interleukin-6 (IL-6) receptor inhibitor. ACTEMRA is used to treat adults with moderately to severely active rheumatoid arthritis (RA) after at least one other medicine called a Tumor Necrosis Factor (TNF) antagonist has been used and did not work well.

Important Side Effect Information
ACTEMRA is a medicine that affects your immune system. ACTEMRA can lower the ability of your immune system to fight infections. Some people have serious infections while taking ACTEMRA, including tuberculosis (TB), and infections caused by bacteria, fungi or viruses that can spread throughout the body. Some people have died from these infections.

Do not take ACTEMRA if you are allergic to tocilizumab, or any of the ingredients of ACTEMRA. Talk to your doctor if you have any questions.

FOLD IN FIRST →

Have you taken any of these medications? (Please check all that apply)

	Currently Taking	Formerly Took
ACTEMRA® (tocilizumab)	<input type="radio"/>	<input type="radio"/>
Cimzia® (certolizumab pegol)	<input type="radio"/>	<input type="radio"/>
Enbrel® (etanercept)	<input type="radio"/>	<input type="radio"/>
Humira® (adalimumab)	<input type="radio"/>	<input type="radio"/>
Kineret® (anakinra)	<input type="radio"/>	<input type="radio"/>
Orencia® (abatacept)	<input type="radio"/>	<input type="radio"/>
Remicade® (infliximab)	<input type="radio"/>	<input type="radio"/>
Simponi® (golimumab)	<input type="radio"/>	<input type="radio"/>
Other biologics	<input type="radio"/>	<input type="radio"/>
Methotrexate or other traditional DMARDs (Arava® (leflunomide), Plaquenil® (hydroxychloroquine), etc)	<input type="radio"/>	<input type="radio"/>
None of the above	<input type="radio"/>	<input type="radio"/>

How long have you been taking the current treatment?

<input type="radio"/> 1-3 months	<input type="radio"/> 1 to 2 years
<input type="radio"/> 4-6 months	<input type="radio"/> 2+ years
<input type="radio"/> 7-12 months	<input type="radio"/> Not on treatment

Brand names mentioned above are registered trademarks of their respective companies.

Please see Brief Summary of full Prescribing Information, including **Boxed Warning** and Medication Guide, for important safety information on following pages.

Which of the following best describes how you discussed your current RA treatment with your doctor? (Select one)

My doctor presented multiple treatment options and asked for my preference.	<input type="radio"/>
My doctor presented multiple treatment options and then made a recommendation.	<input type="radio"/>
My doctor presented a single treatment and I agreed to it.	<input type="radio"/>
My doctor and I discussed a medication that I had specifically asked for.	<input type="radio"/>
Other	<input type="radio"/>

What type of physician are you seeing?

<input type="radio"/> Rheumatologist	<input type="radio"/> Primary Care Physician	<input type="radio"/> Other
--------------------------------------	--	-----------------------------

Moisten to seal

For this next question, we are now going to discuss a specific group of prescription drugs for RA known as biologic disease-modifying antirheumatic drugs, or biologic DMARDs. As you may know, these drugs help to relieve pain and inflammation by working on the body's immune system and are administered by a self-injection or by intravenous (IV) infusion.

Prior to today, how familiar were you with the group of RA drugs known as biologic DMARDs?

<input type="radio"/> Extremely Familiar	<input type="radio"/> Very Familiar	<input type="radio"/> Somewhat Familiar	<input type="radio"/> Not Very Familiar	<input type="radio"/> Not at All Familiar
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Please review each of the statements below and indicate how much you agree or disagree.

	Agree Completely	Agree Somewhat	Disagree Somewhat	Disagree Completely
My RA significantly affects my life with family and friends.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I wish my doctor would give me more RA medication options than he or she does now.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Biologic medications are the most effective way to treat the signs and symptoms of RA.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can see myself going to the Internet to get more information about a medication I've seen advertised.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

By submitting this form, you agree to allow Genentech, Inc. and their agents to collect the information provided, to receive product-specific communications and communications relevant to your condition from Genentech, Inc. and their agents, and to the terms of our Privacy Policy. Please read our complete Privacy Policy at ACTEMRA.com to learn more about our use of your information.

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Setting
goals for
success



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continuing support in your fight against RA

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- **Treatment Tracker**
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The ACTEMRA Patient Support Program

Getting support could help you with your fight against rheumatoid arthritis (RA). That's why we've created ACTiV, the RA patient support program.

Sign up now for the free DVD. You'll also get access to:

- **Stories from other people taking ACTEMRA**
- **A Treatment Tracker to help you monitor your progress and have helpful discussions with your doctor**
- **Newsletters about ACTEMRA**
- **A nurse-staffed hotline that you can call with any questions**
- **Diet and exercise tips from experts**

Please see Brief Summary of full Prescribing Information, including **Boxed Warning** and Medication Guide, for important safety information on following pages.

ACTEMRA
tocilizumab

**ACTEMRA® (AC-TEM-RA)
(tocilizumab)**

This information does not take the place of talking to your healthcare provider about either your medical condition or your treatment with ACTEMRA. Talk with your healthcare provider if you have any questions about your treatment with ACTEMRA.

What is the most important information I should know about ACTEMRA?

ACTEMRA can cause serious side effects including:

1. Serious Infections

ACTEMRA is a medicine that affects your immune system. ACTEMRA can lower the ability of your immune system to fight infections. Some people have serious infections while taking ACTEMRA, including tuberculosis (TB), and infections caused by bacteria, fungi, or viruses that can spread throughout the body. Some people have died from these infections.

- Your doctor should test you for TB before starting ACTEMRA.
- Your doctor should monitor you closely for signs and symptoms of TB during treatment with ACTEMRA.

You should not start taking ACTEMRA if you have any kind of infection unless your healthcare provider says it is okay.

Before starting ACTEMRA, tell your healthcare provider if you:

- think you have an infection or have symptoms of an infection such as:
 - fever, sweating, or sores on or chills your body
 - muscle aches — diarrhea or stomach pain
 - cough — burning when you urinate
 - shortness of breath or urinating more often than normal
 - blood in phlegm
 - weight loss
 - warm, red, or painful skin — feel very tired
- are being treated for an infection
- get a lot of infections or have infections that keep coming back
- have diabetes, HIV, or a weak immune system. People with these conditions have a higher chance for infections.
- have TB, or have been in close contact with someone with TB
- live or have lived, or have traveled to certain parts of the country (such as the Ohio and Mississippi River valleys and the Southwest) where there

is an increased chance for getting certain kinds of fungal infections (histoplasmosis, coccidiomycosis, or blastomycosis). These infections may happen or become more severe if you use ACTEMRA. Ask your healthcare provider, if you do not know if you have lived in an area where these infections are common.

- have or have had hepatitis B.

After starting ACTEMRA, call your healthcare provider right away if you have any symptoms of an infection. ACTEMRA can make you more likely to get infections or make worse any infection that you have.

2. Tears (perforation) of the stomach or intestines.

- Before taking ACTEMRA, tell your healthcare provider if you have had diverticulitis (inflammation in parts of the large intestine) or ulcers in your stomach or intestines. Some people taking ACTEMRA get tears in their stomach or intestine. This happens most often in people who also take nonsteroidal anti-inflammatory drugs (NSAIDs), corticosteroids, or methotrexate.
- Tell your healthcare provider right away if you have fever and stomach-area pain that does not go away, and a change in your bowel habits.

3. Changes in certain laboratory test results. Your healthcare provider should do blood tests before you start receiving ACTEMRA and every 4 to 8 weeks during treatment to check for the following side effects of ACTEMRA:

- **low neutrophil count.** Neutrophils are white blood cells that help the body fight off bacterial infections.
- **low platelet count.** Platelets are blood cells that help with blood clotting and stop bleeding.
- **increase in certain liver function tests.**

You should not receive ACTEMRA if your neutrophil or platelet counts are too low or your liver function tests are too high.

Your healthcare provider may stop your ACTEMRA treatment for a period of time or change your dose of medicine if needed because of changes in these blood test results. You may also have changes in other laboratory tests, such as your blood cholesterol levels. Your healthcare provider should do blood tests to check your cholesterol levels 4 to

8 weeks after you start receiving ACTEMRA, and then every 6 months after that. Normal cholesterol levels are important to good heart health.

4. Cancer.

ACTEMRA may decrease the activity of your immune system. Medicines that affect the immune system may increase your risk of certain cancers. Tell your healthcare provider if you have ever had any type of cancer.

See “*What are the possible side effects with ACTEMRA?*” for more information about side effects.

What is ACTEMRA?

ACTEMRA is a prescription medicine called an Interleukin-6 (IL-6) receptor inhibitor. ACTEMRA is used to treat:

- Adults with moderately to severely active rheumatoid arthritis (RA) after at least one other medicine called a Tumor Necrosis Factor (TNF) antagonist has been used and did not work well.

Who should not take ACTEMRA?

Do not take ACTEMRA if you are allergic to tocilizumab, or any of the ingredients in ACTEMRA. Talk to your doctor if you have any questions.

What should I tell my healthcare provider before receiving ACTEMRA?

ACTEMRA may not be right for you. Before receiving ACTEMRA, tell your healthcare provider if you:

- have an infection. See “*What is the most important information I should know about ACTEMRA?*”
- have liver problems
- have any stomach-area (abdominal) pain or been diagnosed with diverticulitis or ulcers in your stomach or intestines
- have had a reaction to tocilizumab or any of the ingredients in ACTEMRA before
- have or had a condition that affects your nervous system, such as multiple sclerosis
- have recently received or are scheduled to receive a vaccine. People who take ACTEMRA should not receive live vaccines. People taking ACTEMRA can receive non-live vaccines
- plan to have surgery or a medical procedure
- have any other medical conditions
- plan to become pregnant or are pregnant. It is not known if ACTEMRA will harm your unborn baby.

Pregnancy Registry: Genentech has a registry for pregnant women who take ACTEMRA. The purpose of this registry is to check the health of the pregnant mother and her baby. If you are pregnant or become pregnant while taking ACTEMRA, talk to your healthcare provider about how you can join this pregnancy registry or you may contact the registry at 1-877-311-8972 to enroll.

- plan to breast-feed or are breast-feeding. You and your healthcare provider should decide if you will take ACTEMRA or breast-feed. You should not do both.

Tell your healthcare provider about all of the medicines you take, including prescription and non-prescription medicines, vitamins and herbal supplements. ACTEMRA and other medicines may affect each other causing side effects. Especially tell your healthcare provider if you take:

- any other medicines to treat your RA. You should not take etanercept (Enbrel®), adalimumab (Humira®), infliximab (Remicade®), rituximab (Rituxan®), abatacept (Orencia®), anakinra (Kineret®), certolizumab (Cimzia®), or golimumab (Simponi®), while you are taking ACTEMRA. Taking ACTEMRA with these medicines may increase your risk of infection.
- medicines that affect the way certain liver enzymes work. Ask your healthcare provider if you are not sure if your medicine is one of these.

Know the medicines you take. Keep a list of them to show to your healthcare provider and pharmacist when you get a new medicine.

How will I receive ACTEMRA?

- You will receive ACTEMRA from a healthcare provider through a needle placed in a vein in your arm (IV or intravenous infusion). The infusion will take about 1 hour to give you the full dose of medicine.
- For RA you will receive a dose of ACTEMRA about every 4 weeks.
- If you miss a scheduled dose of ACTEMRA, ask your healthcare provider when to schedule your next infusion.
- While taking ACTEMRA, you may continue to use other medicines that help treat your RA such as methotrexate, non-steroidal

anti-inflammatory drugs (NSAIDs) and prescription steroids, as instructed by your healthcare provider.

- Keep all of your follow-up appointments and get your blood tests as ordered by your healthcare provider.

What are the possible side effects with ACTEMRA?

ACTEMRA can cause serious side effects, including:

- See “*What is the most important information I should know about ACTEMRA?*”

• Hepatitis B infection in people who carry the virus in their blood.

If you are a carrier of the hepatitis B virus (a virus that affects the liver), the virus may become active while you use ACTEMRA. This happens with other biologic medicines used to treat RA. Your doctor may do blood tests before you start treatment with ACTEMRA and while you are using ACTEMRA. Tell your healthcare provider if you have any of the following symptoms of a possible hepatitis B infection:

- feel very tired
- skin or eyes look yellow
- little or no appetite
- vomiting
- clay-colored bowel movements
- fevers
- chills
- stomach discomfort
- muscle aches
- dark urine
- skin rash

• Serious Allergic Reactions.

Serious allergic reactions, including death, can happen with ACTEMRA. These reactions can happen with any infusion of ACTEMRA, even if they did not occur with an earlier infusion. Tell your healthcare provider right away if you have any of the following signs of a serious allergic reaction:

- shortness of breath or trouble breathing
- skin rash
- swelling of the lips, tongue, or face
- chest pain
- feeling dizzy or faint

• Nervous system problems.

Multiple Sclerosis has been diagnosed rarely in people who take ACTEMRA. It is not known what effect ACTEMRA may have on some nervous system disorders.

Common side effects of ACTEMRA include:

- upper respiratory tract infections (common cold, sinus infections)
- headache
- increased blood pressure (hypertension)

Tell your healthcare provider if you have any side effect that bothers you or that does not go away. These are not all of the possible side effects of ACTEMRA. For more information, ask your healthcare provider or pharmacist.

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

You may also report side effects to Genentech at 1-888-835-2555.

Genentech

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South San Francisco, CA
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healthy start ▶ GOOD FOR YOU THIS MONTH

OCTOBER

Fall into healthy habits



skin care

IN THE PAINT

With football season in full swing and Halloween on the horizon, it's prime face-painting time. But choose your paints carefully, says Mary Ruth Buchness, MD, WebMD skin care expert. "Avoid paints not specifically made for the face," she cautions, adding, "**Water-based [face] paints are much easier to remove** than oil-based." Buchness also recommends searching for fragrance-free paints, and to start with a completely bare face. To remove, she says, don't scrub; use a non-exfoliant such as Cetaphil Gentle Skin Cleanser (\$9.49) or Dove's White Beauty Bar (8-pack for \$9.84).

FREE WHEELIN'

Need a great cardio workout this fall? Hop on your bike. "If you **bike each day for a half hour**, you reduce your risk of heart disease by 50 percent or greater," says WebMD fitness expert Pamela Peeke, MD. The cardio-intensive workout "cooks calories and stays fun at the same time," Peeke adds. Want to keep your routine indoors? Consider spinning classes, which Peeke says can help burn more than 600 calories an hour while toning and strengthening quads.

fit tip



give back

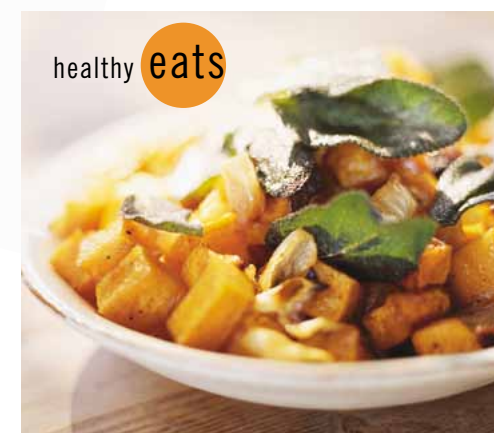
WRAP IT UP

Whether you've got birthdays coming up or are getting **a head start on the holiday gift season**, you can give and give back when you buy wrapping paper, posters, and prints from the American Cancer Society's "More Birthdays" campaign (morebirthdays.com). All proceeds go to the American Cancer Society. You can also send personalized "Happy Birthday" messages from notable celebs such as Colbie Caillat, Keith Urban, and Lady Antebellum any day of the year.

ROAST CHIEF

Bring the summer heat into your kitchen this fall. WebMD nutrition expert Carolyn O'Neil, MS, RD, says, "**Roasting brings out the nutty and naturally sweet flavors** of fall and winter vegetables, such as beets, cauliflower and Brussels sprouts." To roast, place a layer of the sliced veggie on a baking sheet, sprinkle spices, and drizzle olive oil; bake at 375°F to 425°F for 15 to 30 minutes. For a flavorful alternative drizzle, O'Neil combines maple syrup and citrus juices.

healthy eats



Get more tips for staying **fit and healthy** this fall.  **WebMD.com**



Think the germiest thing in your house is the toilet bowl? Think again—it might be the sponge you're using on your cereal bowls.

The nonprofit NSF International interviewed 22 families about where they think the most germs reside in their homes and tested 30 everyday items for bacteria, yeast, and mold. The findings? People don't understand where the real germ hot spots are.

For instance, most thought their toothbrush holder was the germiest item in the house. But the germiest room is the kitchen, the germiest item is the kitchen sponge, and the germs are, well, really germey. In fact, 77% of the kitchens, sponges, and dishrags tested positive for coliform, bacteria that can be a sign of fecal contamination.

Kitchen sinks (the second-germiest item in the house), countertops, and cutting boards also harbor nasty bacteria. Still, toothbrush holders do collect their share of germs—often from bacteria that swirl through the air after the toilet is flushed. Bathrooms are the second-germiest room in the house, and toothbrush holders are the third-germiest item.

How to keep things cleaner? Microwave sponges for two minutes every night or use dishcloths, which can be washed in hot water and bleach every couple of days. Wipe down sinks daily with a disinfectant cleaner, and wash sink strainers once a week in the dishwasher. Clean toothbrush holders in the dishwasher or in hot soapy water one to two times a week, and close the toilet lid before flushing.

Source: NSF International



9 billion
The number of pieces of candy corn that will be produced this year—**enough to circle the moon nearly 21 times**



Getting teens “used to” alcohol by allowing them to drink in the home may lead to higher—not lower—drinking rates and alcohol-related problems, a recent study suggests.

The researchers surveyed 1,945 seventh-grade students and their parents over a three-year period. Slightly less than half of the group came from the United States, where many parents take a zero-tolerance approach to teen drinking. The rest were from Australia, where parents tend to introduce teens to alcohol gradually, in hopes it will help teach responsible drinking.

The results were striking. In seventh grade, 59% of the Australian students had used alcohol vs. 39% of the American students. In eighth grade, two-thirds of the Australian students were drinking vs. one-third of the American students. By ninth grade, the ratio was 71% to 45%, and more than a third of the Australian students reporting having a drinking-related problem (such as getting sick or passing out) vs. one-fifth of the U.S. students.

In both countries, the younger the students were when they started drinking, the more likely they were to have problems with alcohol, but those who drank under the watchful eye of parents had higher rates. In other words, a more permissive approach to alcohol appeared to encourage drinking but didn't necessarily teach safe, responsible drinking.

Source: *Journal of Studies on Alcohol and Drugs*

FOOD FAIL

Limited access to healthy foods in most U.S. states may be fueling the childhood obesity epidemic, according to a new CDC report.

The report shows that 32 states and the District of Columbia scored at or below the national average for the Modified Retail Food Environment Index, which rates community access to retailers, such as supermarkets, that sell healthy foods like fresh fruits and vegetables. Previous studies have linked poor access to healthy foods—or easy access to convenience stores and fast-food restaurants with few healthy options—to childhood obesity.

Based on a range from zero (no food retailers that sell healthy food) to 100 (only food retailers that sell healthy food), the national average score was 10.

PAUL MAGEGETTY IMAGES



The five highest scores were:

- 16 Montana
- 15 Maine
- 14 Hawaii
- 13 Idaho, Oregon, Utah, Vermont, West Virginia
- 12 Arizona, Delaware, New Mexico, Washington

The five lowest scores were:

- 8 Georgia, Illinois, Mississippi, New Jersey, New York, North Dakota, South Dakota
- 7 Massachusetts, Texas
- 6 Alaska, Connecticut
- 5 Rhode Island
- 4 District of Columbia

Source: CDC



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CLOCKWISE FROM TOP LEFT: MASTERFILE, JP GREENWOOD/GETTY IMAGES

Living with Bipolar

My Life With Bipolar

Bipolar in Focus

MIND OVER MATTER

If willpower is your chosen weight-loss method, you might want to think really hard about just how strong yours is. According to recent research, we put food in our mouths whether we’re hungry or not. A researcher and food psychologist at Cornell University, who used some rather novel study techniques, believes that “mindless eating” is one of the top sources of weight gain in the United States.

For instance, when offered fresh and stale popcorn in extra large and large containers, the researcher found, people ate 45% more fresh popcorn and 34% more stale popcorn from the larger container—even when they had already eaten dinner.

In another experiment, 30 people were served soup out of a “bottom-less” bowl that was pressure-fed under the table and slowly refilled from the bottom without their knowing. Another 30 people ate soup in regular bowls. The people with bottomless bowls ate 73% more than those with regular bowls but they didn’t report feeling any more full.

With these study results in mind, the researcher provided tips for more mindful eating, including:

- ▶ Serve meals on salad plates rather than large dinner plates.
- ▶ Keep healthier foods at eye level in the cupboard and refrigerator.
- ▶ Avoid eating in front of the television, where you’re likely to lose track of how much you’ve consumed.



Source: American Psychological Association meeting

Good Health News

Scanning the news headlines, you might think this country’s overall health is going to pot. But not all health news is bad. The CDC reports the country made some serious strides toward improving public health in the first 10 years of this century. The top achievements include:

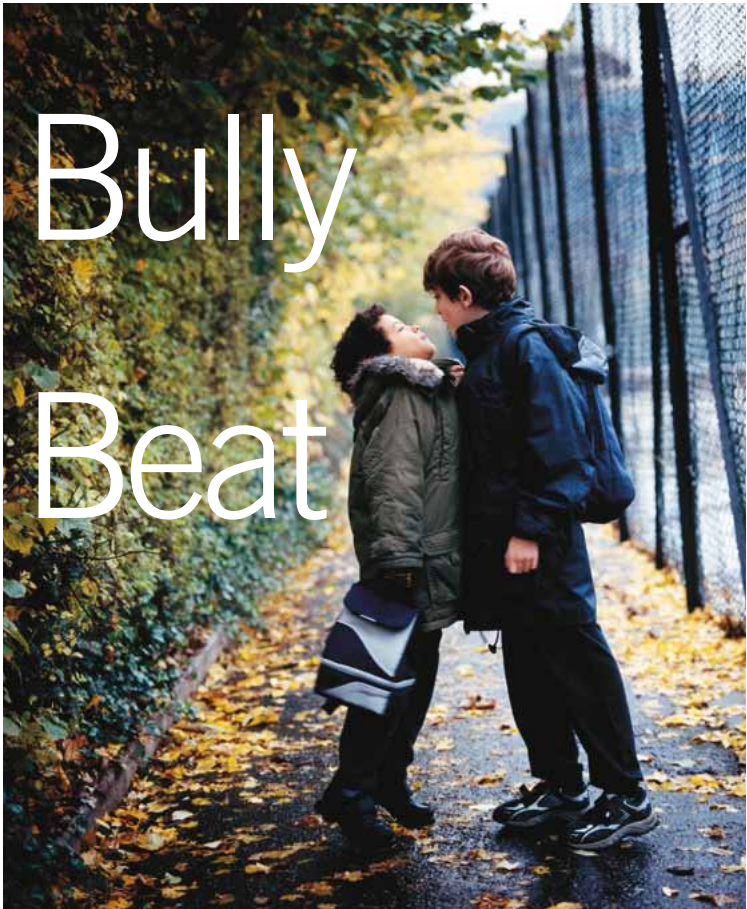
- ▶ Making advances in the prevention of infectious diseases, like AIDS and tuberculosis
- ▶ Improving motor vehicle safety (by creating safer roads and requiring seat belts and child safety harnesses)
- ▶ Fighting tobacco use
- ▶ Reducing the incidence of heart disease and stroke
- ▶ Preventing lead poisoning
- ▶ Reducing the number of cancer deaths
- ▶ Preventing birth defects
- ▶ Improving public preparedness for bioterrorism, flu epidemics

As a result of these improvements, CDC researchers say, Americans are living longer. In fact, from 1999 to 2009, the death rate in the United States declined from 881.9 per 100,000 population to 741 deaths per 100,000, a record low.

Source: CDC



TOP: CHRIS WINDSOR/GETTY IMAGES; RUSSELL TATEGETTY IMAGES



HENRY KING/GETTY IMAGES

It’s almost a cliché to think that playground bullies learn their craft in the home. But now new research shows that both bullies and victims of bullying are more likely to be exposed to violence at home.

In a study of more than 5,500 Massachusetts youths, 44% of middle school students and 31% of high school students said they had been involved in or affected by bullying in 2009. The study also found that bullies, victims of bullying, and bullies/victims (students who had been in both roles) were more likely to be exposed to violence at home—including being hurt by another family member or witnessing violence—than kids not involved with bullying.

The study found that kids who had been in both the bully and victim role were the most likely to have been exposed to family violence, followed by kids who had been bullies only and then kids who had been victims only. As a result, the researchers say, school-based anti-bullying programs need to include both families and other community members.

The study also showed that bullies/victims are more likely to abuse drugs or alcohol and are at higher risk for depression and/or suicide. Girls are more likely to be victims than boys; boys are more likely to do the actual bullying.

On a more positive note, other researchers have found that students who receive social support from adults are more resilient in the face of bullying, so it’s important that parents listen, empathize, and get involved.

Source: CDC Morbidity and Mortality Weekly Report

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WebMD SEARCH



BREATHING ROOM

Elderly women who have sleep-disordered breathing, a condition that causes disruptions in both sleep and oxygen levels, are more likely to develop memory problems or dementia, a new study shows.

Previous studies had already linked sleep-disordered breathing, which affects up to 60% of the elderly, to increased risk of high blood pressure, heart disease, and diabetes. And some researchers had found an association between the disorder and cognitive impairment. But this was the first one to link lower oxygen levels during sleep as a contributing factor.

In the study, researchers evaluated 298 women, average age 82, for sleep-disordered breathing. Then, five years later, the researchers tested the women's memory. By the end of the study, 45% of women with sleep-disordered breathing had developed memory problems or dementia, compared with 31% of those without the sleep disorder.

The researchers believe that decreased oxygen levels (vs. frequent wakings) are associated with a higher risk of mild memory problems or dementia. Fortunately, therapy, such as continuous positive airway pressure, for sleep-disordered breathing already exists.

Source: JAMA

TV TIME OUT



You know you're not getting anything done when you're sitting around watching the boob tube, right? Now research shows you may also be shortening your life.

The research, conducted in Australia, found that watching six hours or more of TV per day can shorten life expectancy by nearly five years. Put another way, every hour of TV watching as an adult may take 22 minutes off your life. And that means TV watching is as bad for you as not getting exercise, being obese, and smoking cigarettes.

While the study involved Australian data, the findings should hold true for the United States, too, the researchers say, where Americans watch an average of four hours of TV per day.

Source: British Journal of Sports Medicine

Confused about when you should schedule your next mammogram?

Small wonder, given that recommendations have changed so many times over the last few years. But this summer, the American Congress of Obstetricians and Gynecologists (ACOG) issued a new guideline that should clarify your options.

According to the guideline, women in their 40s should have a mammogram every year, just as women in their 50s should. ACOG had previously recommended women in their 40s have mammograms every one or two years.

ACOG says it changed its guideline because breast cancers tend to grow more quickly in younger women. Other health organizations, including the American Cancer Society and the American College of Radiology, also recommend annual mammograms for women in their 40s.

ACOG no longer recommends that women do routine monthly breast self-exams but does advise annual clinical breast exams by a health care professional for those age 40 and older, and one to three years for women age 20 to 39. It adds that women should be aware what their breasts normally look and feel like.

Source: ACOG

Breast Test

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A CLOSER LOOK AT EVERYDAY OBJECTS

COTTON BALLS

Ancient History

Cotton has been grown and made into fabric for at least 7,000 years.

Word Up

The English word "cotton" comes from the Arabic word "qutn."

Work a Round

Cotton balls are another version of cotton pads, which are typically square in shape, while balls are wads of cotton.

Soft Sell

Cotton pads were first invented in the early 1970s as a substitute for cotton swabs, marketed as a good tool for applying and removing makeup.

Au Naturel

An "organic" label on cotton ball packages means the cotton plant was not treated with harmful pesticides or synthetic fertilizers.

Bottle Stop

The material inside medicine bottles looks like cotton, but it is likely made of rayon or polyester.

Makes Scents

Adding a few drops of fragrance to a cotton ball or two and placing inside the vacuum bag can freshen a room while you vacuum.

Diet Don't

A dangerous fad diet, once popular with models, reportedly involved eating only gelatin-soaked cotton balls—based on the theory that the fiber in the balls would suppress the appetite. (Eating only cotton balls leads to severe digestive problems.)

Eye Prop

Experts recommend using a cotton swab to apply eye makeup, especially if you wear contact lenses, to avoid dirt or bacteria from your fingers getting into the eyes.—Chloe Thompson



Take Five

Top director Patty Jenkins joins A-listers to spotlight breast cancer

Director Patty Jenkins connected naturally to her new short film, *Pearl*, one of five intertwined vignettes in the Lifetime Original Movies anthology, *Five*. The film quintet premieres Oct. 10 as part of Lifetime TV's "Stop Breast Cancer for Life" initiative (www.mylifetime.com/my-lifetime-commitment/breast-cancer).

"No matter who you are, no amount of information ensures prevention," Jenkins says. "It's almost hard to find somebody who hasn't had a family member or friend with breast cancer."

Jenkins, 40, has had both. Her grandmother, Patsy Roth, now in her 80s, was initially diagnosed at age 42 and underwent a double mastectomy. (Today, Roth's cancer is slow-growing and she is otherwise healthy.) And in mid-June, Jenkins' close friend, trailblazing film producer and *Stand Up To Cancer* co-founder Laura Ziskin, died from breast cancer at age 61. The *Five* film project allowed Jenkins to positively channel emotions about losing Ziskin, she says.

Jenkins joins the project's other directors (and Hollywood A-listers), Jennifer Aniston, Alicia Keys, Demi Moore, and Penelope Spheeris, who each made a film based on a story arc developed by Marta Kauffman, co-creator of the hit TV sitcom *Friends*, which co-starred Aniston. Jenkins is best known for her 2003 independent crime drama, *Monster*, which led to an Oscar for best actress for its star, Charlize Theron.

Collectively, *Five* explores breast cancer's effects on relationships and women's perceptions of the disease, which is the second most common cancer among U.S. women after skin cancer. According to the National Breast Cancer Foundation, some 200,000 new cases are diagnosed annually, and 40,000 women die of the disease every year.



Academy Award-winning director Patty Jenkins directs a short film about breast cancer in the Lifetime Original Movies anthology, *Five*.

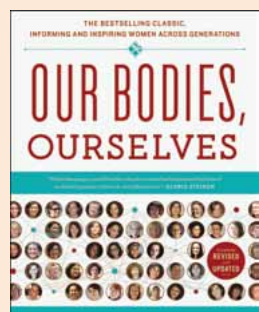
Each 20-minute film follows its title character—Charlotte, Cheyanne, Lili, Mia, and Pearl—from diagnosis through various stages of treatment and coping. *Pearl*, played by actor Jeanne Tripplehorn, is the chronological link: She loses her mother to breast cancer in the first film, then grows up to become an oncologist who treats the other four lead characters, then faces breast cancer herself.

Five's rich cast also includes Rosario Dawson, Bob Newhart, and real survivors. Jenkins wants the film to inspire through its characters, to entertain without forcing the educational component. "It was so intriguing to look at breast cancer like this, with humor and drama, not in a heavy-handed way yet encompassing the full spectrum of emotions with different points of view."—Stephanie Stephens

BODY KNOWLEDGE

Some books morph into icons, standing for so much more than the information between the covers. *Our Bodies, Ourselves* surely makes the grade.

First published 40 years ago, when abortion was illegal, birth control was not widely available, and texts about women's sexuality and reproductive health were scarce (and often written by men), *OBOS* was a revelation, if not a revolution. The updated 9th edition, published this month by the Boston Women's Health Book



Collective, is written by a team of editorial and medical contributors and, at 900 pages strong, looks every bit the women's health bible I remember from my first copy in the 1970s.

Basics about anatomy, childbearing, menopause, and sexual health in women's later years are still here (updated with the benefit of four decades' worth of research). Newer topics explore safe sex, body image, gender identity, greater birth control

choices, cosmetic surgery, environmental health, and changes in the health care system. Real women weigh in with stories about relationships as well as trauma and abuse. Clearly, this is female sexual health not just in medical but political, cultural, and personal terms, too.

Yet the book is meant to be inclusive, not just empowering for women. "We believe that enhancing reproductive health...can play a significant positive role in all our lives," the editors write, one that will "better nurture all women, men, and children. We encourage you to explore this book with curiosity and vision."—Colleen Paretti

HEALTHY READ

ADVERTISEMENT

An important correction from BONIVA for women with postmenopausal osteoporosis

You may have seen an ad about BONIVA for the treatment and prevention of postmenopausal osteoporosis that may have given you the wrong impression. Our ads stated that "After one year on BONIVA, 9 out of 10 women stopped and reversed their bone loss." The FDA has found that there is not enough evidence to support this statement and wants us to clear up any misunderstanding you may have had about these ads and make sure you have the correct information about BONIVA.

BONIVA has not been proven to stop and reverse bone loss in 9 out of 10 women and is **not** a cure for postmenopausal osteoporosis. BONIVA has been shown to help increase bone mass and help reduce the chance of having a spinal fracture (break). We encourage all patients to discuss their treatment with their healthcare provider. Only your doctor can determine if BONIVA is right for you.

What is BONIVA?

BONIVA is a prescription medicine used to treat or prevent osteoporosis in women after menopause. BONIVA helps increase bone mass and helps reduce the chance of having a spinal fracture (break).

It is not known how long BONIVA works for the treatment and prevention of osteoporosis. You should see your doctor regularly to determine if BONIVA is still right for you.

Important Risk Information for BONIVA

You should not take BONIVA if you have certain problems with your esophagus (the tube that connects your mouth and stomach), low blood

calcium, cannot sit or stand for at least 60 minutes, or are allergic to BONIVA or any of its ingredients.

BONIVA can cause serious side effects including problems with the esophagus; low blood calcium; bone, joint, or muscle pain; severe jaw bone problems; and unusual thigh bone fractures.

Before starting BONIVA, tell your doctor if you have problems with swallowing, stomach or digestive problems, have low blood calcium, plan to have dental surgery or teeth removed, or have kidney problems.

Stop taking BONIVA and tell your doctor right away if you have pain or trouble swallowing, chest pain, or severe or continuing heartburn, as these may be signs of serious upper digestive problems. Call your doctor immediately if jaw problems or hip, groin, or thigh pain develops; or if you have symptoms of low blood calcium such as spasms, twitching, cramps in your muscles, or numbness or tingling in your fingers, toes, or around your mouth.

Follow the dosing instructions for once-monthly BONIVA carefully.

The most common side effects are back pain, heartburn, stomach area pain, pain in your arms and legs, diarrhea, headache, muscle pain, and flu-like symptoms.

You are encouraged to report negative side effects of prescription drugs to the FDA at www.fda.gov/medwatch or by calling 1-800-FDA-1088.

Talk to your doctor for more information or if you have questions about your treatment.

Please read additional important risk information for BONIVA on the next page.

If you have any questions about the effectiveness or safety of BONIVA, please call Genentech at 1-800-4BONIVA or visit boniva.com.



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Medication Guide
BONIVA® [bon-EE-va]
(ibandronate sodium) TABLETS

Read the Medication Guide that comes with BONIVA before you start taking it and each time you get a refill. There may be new information. This Medication Guide does not take the place of talking with your doctor about your medical condition or your treatment. Talk to your doctor if you have any questions about BONIVA.

What is the most important information I should know about BONIVA?
BONIVA can cause serious side effects including:

1. Esophagus problems
2. Low calcium levels in your blood (hypocalcemia)
3. Bone, joint or muscle pain
4. Severe jaw bone problems (osteonecrosis)
5. Unusual thigh bone fractures

1. Esophagus problems. Some people who take BONIVA may develop problems in the esophagus (the tube that connects the mouth and the stomach). These problems include irritation, inflammation, or ulcers of the esophagus, which may sometimes bleed.

- **It is important that you take BONIVA exactly as prescribed to help lower your chance of getting esophagus problems. (See the section “How should I take BONIVA?”)**
- **Stop taking BONIVA and call your doctor right away if you get chest pain, new or worsening heartburn, or have trouble or pain when you swallow.**

2. Low calcium levels in your blood (hypocalcemia). BONIVA may lower the calcium levels in your blood. If you have low blood calcium before you start taking BONIVA, it may get worse during treatment. Your low blood calcium must be treated before you take BONIVA. Most people with low blood calcium levels do not have symptoms, but some people may have symptoms. Call your doctor right away if you have symptoms of low blood calcium such as:

- Spasms, twitches, or cramps in your muscles
- Numbness or tingling in your fingers, toes, or around your mouth

Your doctor may prescribe calcium and vitamin D to help prevent low calcium levels in your blood while you take BONIVA. Take calcium and vitamin D as your doctor tells you to.

3. Bone, joint, or muscle pain. Some people who take BONIVA develop severe bone, joint, or muscle pain.

4. Severe jaw bone problems (osteonecrosis). Severe jaw bone problems may happen when you take BONIVA. Your doctor may examine your mouth before you start BONIVA. Your doctor may tell you to see your dentist before you start BONIVA. It is important for you to practice good mouth care during treatment with BONIVA.

5. Unusual thigh bone fractures. Some people have developed unusual fractures in their thigh bone. Symptoms of a fracture may include new or unusual pain in your hip, groin, or thigh. **Call your doctor right away if you have any of these side effects. What is BONIVA?**

BONIVA is a prescription medicine used to treat or prevent osteoporosis in women after menopause. BONIVA helps increase bone mass and helps reduce the chance of having a spinal fracture (break). It is not

known how long BONIVA works for the treatment and prevention of osteoporosis. You should see your doctor regularly to determine if BONIVA is still right for you. It is not known if BONIVA is safe and effective in children.

Who should not take BONIVA?

Do not take BONIVA if you:

- Have certain problems with your esophagus, the tube that connects your mouth with your stomach
- Cannot stand or sit upright for at least 60 minutes
- Have low levels of calcium in your blood
- Are allergic to BONIVA or any of its ingredients. A list of ingredients is at the end of this leaflet.

What should I tell my doctor before taking BONIVA?

Before you start BONIVA, be sure to talk to your doctor if you:

- Have problems with swallowing
- Have stomach or digestive problems
- Have low blood calcium
- Plan to have dental surgery or teeth removed
- Have kidney problems
- Have been told you have trouble absorbing minerals in your stomach or intestines (malabsorption syndrome)
- Are pregnant, or plan to become pregnant. It is not known if BONIVA can harm your unborn baby.
- Are breast-feeding or plan to breast-feed. It is not known if BONIVA passes into your milk and may harm your baby.

Tell your doctor and dentist about all the medicines you take, including prescription and non-prescription medicines, vitamins, and herbal supplements. Certain medicines may affect how BONIVA works. Especially tell your doctor if you take:

- antacids
- aspirin
- Nonsteroidal Anti-Inflammatory (NSAID) medicines

Know the medicines you take. Keep a list of them and show it to your doctor and pharmacist each time you get a new medicine.

How should I take BONIVA?

- Take BONIVA exactly as your doctor tells you.

• BONIVA works only if taken on an empty stomach.

- Take 1 BONIVA tablet **after** you get up for the day and **before** taking your first food, drink, or other medicine.

- Take BONIVA while you are sitting or standing.

• Do not chew or suck on a tablet of BONIVA.

- Swallow BONIVA tablet with a full glass (6-8 oz) of **plain water** only.

- Do **not** take BONIVA with mineral water, coffee, tea, soda, or juice.

After swallowing BONIVA tablet, wait at least 60 minutes:

- Before you lie down. You may sit, stand or walk, and do normal activities like reading.
- Before you take your first food or drink except for plain water.
- Before you take other medicines, including antacids, calcium, and other supplements and vitamins.

Do not lie down for at least 60 minutes after you take BONIVA and do not eat your first food of the day for at least 60 minutes after you take BONIVA.

- If you miss a dose of BONIVA, do not take it later in the day. Call your doctor for instructions.

- If you take too much BONIVA, call your doctor. Do not try to vomit. Do not lie down.

What are the possible side effects of BONIVA?

BONIVA may cause serious side effects.

- See “**What is the most important information I should know about BONIVA?**”

The most common side effects of BONIVA are:

- Back pain
- Heartburn
- Stomach area (abdominal) pain
- Pain in your arms and legs
- Diarrhea
- Headache
- Muscle pain
- Flu-like symptoms

You may get allergic reactions, such as hives or, in rare cases, swelling of your face, lips, tongue or throat. Tell your doctor if you have any side effect that bothers you or that does not go away. These are not all the possible side effects of BONIVA. For more information, ask your doctor or pharmacist.

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

How do I store BONIVA?

- Store BONIVA at room temperature, 59°F to 86°F (15°C to 30°C).
- Keep BONIVA in a tightly closed container.

Keep BONIVA and all medicines out of the reach of children.

General information about the safe and effective use of BONIVA.

Medicines are sometimes prescribed for purposes other than those listed in a Medication Guide. Do not use BONIVA for a condition for which it was not prescribed. Do not give BONIVA to other people, even if they have the same symptoms you have. It may harm them.

This Medication Guide summarizes the most important information about BONIVA. If you would like more information, talk with your doctor. You can ask your doctor or pharmacist for information about BONIVA that is written for health professionals.

For more information, go to:

www.myboniva.com or call 1-888-692-6648

What are the ingredients in BONIVA?

Active ingredient: ibandronate sodium
Inactive ingredients: lactose monohydrate, povidone, microcrystalline cellulose, crospovidone, purified stearic acid, colloidal silicon dioxide, and purified water. Tablet film coating contains: hypromellose, titanium dioxide, talc, polyethylene glycol 6000 and purified water.

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South San Francisco, CA 94080, USA

This Medication Guide has been approved by the U.S. Food and Drug Administration.

Issued: January 2011

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BON0000311300

ask the experts

▶ YOUR QUESTIONS ANSWERED

Down Dad

Does postpartum depression affect only moms?

Q ▶ My husband has been mopey and grouchy since our baby was born. I don't know what's up. How can I talk to him?

A ▶ Your husband's dark moods could just be a result of the same fatigue and roller-coaster emotions that you're feeling now. But he could also be going through the male version of postpartum depression. Researchers now believe that some 10% of new fathers develop this.

The symptoms in men can be different from those for women. Men may get irritable, even aggressive, when they're depressed. They can also engage in destructive behaviors, like drinking more alcohol or having extramarital affairs. But the root of the problem tends to be the same. While men don't have the same dramatic hormone shifts that women experience after birth, other stressors, including financial worries, marital changes, and sleep deprivation can all trigger depression in men.

Postpartum depression generally lasts for about a year if left untreated. But if your husband is showing some of these signs, he should get treated now. Depressed fathers may be unable to relate to and care for children appropriately, which

research shows negatively affects their child's emotional and physical development. Encourage him to talk to his doctor or some kind of counselor so he can get help if he needs it.



Roy Benaroch, MD

WebMD CHILDREN'S HEALTH EXPERT

true or false?

My 10-year-old son cracks his knuckles. Is it true that it causes arthritis?

Ten-year-old boys love to make noises with their body, so it's not surprising your son is intrigued with the sound of a good knuckle pop. But you can put your fears aside—the idea that knuckle cracking leads to arthritis is FALSE.

“There have been a few studies on this,” says Dimitrios Pappas, assistant professor of medicine at Columbia University's College of Physicians and Surgeons. “None of them shows any change in the occurrence of arthritis between people who habitually crack their knuckles and those who do not.”

But here's something cool you can tell your son: The “pop” that comes when you compress your knuckles isn't from bone snapping on bone. It happens because, as the bones are stretched apart, a gas bubble forms and then pops.

While such joint cracking doesn't lead to arthritis, medical journals do contain reports of people who injured their ligaments while cracking their knuckles. At least one study also found the grip of people who habitually crack their knuckles may weaken over the years.



Q ▶ I'm finally ready to quit smoking. Do you have any tips for making it easier?

A ▶ We all know that being tobacco-free is essential to a healthy life. In fact, the most recent report from the Surgeon General details how any exposure to tobacco smoke is harmful. Here are some pointers for quitting.

Make it your idea. I talk about smoking cessation every day. But I can tell which way things are going to go pretty quickly by asking just one simple question: “Do you want to quit?” People who truly want to quit are generally successful. Those who don't find it more challenging.

Make it convenient. Ashtrays, matches, or lighters can all trigger your desire to smoke. When you plan your quit date, make sure that these reminders are out of the way, too.

Don't avoid medication. Understandably, many people seek a natural approach to lifestyle changes. But research data confirms: It's very hard to quit on your own. Nicotine addiction is an acquired medical condition. Talk to your doctor about smoking cessation aids. They can double your chances of quitting successfully.

Quitting isn't easy—that's why so many people try it several times before succeeding. But with a goal in mind, smoking accessories out of sight, and the help of some medications, you can finally kick the habit.



James Beckerman, MD

WebMD HEART HEALTH EXPERT

Get **expert answers** to all your health questions.



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Flying High



Gracie Terzian, 20, keeps her asthma under control and lives a healthy, active life.

By Gracie Terzian
WebMD.com community member

I THINK MY mother was more worried about my going to college two years ago than I was. I have had asthma since I was very young.

It was worse when I was younger. I used to have to use an inhaler before I ran the mile in PE class. And one time I had a big role in a play, and I developed pneumonia. My asthma got really bad. I remember using my nebulizer—a machine that creates a medicated inhalable mist—backstage before I went on. And I hid cough drops on the backs of set pieces to help me get through.

Now I'm 20. I'm a third-year student at the University of Virginia, majoring in drama. I've gotten good at keeping my asthma under control. It mostly only acts up when I'm sick, especially when I have a cold or a cough.

The biggest thing I've had to learn is to carry an inhaler with me wherever I go. That can be hard to remember. My solution is to have a bunch of inhalers and leave them in my bags. That way, no matter which bag I pick up—my backpack, my purse, whatever—I know I have an inhaler. Every time I go back to my home in Northern Virginia, I get my prescription refilled from my family doctor. I also have my own nebulizer, which I keep in my dorm room and use occasionally.

My advice for teenagers with asthma who are at college is to take it seriously. Keep an inhaler with you all the time. That includes when you go out at night. You might think you don't have to pay attention because your parents aren't around, but you have to pay attention more because they're not there to remind you. If you start drinking and dancing and having fun, you might not notice your asthma is acting up. And there are lots of cigarettes at college parties, which can trigger some peoples' asthma, too.

Also, try your best to keep your allergies under control because that keeps your system calmer, making it less likely to erupt into asthma. Know what you're allergic to. Take preventive steps, whether it's wrapping your bedding in allergy-protective covering or avoiding dust and mold. For me it has meant doing daily nasal irrigation and starting up immunotherapy shots again. I think I've learned to take a little better care of myself than other people my age do.

I would also say to stay positive and don't hold back. I'm very active. I take lots of dance classes, and I've even started studying aerial acrobatics. Last summer I helped out at Theatre for a New Audience in New York City, and this fall I'm interning at [NBC's] *Saturday Night Live*.

Being fit is a key part of prevention, and that's not a bad thing at all.

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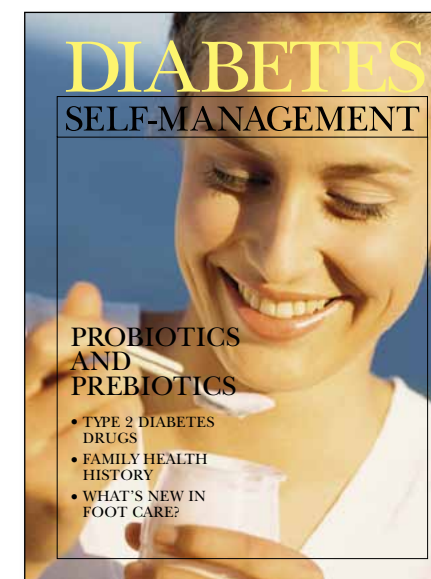
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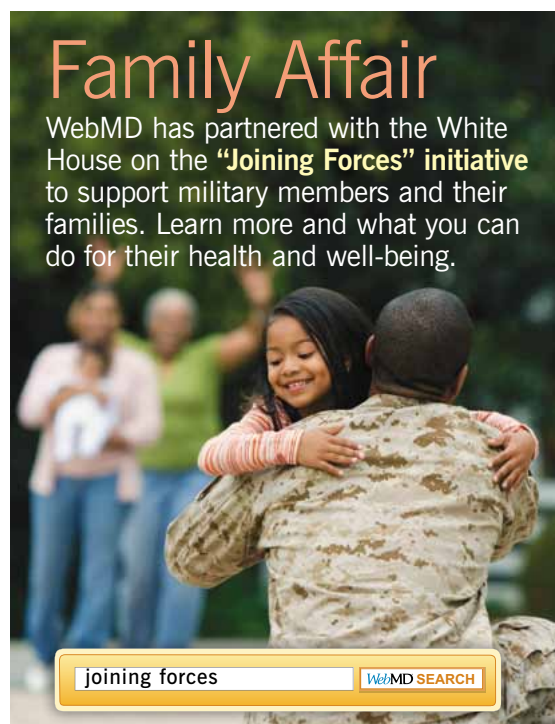
Michael C. Hall

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Family Affair

WebMD has partnered with the White House on the “**Joining Forces**” initiative to support military members and their families. Learn more and what you can do for their health and well-being.

PACK IT IN

Those 100-calorie snack packs might seem like a smart way to keep your noshing in check, but they're often low in nutrients as well as calories. For healthier and more filling ways to munch, check out WebMD's “**25 Super Snacks with 100 Calories or Less**” slideshow.



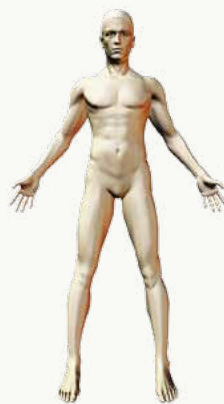
Head Lice

TOP SYMPTOMS INCLUDE

- Intense itching
- Live lice on the scalp
- Eggs (“nits”) on hair shafts near the scalp

This time of year, head lice (*pediculus humanus capitis*) epidemics often sweep through schools and day care centers. The tell-tale itching is the result of the scalp reacting to the saliva of the lice, who feed on the blood of their hosts. While highly contagious, lice don't jump or fly from head to head. Instead they spread by crawling during head-to-head contact or through sharing of personal items, such as hats, hairbrushes, and combs. They can also cling to bedding. (The tiny, whitish nits aren't mobile at all, by the way, as they are stuck to hair shafts.) Treatments include nonprescription lice-killing shampoo, picking the nits and lice off by hand (or with a special comb), and laundering bedding, pillows, and clothes in hot water. If the nonprescription shampoos don't help, you might have missed some nits or your child might still be exposed to someone with lice. Sometimes multiple treatments, or prescription lice treatments, are required to kill all the nits, larvae, and adult lice.

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Straight Talk

Give flyaways and split ends the brush-off with these expert tips and product picks for straight hair



1 Place Holder
Garnier Fructis Style Sleek & Shine Anti-Humidity Hairspray keeps straight styles in check.

2 Washed Up
Burt's Bees Super Shiny Grapefruit & Sugar Beet Shampoo is a gentle way to cleanse.

3 End Game
Tame tips with John Frieda Full Repair Perfect Ends Deep Infusion.

5 Protect & Serve
John Frieda Frizz-Ease Hair Serum Thermal Protection seals and smooths tresses.

Damage Control 4
Add Ojon Dry Recovery Intensive Hydrating 2-Minute Hair Mask to your weekly routine.

You asked!

Q. I flat iron my straight hair regularly. What can I do to minimize dryness and split ends?



Jessica Dolese, 25, real estate agent, Florham Park, N.J.

A. The long-term effect of unprotected, excessive flat ironing is split ends and color fading, but with products and a few key techniques, you can stop damage before it starts.

For starters, avoid shampoos with sodium lauryl sulfate, which can strip and dry out your hair. Instead, use a super-moisturizing cleanser like **Burt's Bees Super Shiny Grapefruit & Sugar Beet Shampoo** (\$8), which is sulfate-free and contains soy protein to repair damaged strands. In addition to your daily conditioner, you should also use a conditioning mask once or twice a week if your hair is very dry or damaged. Infused with blue agave and shea butter, **Ojon Dry Recovery Intensive Hydrating 2-Minute Hair Mask** (\$29.50) will boost moisture levels to repair the cuticle layer of your hair.

One of the biggest mistakes people make is not using products to seal and protect their hair. Spray each section with a thermal protector like **John Frieda Frizz-Ease Hair Serum Thermal Protection** (\$9.99) before flat ironing. Afterward, apply a little **John Frieda Full Repair Perfect Ends Deep Infusion** (\$9.99) to the tips to help block humidity-induced frizz and prevent split ends and flyaways. Finally, use a light hairspray like **Garnier Fructis Style Sleek & Shine Anti-Humidity Hairspray** (\$4.29) to keep straight strands smooth all day long.

George Gonzalez, Owner, George the Salon, freelance stylist at The Spa at Harpo, Chicago



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.

A. Healthy hair starts in the shower. Thin, straight hair can benefit a ton from sudsing up with a volumizing strand cleanser such as **Pureology PureVolume Shampoo** (\$27), which is free of sulfates and contains a soy, oat, and wheat protein complex that helps repair dry, damaged locks. Since your strands are straight (and probably fine), you might feel you can skip conditioning them, but that's not the case. Always condition your ends (the driest part of your hair) when you wash; just try to keep the conditioner away from your roots because they produce their own natural oils that help moisturize the scalp.

To give your straight strands control without weighing them down or making them look greasy, stock up on lightweight hairsprays such as **Sebastian Shaper Zero Gravity** (\$16.95), a soft-hold spray that locks in loose styles while maintaining the bounce. If your hair is thin, it's best to apply products with a light hand. To fight flyaways, I suggest **Davines Wizard No.1 Finest Oil Non Oil** (\$22), a combo of sweet almond proteins that helps nix static during blow-dry sessions and adds shine while keeping strands light and airy.

Women with straight hair often damage their hair with high-heat styling tools—flat irons, blow-dryers, or curling irons. Because straight strands can be fragile, it's important to use a pre-heat spray to protect your locks from wear and tear. Particularly before flat ironing, prep hair with **Rusk Design Thermal Flat Iron Spray with Argan Oil** (\$16). Infused with UVB sunscreens and silicones, the spritz protects and conditions while adding texture, sheen, and soft hold to straight, fine strands.—Ayren Jackson-Cannady

Stephanie Pohl, celebrity hairstylist, Los Angeles



Clean Start 1
Pump up your strands with **Pureology PureVolume Shampoo**.



4 Press Club
Before ironing, prep hair with **Rusk Design Thermal Flat Iron Spray with Argan Oil**.

2 Defying Act
Keep styles light and locked down with **Sebastian Shaper Zero Gravity**.

3 Magic Potion
Davines Wizard No.1 Finest Oil Non Oil fights flyaways and static.

“It's important to use a pre-heat spray to protect your locks from wear and tear.”

Home Blown

Do you leave the salon thinking your hair will never look this good again (until your next appointment)? You can get salon-worthy blowout results at home. Zahir Ziani, Red Door Spas' national creative director, shares his steps for success.

1. Pre-dry your hair with a blow-dryer set to low heat to remove excess moisture, or let your locks air-dry for a few minutes.
2. Apply an anti-frizz/smoothing product to soften hair and make it more manageable.
3. Divide your hair into four to six sections, securing each with a clip. Using a round brush, hold your hair taut to avoid any frizzing and begin blow-drying in the back, and finish in the front. Before you're done with each section, blast it with a shot of cool air to close the hair cuticle (it opens when heated) and boost shine.
4. Apply a non-greasy shine serum, such as Citré Shine Anti-Frizz Serum, to the ends.



What's Up, Doc?

The top 5 signs that it's time to call the vet

What our sick pets can't say in words, they show through physical symptoms. And pet owners often are the first ones to notice, simply because "they see their pets every day and realize when they're not their regular selves," says Mark Stickney, DVM, director of general surgery services at Texas A&M University College of Veterinary Medicine and Biomedical Sciences.

What should you look for? WebMD asked several experts to identify five red flags that should prompt a call or visit to the veterinarian.

Digestive Dilemmas Cats and dogs can vomit without being ill. "A puppy who's...playful and has been outside eating leaves and junk and vomits and then goes back about his life" doesn't much worry Julie Meadows, DVM, assistant professor for clinical medicine in community practice at the University of California, Davis Veterinary



CATS AND DOGS CAN VOMIT WITHOUT BEING ILL. BUT A PET THAT VOMITS SEVERAL TIMES A DAY NEEDS VET ATTENTION.

Medical Teaching Hospital. But a pet that vomits or has diarrhea several times a day, is lethargic, or has blood in its vomit or stool needs a veterinarian's attention.

Likewise, pets that stop eating for more than 24 hours need vet care. Cats who won't eat need immediate vet attention because without nutrition they can develop fatty liver disease.

Pee Problems Increased urination may signal diabetes, or liver, kidney, or adrenal gland disease. Too little urination, or straining to urinate, often signals a urinary tract problem or bladder stones.

Cat owners take note: In male cats, crystals or inflammatory debris can plug up the urethra so that the cat can't urinate, which can become life-threatening within 24 hours.

"It's a hard thing to pick up because the only thing you might see is the cat making multiple trips to the litter box and just sitting there," Meadows says.

Or cats that strain to urinate might change their habits and start urinating outside of their

litter box, such as into the sink or on bedding and furniture.

Constant Coughing Chronic coughing may be related to heart disease, heartworms, or various lung diseases. Or a dog may have kennel cough, an infectious tracheobronchitis that causes a harsh, hacking cough. For most dogs, kennel cough is mild—a nuisance that goes away within two weeks. But for puppies, kennel cough can progress to fatal pneumonia.

Itchy Incidents Fleas, ticks, mange mites, and ear mites are common reasons for dog or cat hair loss and itching on the skin or around the ears, as are endocrine problems, staph infections, fungal or yeast infections, and a host of other causes.

Mobility Maladies Stiff dogs may have hip or spine arthritis, disc disease, ruptured ligaments, or hip dysplasia. Many of these conditions—and those detailed above—can be treated so that pets can maintain their mobility and quality of life.—Katherine Kam

Learn more signs that your pet might be ill. [WebMD.com](https://www.webmd.com)

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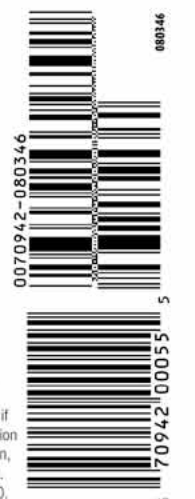
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ANATOMY OF A CARROT

Orange Rx

Carrots were first grown as medicine, not food, for a variety of ailments.

Long Story

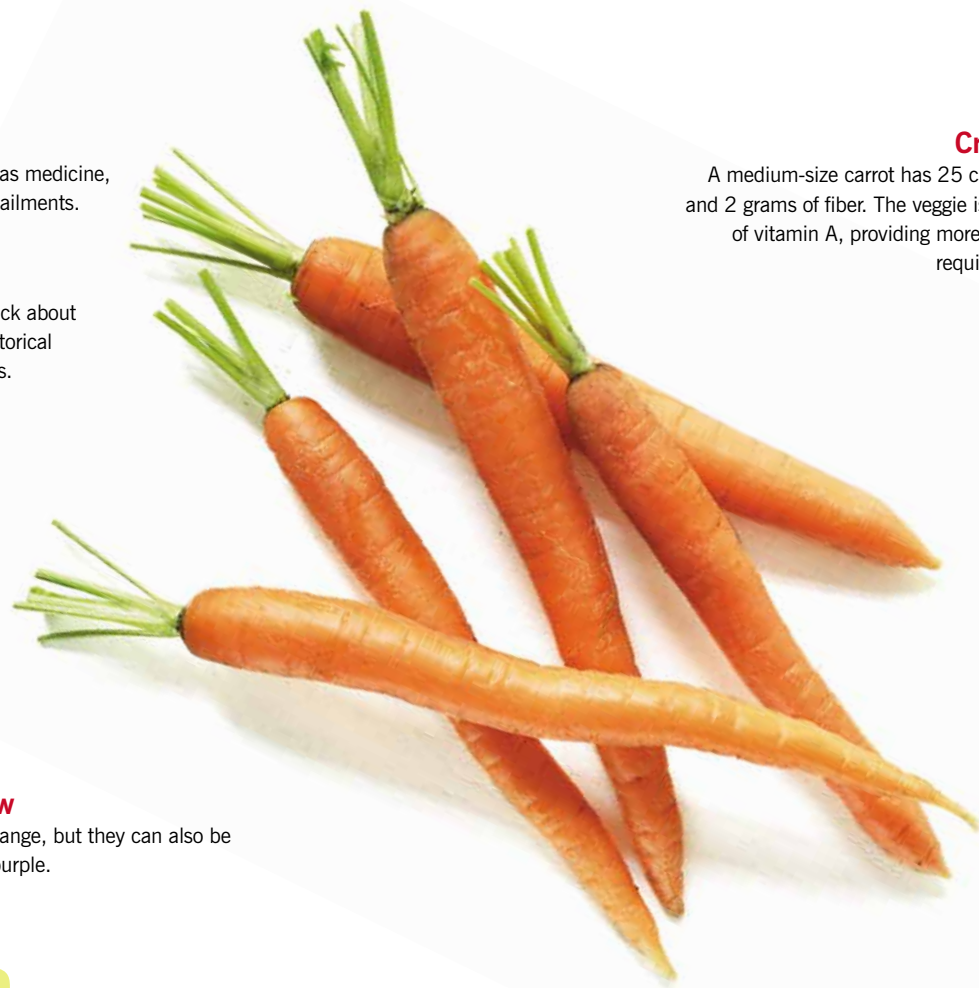
Carrots can be traced back about 5,000 years through historical documents and paintings.

Beta Best

Carrots are loaded with beta-carotene, a compound that is naturally converted to vitamin A when consumed. The deeper orange the carrot, the more beta-carotene you're getting.

Taste the Rainbow

We think of carrots as orange, but they can also be white, yellow, red, and purple.



Crunch With Punch

A medium-size carrot has 25 calories, 6 grams of carbs, and 2 grams of fiber. The veggie is also an excellent source of vitamin A, providing more than 200% of your daily requirement in just one carrot.

Lost Cause

No one knows when the first carrots appeared because many people mistook them for parsnips, a close relative of the carrot.

What's Up, Doc?

Mel Blanc, the voice of the iconic cartoon character Bugs Bunny, reportedly did not like carrots.—*Chloe Thompson*

healthy recipe

Carrot Quinoa Grain Medley



Makes 8 servings
Ingredients

1 tbsp olive oil
2 cups dry quinoa, rinsed and drained
1½ cup carrots, diced (about 3 medium)
1 large onion, diced
1 large red bell pepper, diced
1 tbsp garlic, minced
½ cup chopped fresh parsley, divided
2½ cups unsalted, nonfat chicken stock
pinch salt and pepper
2 oz dry roasted salted pistachio kernels, chopped

Directions

1. Heat medium saucepan over medium heat. Add olive oil and quinoa and stir 3 to 4 minutes to toast quinoa.
2. Add carrots, onion, red pepper, garlic, and 1 tbsp parsley. Stir 3 to 4 minutes.
3. Add chicken stock and bring medley to a simmer. Reduce heat to low, cover, and cook for 15 minutes or until quinoa is tender and liquid is absorbed.
4. Remove saucepan from heat, let sit 5 minutes, then fluff with fork.
5. Garnish with pistachios and parsley.

Per serving:

266 calories, 10 g protein, 38 g carbohydrate, 9 g total fat (1 g saturated fat), 2 mg cholesterol, 5 g fiber, 5 g sugar, 171 mg sodium. Calories from fat: 28%.

KRUEGER/GROSS/STOCKFOOD; TRACEY KUBIEWICZ/STOCKFOOD

Seeing orange? Get more **carrot recipe** ideas.



WebMD.com

How I Learned to Love Mushrooms



Candice Oppen, 32, student, DePaul University College of Law, Chicago

Mushrooms. Candice Oppen grew up thinking of them as slippery little stealth bombs with a funky taste and flabby texture, hidden in everything from her dad's canned spaghetti sauce to her mom's tuna noodle casserole. Even worse were "mushrooms fried in a ton of butter until nearly black and served with overcooked steak," says Oppen, who attempted to feed them to her dog.

The dog, it turns out, "only liked broccoli," says Oppen, who resorted to picking the fungi out of any dish she found them in: "A lot of my early mushroom memories involved canned mushrooms, which already had an unpleasant, overprocessed texture, or fresh mushrooms that had been cooked to death," she says.

Still, because her vegetarian inclinations led her to forgo meat for eight years, she was destined for dozens of mushroom meet-ups, prompting her to try—and try again. Oppen's conversion moment came during a restaurant meal when she discovered that "mushrooms tasted pretty good if they were properly prepared." First, she tried a vegetarian portabella-patty burger and thought it tasty. Next, she encountered stuffed mushroom caps, "and I was in love!"

Now, she can't get enough. "I eat mushrooms whenever they appear," sliced raw in salads, simmered in stews, tossed in stir-fries, or minced, shaped, and cooked like burgers. The bad memories of flabby fungi are just that: memories.—*Monica Kass Rogers*



healthy recipe

Cooking With 'Shrooms

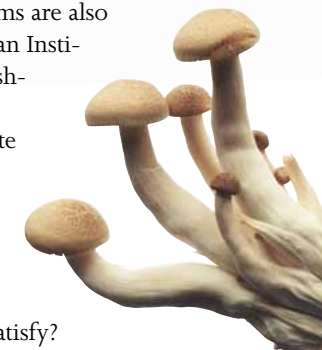
Although you'll find them in the produce aisle, mushrooms aren't really vegetables, but the nutrition-packed fruit of fungi.

Revered from ancient times by Eastern cultures for their health benefits, mushrooms may have several natural antiviral and immunity-boosting properties. Naturally low in calories and sodium and high in dietary soluble fibers associated with lowering cholesterol and boosting heart health, mushrooms are also mineral-rich in potassium and selenium. Findings from the American Institute for Cancer Research show that even the common "button" mushrooms have promising anti-cancer properties.

Among the other 'shroom varieties: enoki mushrooms, tiny, white dots on slender white stems, are sweet and crisp. Flat-topped shiitakes are rich and smoky. And black-gilled portabellas, which can be 6 inches or more across, are the most meaty.

→ Won't-Miss-the-Meat Enchiladas

Need to convince a meat-loving family that a mushroom entrée can satisfy? Try these enchiladas. For the filling, chop one large onion and 6 cloves garlic and sauté in 1 tbsp olive oil and 2 tbsp water until transparent. Finely chop 8 oz each crimini, portabella, and oyster mushrooms. Add to onions along with 2 tbsp chopped parsley and cook until mushrooms have released all liquid and are almost dry. Lightly salt and pepper to taste. Grate 2 cups low-fat mozzarella or Jack cheese. Spray a small skillet with olive oil, and heat—one at a time—a package of corn tortillas. Fill each with a few spoons of mushroom filling and a sprinkling of cheese. Roll and place in baking dish, seam-side down. Top with remaining cheese and heat at 400°F until bubbly. Serve with salsa, pico de gallo, and fresh chopped cilantro.



BLUE JEAN IMAGES/GETTY IMAGE

Unearth more ways to cook with **mushrooms**.



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healthy eats

NUTRITIOUS AND DELICIOUS

Reviewed and recipes by
Kathleen Zelman, MPH, RD, LD
WebMD DIRECTOR OF NUTRITION



Three Ways to Cook Salmon

Think pink for dinner more often—your body will thank you

Celtic myth tells the tale of Fionn MacCumhaill, a poet's apprentice who absorbed all the wisdom of the world by eating just a drop of oil from a special salmon. Turns out Fionn was on to something: We're all wise to eat salmon—especially that marvelous fish oil. Vibrantly colored, tenderly textured, and richly flavored, salmon is loaded with the omega-3 fatty acids EPA and DHA.

Multiple studies suggest that these polyunsaturated fats help boost the immune system, help reduce the risk of heart disease, and are especially beneficial for a developing fetus, nursing infants, and young children.

The American Heart Association recommends at least two servings a week of fish, preferably oily fish such as salmon. Salmon is one of a few fish rich in omega-3s (1.2 to 1.9 grams per serving, compared with almost none for chicken, pork, and beef). Salmon is also an excellent source of protein, vitamin B12, and selenium, with good amounts of vitamin B6, thiamin, and niacin.

Salmon's characteristic rosy color, which ranges in hue from pale pink to orangey-red, comes largely from astaxanthin, a naturally occurring pigment salmon ingest from microalgae in their diet. Research on astaxanthin suggests that it, too, points to potent protection for the immune system.

Because salmon is a rich fish, the best preparation methods are those that add little or no fat, such as the following three recipes. Cook up your own poetic homage to one of the healthiest fish in the sea.—Monica Kass Rogers



Vibrantly colored and richly flavored, salmon is loaded with omega-3 fatty acids.

KLAUS ARRAS/GETTY IMAGES



Salmon Pantry Picks

No matter how you prepare it, versatile salmon cooks up quickly and plays well with a variety of ingredients you'll want to have on hand for the recipes on page 52. WebMD's director of nutrition, Kathleen Zelman, MPH, RD, LD, suggests these staples for healthy, tasty results.

GREEK GIFT

Higher in protein, more firmly textured, and more tart than regular yogurt, Greek yogurt is great for cooking. Try Fage Total Classic Plain, Total 2% Plain, or Total 0% Plain. Other options? Voskos Greek Plain Non-fat and Plain Low-fat options, Chobani Non-fat Greek and Low-fat (2%) Greek, and Stonyfield's Oikos Plain Organic Greek yogurt.

MAYO LEAGUE

The reason there's little flavor difference between regular and light mayonnaise is that mayo makers achieve lightness by whipping mayonnaise with air and water. Light mayos made with canola or olive oil are best, but all vegetable oil-based mayonnaises are fine. Zelman's go-to brand? Hellmann's Mayonnaise Dressing With Extra Virgin Olive Oil. She also recommends Hellmann's Canola Cholesterol Free Mayonnaise, Duke's Light Mayonnaise, Kraft Mayonnaise with Olive Oil, and Miracle Whip Light Mayonnaise.

PANKO PICKS

Uniquely light, crisp, and perfect for baking or breading salmon, Japanese-style panko breadcrumbs are finely ground without seasonings or fat. Less dense than regular breadcrumbs, panko crumbs have only 100 calories per half cup. They also let the foods they're served with stand out without masking flavor. Try Asian Gourmet Japanese-style Panko Breadcrumbs or Kikkoman Japanese-style Panko Breadcrumbs. For a little boost of fiber and whole grains, Zelman likes Ian's Whole Wheat Panko Breadcrumbs.

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healthy recipe

→ Salmon Cakes With Lemon Dill Yogurt Sauce

Makes 4 servings

Ingredients

Salmon cakes
1 lb cooked, flaked salmon
¼ cup panko breadcrumbs
1 egg, slightly beaten
½ cup light mayonnaise
Juice of 1 lemon
2 tsp Dijon mustard
1 small red onion, finely minced
2 tbsp chopped flat leaf parsley
dash hot sauce
cooking spray

Sauce

½ cup nonfat plain Greek yogurt
1 tbsp lemon juice
1 tsp lemon zest
1 tbsp fresh dill
1 tbsp chopped parsley
½ cup seeded, chopped cucumber

Directions

1. In a large bowl, combine all salmon cake ingredients and mix well. Form into four patties.
2. Spray a large skillet and heat over medium heat. Sauté patties 3–4 minutes on each side until golden brown.
3. Make sauce by combining all ingredients.
4. Serve each salmon patty with the lemon dill yogurt sauce.

Per serving: 397 calories, 30 g protein, 13 g carbohydrate, 25 g fat (5 g saturated fat), 134 mg cholesterol, 1 g fiber, 5 g sugar, 377 mg sodium. Calories from fat: 56%.



healthy recipe

→ Spicy Citrus Grilled Salmon and Asparagus Salad

Makes 4 servings

Ingredients

4 4-oz salmon filets
1 tbsp brown sugar
1 tsp cumin
½ tsp chili powder
dash salt and ½ tsp pepper
cooking spray
12 spears asparagus
4 cups mixed salad greens (arugula, spinach, baby lettuce)
1 orange, peeled, sliced into wedges
1 cup cherry tomatoes, sliced in half
2 tbsp feta cheese
2 tbsp chopped walnuts

Salad dressing

¼ cup extra virgin olive oil
1 tsp orange zest
1 oz orange juice
1 oz lemon juice
1 tbsp sherry vinegar
salt and pepper to taste

Directions

1. Combine brown sugar, cumin, chili powder, salt, and pepper. Rub blend on fish; cover and chill 30 minutes.
2. Grill asparagus on rack coated with cooking spray for 5–7 minutes. Grill fish, skin side up, 5 minutes each side.
3. Toss greens with dressing and arrange on four dinner plates. Top with grilled salmon and garnish with orange, asparagus, tomatoes, feta, and walnuts.

Per serving: 471 calories, 27 g protein, 35 g fat (7 g saturated fat), 68 mg cholesterol, 3 g fiber, 9 g sugar, 204 mg sodium. Calories from fat: 66%.



healthy recipe

→ Pecan-Crusted Salmon

Makes 4 servings

Ingredients

4 4-oz salmon filets
salt and pepper to taste
1 tbsp Dijon mustard
1 tbsp honey
2 tbsp panko breadcrumbs
2 tbsp chopped pecans
1 tbsp chopped parsley
fresh lemon cut in wedges

Directions

1. Sprinkle salmon with salt and pepper.
2. Place salmon skin side down on baking sheet.
3. Combine mustard and honey, and brush on salmon.
4. Mix topping of breadcrumbs, pecans, and parsley and sprinkle over salmon, pressing down into honey mustard coating.
5. Bake salmon at 400°F 10–15 minutes or until flaky.
6. Serve with lemon wedges.

Per serving: 265 calories, 29 g protein, 9 g carbohydrate, 12 g fat (1.6 g saturated fat), 78 mg cholesterol, 0.4 g fiber, 282 mg sodium. Calories from fat: 42%.

FROM LEFT: HOWARD SHOOTER/STOCKFOOD; SARA DANIELSON/STOCKFOOD; FOODCOLLECTION/GETTY IMAGES

TED MORRISON

Most famous as curvalicious Joan on *Mad Men* and starring in two new movies, **Christina Hendricks** reveals her secrets for enjoying life on her own terms and putting first things first, no matter the demands of her **va-va-voom** acting career



Queen Christina

By Rebecca Ascher-Walsh
WebMD Contributing Writer

s Joan Harris (née Holloway), the corseted, curvy, take-no-prisoners secretary-in-chief in AMC's hit series *Mad Men*, Christina Hendricks has crashed a vase over someone's head to get attention. In real life, the star has wowed audiences and critics simply by being herself, a talent whose range is matched only by her extraordinary energy and beauty.

This fall she has two new movies—the comedy *I Don't Know How She Does It*, co-starring Sarah Jessica Parker, and the thriller *Drive*, opposite Ryan Gosling and Carey Mulligan. And she's recently resumed filming the fifth season of *Mad Men*, which has earned her an Emmy nomination for Outstanding Actress in a Drama Series, a Critics' Choice Television Award, and legions of fans who either want to be Joan or date her. At press time, she was up for her second Emmy nomination.

Hendricks, 36, has made Hollywood's coveted "A list," and she's done it on her own exacting terms, heralded equally for the mastery of her craft and her looks. *Esquire* voted her America's Most Beautiful Woman last year, but she's a self-professed homebody who'd rather be knitting than posing on every red carpet in town. She's idealized enough physically to have earned her own Barbie doll, but she makes women feel good about themselves.

Reviewed by
Louise Chang, MD
WebMD SENIOR MEDICAL EDITOR



Hendricks' power doesn't just come from her skill or because she thumbs a perfectly manicured finger at the idea of size 2 beauty. It's also due to her stalwart belief that a life well lived—professionally and personally—entails confidently embracing oneself and the world. Says *I Don't Know How She Does It* director Douglas McGrath, "You expect to meet a heart-staggering, man-killing wonder woman, but she's so friendly and sweet, with a wonderful, droll intelligence and sense of humor."

"My mother always made me feel like we could accomplish anything," says Hendricks of the now-retired therapist. (Her father worked for the U.S. Forest Service; her brother, Aaron, is a graphic designer in Los Angeles and the producer and host of the Web podcast *GeeksOn*, on which Christina has appeared.) "If we wanted to try something new or had an interest in something, she was always incredibly excited for us and had positive feedback. And I think that affected every part of my life and career and how I've carried myself. I always felt like I could do anything."

And everything. In addition to her nonstop career, she's also found time to give back, signing on as spokesperson for the Latisse Wishes Challenge (www.latissewisheschallenge.com), in which the

“Be nice to yourself! We all need to look in the mirror and see the things that are beautiful in ourselves, and to remind ourselves of what those things are.”

company matches up to \$250,000 in donations to the Make-A-Wish Foundation. (Latisse is an FDA-approved medication to promote eyelash growth in a condition called eyelash hypotrichosis.) In just two years, the campaign has raised \$1.5 million to help grant wishes to critically ill children.

Hendricks first became familiar with the organization when she was 7 years old and a sick classmate was granted her wish to meet Erik Estrada, star of the then-popular TV series *CHiPs*. "I've admired Make-A-Wish ever since, so I'm honored to be involved with them," she says. As with other commitments in her life, her involvement is passionate: In Los Angeles, "Christina came and spent an afternoon with seven of the kids, and she had the best connection with them," says foundation spokesperson Brent Goodrich. "The kids were hopping on her lap, and she was so interested in them."

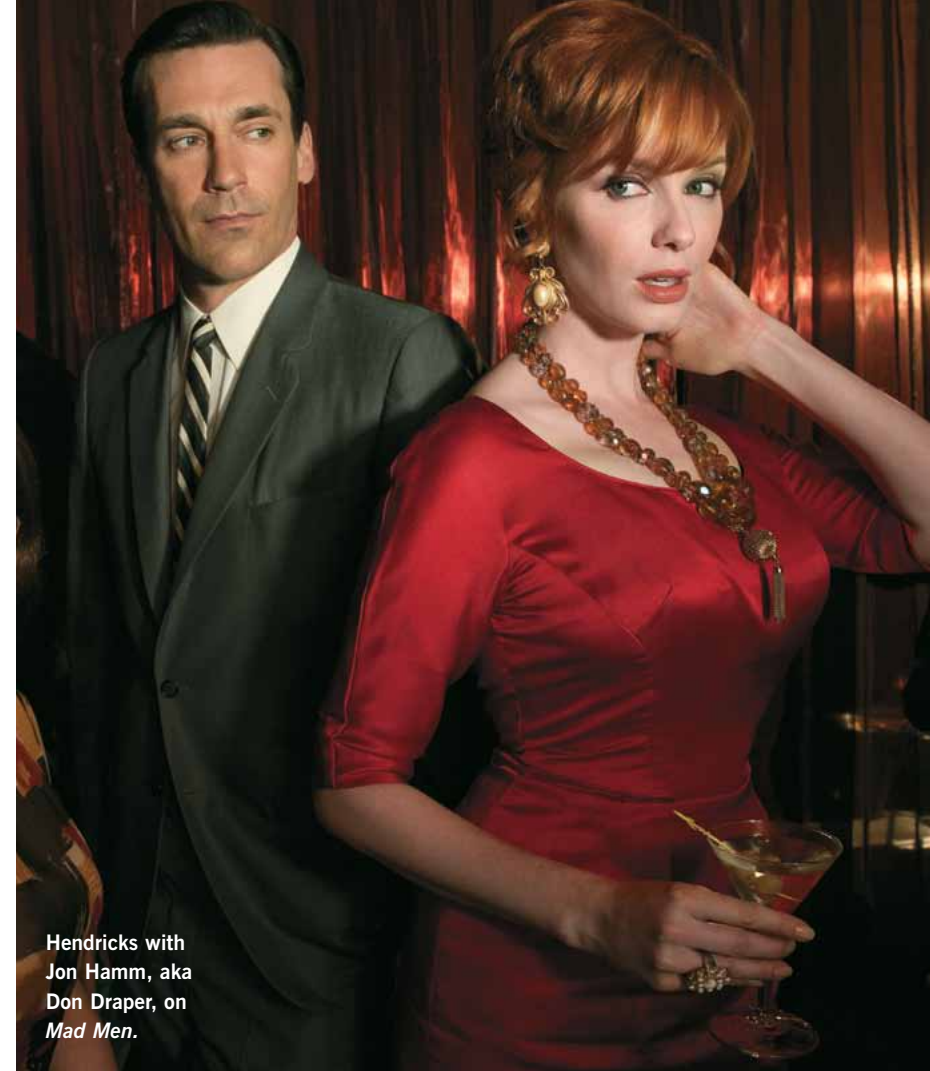
Solid Beginnings

Hendricks attributes her down-to-earth values to her parents and the nurturing environment of her childhood home in Twin Falls, Idaho. "It was just a nice place," she says.

It was there she developed her ease with her own looks, mirrored by the attitudes of those around her. "I never even heard people talk about body types," says the actor. "When I was in high school, I would read magazines, but I was just looking at the clothes and the hair," she insists.

"Even now, it's never been a focus in my life. I've always been fit, I've always been active, and I've always been healthy, but I've just tried to live my life the way I live it. It's nice that I've gotten a lot of positive feedback about it lately," she says with a smile, her voice both higher in pitch and quieter than Joan's, "but I'm just doing what I normally do."

PREVIOUS PAGE: RUVEN AFANADOR/CORBIS OUTLINE. BELOW LEFT: AMC. RIGHT: RICHARD FOREMAN JR., SMPSP



Hendricks with Jon Hamm, aka Don Draper, on *Mad Men*.

Her role on *Mad Men* has only helped her get her message across: Far from eschewing the figure-flaunting costumes (corsets and garter belts required), Hendricks praises their sexiness and how they make her feel.

Indeed, Hendricks seems to avoid the trap so many people find themselves in when it comes to judging themselves by their appetite or a cultural standard. "Be nice to yourself!" she says. "We all need to look in the mirror and see the things that are beautiful in ourselves, and to remind ourselves of what those things are. And it's nice to have the people around us remind us, too."

Amy Pizer, PhD, a psychotherapist in New York City who praises Hendricks' healthy attitude, notes, "No matter what, you can look in the mirror and find something you like. We have images of what we 'should' look like that aren't realistic. Instead of focusing on what you don't like, practice focusing on finding things, or one thing, that you do."

Having loved ones' admiration is helpful as well, says Pizer, especially if we can

internalize those voices. "We are bombarded with images that make us feel substandard, so when you look in the mirror, try to hear friends' voices. What do they say? That you have a beautiful smile, or you glow? Listen to that voice until it is integrated into your own healthy voice."

Christina's Daily Routine

With 15-hour workdays and constant travel, Hendricks finds that keeping up a healthy routine—let alone a "normal" life—requires great discipline. A dancer until she was 19 years old, Hendricks never worried about getting additional exercise or watching what she ate. Now, "I have to constantly remind myself to check in and be good to myself, to take vitamins and exercise," she admits. "I'd always be happy to just snuggle in bed with a book."

Hendricks practices caring for herself from the moment she awakens, beginning with a soothing soak even if she's required on set at dawn. "I'm not a shower person," she says, "so I always start my day with a

Love Lessons

Learn to adore your body exactly as it is

Actor Christina Hendricks is a powerful role model in reminding us that learning to accept—and even love—our bodies isn't an impossible task.

Two negative forces stand between us and the mirror, says Amy Pizer, PhD: "an unrealistic media ideal and our overly critical internal voice." She offers a few tips to help you begin to change your thinking:

Give Praise Where Praise Is Due

"Appreciate the functionality of your body and all the healthy things it can do," says Pizer. By shifting the thinking from "Everything's sagging" to "This body carried a baby," or "This body is strong," you're practicing a cognitive technique called "reframing."

Be Your Own Friend

"We always compare ourselves to others," says Pizer, "but we rarely talk as harshly to a friend as we do to ourselves." Hearing a friend's voice in your head instead of your own can stop self-scrutiny and even make you smile.

Redirect When you're stuck in a negative thought, "ask yourself, 'Why am I looking at this body part so much when I have so many other things to do?'" Instead, make a list of what you value about yourself.

Take a Step Back "Do things that remind you that appearance is the least important part of being a good or valued person," says Pizer. "Nurture your friendships, do community service—anything that makes you feel good about yourself."—RAW



Hendricks on the set of *Mad Men*, left, and with Ryan Gosling in *Drive*.

FRANK OCKENFELS/AMC

Christina's Shortcuts to Serenity

Working 15-hour days doesn't have to result in climbing the walls at the end of them. Christina Hendricks shares her surefire tips for feeling good, despite the daily pressure of to-do lists and stressors.

Unplug Just because the world seems wired for Wi-Fi doesn't mean you have to use it. Hendricks spends her time on airplanes lost in books. "Reading a novel is such a treat for me," she says.

Skip the Shower Beginning each day with a bath is a soothing way to awaken and doesn't need to take any more time than a shower. When it comes to de-stressing, "A hot bath helps for sure," says Hendricks.

Sleep In Given the opportunity, Hendricks catches up on sleep. "If you let me sleep for 14 hours, I will do so without hesitation!" she says with a laugh.

Indulge in Your Comfort Food "For me, it's spaghetti with red sauce," says Hendricks. "It's not that hard to make, and it's one thing you can order from room service that they won't mess up."

Find a Hobby You Can Enjoy at Home Hendricks chills out by knitting, which she calls "relaxing and meditative," as well as by listening to music and practicing her accordion.

Stay Connected The less time you have to catch up with friends and family, says Hendricks, the more you probably need them—especially if they're hands-on. Says the actor, "My husband is good at rubbing my shoulders when I need it!"—RAW



Hendricks with her husband, Geoffrey Arend.

bath." And she indulges in one comforting cup of coffee. "I don't really like the taste of it, but I love the smell. It's about having something aromatic and warm in my hand first thing in the morning."

Hendricks is especially conscientious about getting enough sleep and drinking water. "Those two things really affect me daily. I like a lot of sleep, but when I travel, I can't do that, so I know I will have to make up for it later. I just try to stay balanced."

Hendricks' most potent weapon is simple in theory: Everything in moderation. To maintain her famous figure, she does sit-ups and push-ups in her trailer if she has a down moment on the set.

And on a regular basis, she and her husband of two years, actor Geoffrey Arend, schedule workouts together with a trainer, turning what might otherwise be a "have to" into a "love to." Hendricks says during these sessions she does weight training and uses a BOSU ball.

"It makes it so much more fun and makes the time go by so much faster because we're encouraging each other. And my husband is ridiculously funny, so he's making jokes the whole time we're working out, and we're getting time together."

Before turning to acting in her mid-20s, Hendricks modeled in New York and Europe and says that after happily gaining

15 pounds in Italy thanks to indulging in local fare, she has embraced her natural body weight ever since.

That means that rather than follow a strict diet, she eats foods that please her, although with a healthy bent. For example, the couple make soups to keep in the fridge for snacking. At the same time, she allows room for trying new foods and cooking techniques.

"My husband got a deep fryer for his birthday, so we experimented with that, but I'm not a big fan of fried food," she says. "Our new thing is we've gotten a smoker, and he's making his own bacon."

Hendricks also relishes a savory plate of pasta now and then: "Spaghetti in red sauce is always comforting."

Domestic Diva

For Hendricks, a happy and healthy life means a solid home base with her family and close friends. "When my husband and I aren't working, we are always together," Hendricks says. "He's my best friend."

More complicated to schedule but just as crucial to her happiness is time with her women friends. "I couldn't do anything without my girlfriends," she says. "They're the best things in my life. We're all so busy, so we have to remind ourselves how important those

relationships are, but we always get in touch with each other and make time to get together and catch up."

One place you won't find Hendricks is out at Hollywood's hot spots. "When I'm not working or having to go to events, I'm at home," she says with a laugh. There, she curls up with a book or a ball of yarn. "For me, knitting is meditative."

Until recently, when her schedule became too unpredictable, Hendricks also treasured weekly accordion lessons, which she began in her early 30s. "I do have to say that I have ignored it over the last year and a half, and I'm ashamed of that," she says. "It's hard to find time to take a lesson every week. But it's something I love, and music is incredibly important to me. If you practice an instrument, suddenly it's four hours later and you are completely de-stressed. I want to get back to that."

The effects of learning music may have greater health benefits than simply easing tension. A recent study conducted at the University of Kansas Medical Center showed that adults ages 60 to 83 who had played a musical instrument for at least 10 years performed better on memory and brain function tests than those who had not. Brenda Hanna-Pladdy, PhD, author of the study and now assistant professor of neurology at Emory University, suggests that studying music creates alternate connections in the brain that help compensate for diminishing functions as we age.

The importance of additional neural pathways can be likened to having alternative routes when driving on a traffic-jammed highway: "If you don't have another way to get where you need to go," says Hanna-Pladdy, "you just sit in the traffic jam."

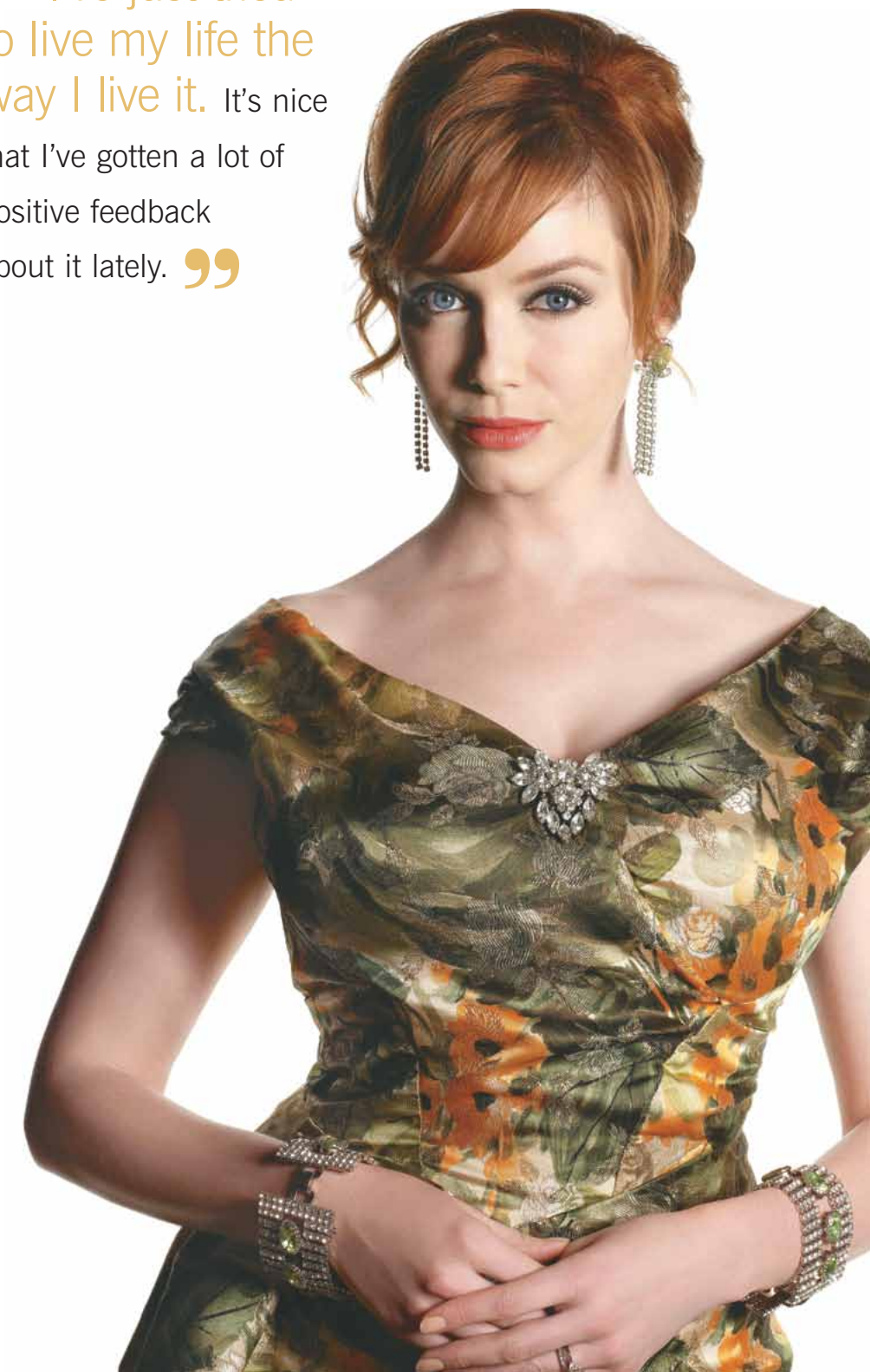
For those like Hendricks who come to music later, says Hanna-Pladdy, "our study shows the most important element is the length of time the person studied music, rather than the age they started. So if one began in one's mid-30s and studied until age 65, that's a significant amount of time."

Perhaps even more important: "Music engages both hemispheres of the brain, it's not a drug, it has no side effects, and it's enjoyable." If Hendricks wishes she had more time to play music, she is a

woman who otherwise has few regrets, thanks to discovering the secret to her own happiness. "I want to be a great actor and a great wife and a great friend, and that's what I focus on," she says.

"I don't sit around and think about myself too much." ■

“I’ve just tried to live my life the way I live it. It’s nice that I’ve gotten a lot of positive feedback about it lately.”



Want to de-stress for success like Christina?  WebMD.com

10

cancer symptoms

women should never ignore

By Christina Boufis, WebMD Contributing Writer

When Caryl Engstrom, 49, found a lump in her right breast, she knew immediately something was wrong. Despite a normal mammogram two months earlier and recent breast exams by her internist and gynecologist, who found nothing amiss, Engstrom knew she needed to call her doctor immediately. "I just had a gut feeling. It was a sizable lump and just didn't feel right to me."

Engstrom's suspicions turned out to be correct when a biopsy revealed she had stage 2 breast cancer, a finding that surprised everyone, she says.



Reviewed by
Brunilda Nazario, MD
WebMD LEAD MEDICAL EDITOR



Though almost 65% of women over 40 have had a mammogram in the last two years, according to the CDC, cancer isn't always caught by screening tests.

Moreover, when women do suspect something, fear sometimes prevents them from seeing a doctor right away, says Beth Y. Karlan, MD, director of the Women's Cancer Research Program at Cedars-Sinai's Samuel Oschin Comprehensive Cancer Institute in Los Angeles. Or women minimize or misinterpret symptoms that could indicate cancer. "They say, 'Oh, this bloating is nothing. It can wait,'" says Karlan. "There's this idea that if you look into it, if you acknowledge the symptoms, then something is going to change in your life, and you don't want it to change."

"But warning signs do not mean cancer," she adds. "Even if you have all of them. There are many other benign diagnoses or physiological changes that can also cause warning signs." For instance, you can have bloating, low back pain, and pelvic pressure and just have fibroids, says Karlan.

But if your symptoms are "persistent and progressive," she says, "meaning you wake up every morning and feel something and it has you worried—even for two weeks in a row—it really is worth calling your physician and having it checked out."

Regular checkups and screenings such as Pap smears and mammograms, as well as knowing your own body, are all crucial for good health, Karlan adds.

Which changes are worth bringing to your doctor's attention? We've asked experts about the signs and symptoms you most want to keep on your radar screen.

1 Breast Changes

"If you feel a lump, you shouldn't ignore it, even if your mammogram is normal," says Carolyn Runowicz, MD, herself a breast cancer survivor and professor of obstetrics and gynecology at Florida International University's Herbert Wertheim College of Medicine and past president of the American Cancer Society. If your nipple develops scaliness or flaking, that could indicate Paget disease of the nipple, which is associated with an underlying cancer in about 95% of cases. Any milky or bloody nipple discharge should also be checked out.

Persistent and progressive symptoms—you wake up every morning and feel something worrisome—are worth calling your physician about.

Dimpling of the skin over the breast, particularly if it looks like the skin on an orange, "is something to be worried about," says Karlan. Such dimpling is most often associated with inflammatory breast cancer, a rare, usually aggressive cancer characterized also by swollen, hot, red breasts.

Expect your doctor to do a breast exam and medical history, followed by a mammogram or sonogram and perhaps a biopsy, depending on the results of both tests.

2 Irregular Bleeding

Once you hit menopause (defined as 12 months without a period), any postmenopausal bleeding is a warning sign, says Runowicz. "Any bleeding, staining, little drops on your underwear, or big clots are abnormal and should be immediately investigated," she says. Such bleeding could indicate something as benign as an endometrial polyp or something more serious like endometrial or cervical cancer.

Bleeding that is uncharacteristic for you—spotting outside of your normal menstrual cycle or heavier periods—should be looked into, says Karlan. Around menopause, abnormal bleeding is often attributed to hormonal shifts, though more serious problems could be the cause, which is why all abnormal vaginal bleeding should be evaluated. Expect to receive a transvaginal sonogram and perhaps a biopsy.

3 Rectal Bleeding

Colon cancer is the third most common cancer in women. One of the hallmarks is rectal bleeding, which many people attribute to hemorrhoids, the most common cause.

"But it's not always that," says Karlan. Red or dark blood in your stool warrants a visit to your doctor, she says.

Your doctor will likely do a rectal exam and order a colonoscopy if you're 50 or older and perhaps even if you're younger.

4 Discharge

A foul or smelly vaginal discharge could be a sign of cervical cancer, says Runowicz. The discharge may contain blood and may occur between periods or after menopause. It's best not to self-treat a discharge with over-the-counter medications, she advises.

An exam is necessary to determine if the discharge is due to an infection or something more serious.

5 Bloating

"Ovarian cancer is the No. 1 killer of all the reproductive-organ cancers," says Karlan. "For years it's been known by the misnomer of the silent killer, and we really need to put that aside. Ovarian cancer clearly has symptoms." The four most frequent are bloating; feeling that you're getting full earlier than you typically would when eating; changing bowel or bladder habits, such as urinating more frequently; and low back or pelvic pain.

It's not unusual to have one or two of these symptoms occasionally, particularly after a big meal. But pay attention if you have two or more symptoms occurring daily for more than two weeks. "If they're persistent and progressive," says Karlan, "call your physician."

Expect a pelvic exam, transvaginal sonogram, and perhaps a CA-125 blood test to check for cancerous cells.



3 Ways to Minimize Your Cancer Risk

Know thyself. Make a family health tree. "Know your family history," says cancer researcher Beth Y. Karlan, MD. "Know what you're at risk for," so you can focus on screenings and preventions. Moreover, you're just as likely to inherit your risk of breast and ovarian cancer from your father's side of the family as from your mom's, she adds.

Check your BMI. Make it a habit to know your body mass index, and keep it under 25—the dividing line for being overweight, says Karlan. Regular exercise can lower blood-estrogen levels, which helps cut your risk of breast cancer.

Schedule screenings. "Make sure you get a colonoscopy if you're 50 or older," says obstetrics and gynecology professor Carolyn Runowicz, MD. And schedule regular Pap smears (starting three years after first intercourse or no later than age 21) as well as mammograms after 40, according to the American Cancer Society.—CB

6 Unexplained Weight Gain or Loss

"If you suddenly put on 5 pounds, I wouldn't worry," says Runowicz. But gaining excess weight month to month—especially if you usually maintain a normal weight and watch what you eat—can be due to an accumulation of fluid in the belly related to ovarian cancer and warrants seeing your doctor, she explains.

Unexplained weight loss of 10 pounds or more "may be the first sign of cancer," according to the American Cancer Society, and is most often associated with pancreatic, stomach, esophagus, or lung cancer.

But weight loss in women is often caused by a hyper-active thyroid, says Runowicz. Expect your doctor to order a thyroid test first to check for this common disease.

7 Persistent Cough

Any persistent cough—one that lasts more than two or three weeks and is not due to an allergy or upper respiratory infection or one that produces blood in the sputum—needs to be checked by your doctor. If your cough may be caused by smoking or being exposed to second-hand smoke, get it checked out. "Smoking is the number one cancer killer of women," says Karlan. Yet you don't have to be a smoker to be at risk; the majority of lung cancers that occur in nonsmokers also occur in women. Expect your doctor to order a chest X-ray and perhaps a CT scan.

8 Change in Lymph Nodes

"If you feel hard lymph nodes in your neck or under your arm, you should be seen by a doctor," advises Runowicz. Swollen, firm lymph nodes are often the result of an infection. However, lymphoma or lung, breast, head, or neck cancer that has spread can also show up as an enlarged lymph node. Expect a physical exam and possibly a biopsy.

9 Fatigue

Although fatigue can be hard to quantify, the American Cancer Society defines it as "extreme tiredness that does not get better with rest." If you're persistently fatigued, see your doctor. Leukemia, colon, or stomach cancer—which

can cause blood loss—can result in fatigue.

"Fatigue can be a serious problem and it's easy to ignore," says Runowicz, who notes your doctor will most likely do a physical exam and order blood tests to evaluate your thyroid and rule out a thyroid condition.

10 Skin Changes

Keep an eye on any changes you notice on your skin all over your body, and call your doctor right away if anything concerns you.

Sores in the mouth that don't heal—especially if you smoke or drink alcohol—may be a sign of oral cancer and should be examined by your physician.

In particular, note any sores or irritated skin in the vaginal area. "A nonhealing vulvar lesion could be a sign of vulvar cancer," says Runowicz. Changes in moles or pigmented lesions on the vulva can also signify cancer. "Vulvar melanoma can frequently be overlooked and can have a very aggressive course," says Karlan. A simple biopsy can be done in your doctor's office if necessary.

The Bottom Line

Watch for all of these symptoms, but remember: While it's important to be on the alert for physical changes, "We don't want to [cause] too much alarm," says Karlan.

"Don't be afraid," she says. If you notice something different about your body, get it checked out. Most likely it's not cancer, but if it is, she says, "cancer is treatable, often it's curable, and clearly having a diagnosis earlier will allow you to have the most benefit possible from current health care advances and to live as full a life as prior to a diagnosis."

Caryl Engstrom agrees. "It's all about early diagnosis. At the stage I was diagnosed, it was completely treatable," she says. Getting confirmation she had breast cancer was "the worst part." The treatment—a mastectomy, chemotherapy, and radiation—"wasn't that difficult," she adds. "I found it all very manageable."

Today, two years after being diagnosed and treated, Engstrom is in remission, despite having what turned out to be a very fast-growing cancer—and, more important, despite recent screenings that revealed nothing amiss. For her, picking up the phone right away was the best thing she could do for her health—and her life. ■

CANCER

QUIZ

COLORECTAL CANCER TESTS

DID YOU KNOW?

Colorectal cancer doesn't always show symptoms. Signs sometimes include blood in the stool, unexplained abdominal pain or cramps, and **unexplained weight loss.**



QUESTIONS FOR YOUR DOCTOR

- 1 Based on my personal history, when and how often should I start screening?
- 2 What colorectal cancer symptoms should I watch for?
- 3 What kinds of things can I do to decrease my risk of colorectal cancer?
- 4 What treatment options are available if I am diagnosed with colorectal cancer?

CANCER NEWSLETTER

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MIND

QUIZ

IS YOUR CHILD DEPRESSED?

Children's depression symptoms are not always the same as adults'. Take the case of **barbie68505**, whose 11-year-old son “throws a fit” whenever he's asked to do something by screaming, crying, and throwing himself on the couch. **“I want to know if this is anger issues, depression, or is it partly because of his age?”** she asked WebMD's parenting community recently. **“What am I to do?”** Though it would take a behavioral specialist to diagnose this boy for sure, angry outbursts are indeed a symptom of depression in children. Do you know the other signs?

- | | |
|--|--|
| 1 Frequent sadness, crying
<input type="radio"/> Yes <input type="radio"/> No | 5 Major change in sleeping or eating habits
<input type="radio"/> Yes <input type="radio"/> No |
| 2 Hopelessness, feelings of worthlessness or guilt
<input type="radio"/> Yes <input type="radio"/> No | 6 Increased anger, agitation, and irritability
<input type="radio"/> Yes <input type="radio"/> No |
| 3 Apathy, low energy, loss of interest in activities that used to be enjoyable
<input type="radio"/> Yes <input type="radio"/> No | 7 Excessively irresponsible behavior or unusual defiance
<input type="radio"/> Yes <input type="radio"/> No |
| 4 Difficulty concentrating or making decisions
<input type="radio"/> Yes <input type="radio"/> No | 8 Thinking or talking about suicide or death
<input type="radio"/> Yes <input type="radio"/> No |

Answer: All of the above are common symptoms of depression in children and teens. In teenagers, depression can be tough to diagnose, given the emotional highs and lows that characterize these turbulent years. But persistent sadness that interferes with daily functioning is a red flag. Fortunately, depression is treatable. If you spot these signs, call your child's doctor right away.

Source: National Institutes of Health, the American Academy of Child and Adolescent Psychiatry, the FDA, the National Youth Violence Prevention Resource Center, and the **WebMD Depression Health Center**

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QUANTUM
HEALTH

SLEEP

QUIZ

DO YOU HAVE GOOD SLEEP HABITS?

schraderj4, a member of the WebMD sleep disorders community, doesn't have a problem falling asleep. Her problem, she posted recently, **"is STAYING asleep! I sleep for about an hour at a time, sometimes a little more or less. It affects everything in my life now as I am always tired, can't remember things I've known for years, can't concentrate on simple tasks."** schraderj4 may have a problem with her sleep habits, also called "sleep hygiene." Do you know how the following factors can affect your sleep?

- 1 Do you watch TV, eat, or discuss emotional issues in bed?
☐ Yes ☐ No
- 2 Do you drink fluids after 8 p.m.? ☐ Yes ☐ No
- 3 Do you smoke or drink alcohol before sleeping? ☐ Yes ☐ No
- 4 Do you exercise before bedtime? ☐ Yes ☐ No
- 5 Does your pet sleep with you? ☐ Yes ☐ No

Answers: If you answered "yes" to any question, you may need to improve your sleep hygiene. **1.** Use your bed only for sleeping or sex; associating it with other activities can make it harder for you to fall asleep. **2.** Stop drinking fluids after 8 p.m. so that you don't wake up to urinate. Don't consume caffeine in coffee, tea, sodas, or medications for six to eight hours before bedtime. **3.** Nicotine is actually a stimulant. Alcohol may help you fall asleep, but it can disrupt your sleep. **4.** Exercising regularly makes it easier to fall asleep and contributes to sounder sleep, but do it at least five hours before bedtime. **5.** Keep pets out of your bed so they don't wake you or trigger allergic reactions. If you improve your sleep habits and still don't sleep well, talk with your doctor.

Source: National Sleep Foundation; the National Heart, Lung, and Blood Institute; and the [WebMD Sleep Disorders Health Center](#)

DID YOU KNOW?

During middle age, sleep patterns alter: **We wake up more** than in our younger years.



QUESTIONS FOR YOUR DOCTOR

- 1 What are some things I can do to improve my sleep?
- 2 Do I have health or psychological problems that might be affecting my sleep?
- 3 What are the common types of sleep disorders? Could I have one?
- 4 Do I need to see a sleep specialist? What can I expect at that appointment?

SLEEP WELL NEWSLETTER

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DIET

QUIZ

WHAT'S YOUR DRIVE-THROUGH IQ?

Now that it's fall, kids' activities are in full swing. And some nights, dinner may have to come from a drive-through. How to make it healthy? In WebMD's diet community, **Trepilicious** recently suggested that people eat more slowly: **"It takes 20 minutes for your body to realize that it's full. You could've gobbled down 2 Big Macs in [that] time. Those burgers alone are a full day's worth of calories!"** How healthy are your fast food choices?

- 1 Do you choose chicken over beef?
☐ Yes ☐ No
- 2 Do you substitute mustard for mayonnaise on your sandwich?
☐ Yes ☐ No
- 3 Do you order a small serving of fries instead of medium?
☐ Yes ☐ No
- 4 Do you skip the soda in favor of water or low-fat milk?
☐ Yes ☐ No

Answers: If you answered "yes" to these questions, you're on your way to healthier fast food. **1.** Grilled chicken sandwiches—not fried or breaded—are a better choice than beef patties, which contain lots of saturated fat. **2.** Mustard has almost no calories or fat, compared with 100 calories per tablespoon of mayo. Even better, hold the sauces and ask for extra lettuce and tomato. See if you can get a whole-grain bun, too. **3.** With small fries instead of medium, you save 130 calories and 10 grams of fat. An even healthier choice is to order a small salad. **4.** A soda adds 10 calories per ounce, so do the math: A 32-ounce soft drink packs 320 empty calories.

Source: [WebMD Diet and Nutrition Center](#)

DID YOU KNOW?

- 2 Average number of times kids ages 11 to 18 visit fast food restaurants every week



QUESTIONS FOR YOUR DOCTOR

- 1 Is my weight unhealthy? What are the guidelines for a healthy weight level?
- 2 Should I have my cholesterol levels checked? How frequently?
- 3 Do I need to limit sodium to control high blood pressure?
- 4 What other steps should I take to eat more nutritious foods?

WEIGHT CONTROL NEWSLETTER

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HEART

QUIZ

TEST YOUR SMARTS ABOUT HEART FAILURE

The words “heart failure” are scary—and not many people understand them. Take the case of **nmsheri**, whose husband died at the age of 71. The day before he died, she told WebMD’s heart disease community, he **“complained of feeling like he had the flu...in his words, ‘Felt like he had been hit by a truck.’ Is this a common feeling with CHF?”** Fatigue is one symptom of CHF (congestive heart failure), but others need to be present as well. How much do you know about heart failure?

- 1 Heart failure means that your heart has stopped working.
☐ True ☐ False
- 2 There is only one type of heart failure.
☐ True ☐ False
- 3 Swollen ankles are a common symptom.
☐ True ☐ False
- 4 Heart attack can lead to heart failure.
☐ True ☐ False

Answers: 1. False. Heart failure means that your heart can’t pump enough blood to meet your body’s demands for oxygen and nutrients. It’s a serious problem that requires medical care, but some people can live with the condition for several years. 2. False. Two major types exist. Systolic heart failure develops when the heart muscle can’t contract forcefully enough to pump adequate amounts of blood. In diastolic heart failure, the heart’s walls stiffen and thicken so that the heart can’t relax and fill normally with blood. 3. True. Common symptoms include swelling of ankles, feet, legs, and sometimes the lungs and abdomen; shortness of breath or trouble breathing; coughing; and fatigue. 4. True. Heart failure stems from many conditions that damage the heart, including heart attack, coronary artery disease, high blood pressure, diabetes, and heart valve disease.

Source: National Heart, Lung and Blood Institute; the Centers for Disease Control and Prevention; and the **WebMD Heart and Vascular Health Center**

DID YOU KNOW?



Symptoms **don’t always correlate** with how weak the heart is. You may have many symptoms with a mildly weakened heart—or none with a severely damaged heart.

QUESTIONS FOR YOUR DOCTOR

- 1 What was the cause of my heart failure? Is there a treatable, underlying illness?
- 2 How severe is my heart failure? What can I do to manage it properly?
- 3 What should I do if my symptoms suddenly start to worsen?
- 4 What is a cardiac rehabilitation program? Should I enroll in one?

HEART HEALTH NEWSLETTER

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SEX

QUIZ

COULD YOU HAVE HERPES?

Genital herpes is one of the most common STDs in America. But few people understand what it is or how to protect themselves (or others). **“I’ve only had three sexual partners,” Brits2891**, an 18-year-old who was recently diagnosed, writes in the WebMD sexual conditions and STDs community. **“I know you don’t have to sleep around to get it.”** How much do you know about herpes?

- 1 The symptoms of genital herpes are easy to spot.
☐ True ☐ False
- 2 Women are more likely to become infected than men.
☐ True ☐ False
- 3 You can only get genital herpes if your partner has genital herpes.
☐ True ☐ False
- 4 Once you have genital herpes, you have it forever.
☐ True ☐ False
- 5 As long as you don’t have any sores, you can’t spread a herpes infection.
☐ True ☐ False

Answers: 1. False. Many people don’t realize they have genital herpes because they develop no symptoms. Those who do typically have blister-like sores around the genitals or rectum that can take several weeks to heal. Most genital herpes is caused by herpes simplex virus type 2 (HSV-2) but it can also be caused by type 1 (HSV-1). 2. True. About 1 in 5 women ages 14–49 has HSV-2, compared with one in nine men. Researchers think this may be because the infection passes more easily from men to women than vice versa. 3. False. Cold sores, which usually develop on the mouth and lips, are usually caused by HSV-1. But the rate of genital herpes infections caused by HSV-1 has nearly tripled since 1988, because more and more teens are having oral sex. 4. True. No treatment can cure genital herpes. But antiviral medications can reduce your outbreaks and shorten the length of your outbreak. 5. False. You can spread genital herpes even if you don’t have any sores. But you can reduce the chances by not having sex when you have sores, using latex condoms correctly and consistently, and getting tested.

Source: **WebMD Guide to Herpes**

DID YOU KNOW?

One out of six Americans ages **14 to 49** years has a genital HSV-2 infection.



QUESTIONS FOR YOUR DOCTOR

- 1 How do I know if I have genital herpes? What are the signs to watch for?
- 2 What medications can help suppress my symptoms? Do I need to take medication regularly?
- 3 What are some of the possible complications of genital herpes?
- 4 How can I avoid getting genital herpes? Can I prevent herpes breakouts?

SEX NEWSLETTER

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PAIN

QUIZ

ARE YOUR KNEES AT EASE?

Spartanx35 tweaked a knee about a year ago and it's still causing trouble. Her doctor recommended icing it down and getting a knee brace. She also wrote to WebMD's fitness & exercise community for some tips: **"I don't want to start back up working out only to make my knee worse by doing something I shouldn't be doing."** In addition to seeing a doctor, do you know how to treat knee pain?

Change of activities: Hurting knees need time off. Stop running or doing anything that worsens the pain. Instead, stay fit with water workouts, swimming, walking, biking, and other activities that don't put pounding pressure on knee joints. Also, weight training builds muscle strength, which helps support the knee.

Pain relievers: Over-the-counter drugs such as acetaminophen can ease pain, while ibuprofen and naproxen reduce pain and swelling. (Take only the recommended dose and for no longer than 10 days in a row without checking with your doctor.) Pain-relieving gels, salves, or creams that contain capsaicin may also relieve discomfort.

Ice packs: Apply ice packs for 15 to 20 minutes at a time, four times a day, to keep swelling and pain down.

Compression: To reduce swelling and provide extra support, compress your knee gently by wrapping it with an elastic bandage.

Elevation: Limit swelling by elevating your knee above your heart level.

If knee pain persists after three days, call your doctor.

Source: Arthritis Foundation, the Centers for Disease Control and Prevention, and the [WebMD Arthritis Health Center](#)

DID YOU KNOW?



Being overweight or obese is a leading cause of knee pain.

QUESTIONS FOR YOUR DOCTOR

- 1 What's causing my knee pain: injury, overuse, arthritis, or another problem?
- 2 What are my treatment options? Which pain reliever is best for me?
- 3 What kind of exercise should I do? How many times a week and for how long?
- 4 What can I do to prevent my knee pain from getting worse?

CHRONIC PAIN NEWSLETTER

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knee pain [WebMD SEARCH](#)

ALLERGIES

QUIZ

WHAT IS ALLERGIC ASTHMA?

For 50% of adults with asthma, allergens are a trigger. **"This allergy season is different—everyone says so," mathchickie** wrote recently to another member of the WebMD asthma community, who was commenting about an increase in allergy and asthma symptoms. **"Pollen counts are much worse, and peak pollen is lasting longer."** Do you know the kinds of allergens that can trigger asthma?

- | | |
|--|--|
| 1 Cockroaches and dust mites
<input type="radio"/> Yes <input type="radio"/> No | 4 Mold spores and pollen
<input type="radio"/> Yes <input type="radio"/> No |
| 2 Stress and anxiety
<input type="radio"/> Yes <input type="radio"/> No | 5 Pet dander
<input type="radio"/> Yes <input type="radio"/> No |
| 3 Cold air and dry air
<input type="radio"/> Yes <input type="radio"/> No | 6 Smoke
<input type="radio"/> Yes <input type="radio"/> No |

Answers: Cockroach droppings, mold spores, pollen, and pet dander are all common triggers for allergic asthma. Although smoke, stress, and cold air can trigger an asthma attack, this is not an allergic reaction. Specifically, smoke and cold air can trigger an asthma attack by irritating the lining of the airways. Doctors are unsure how stress causes asthma attacks.

ALLERGIES NEWSLETTER

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allergies and asthma [WebMD SEARCH](#)

Source: American Academy of Allergy, Asthma, and Immunology; the Asthma Foundation of America; the National Institutes of Health; and the [WebMD Allergies Health Center](#)

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DIABETES

QUIZ

DO YOU KNOW YOUR A1C?

If you have diabetes, you've probably heard about the HbA1c test—or A1c. But you may not know what it is. Here's a good definition from **David Hueben**, who posts regularly in WebMD's diabetes community: **"The A1c can be used to approximate an average glucose level for the previous 90 days (heavily weighted to the end of the testing period)."** The higher your glucose levels, the higher the number, as this chart shows.

A1c Test Results Guide

HbA1c test results (%)

5	6	7	8	9	10	11	12
Target			Suboptimal		Poor		
Average Plasma Glucose (mg/dL)							

For people without diabetes the normal range of A1c values is less than 6.5%. If you have diabetes, you should aim for an A1c result of less than 7%. The difference seems small, we know, but it's important: Even a 1% rise in A1c test results increases your risk of diabetes-related complications, including eye disease, heart disease, nerve damage, kidney disease, and stroke.

Your doctor will use this test, along with your home blood glucose monitoring, to develop the best diabetes treatment for you. Some doctors are also beginning to use the test to diagnose diabetes, not just manage it.

Ideally, if you have diabetes you'll take the test every three months or so. But no worries, this is an easy one: Just a quick blood draw and you're done.

Source: National Institutes of Health, American Academy of Family Physicians, National Diabetes Information Clearinghouse, and the **WebMD Diabetes Health Center**

DID YOU KNOW?

About **7 million** people with diabetes in the United States don't know they have it.



QUESTIONS FOR YOUR DOCTOR

- 1 Do I have to have my A1c level tested regularly? If so, how often?
- 2 What do my results mean? What do I need to keep an eye on?
- 3 Do I need to make a change in my medications to achieve better control?
- 4 Are there ways that I can improve my blood glucose readings?

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diabetes

WebMD SEARCH

WebMD **checkup** 10 QUESTIONS ABOUT YOUR LIFE AND WELL-BEING

Kathy Bates

ACTOR

How is your health now?

My health is very good. I've got a lot of energy. I feel really positive and happy to be at work.

You're an Oscar and Golden Globe winner, you're in three movies this year, and you're in two TV series—*The Office* and *Harry's Law*, both on NBC—plus you do work for the Ovarian Cancer National Alliance. How do you manage to do all that and still find time to exercise?

Thankfully, *Harry's Law* has a huge set, and I'm on my feet walking all day. Of course, in the courtroom we're always on our feet making closing arguments and cross-examinations. I find it to be a really good workout.

This year, you also shot a movie, *A Little Bit of Heaven*, about a woman who discovers she has cancer. How did this storyline resonate with you since you've had the disease yourself?

Kate [Hudson] lost quite a bit of weight for the movie, and her makeup was certainly reminiscent to me of my own face. My own complexion got very white and I lost all my hair. It was sometimes hard to look at.

What's your favorite healthy food?

One of the things I eat on set for a quick protein snack is beef jerky. I'm trying to balance my carbs and proteins.

What do you do for relaxation?

I love to read and play with my three dogs. I also love my iPad and being online and seeing what's going on in the world. I don't tweet and I don't do Facebook, but I like surfing the Web.

Do you find yourself recommending a healthy personal practice to your friends?

I don't really proselytize—it's more the other way. Everybody at work has their own idea of what keeps them going, and most of it involves something that tastes really terrible. So I'm afraid I'm on the receiving end of those kinds of tips and not the one who hands them out.

What is the one piece of health advice you would give to other women?

Don't let your weight get out of control. Once that happens, you go on diets and you get a yo-yo effect with your weight. That's the one health problem that I have fought all my life, and that I wish I had been able to get a handle on when I was younger.—Linda Formichelli

In your video interview for the Ovarian Cancer National Alliance (ovariancancer.org), you said going through the experience of fighting ovarian cancer was the best thing that ever happened to you. Why is that?

It helped me see that I'm lucky, and I feel grateful to have the opportunity to continue working, to have relationships with friends, to travel, to have a good relationship with my family. All the things we begin to take for granted in our daily lives.

You advocate listening to your body and heading to the doctor if anything strikes you as wrong. Before the cancer, did you tend to ignore what your own body was telling you?

You get to the point where you don't want to go to the doctor. You tell yourself you don't want any bad news. [In 2003] I was in Europe and a friend said, "You know, you don't look well." I was very flushed and very tired, and I kept thinking it was the heat. Finally I decided I was not feeling right and I went back home and saw the gynecologist.

How have your health habits changed since?

I've tried to eat better. I try to get more exercise. It's not always easy—it's a constant battle, but I do the best I can.