“There’s a whole subculture in this country of people who are struggling, who are hungry, who have nothing. And if we are to put an end to this, first hunger has to be destigmatized.”

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A Place at the Table
Viola Davis comes full circle as she works to fight childhood hunger and the stigma and stress that go with it
WEBMD HEALTH HEROES
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Lauren Singer

36 Advocate
Chloe Fernandez

38 Inventor
Kavya Kopparapu

40 Medscape Mentor
Donna Magid, MD, MEd
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### On the Cover

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**WEBMD.COM**
If you ever needed a reason to place hope for the future in the youth of today, look no further. In this issue, we honor some of the best and brightest young people working to improve health, wellness, and quality of care. Our 2017 WebMD Health Hero Awards recognize three people under the age of 21 who are already making a difference. In these pages, you will meet Kavya Kopparapu, who at the age of 16 invented a new device to diagnose diabetic retinopathy; Lauren Singer, whose research in high school has helped us better understand autism; and Chloe Fernandez, who at the age of 10 is already a published author, having written a book for kids with a rare genetic disease.

MAGAZINE HONORS

We are proud to announce some recent awards for WebMD Magazine! Folio, the organization that represents the print and digital magazine industry, honored us for design and editorial excellence at the 2017 Folio Awards ceremony last October in New York City. Two Eddie (editorial) awards honored our ongoing men’s health coverage; another Eddie went to the long-form health stories we run in each issue. And an Ozzie (design) recognized the March/April 2017 issue, which featured chef Curtis Stone on the cover. We are honored to receive these awards and pleased to share the good news with you.
Heroes come in all shapes, sizes—and ages. Young people who volunteer not only help others, they also improve their own health and well-being. When teens give back, they perform better in school, develop a stronger work ethic, and are less likely to get into drugs, according to Child Trends, which conducts research on children’s issues.

**FACTS & STATS**

- **24%**
  - Percentage of kids ages 12 to 17 who volunteer at least a few times a month. Their top cause? Animal welfare.

- **1.3 billion**
  - Number of hours that young people contribute to community service each year.

- **60 to 90**
  - Number of volunteering minutes per week that helped reduce kids’ cholesterol levels and body mass index (BMI).

- **19%**
  - How much more likely kids who volunteer are to graduate from college.
Hunger: It’s Personal

We have covered hunger—the sheer lack of not having enough food to eat—in many previous issues of WebMD Magazine but never with the same intense, personal spotlight our cover star Viola Davis shines on the issue. A defining feature of her childhood, the memory of persistent hunger and the accompanying despair and shame now fuel Davis’s work with Hunger Is, an organization that aims to eradicate childhood hunger. The problem is serious and nationwide: Some one in five children suffer from inadequate access to food and the long-term physical, emotional, and social effects of not knowing when or even if the next meal will come. And a hungry child cannot think, focus, or learn. “If we are to put an end to this,” Davis says, “first hunger has to be destigmatized.” Her work to do that brings her life full circle, as you will discover in “A Place at the Table,” page 27.

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IN THE NEWS

ACT YOUR AGE

TODAY’S TEENS ARE no more active than 60 year olds, according to activity tracker data from 12,529 people. Teens should get 60 minutes of moderate to vigorous physical activity every day.

SOURCE: Preventive Medicine

Mobile Monsters

Your phone addiction is creating a monster: your child. Researchers asked 170 parents of toddlers about their attachment to their phone. Parents who admitted to problematic-level phone use were more likely to turn to their phones in the middle of an interaction with their child. Toddlers whose mothers, but not fathers, get distracted by their phones were more likely than others to have behavior problems.

SOURCE: Child Development
RAISE A GLASS (BUT NOT TOO MANY)

A little drinking can lengthen life. A lot can shorten it. Three to 14 drinks per week for men and three to seven for women can lower the risk of dying of heart disease by 20% to 25% compared to those who abstain completely. But heavy drinkers—men who have more than 14 drinks a week and women who have more than seven—are 27% more likely to die of cancer and 11% more likely to die early for any reason at all.

SOURCE: Journal of American College of Cardiology

WEIGHING ON YOUR HEART

Getting down to a healthy weight is important no matter what your other numbers say. In a study that followed 520,000 adults for 12 years, people who were overweight or obese were up to 28% more likely to develop heart disease than their healthy-weight peers—even when their blood pressure, blood sugar, and cholesterol were on target.

SOURCE: European Heart Journal

Happy Thoughts

GIVERS ARE HAPPIER THAN TAKERS. BRAIN MRIs FOUND THAT SMALL acts of kindness, or even just promising to do something kind later, triggered brain activity known to be associated with happiness.

SOURCE: Nature Communications

BLOOD TEST BREAKTHROUGH

A simple blood test may soon detect breast, lung, ovarian, and colorectal cancers in their earliest stages. Tumors shed DNA that then circulates in the bloodstream of people who have cancer. Until now blood tests could only detect this type of DNA in people with advanced cancers. A team of researchers has developed a highly sensitive test that can pick up DNA shed by even the tiniest tumors. The test could one day serve as a cancer screening tool.

SOURCE: Science Translational Medicine

41% PERCENTAGE of Americans who make New Year’s resolutions. Top resolutions? Lose weight and eat healthier.

SOURCE: Statistic Brain
Let’s Talk Screen Time
For every 30 minutes of daily handheld screen time an 18 month old gets, his or her risk of speech delay increases by 50%.

SOURCE: Pediatric Academic Societies Meeting

WAXING WOES
BE CAREFUL DOWN THERE!
From Brazilian-waxing to “man-scaping,” pubic-hair primping is commonplace—and so are related injuries. Three in four adults groom their pubic hair; one in four has been injured as a result. Those wounds can make you more vulnerable to sexually transmitted infections. Cuts, burns, and then rashes are the most common injuries. Risk increases with the extent of grooming. That is, if you go totally bare down there, you’re more likely to hurt yourself in the process. Waxers are the least injury prone, while those who use old-fashioned blades are at highest risk.

SOURCE: JAMA Dermatology

PARENTS, BEWARE.
Prescription painkiller abuse and addiction aren’t just risks for adults. Opioid overdose deaths are on the rise among teenagers ages 15 to 19.

SOURCE: CDC

EAT HEALTHY, BE HAPPY
Healthy eaters are less likely to have depression than unhealthy eaters. In a survey of 177,000 people, those who ate healthy yesterday were almost 32% less likely to be currently depressed and 31% less likely to have been depressed in their lifetime.

SOURCE: Gallup

16 MILLION
Number of Americans living with smoking-related diseases.

SOURCE: CDC
SADNESS, LONELINESS, ANGER, and stress: These and other negative emotions make appearances in everyone’s life. How you respond helps determine your overall psychological health. If you judge yourself harshly when you feel low or try to ignore these emotions altogether, you will feel even lower, say researchers from the University of Toronto and University of California, Berkeley. They suggest a different approach: Rather than resist your occasional dark moods, accept them but give them little attention. By not dwelling on them or criticizing yourself for having them, the researchers speculate, you may avoid a buildup of negativity. This mindful, non-critical approach to your mood may help you avoid depression and anxiety and contribute to a more satisfying and purposeful life.

—MATT McMILLEN

Feeling It
Got the blues right now? You’ll feel better in the long run if you acknowledge your feelings, accept them, and then get on with your day.
The Doctor Is Out

Telepsychology using webcams, online therapy sites, texting, and instant messaging is popular. But can it be as effective as a traditional office visit for treating depression and other conditions?

MILLIONS OF AMERICANS STRUGGLE WITH A RANGE OF MENTAL HEALTH ISSUES, FROM serious psychological and life-limiting anxiety disorders to addictions and clinical depression. Many people never seek help, citing stigma, cost, inconvenience, and inaccessibility as primary reasons. Considering cost alone, the average face-to-face talk therapy session ranges from $100 to $200 per hour, with doctors in larger cities often charging considerably more, plus hefty initial consultation fees.

Popular online therapy sites such as Talkspace, Better Help, and Doctor on Demand aim to solve these issues by virtually and privately connecting therapists with patients, wherever they are, through their laptops and smartphones—and at lower prices than a standard in-person visit.

But does the research back up the effectiveness of remote therapies? The answer is yes and no, says Anat Brunstein Klomek, PhD, clinical psychologist and adjunct associate research scientist at the division of child and adolescent psychiatry at Columbia University.

Talk therapy using webcams, texting, and phone calls for post-traumatic stress disorder and some eating disorders can be just as good as traditional in-person sessions, various studies show.

Still, Klomek, who co-authored the 2014 study *The Future of Online Therapy*, says successfully treating depression—which affects 16.1 million American adults, or about 6.7% of the population age 18 and older—through telepsychology yields mixed results.

“There’s an increasing body of evidence that supports the use of computers and the internet in the provision of interventions for [some groups with] depression,” she says. “However, other studies did not show good results. More studies and long-term follow-up are needed.”

She adds, “It’s a challenge to treat acutely psychotic or suicidal patients in remote therapy. That doesn’t mean we shouldn’t study it. It also doesn’t mean we [shouldn’t] use messaging or phone calls between sessions. I actually think these can be very helpful for suicidal patients.”

She claims the benefits of remote therapies include added convenience and increased accessibility, especially for people with disabilities, while “writing may be therapeutic” in electronic communications.

The drawbacks? Screen sessions and texting offer “no non-verbal cues. This can limit the assessment and treatment of the client,” says Klomek. There may also be “more potential for misreading, cultural clashes, technical issues, and time delays,” even as patients may be at “increased risk for loss of confidentiality” through security breaches.

Klomek adds, “These technologies provide both opportunities and challenges for psychotherapy.” She hopes in-person therapy “is here to stay for those who need and want it. At the same time, delivery of services by telephone, teleconferencing, and the internet will definitely expand rapidly and will change the psychotherapeutic world.”
Recovery Mode

Want to optimize your recovery and propel your future workouts to the next level? Try these tips.

1. REFUEL
Dip into a stash of carbohydrate- and protein-rich foods after you work out. A healthy snack at the right time tops off your energy supply and helps repair and rebuild your muscles.

   About 20 to 60 minutes after your workout, have a snack that's two-thirds carbs and one-third protein, like a turkey sandwich on whole-grain bread.

2. REHYDRATE
"Replenishing your water is critical to optimize your recovery," says Eric Oliver, PT, owner of Beyond Exercise, an athletic development and physical therapy facility in Cincinnati, Ohio. Sipping water post-workout restores cell function, boosts circulation, and brings your body temperature back to normal.

   Drink 8 ounces before your workout, 7 to 10 ounces every 20 minutes during exercise, and another 8 ounces after. For a flavor boost, add a splash of 100% fruit juice or a slice of lime.

3. MASSAGE
Kick muscle tightness, aches, and limitations to the curb with a soft-tissue massage. "If you can't get a massage, using products like foam rollers or massage balls is a decent substitute," says Oliver. Roll them slowly over your muscles, and when you find a sore spot, hold it there for 30 to 60 seconds.

4. COMPRESS
Many athletes and fitness buffs rock compression socks, tights, and sleeves while they work out. But keeping them on longer may be beneficial. Recent research suggests that donning compression wear after exercise—even while you sleep—may aid muscle recovery.

5. ICE
Ice packs and ice baths are a tried-and-true recovery tool. The frigid temp constricts your blood vessels, which sends extra oxygen to your muscles when they warm up again.

   Some pros suggest flipping between an ice bath and a hot shower. Soak in frigid water for 45 seconds, then let a hot shower cascade over you for three to four minutes. Repeat it several times, always starting and ending with cold.

6. GO LIGHT
Intense exercise has major benefits, but gentle workouts deserve credit, too. They boost blood circulation, promote the flow of nutrients to your muscles, and prevent scarring of muscle and connective tissue, says Oliver. Try low-intensity activities like yoga or walking a few times a week.

7. TAKE OFF
"Recovery days are critical in developing more strength, power, or speed from your exercise efforts," says Oliver.

   If you work out hard, alternate muscle groups on different days. Every week, pencil in one full day off plus one day of active recovery, like stretching, easy cardio, or core work.

   If you’re a low-key exerciser, you don’t need a day off. But, says Oliver, “it doesn’t hurt to have that time off to let your body and mind relax and recover for the next week of exercise.”
10 Healthy Habits

Some you may already have! Kick off the new year with some much-deserved credit for improving your health.

1. **You Walk Every Day**
   - Whether it’s through the grocery store, around the block, or on a treadmill, you make every single step count. It helps you keep a healthy weight, move more, and feel more socially connected with others.

2. **You Say Thank You**
   - Studies show that expressing gratitude can help you feel better about your life, improve your relationships, and even help you avoid getting sick.
   - **Step It Up:** Write it down. Research suggests that the act of sending thank-you letters or keeping a gratitude journal can give a big boost to your well-being and even help you sleep better. But don’t worry if you don’t have time—mentally sending a “thank you” (or a quick text) to whoever you’re grateful for can go a long way as well.

3. **You Spend Time with Others**
   - Yes, being social is a sign of good health. People who have plenty of personal relationships are more likely to be healthier overall and even live longer. Whenever you catch up with a pal or sit down to dinner with your family, remind yourself of the benefit you’re bestowing on your mind and body.
   - **Step It Up:** Ditch the screen and connect in real life—research suggests that chatting face-to-face has more benefits than chatting over text or social media. And don’t hold back when it comes to your feelings. Expressing—rather than repressing—your emotions is key for a longer, healthier, and happier life, research suggests.

4. **You Cook at Home**
   - Studies show that people who cook at home eat fewer calories and carbs and less fat than those who eat out more frequently. You don’t have to be the next Top Chef to enjoy a healthy home-cooked meal. Search WebMD’s recipe finder for simple, delicious ideas that don’t take much time or effort to make.

5. **You Spend Time Outdoors**
   - Don’t underestimate the benefits of being around Mother Nature: Research shows that people who live in “greener” areas live longer, have improved mental health, move more, and feel more socially connected with others.
   - **Step It Up:** On weekends, squeeze in a hike or stroll through a park to reap the rewards of both exercise and being in nature. If you live in an urban area or can’t get outside as often as you’d like, simply putting some plants in your home or office may deliver health benefits, like cleaner air, a better mood, and a sense of resiliency.

6. **You’ve Ditched Sugary Soda**
   - Great job—you’ve improved your heart health, lowered your blood pressure, and even reduced your risk of serious health issues like type 2 diabetes. Plus, you’ve avoided all those extra calories and sugar grams that can lead to weight gain.
   - **Step It Up:** Time to trim back on diet soda, too, though more research is needed to show diet drinks are harmful to health. Some studies show even the low- or no-calorie kind has been linked to an increased risk of health conditions like metabolic syndrome and diabetes.

7. **You Make Sleep a Priority**
   - If you get seven to nine hours of shut-eye per night, congratulations—you meet the recommended amount for adults ages 18 to 60. Getting enough ZZZs helps lower your odds of developing long-term conditions like diabetes, high blood pressure, heart disease, stroke, and depression, plus it helps you keep a healthy weight.
   - **Step It Up:** Wind down before bedtime by putting your phone or tablet in another room so you’re not tempted to type or scroll through social media. Studies show that the blue light from smartphone screens can mess with levels of melatonin, the sleep-inducing chemical in your brain, and may even be linked to certain kinds of cancer, diabetes, and heart disease.

8. **You See Your Doctor Regularly**
   - Just like taking your car in for maintenance, your body needs regular checkups too. See your primary care doctor regularly to get an overall view of your vital health numbers, like your blood sugar, blood pressure, cholesterol, and weight. It’s also crucial to see your doctor for cancer screenings, immunizations, and vaccines as needed.
   - **Step It Up:** Make sure you’re also scheduling appointments with specialists as needed:
     - Dentist: Schedule one or two visits per year, depending on your oral health.
     - Dermatologist: See one for a personalized recommendation on how often you should get skin exams. You should also know the signs of skin cancer and check your skin regularly for any unusual spots.
     - Eye doctor: If you wear glasses or contacts, you should already be getting regular exams. But even if you don’t have vision problems or risk factors, get a baseline eye screening at age 40.

9. **You Stay Out of the Sun**
   - Soaking up rays (either from the sun or indoor tanning booths) has been definitively linked to an increased chance of skin cancer, not to mention wrinkles and sun spots.
   - **Step It Up:** Sunscreen isn’t only for beach days. If you’re not already, you should wear it every single day on your face—even on cloudy days, when up to 80% of harmful UV rays can affect your skin.

10. **You Look on the Bright Side**
    - If you’re the kind of person who always sees the glass half-full, kudos to you—your positive attitude lowers your odds of depression and cardiovascular disease and even helps you live longer.
    - **Step It Up:** According to research, you can spread positivity. Try tweaking your everyday language, like choosing to share something good about your day rather than bad, or asking co-workers how they’re doing instead of launching right into business at the start of meetings.
High Five

The secret to preventing dry, flaky hands is knowing what causes the issue in the first place. Try our expert’s tips for healthier, prettier skin.

YOUR HANDS HAVE FIVE TOP enemies during the winter months, says Kally Papantoniou, MD, a dermatologist in New York City. First up are alcohol-based hand sanitizers, which pull natural oils from your skin. Use an alcohol-free version instead. Next, make sure you don’t over-wash your hands. Use a gentle soap or cleanser to avoid dried out skin. Be picky about moisturizers, too. Skip oil-free varieties; natural oils such as coconut help maintain a healthy skin barrier. Don a pair of gloves if you do dishes by hand, and pull on a pair of insulated gloves when venturing outside to shield your hands from the drying frigid air.

—AYREN JACKSON-CANNADY
**Fluid Finds**

No time for a 15-step skin care regimen? That’s where serums come in. Nix the drawn-out routine with these picks from Shilpa Agarwal, MD, a dermatologist from Hackensack, New Jersey, that provide targeted results.

1. **DOUBLE DOWN**
   Clinique Acne Solutions Acne + Line Correcting Serum ($45)
   “Two of skin’s biggest saboteurs—acne and wrinkles—are no match for this oil-free serum that comes with breakout-battling salicylic acid and fine-line fighting moisturizers.”

2. **DEW YOU**
   Avène Hydrance Optimale Hydrating Serum ($38)
   “Hyaluronic acid is a molecule within the topmost layers of the skin; it acts as a sponge and can retain 1,000 times its weight in water. By isolating it in serum form like this one does, it can provide a boost of moisture for all skin types, whether oily, dry, or sensitive.”

3. **SMOOTH OVER**
   SkinMedica Age Defense Retinol Complex ($93)
   “Made with retinol, this powerhouse product works within deeper layers of the skin to help shrink pore size that can visually age skin. Over time this serum, which comes with retinol, can also speed up cell turnover to even out skin tone.”

4. **FLOWER POWER**
   Fresh Rose Deep Hydration Face Serum ($55)
   “Wake up tired-looking skin with this serum that uses water and oil derived from roses to enhance your complexion’s glow and angelica leaf extract to retain moisture.”

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**EXPERT PICKS**

**Fluid Finds**

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**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.**
Shaving Cream
The story behind the lather

BY Liesa Goins

REVIEWED BY Mohiba Tareen, MD
WebMD Medical Reviewer

DON'T FEEL THE BURN
If you're prone to razor bumps (aka ingrown hairs), shave in the shower. Allowing coarse hair to soften in warm water will reduce irritation. Also, shave with the grain, at least to do most of the shaving, then go against it for the last pass.

SAVE YOUR SKIN
Shaving cream softens the hair shaft so the razor requires less force to cut the hair. In addition, cream lubricates skin so there is less friction with the razor—and less chance of irritation.

FUN WITH FOAM
What comes out of a can is shaving foam. Other products lather after you apply them—like gels, oils, lotions, and creams.

BRUSH WITH GREATNESS
Lathering with your hands is fine, but a shave brush can be a useful step in applying shave cream. The bristles help lift stubble off the face to make it easier for the razor to slice them off. Plus, a shave brush absorbs water to create a thicker foam that minimizes friction.
Winter Wisdom

Follow these expert-approved skin-softening strategies to get through the season without any rough spots.

AS THE TEMPERATURE DROPS, WE HAVE NO CHOICE BUT TO PILE ON LAYERS of clothing. At the same time, however, our skin sheds layers as the winter elements cause dehydration. Flaky, itchy patches aren’t just an issue on a cosmetic level—the condition can lead to more serious problems.

“The medical term for dry skin is xerosis and it’s when the top layer of the skin, the stratum corneum, dries out,” says Erster Freeman, MD, assistant professor of dermatology at Harvard Medical School. “You need at least 10% moisture in the top layer for the cells to function; otherwise, the cells shrink and form cracks between them.” Once the cracks form, your skin no longer forms a barrier between you and pathogens, making you vulnerable to allergic reactions and inflammation.

To avoid dry, itchy, red, cracked skin, you just need to adopt a few simple habits. This winter, keep your skin calm, smooth, and protected by following the advice of top dermatologists:

1. STAY OUT OF HOT WATER

After battling cold winds and single-digit temperatures, few things feel better than a long, hot shower or bath. But you’re sucking the moisture out of your skin. Your shower and bath habits have a big impact, says Barbara Reed, MD, clinical professor of dermatology at the University of Colorado Denver Hospital. Staying in hot water, using a harsh soap, and toweling off too vigorously can sap moisture, she explains.

“Try to make your shower quick and as lukewarm as possible, and use a moisturizing body wash that contains ceramides to help restore moisture,” says Carol Jacob, MD, a dermatologist in Chicago and fellow of the American Academy of Dermatology. “I recommend applying lotion within a minute of stepping out of the shower or bath,” Jacob says. “You want to trap the surface water,” she explains. First, gently pat dry then slather on lotion, she explains. “Start with the legs first because they get the dirtiest.

2. MOISTURIZE. MOISTURIZE. MOISTURIZE. EVERY. DAY.

You’re spending time in air with little moisture, both indoors and outdoors, so replacing moisture whenever you can is crucial. “You need emollients to introduce moisture back into the skin,” Freeman explains. Look for shea butter, ceramides, hyaluronic acid, cocoa butter, lanolin, petal-olatum, or squalene on the ingredients list. “But the best moisturizer is the one that you’ll use frequently,” Reed says.

3. AVOID EXFOLIATION

Seeing shiny, flaky, peeling skin can tap into the instinct to exfoliate, but that’s a counter-productive call. “Exfoliating can be irritating,” Freeman warns. Using acids or scrubs to slough off dry skin can be too harsh on already compromised skin. “Being aggressive with moisturizer can help, but don’t exfoliate,” she says. “This is especially true for acne-prone skin.” Irritating your complexion will only cause more inflammation. If you suffer from breakouts, calm skin with a non-comedogenic moisturizer.

4. PICK THE RIGHT FORMULA

“Everybody needs moisturizer to keep their skin balanced,” Jacob says—even those with breakouts or oily skin, she stresses. As the moisture leaves your skin, you’re more prone to flakes and dehydration, which can increase inflammation. Using a gentle, oil-free, non-comedogenic moisturizer will help keep your skin breakout-free. “If you have dry, itchy skin, you need a humidi- fier,” Freeman says. “Having a humidifier in the bedroom is a small change but it can make a big difference in combating dry air.” She advises keeping your bedroom (where you tend to spend the most time) at 40% humidity or higher. Drinking water can also help you stay hydrated, and inside and out, Jacob says. “Water helps skin cells function properly,” she explains. And eating foods containing omega-3 and omega-6 fatty acids can help cells stay healthy and hydrated.

Bottom line: A few tweaks like these mean you’ll be comfortable all winter long—no matter how many layers you’re wearing.

Even if you don’t see flakes, you want to take a proactive approach by applying a moisturizer. “I think the most common mistake is hoping that once skin has become moisturized it will stay moisturized,” Reed says. “Simply put, we get lazy.”

Don’t apply lip products with your fingers. Is that so bad? APPLY LIP BALM WITH MY FINGERS. IS THAT SO BAD?

DON’T APPLY YOURSELF

“Using your fingers to spread a lip balm or ointment is not an ideal method. You’re creating risk of spreading an infection or possibly causing an allergic reaction. The mouth is a major portal of entry for viruses and other illnesses, so avoiding direct contact is always preferable.” —Bruce Brod, MD, clinical professor of dermatology, University of Pennsylvania Perelman School of Medicine

HANDS AREN’T HYGIenic

“Warts are common on the hands and can be spread to the lips and mouth. There’s also a risk of transmission of herpes simplex from your mouth to your hands or vice versa. The skin on your lips is thinner and more sensitive, so if you touch an allergen like nickel from keys or coins or certain nail polish ingredients—and transfer it to your mouth, you could cause an allergic reaction.”

CAN’T TOUCH THIS

“Apply any lip product with an applicator or use a disposable cotton swab to limit the risk of spreading contaminants. The goal is to avoid transferring microbes from one area of the body to another.”

Dirty Secret

“I APPLY LIP BALM WITH MY FINGERS. IS THAT SO BAD?”

THE SCOOP

SHOP AROUND. Look for face washes that contain glycolic acid, salicylic acid, benzoyl peroxide, or granular exfoliants (face washes with crushed nut shells and other hard, non-uniform particles).
Balancing Act

Shuttling between a full-time job and parenting responsibilities can throw your work-life balance out of whack. But you don’t have to sacrifice family for the sake of career.

THE DAYS WHEN MOM STAYED HOME with the kids while dad went to work are long gone. Today in almost half of all two-parent households, both parents work full-time. A recent report from Pew Research shows that both partners struggle equally to juggle work and family conflicts. Finding balance takes effort, but it is doable. First, meet as a family to discuss everyone’s responsibilities and expectations. When you get home from work or after dinner, take 10 minutes for yourself to relax and regroup. Carve out slots each week for family meals and quality time together, which research finds helps forge strong parent/child relationships. —STEPHANIE WATSON
Dry Nights
What to do if your child still wets the bed—and how you can nip it in the bud

THE MOMENT YOUR CHILD USES THE POTTY FOR THE FIRST time can feel like mission accomplished. Yet it can take months or even years longer for some kids to master nighttime dryness. At age 5, 16% of children wet the bed. About 2% of teens still struggle to stay dry overnight.

Doctors used to think of bedwetting as a psychiatric disorder. Today they know its roots are physical.

Three main factors lead to bedwetting, says Stephen Zderic, MD, attending urologist in the Children’s Hospital of Philadelphia division of urology. “The first is how much urine is being produced at night, the second is bladder capacity, and the third is depth of sleep.”

For kids to get up and use the toilet at night requires communication between their brain and bladder. The bladder tells the brain it’s full, and then the brain tells the bladder it’s “go time.” “During the day, the brain and bladder can talk to each other,” Zderic says. “In sleep, that part of the circuit is shut down.”

Bedwetting can cause anxiety and embarrassment, especially when kids sleep over in a communal setting like summer camp or a friend’s house. Most kids eventually grow out of the problem as their bladder capacity increases and they learn how to work around the brain-bladder circuitry, Zderic says.

Until then, try a few simple fixes: Limit fluids late in the day and have your child empty his bladder right before bed.

You also can try a bed-wetting alarm. This moisture sensor alerts your child—and you—at the first sign of wetness. If your child has a sleepover or is concerned about overnight camp, ask your pediatrician about desmopressin (DDAVP), a drug that reduces urine production. These solutions are temporary fixes, though, not permanent.

Remember that kids don’t wet the bed on purpose or because they’re lazy. Don’t punish them for waking up wet. Treat it like the accident it is, and work together to find solutions.

ASK YOUR DOCTOR

Q At what age is bedwetting a concern?
Wet the bed before age 7 usually isn’t a problem. But age isn’t as important as how bedwetting affects your child.

Q Could there be a medical cause for the bedwetting?
A structural problem or infection in the urinary tract can sometimes cause nighttime wetness.

Q When should I call you?
Phone if your child continues to wet the bed regularly after age 7, or if he also has symptoms like painful urination, blood in the urine, excess thirst, or constipation.

Q Does my child need treatment?
If the wetness distresses your child, you can try medicine to reduce the amount of urine his body makes as a temporary solution.
A GOOD SNUGGLE WITH A BELOVED HUMAN can help a dog relax and de-stress. And dogs can return the favor: “It’s commonly believed that pets provide some level of support and coping for kids,” says Darlene Kertes, PhD, associate professor in the department of psychology at the University of Florida.

Given that the average kid today has to deal with stress at school, in sports, and with friends and parents, Kertes and her colleagues wanted to know just how much help dogs might offer to their young companions when times get tough.

The researchers put 100 kids between the ages of 7 and 12 to a test. They were placed into three groups—one group of kids by themselves, the next group with a parent, and the last group with their dog. Then the kids were asked to perform a public speaking task and mental math task—both likely to bring on a stress response in an adult, and probably even more so in a child.

Kertes and her research team tested each kid’s level of the stress-sensitive hormone cortisol and also asked them to give verbal feedback on their stress levels during each task. Across the three groups, those with the dogs fared the best with the least amount of stress. Overall, when kids had their dogs with them, they were about half as stressed during the mental tasks compared to kids who went in alone or with an adult. Even better, the kids who actively engaged with their dogs during the tasks—petting and playing with them—had lower levels of the stress hormone cortisol.

“Parents need to help foster an environment where kids have a good network of social support to help when they’re facing stress,” says Kertes. “Dogs can be a part of that scenario.”

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4 TIPS
PARENTS CAN HELP KIDS AND DOGS ENGAGE IN HEALTHY WAYS

**KEEP IT NATURAL**
Encourage interaction between your dog and your child, but don’t force it.

**LEND A HAND**
Have your child help care for the dog to build a stronger bond.

**TEACH RESPECT**
Encourage mutual respect to help your child and dog get the best out of each other.

**HAVE FUN**
Set aside playtime for your child and your dog. Play is a de-stressor for them both.

**Canine Support**
A new study shows how dogs can help reduce children’s anxiety levels.
Step by Step

How does a family integrate former spouses and unrelated siblings within a second—or even third—marriage? An expert family therapist offers advice on how to bring calm to the storm through shared expectations and a kid-focused approach.

To further complicate matters, each family member brings his or her own set of psychological issues to a new household dynamic, says Lisa Marie Bobby, PhD, LMFT, RCO, founder and director of Growing Self Counseling and Coaching in Denver, Colorado, and host of The Love, Happiness, and Success podcast.

Parents may be overly focused on loving a new spouse, Bobby says, even as they continue to manage the financial stress and fraught disputes with a former one. Sometimes they are too distracted to handle the emotional fallout their kids are feeling. Stepparents may find themselves in unknown terrain when confronting disciplinary challenges for kids who are not biologically their own.

Children, on the other hand, may acutely miss the original family unit they struggled with feelings of depression and confusion while they’ve adapted to a new stepparent, stepsiblings, and sometimes new neighborhoods and schools.

**START BEFORE THE MARRIAGE**

Bobby’s first bit of advice? “Premarital education in the form of professional support is so helpful. Usually I see the 25 year olds who are getting married for the first time for counseling. It’s a lot less likely for those entering second marriages—and they actually need it more than anybody.”

Sitting down before you say “I do”—with former spouses in attendance, if at all possible—with a licensed family therapist and asking tough questions can help save a second or third marriage from imploding down the line, Bobby says. Questions might include: “How do we want things to look? What are our boundaries going to be? Who disciplines the kids? How can we meet the emotional pain of ex-spouses as a team and with compassion?” Still, most couples are “too starry-eyed and in love to think about what their kids actually need it more than anybody.”

**THE STEPPARENT’S ROLE**

The most common grievance Bobby hears in her practice is “misaligning parenting styles,” when one partner is deeply unhappy with how the other approaches discipline with either her kids, or his own.

“It can get complicated and emotional,” says Bobby. “This is the primary conflict and dynamic. Stepparents want more of a voice.”

Bobby provides a straightforward solution: Stepparents, step back.

“If you’re supportive, friendly adult in a stepkid’s life,” she says—and not much more, at first.

“A stepparent’s role is not to discipline,” she says. “You have to have a connection with a child before you can correct him. Many stepparents go into the correctional phase before they have that alignment. Instead, work toward knowing the child, giving praise, spending fun time together.”

In other words, build the relationship. Down the line you may have grounds to discipline a child, but only after this initial work is done—and if your approach is fully in step with your partner’s and the former spouse’s, who may have left the marriage but is still that child’s parent.

When a biological parent is disenfraged or fully absent, “it can be appropriate for a stepparent to become a surrogate parent,” Bobby says. “But it’s a slippery slope when a ‘step’ attempts to be the disciplinarian.” In the mind of a child, the absent biological parent—a “Disneyland Dad” who appears on occasion for fun outings and not much else—“becomes all the more magnified,” even as an relationship with a stepparent turns adversarial.

Frank discussions before a couple walks down the aisle are key—yet counseling or therapy should be approached like oxygen masks deployed on an airplane, with the adults saying nothing first.

“Kids are not the ones who necessarily need to sit down with a therapist,” Bobby says. “Parents gain the tools to manage stress and their own emotions in a healthy way; they’re better prepared to be there for their children. Kids react positively to their environment. When the adults are able to put children’s needs before their own, that’s when we see children become happier.”

And then blended families can successfully bond.

**IT’S THE NEW NORMAL, ACCORDING TO THE STEP FAMILY FOUNDATION, more than 50% of U.S. families are now formed through remarriage or re-matings.**

With the average American marriage lasting only seven years and one in two marriages ending in divorce, learning to navigate the emotional needs of stepchildren, stepparents, former spouses, and even babies born of new unions is simply status quo these days for millions of adults and their kids.

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**WHAT IF A STEPPARENT FEELS JEALOUS OF, OR THREATENED BY, AN EX?**

“I recommend couples counseling that builds on the connection between them to dissipate the fear,” she says. Failing to do so can lead to “contentious” sparring between past and present partners, Bobby warns.

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**WHAT IF THE KIDS CONTINUE TO ACT OUT?**

“Prioritize emotional safety for your kids above everything else,” she says. “Beneath negative behaviors there’s a world of pain and fear. When angry kids are met with kindness and understanding, they often dissolve into tears.”

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**WHAT IF AN ANGRY EX CAUSES EMOTIONAL CHAOS?**

“I work with couples to deal compassionately with an ex’s elevated pain, and to learn how to work together in the best interests of the child,” says Bobby. “When remarriage comes it’s respectful and collaborative. It’s hard, but it’s possible.”

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**BY THE NUMBERS**

66%
Percentage of couples who are living together or remarried who break up when children are involved, according to the U.S. Census Bureau.

1,300
Number of new stepfamilies that form in the U.S. each day.

50%
Percentage of women participating in a recent 25-year landmark study on kids who reported still being “intensely angry” with their former spouses. For men, it’s 30%.
WHEN MIDDLE SCHOOL AND HIGH SCHOOL STUDENTS WENT BACK TO SCHOOL in Seattle this past September, the bell rang at a much later time than it used to—between 8:45 and 8:55 a.m., depending on the school. That’s because the Seattle Public School District is now the largest in the nation to embrace a growing movement, endorsed by the American Academy of Pediatrics, to push back school start times for adolescents and teens.

“When children reach puberty, there is a natural change in their circadian rhythms,” explains Judith Owens, MD, MPH, a professor of neurology and the director of the Center for Pediatric Sleep Disorders at Harvard Medical School. “Research indicates that the average teenager has difficulty falling asleep before 11 p.m. and has a natural wake time of around 8 a.m. Asking a teenager to wake up at 6 a.m. for school is like asking an adult to wake up at 3 or 4 a.m.”

Polls done by the National Sleep Foundation show that American teens are chronically sleep deprived, with the average high school senior getting less than seven hours of sleep per night and 28% of students reporting that they fall asleep in school at least once a week. And the consequences are worse than just getting a little drool on the desk. Kids who don’t get enough sleep tend to perform less well in school, are absent and tardy more often, and are at greater risk of getting into car accidents caused by drowsy driving.

So what time is best for that bell to ring? It seems that 8:30 a.m. is the tipping point. When school starts no earlier than 8:30, studies show that the negative effects of sleep deprivation can be reversed, with improvements in grades and standardized test scores, reduced tardiness rates, increased graduation rates, and declines in car accidents, depression, and suicidal thoughts.

Some school districts and parents have resisted the later start times, arguing that they wreak havoc on after-school activities and bus schedules. But several states, California being the largest, are promoting legislation to push back school start times statewide.

“As more and more suburban, rural, and city school districts successfully make the decision to move their start times—and see the benefits—I think we’ll see this move forward in more places,” Owens says. “Every community may be unique, but no community’s children are immune from the negative effects of not getting enough sleep.”

To find out what’s happening with this movement in your area, check out www.startschoollater.net.

BY THE NUMBERS

<table>
<thead>
<tr>
<th>Percentage of decline in average crash rates for teen drivers in a Kentucky county that adopted an 8:30 or later start time for middle and high school.</th>
<th>17.8%</th>
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<tbody>
<tr>
<td>Percentage of decline in students at a New England high school who rated themselves as somewhat unhappy or depressed after start times were pushed to 8:30 a.m.</td>
<td>20.8%</td>
</tr>
<tr>
<td>Estimated hours of sleep that teens need every night.</td>
<td>8.5 to 9.5</td>
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<tr>
<td>Gain to the U.S. economy over just two years if start times of 8:30 a.m. or later were adopted by all middle and high schools, according to the Rand Corporation.</td>
<td>$8.6 billion</td>
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When Viola Davis reflects on her childhood, one of the strongest emotions that comes flooding back to her is shame. “All the gifts I had as a child were basically squelched,” says the How to Get Away With Murder star, whose extraordinary performances in film, television, and theater have earned her acting’s triple crown: two Tonys, an Emmy, and most recently, an Academy Award for Best Supporting Actress for her gut-wrenchingly raw and honest portrayal of Rose Maxson in August Wilson’s Fences. In May 2017, she received a star on the Hollywood Walk of Fame.

Davis grew up in poverty in Central Falls, Rhode Island, a former mill town. “Being desperately hungry made me feel a great sense of shame,” says Davis. “I would come to school and all I wanted..."
Davis praises New York City schools, which this year announced they would provide free lunch to all city students, eliminating the stigma and shame often felt by kids who receive subsidized meals. However, a new survey of 50 large school districts released by the Food Research and Action Center (FRAC) in September shows that New York and a few other cities, like Boston, Chicago, Dallas, and Detroit, are still relatively alone on this—only eight of the districts FRAC surveyed offered free lunch to all students, and few districts have policies that prevent school staff from humiliating or even denying meals to children who cannot pay.

“I want what they’ve done in New York to happen everywhere, in every city and every town and every school,” Davis says. “We have an idea of an America in which no one is struggling to that degree; we put that on third world countries. But there’s a whole subculture in this country of people who are struggling, who are hungry, who have nothing. And if we are to put an end to this, first hunger has to be destigmatized.”

Davis first revealed her own childhood story in a riveting speech at Variety’s Power of Women event in 2014, breaking into tears as she described stealing food and pulling scraps covered with maggots out of garbage bins.

“It was a great relief to say that,” she says now. “Standing in a room full of 20,000 people in a convention hall and saying I was one of those kids. It was cathartic for me. And my work on this issue is probably one of the greatest things I’ve done in my life. It’s been the greatest journey for me to be able to give this gift to kids who are like I was.”

The long-term effects of not knowing where your next meal is coming from can lead to things like hyper-reactivity—if another child bumps into them in line, they might respond aggressively instead of just taking it in stride.”

Davis didn’t feel truly free of the specter of hunger until she entered Rhode Island College on a full scholarship. “I finally had three meals a day, and trust me, I didn’t miss any of them!” she says. “Every month when we got our food stamps, my mother would do a big grocery run, but there were six of us kids and in two weeks the food would be gone, so we’d have to figure out how to survive for the next two weeks. That stays with you. So by the time I got to college, I ate everything. They talk about the freshman 15? I had the freshman 30 or 40! There was just this constant fear in my head that someone was going to take it away.”

Today, more than 30 years later, Davis says that she’s still learning important lessons about her own health and self-care. “It’s a 24-7 job, I’ll tell you that!” she says. “And it’s completely on you. You’re the only one who knows how you feel. Especially now that I’ve turned 52, I’m very aware of my body’s limitations. I’m not trying to be 28. I’m trying to be a very healthy 52-year-old woman and be okay with that.”

Working with a trainer, she’s focused on isometric exercises along with strength and endurance training. “It involves very little cardio, not bringing up your heart rate way too high for your age or pounding your body like a 20 year old,” she says. “I’ve been able to change my body and feel good doing it.”

Photo: JAN WELTERS / TRUNK ARCHIVE

NO MORE SHAME

That’s why Davis has dedicated her spare time—although it’s hard to imagine that the actor, who also runs a production company, JuVee Productions, with husband Julius Tenen, has much of that—to the organization Hunger Is, which aims to eradicate childhood hunger through increasing access to free or reduced-priced school breakfasts and “backpack” programs that provide kids with food for the weekend.

“We now know that one in five children lives in a home without consistent access to the food they need,” says Davis, who signed on as an ambassador for Hunger Is three years ago and regularly appears in public service announcements and other campaigns for the program. Over the last three years, Hunger Is has raised more than $18 million and awarded more than 270 grants in 33 states plus the District of Columbia.

“Three in every four teachers say that kids who teach English in their hometown] is hungry. My sister Deloris [Davis Grant, actor, who also runs a production company, wear and tear on the body and the brain. This affects a child’s social and emotional development and how they respond to their teachers and other children. It can lead to things like hyper-reactivity—if another child bumps into them in line, they might respond aggressively instead of just taking it in stride.”

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“My work on this issue is probably one of the greatest things I’ve done in my life. It’s been the greatest journey for me to be able to give this gift to kids who are like I was.
In 2017, Davis won an Oscar for her role in "The Help" for Best Supporting Actress. Away With Murder marks the first time she’s left her television character, Annalise Keating, with her secrets. She’s trying to get better. "He’s got secrets of his own, and Annalise is terrified as to what those secrets could be," she says. At the time Davis gave the interview for this article, they’d just finished filming episode seven. "Things have taken a turn that I literally don’t know where he’s going, and I don’t think he’s going to tell me," she says. After decades of stellar work in theater, television, and film—and a childhood seeming to have lost everything. But, "I'm going through as an actor of color, fighting to be recognized the same way Caucasian women are. I am interested in her having no bounds, being paid what we deserve to be paid, there are women not getting work, and not getting promoted," she says. "And I want people to understand that when we talk about women not getting work, and not getting paid what we deserve to be paid, there are two different narratives here—women and women of color. Women of color are fighting to be recognized in the same way Caucasian women are.

"That's why I fight so hard even with Annalise. I want her to be a full woman. She's a full-blown alcoholic who is on the road to recovery, and in this fourth season we are going to see how she chooses to dig herself out." She teases viewers that new cast member Emmy Smith, playing Annalise’s therapist, will take the show down interesting paths.

Self-care also involves plenty of sleep. "If I come home and I feel like, 'I've gotta do this and I've gotta do that,' I tell myself that the thing I really have to do is sleep," says Davis. "It's helped with my energy and helped with my weight." Davis and her husband also try to set aside time for quiet retreats—visits to spas, walks by the ocean, or just staying home for a calm, peaceful weekend. "I'm always looking for what's going to fill my spirit, like praying and meditating, because your health does not only extend to your physical body. I work on letting go of anger and issues with people. That's been a big lesson with speaking out about the whole hunger thing too—owning your story. I don't want to die with a lot of secrets, and opening up has really helped with my health."

"In that way, Davis says, the life of her Murder character, Annalise Keating, mirrors her own. Unlike Davis, whose skyrocketing career is accompanied by a blissful home life with Tennon and their 6-year-old daughter Genesis, Annalise is flying. "She's a full-blown alcoholic who is on the road to recovery, and in this fourth season we are going to see how she chooses to dig herself out."

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“That’s why I fight so hard even with Annalise. I want her to be a full woman. I am interested in her having no boundaries, exploring her sexuality, her pathology, her mess. It’s a metaphor for what I’m going through as an actor of color, believing that the full scope of my imagination and talent needs to be honored.”

And as she works to ensure that children today will not have to endure the deprivations that she did as a child, she feels she’s opening the way for their gifts and potential to blossom as well. “It’s been a true sign of my life coming full circle,” says Davis.

FEEDING KIDS’ BODIES AND MINDS

Does your school provide free breakfasts and/or lunches for all kids, regardless of income? If it doesn’t, campaigning to change that is one way that you can make a powerful contribution toward ending childhood hunger and making sure that all kids in your community can learn and succeed.

“We know that school breakfast and lunch programs can really improve children’s performance in school,” says John Cook, MD, associate professor of pediatrics at Boston University Medical Center and an expert on the effects of hunger and food insecurity with Children’s HealthWatch. “That body of evidence is strong and getting stronger every day. We don’t have to tolerate kids not being able to learn in school because they’re hungry. This is a problem that has very effective solutions.”

A few other benefits of school breakfast:

» LEARNING BETTER

Kids participating in school breakfast programs show improvements on everything from math scores to depression, anxiety, and hyperactivity. After a pilot program in Pennsylvania implemented a universal school breakfast in certain schools, children reported that they felt eating breakfast increased their energy and ability to pay attention in school.

» SHOWING UP

When schools provide students with breakfast in the classroom, attendance goes up while tardy rates and disciplinary referrals go down. When asked what they would happen if their school in New York, stopped offering classroom breakfast, one student said, “I would fall asleep in class like I used to.”

» REMOVING STIGMA

Student math and reading achievement test scores improve when breakfast is moved out of the cafeteria and into the classroom. “After the bell breakfast programs are particularly good,” Cook says. “Because many children don’t get to school in time to have breakfast before the routines start. Having breakfast after the bell in the classroom as part of the normal day can be much more effective, and it also eliminates stigma when its made available to all children.”
Each year, we honor extraordinary Americans who improve health and wellness for everyone. For 2017, our Investigator, Inventor, and Advocate winners are younger than 21. And our Mentor of the Year, chosen by the editors at Medscape, goes to a health care professional making a difference for tomorrow’s leaders. Turn the page to meet them.
Growing up, Lauren Singer thought her older sister, Jodie, was just a little quirky. "She would do funny things. In the grocery store, she would sometimes throw a tantrum or sing," Singer says. Other people weren’t as accepting. "Some people would point at her and laugh," she says, "and that would make me very upset."

Jodie has autism, a developmental disability that affects her communication and social skills. When Singer was in sixth grade, she volunteered with Sunday/Funday, an enrichment program at the Jewish Community Center in Scarsdale for kids like Jodie with developmental disabilities.

Through her volunteer work, Singer became more aware of what it means to live with autism, and she learned that being different isn’t always a bad thing. "I started to understand that a lot of behaviors people think are abnormal just represent different ways that people think," she says. "They aren’t necessarily negative."

After her sophomore year at Scarsdale High School, Singer spent the summer in the lab of autism researcher Joseph Buxbaum, PhD, at Mount Sinai School of Medicine. She joined a team of scientists who were testing insulin-like growth factor-1 (IGF-1) as an autism treatment. The following summer, she took part in another study using EEG (a test that measures the brain’s electrical activity) to diagnose the autism subtype Phelan-McDermid Syndrome.

Singer is now a freshman at Yale University studying perceptive cognitive science. "What I ultimately want to do is become a psychiatrist who works with people with developmental disabilities or perhaps become a combination of a psychiatrist and a researcher," she says.
At age 6, Chloe Fernandez was diagnosed with primary ciliary dyskinesia (PCD), a rare genetic disease that damages cilia—the hair-like structures that sweep mucus out of the lungs. With PCD, mucus builds up, causing breathing problems and repeated lung infections.

Living with PCD has meant major life changes for the sixth grader. Fernandez is homeschooled to avoid exposing her to the kinds of infections that used to land her in the hospital. During one of those hospital visits, she and her mother went to the library to check out a book on PCD. They couldn’t find one. So Fernandez decided to write her own book. “It all came from my journals. I was writing about how I felt, and how it felt to live with PCD,” she says.

With help from the Make-A-Wish Foundation, Fernandez published PCD Has Nothing on Me! in 2016, when she was just 9 years old. She’s donated the proceeds to Make-A-Wish and the PCD Foundation.

The response has been overwhelmingly positive. “One mom wrote that when they’re going through a tough time, they reach for Chloe’s book,” says her mother, Leslie Mota. “Chloe was teary-eyed. She said, ‘Mom, I’m so glad, because when I was going through this I had nobody to reach out to.’”

When she’s not advocating for PCD, Fernandez models and acts. She’s walked the runway during New York Fashion Week and starred in two Nickelodeon commercials. In the future, “I would like to do everything that I’m doing right now, but even better,” she says. “I want people to know that I have PCD, but PCD doesn’t have me.”

Chloe Fernandez recently moved from the East Coast to California because the weather and salt air are better for her lungs.
Last year, 17-year-old Kavya Kopparapu invented Eyeagnosis, a 3D-printed lens system and mobile app. The device snaps a photo of the retina and analyzes it with artificial intelligence to diagnose diabetic retinopathy—a diabetes complication that can lead to blindness—without the need for an extensive eye exam.

Kopparapu’s grandfather, who lives in a small town in India, inspired the invention. “He was lucky he had the means to go to a major hospital and get diagnosed, but a lot of people in developing countries or rural areas might not have an available ophthalmologist,” Kopparapu says.

Eyeagnosis isn’t Kopparapu’s first invention. During her freshman year at Thomas Jefferson High School for Science and Technology in Alexandria, she developed the MediKey mobile app, which lets EMTs quickly and securely pull medical information from unconscious patients’ smartphones.

In 2015, the realization that she was one of just a few girls in her school’s elective science class led Kopparapu to found GirlsComputingLeague. This nonprofit organization hosts workshops for girls in underfunded schools who lack access to computing and science resources. In October 2017, she hosted her own Artificial Intelligence Summit, bringing together industry leaders and students to introduce a new generation to the technology.

Kopparapu’s goal is to blend her passion for health care, medicine, and computer science into a career—and inspire other young women to follow her path: “I want to make an impact on students who want to pursue computer science—and make them more confident in their abilities, skills, and future.”
In 1996, radiologist Donna Magid found herself standing before a roomful of Johns Hopkins medical students. "The gentleman who was in charge of teaching the radiology elective got unexpectedly ill on a Friday, and I was told on Monday when I walked in that I was in charge of the medical students," she says. "I realized in five or 10 minutes that it was going to be the best thing I’d ever do."

Students soon started coming to her for advice, which Magid was more than happy to dispense. Before long she’d adopted a second role: mentor. "There were a few people who mentored me in medical school who really changed the direction of my career," she says. "They had done so much for me, I thought I had to do something for other people."

Magid is a constant presence in her students’ lives from day one of medical school until they leave for their residency. Her advice ranges from reminders when application deadlines loom to cautions about questionable social media content that prospective employers might see.

She’s launched two computer-based tools to help her students succeed. TeamRads is a website compendium of radiology resources. Apps of Steel steers students through the residency application process.

Students regularly tell Magid how much her efforts have meant to them. "They will look at me and say, ‘You have changed my life.’" Yet she says her greatest reward comes when they pay her advice forward: "I’m here temporarily. My students and residents are the future. If I want the future to be good, I have to enable them."
Ed Damiano’s son, David, was diagnosed with type 1 diabetes at just 11 months old. Frustrated at the lack of technology available to help manage David’s blood sugar, Damiano came up with his own solution over the years—a fully automated bionic pancreas. The cellphone-size wearable device constantly monitors blood sugar, releasing the hormones insulin or glucagon to keep levels steady, just like a healthy pancreas would.

In the fall of 2015, Damiano started a company—Beta Bionics—to develop and market the device, called iLet. A year later, the National Institutes of Health gave his team a $12 million grant to study the bionic pancreas at 16 clinical sites across the country.

Damiano’s goal was to get his bionic pancreas to market by the time David went to college. He didn’t quite make it—David is now a freshman at Boston University—but he’ll be close. A single-hormone version of the device is in studies now.

“We suspect that the clinical trials will be done by the beginning of 2019, and by the middle of 2019 we’ll have approval from the FDA,” he says. “Which is not as good as getting the whole thing done by freshman year, but it’s certainly going to be a better device than I had imagined.”

Betty Ferrell discovered the virtues of palliative care when her mother was diagnosed with lung cancer nearly two decades ago. Palliative care offered her mother a level of comfort beyond what traditional medical care could provide. “Suddenly we realized what happens to patients and families when we can get their symptoms under control, when we provide social and spiritual support,” she says.

Ferrell’s experience led her to become a missionary in the fields of palliative care and pain management. In 2000, she founded the End-of-Life Nursing Education Consortium (ELNEC) project to teach nurses how to deliver effective palliative care.

ELNEC now trains nurses in 95 countries—most recently in South Korea and Nepal. The project has also launched a program to support pediatric palliative care in Japan and China. “It is exciting to see this expand to support the care of seriously ill and dying children around the world,” she says.

In the U.S., Ferrell and the National Cancer Institute have teamed up on a new ELNEC project to train oncology nurses in palliative care. ELNEC has also launched an online educational program for undergraduate nursing programs. “This program is vital so that we can prepare nurses to enter practice with the knowledge to care for seriously ill patients,” she says.

In 2013, at age 13, Trisha Prabhu created ReThink—a smartphone app that discourages cyberbullying by encouraging kids to think twice before they post harmful thoughts online. Her studies have shown the app gets kids to change their minds about posting 93 percent of the time. ReThink earned Prabhu top honors at the 2014 Google Science Fair and the 2015 White House Science Fair.

Now she’s taking ReThink global, with plans to release free versions of the app in several languages by the end of the year. “ReThink’s impact now reaches across the globe,” she says. “Just recently, TED partnered with Star-TV India and invited me to share the ReThink message with 650 million native Hindi speakers. Not only was it an incredible opportunity for me to learn a new language, it allowed me to bring my anti-cyberbullying movement to a different corner of the world and opened doors for me to make ReThink a reality for millions more.”

Prabhu, who is now a high school senior, also continues to customize and fine-tune ReThink for use in schools across the United States. While appearing on the TV show Shark Tank last year, she got a $100,000 deal from investors Mark Cuban and Lori Grenier to help her develop the app and expand its reach.
Beet It

These earthy super foods are loaded with heart-healthy compounds and have a mellow sweetness that can’t be . . . beat.

BE GOOD TO YOURSELF THIS winter with bunches of beets. When gently roasted, these purplish-red roots grow so silky-tender and sweet that you might forget how healthy they are. A cup of cooked beets contains 34% of an adult’s daily value of heart-healthy folate and 28% of the daily value for manganese, a key mineral for skin and bone health. Beets also contain super-powered plant pigments known as betalains, which preliminary studies suggest support the growth of cancer-fighting immune cells. After roasting or steaming, wipe beets with a paper towel to remove their skins, and serve them warm, drizzled with olive oil and balsamic vinegar. Try beets simmered in soups, paired with berries in smoothies, or grated, raw, over salads.

—ERIN O’DONNELL
**1. THE LONELY LUNCH**

**Southwestern Cauliflower Rice Bowl**
This recipe uses a food processor to chop cauliflower into tiny pieces, creating an ingeniously low-carb alternative to rice. (Don’t have a food processor? Use a box grater instead.) Some supermarkets offer cauliflower “rice” in the freezer section near other veggies, which can save a step as you prep.

**THE MIX**
- Cauliflower + lime, red sweet pepper, avocado, onion, jalapeño, black beans, garlic

**PER SERVING (ABOUT 1 CUP)**
- 305 calories, 16 g protein, 50 g carbohydrates, 9 g fat (1 g saturated fat), 11 g fiber, 7 g sugar, 210 mg sodium. Calories from fat: 20%

**MAKE IT**
Roughly chop a large head of cauliflower. Pulse pieces in a food processor until they resemble grains of rice. Mince an onion, red pepper, jalapeño, and two cloves of garlic. In a large skillet sauté riced cauliflower and minced vegetables with 2 tbsp olive oil and 1 tsp cumin until soft. Add 1 can of drained black beans, juice from 1 lime, and 2 tsp chopped cilantro. Garnish with avocado slices and additional cilantro. PACKAGE 6

**2. THE SUPER SIDE DISH**

**Roasted Cauliflower Confetti**
This Asian-inspired recipe calls for cauliflower florets, which are roasted to provide additional color and flavor. But the dish will also work with riced cauliflower, prepared as described in the previous recipe, and then roasted.

**THE MIX**
- Cauliflower + olive oil, unsalted peanuts, carrots, soy sauce, ginger, snow peas

**PER SERVING (ABOUT 1¼ CUP)**
- 190 calories, 7 g protein, 15 g carbohydrate, 13 g fat (2 g saturated fat), 6 g fiber, 7 g sugar, 344 mg sodium. Calories from fat: 59%

**MAKE IT**
Chop a medium head of cauliflower into small florets. Toss with 1 tbsp olive oil and roast at 425ºF until tender and browned. Remove from heat. In a pan, sauté 1 cup each of shredded carrots and chopped snow peas in 1 tbsp olive oil until just soft. Toss with cauliflower and 1 tbsp each of freshly grated ginger and low-sodium soy sauce. Drizzle with sesame oil. Garnish with chopped peanuts and scallions. PACKAGE 6

**SERVES 4

**3. THE FLAVORFUL FLOWER**

**Sweet and Spicy Roasted Cauliflower**
This simple recipe—no chopping required—roasts cauliflower whole, creating a surprisingly stunning dish seasoned with warm Mediterranean flavors. Vegetarians will like it as an alternative to roasted meat.

**THE MIX**
- Cauliflower + chili powder, golden raisins, parmesan cheese, fresh parsley, pine nuts, cumin

**PER SERVING (1/6 OF CAULIFLOWER)**
- 107 calories, 4 g protein, 10 g carbohydrate, 7 g fat (1 g saturated fat), 1 mg cholesterol, 4 g fiber, 5 g sugar, 262 mg sodium. Calories from fat: 56%

**MAKE IT**
Combine 2 tbsp olive oil with 1 tbsp each chili powder, garlic powder, and cumin, plus a little salt and pepper. Trim cauliflower to remove leaves and stem. Rub with spice mix. Place on a pie plate and roast at 400ºF for 50 to 60 minutes until tender. Slice into wedges. Sprinkle with raisins, pine nuts, shredded parmesan cheese, and chopped parsley. PACKAGE 6

**PER SERVING (50% OF CAULIFLOWER)**
- 101 calories, 4 g protein, 10 g carbohydrates, 7 g fat (1 g saturated fat), 1 mg cholesterol, 4 g fiber, 5 g sugar, 262 mg sodium. Calories from fat: 56%

**SERVES 6
Build a Better Pizza

A few top-quality ingredients, a little patience, and plenty of practice—that’s the recipe for the perfect pizza.

“I LIKE PIZZA SIMPLE, RICH, AND DELICIOUS,” SAYS JOE BEDDIA, AUTHOR OF PIZZA CAMP and owner of Pizzeria Beddia in Philadelphia, which Bon Appetit declared America’s best pizza place. Pizza’s so personal, he says, so make it how you like it, but try the tips he shares here. If you don’t get the shape right the first time, it still will be delicious. Keep at it, says Beddia. “Practice makes pizza.”

MAKE IT

• Plan ahead. Pizza dough needs time to develop flavor, so use a recipe that calls for at least an overnight stay in the fridge.
• When shaping your dough, relax and work slowly as you stretch it into a circle. Don’t expect perfection.
• Place the shaped dough on parchment paper, so it slides easily into the oven without the risk of sticking.
• Buy a baking stone, the only essential pizza equipment you need. Heat it for an hour at your oven’s hottest setting before you bake your pizza.
• Use canned, preservative-free tomatoes and taste test several brands to find one you like best.
• Choose crushed or whole tomatoes. Crush the latter by hand for a rustic sauce. To avoid foamy, aerated tomatoes, don’t use a food processor or blender.
• Keep the sauce simple. Just add a little garlic and olive oil (and salt, if necessary). No need to cook it. That’ll happen in the oven.
• Cover the sauced pizza with a mix of fresh and low-moisture mozzarella, ideally whole milk. Low-fat mozzarella lacks flavor.
• Limit each pizza to one or two toppings, or skip the toppings altogether. Sometimes, a plain pizza is just perfect.
• A personal favorite: Scatter thinly sliced raw mushrooms such as crimini on the top and sprinkle with salt. They’ll release their juices in the oven and add depth of flavor to the sauce.
• Once out of the oven, finish with the more delicately flavored ingredients: grated parmesan or pecorino, a splash of extra virgin olive oil, and fresh basil leaves snipped with scissors over the pizza.

OFF THE MENU

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OFF THE MENU

Take a Dip

EASILY ELEVATE YOUR CRACKERS AND CRUDITE WITH THESE FULL-FLAVORED DIPS FAVORED BY REGISTERED DIETITIAN JILL WEISENBERGER, AUTHOR OF THE OVERWORKED PERSON’S GUIDE TO BETTER NUTRITION

LANTANA SRIRACHA CARROT HUMMUS
“An innovative combo of flavors that boasts a small number of calories and a nice kick of heat. Serve this white bean hummus with cucumbers and carrots.”

SABRA FARMER’S RANCH TZATZIKI
“Packing carrots, cucumbers, and celery, this tangy Greek yogurt dip, with only 40 calories per serving, offers an easy, healthy way to encourage kids to eat raw vegetables.”

WHOLE FOODS GUACAMOLE
“You can pass off this made-fresh version of the super-nutritious classic as homemade. Traditionally served with tortilla chips, try it with bell peppers, carrots, and other veggies.”

BETTER BEAN ROASTED CHIPOTLE BEAN DIP
“This low fat, high fiber, medium hot, and smoky dip pairs well with fresh bell peppers. Crave nachos? Layer it with guacamole, Greek yogurt, diced tomatoes, and melted cheese.”

TRADER JOE’S SPINACH AND KALE GREEK YOGURT DIP
“Dill, onion, and garlic come together with carrots, red peppers, and other good-for-you ingredients in this creamy, low-cal treat. Serve it with whole grain crackers and celery sticks.”

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.
Grain Goodness

Don’t think of whole grains merely as health food. Instead, explore—and experiment with—these flavorful, versatile, and, yes, good for you, wonders.

WHOLE GRAINS BOAST LOADS OF FIBER, B VITAMINS, ANTIOXIDANTS, AND HEALTHY FATS. BUT Maria Speck, author of the award-winning cookbook Simply Ancient Grains, loves them for another reason: “Whole grains have such a variety of tastes, textures, and colors,” she says. These are five of her favorites, with a caveat: “I love all grains. It’s so hard to pick just five.”

1. TEFF
With hints of cocoa and molasses, this trendy grain—super impressive but super easy to cook—makes a delicious polenta-like porridge. Pair it with bitter greens or prosciutto.

2. SPELT
Beautifully chewy and mildly nutty, it’s a great intro to whole wheat berries. Toss in a soup or use as a base for a salad with fresh or roasted vegetables.

3. MILLET
Extremely versatile and mildly flavored, it blends with many foods. Serve as a simple side dish with a little butter and salt or as a breakfast porridge. It can even become dessert.

4. BULGUR
A year-round favorite that cooks in 10 minutes or less, it makes a great filling with vegetables. Think stuffed bell peppers. Or savor its nutty sweetness at breakfast with honey and tahini.

5. BLACK RICE
Turning a stunning deep purple when cooked, black rice adds a soft, comforting texture to simple savory side dishes. Or, serve it for breakfast with cardamom, pistachios, and blueberries.
Be a Wiz!

Immersion blenders are endlessly versatile—you can plunge them into hot sauces and soups, making the contents velvety smooth. You can blitz through raw greens, garlic, and ginger to make pestos, dips, and dressings. You can blend up a morning smoothie. Here are five ways you can use your immersion blender all week long.

When children are born, they’re tuned into their body’s needs—knowing (and letting you know) when they’re hungry and when they’re full. However, as they get older, this internal sense can get dulled as parents or caregivers tell kids how much or how little to eat. According to research published in the Journal of Nutrition Education and Behavior, saying things like “clean your plate” or “take three bites of mashed potatoes,” makes it harder for children to keep their sense of how much or little their bodies need. However, you can help foster your child’s attunement to satiety by asking other questions, such as “Are you hungry?” or “Does it make your tummy happy?” This shift can help kids develop into intuitive eaters who trust their body’s hunger and fullness cues.

1 Tool, 5 Meals

**MONDAY**

**CURRIED SWEET POTATO & COCONUT SOUP:**
In a large saucepan, sauté two peeled, chopped sweet potatoes, a chopped onion, and a chopped red sweet pepper in some olive or coconut oil for 10 minutes. Add 2 tbsp red curry paste and 1 tbsp each of minced ginger and garlic. Cook another minute or two, then cover with 2 to 3 cups of water and simmer. When potatoes are tender, add a can of coconut milk and some lime juice and puree with the blender.

**TUESDAY**

**PEANUT SAUCE FOR BAKED TOFU OR CHICKEN:**
In a narrow container, combine 1/2 cup natural peanut butter, 1 minced garlic clove, 2 tbsp low-sodium soy sauce, 1 tbsp lime juice, a peeled knob of ginger, a pinch of sugar, and a squirt of sriracha, then puree.

**WEDNESDAY**

**HOMEMADE TOMATO SAUCE:**
In a large saucepan, sauté a chopped onion and a couple cloves of garlic in olive oil until onions are translucent. Add a large can of crushed tomatoes with basil and a pinch of red pepper flakes. Cook until hot, occasionally stirring. Blitz with the immersion blender until it’s as smooth as you like.

**THURSDAY**

**GARLICKY KALE HUMMUS:**
In a narrow container, add a couple handfuls of chopped kale, a cup of rinsed canned chickpeas, 2 tbsp tahini, 2 tbsp water, 2 tbsp of lemon juice, and 2 cloves of garlic. Blend and adjust seasonings to taste.

**FRIDAY**

**AVOCADO-CILANTRO-LIME SALAD DRESSING:**
Scoop the flesh of a large ripe avocado into a narrow container. Add a handful of washed cilantro, 1/2 cup of olive oil, 2 tbsp of lime juice, 1 washed garlic clove, and salt and pepper. Blend, adding water, as needed, to make it as thin as you like.

Immerse Yourself

Immersion blenders require less cleanup than traditional blenders—at a super-accessible price.
Heart failure doesn’t mean the heart just stops.

Heart failure occurs when the heart muscle weakens over time and fails to pump enough blood for cells to receive the oxygen and nutrients they need. New research zeros in on proteins that might influence the condition and medications that could block them.

Scientists at the University of Iowa believe a protein called CDK8—which is part of the larger complex protein responsible for switching genes in the heart muscle on and off—might activate crucial genes early in the disease process. Targeted medications could one day modify gene activity and prevent heart failure from developing.

Inflammation and scarring of heart tissue are key factors in the heart’s decline from functioning to failing. Researchers at the University of California San Francisco are testing on mice and human heart cells an experimental cancer drug that blocks the protein that triggers scarring and inflammation.

Many people manage the condition with medications and lifestyle changes. But a recent study found that while doctors classified nearly 70% of their heart failure patients as high risk, only 14% of those patients recognized themselves that way. The study illustrates a need for better education about the severity and risks of the condition.

—Sonya Collins
Drowsy Driving

Some over-the-counter medicines may affect your response time behind the wheel

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**EXPERT Q&A**

**Drowsy Driving**

Some over-the-counter medicines may affect your response time behind the wheel

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**Did You Know Some Over-the-Counter (OTC) Medicines Can Make You Drowsy and Affect Your Driving?**

Anyone who operates a vehicle of any type—car, bus, train, plane, or boat—and uses OTC medicines should understand the risks.

**John Whyte, MD**, director of professional affairs and stakeholder engagement at the FDA, dispels some common myths and explains how to stay safe when taking OTCs.

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**Q Aren’t OTC Medicines Without Risk?**

**Whyte** No, OTCs are serious drugs, and their risk can increase if you don’t choose them carefully and use them exactly as directed on the label. Each OTC medicine has a drug facts label to guide you; be sure to read all the sections before you take the drug, especially when driving or operating machinery.

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**About 35%**

Percentage of adult Americans who use OTC medications on a regular basis. There is a trend for increasing use as more drugs move from prescription to OTC status.

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**More than 5,000**

Estimated number of people who died in drowsy-driving-related motor vehicle crashes across the U.S. in 2016.

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**More than 72,000**

Number of police-reported crashes involving drowsy drivers in 2015.

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**Q How do I know an OTC I am taking can affect my driving?**

**WHYTE** On the drug facts label, the “When using this product” section will include warnings about drowsiness or impaired driving. Look for statements such as “You may get drowsy,” “Marked drowsiness will occur,” “Be careful when driving a motor vehicle or operating machinery,” or “Do not drive a motor vehicle or operate machinery when using this product.”

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**Q What are some common OTC medicines that can cause drowsiness or impaired driving?**

**WHYTE** Some include:

- **Antihistamines:** These medicines treat symptoms like runny nose, sneezing, itching of the nose or throat, and itchy or watery eyes. Some antihistamines are marketed to relieve cough due to the common cold or to relieve occasional sleeplessness. Antihistamines can also be added to other active ingredients that relieve cough, reduce nasal congestion, or reduce pain and fever. Some antihistamines, such as diphenhydramine (the active ingredient in Benadryl), can make you feel drowsy, unfocused, and slow to react.

- **Antidiarrheals:** These medicines, used to treat or control symptoms of diarrhea, can cause drowsiness and affect driving. One of these is loperamide, the active ingredient in Imodium.

- **Antiemetics:** These medicines treat nausea, vomiting, and dizziness associated with motion sickness. These can cause drowsiness and impair driving as well.
Cold & Flu
How to stay healthy all season

10 Ways to Deal
TAKE CHARGE WITH THESE TIPS

1. **FLUSH IT OUT**
Use a clean neti pot or other nasal irrigation device to ease your stuffy, runny nose.

2. **SLEEP IT OFF**
Quality shut-eye gives your body the opportunity to fight infection, so get plenty of rest.

3. **GET STUCK**
Guard against the flu with an annual flu shot. Get yours today.

4. **AVOID ANTIBIOTICS**
They can’t fight cold and flu viruses, so don’t take them.

5. **CALL IN SICK**
Don’t share your illness with others. Instead, stay home and get better.

6. **ENHANCE IMMUNITY**
Eat well and exercise regularly to help prevent colds and flu.

7. **GET HELP**
Call a doctor if you have trouble breathing or you’ve been sick more than five days.

8. **ACT FAST**
Take a prescription anti-viral within 48 hours of getting the flu to ease some symptoms.

9. **HANDS OFF**
Cough or sneeze into a tissue or your sleeve, not your hands.

10. **KEEP IT CLEAN**
Clean and disinfect surfaces you frequently touch to stop the spread of germs.
Head and Neck Cancer
Some habits could increase your risk for this group of cancers

HEAD AND NECK CANCERS DON’T AFFECT AS MANY PEOPLE AS BREAST, lung, and colon cancers, but they can be deadly if they’re not treated quickly. Surgical oncologist John Sunwoo, MD, explains the risks and how to spot the symptoms.

Q Where do these cancers start?
SUNWOO The term head and neck cancer generally refers to cancers that start in the mouth, throat, voice box (larynx), and nose. Most of these are squamous cell carcinomas—a type of cancer that starts in cells lining these areas. Other types of head and neck cancer start in the salivary glands, skin, and thyroid.

Q How common are head and neck cancers?
SUNWOO In the United States, head and neck squamous cell carcinoma (HNSCC) is not one of the more common cancers. It makes up about 3% of all cancers in this country.

Q Who is at risk?
SUNWOO Smoking and alcohol use are the two biggest risk factors. They’re responsible for about 75% of all HNSCC. Recently, we’ve seen an increase in cancers associated with human papillomavirus (HPV). This is the same strain of HPV that’s associated with cervical cancer. The number of oral sex partners a person has in a lifetime may increase their risk for cancers of the tonsils and the base of the tongue.

Q What are the symptoms?
SUNWOO Pain in the mouth or throat that doesn’t go away after two weeks, a lump in the neck, hoarseness, difficulty swallowing, or pain when you swallow should be looked at.

Q How are these cancers treated?
SUNWOO The main treatments for HNSCC are surgery, surgery plus radiation, radiation and chemotherapy, or sometimes all three. Treatment depends on where the tumor is located and whether it has spread.

Q How can you prevent head and neck cancers?
SUNWOO The best way to prevent these cancers is to avoid tobacco products. Not just smoking tobacco, but also chewing tobacco. Also, the HPV vaccine is available for girls and boys at age 11 or 12, but in many cases, you can receive it up to age 26.

BY THE NUMBERS

63,000
Number of people in the U.S. who will be diagnosed with head and neck cancers this year.

13,360
Number of people who will die from head and neck cancers this year.

2 to 3 times
Rate by which men are more likely to develop these types of cancer compared to women. However, the rate of head and neck cancers has increased in women over the last few years.

62
Average age at which people are diagnosed with head and neck cancers.
WHEN YOU HAVE TYPE 2 DIABETES, YOU MAY FEEL OVERWHELMED WITH THE number of decisions you have to make every day—when to take your medicine, what to eat to keep blood sugar in check, how to squeeze in exercise in an already packed schedule, etc.

In addition to the other life stresses you may have—such as caring for an older parent, supporting a family, or handling finances—and it’s no wonder many people get discouraged or put managing diabetes on the back burner, says Nicole M. Bereolos, PhD, MPH, CDE, a clinical psychologist and certified diabetes educator in Dallas, Texas.

If you feel overwhelmed, take steps to get back on track.

### Slow and Steady
If you have trouble testing your blood sugar, talk to your doctor before it escalates.

### Focus on the positive.
Next time your thoughts turn to the negative, whether it’s about diabetes blood sugar numbers or managing your condition, think about a success you’ve had. It doesn’t have to be diabetes-related, says Bereolos. It could be getting through school or managing a job with a family—or even something you’ve done well, such as taking your diabetes medication on a regular basis, she adds.

“If you start saying positive things and changing some of your thoughts, you can feel less stressed and overwhelmed,” says Bereolos.

### Be honest with your health care provider.
If you don’t understand your medication or have difficulty testing your blood sugar as often as you need to, talk to your doctor about it, advises Bereolos.

“Come in with a list of questions and have an honest conversation about what you can and cannot do to manage your diabetes,” she says. You and your doctor may be able to problem-solve before blood sugar escalates.

### Reward yourself.
You don’t have to do things perfectly to celebrate your successes. If you took your medication as prescribed most days of the week, “that’s a big deal,” says Bereolos. Treat yourself with something pleasurable—such as a coffee date or a sports event outing with a friend, she suggests.

Mini-rewards can help lift you out of a funk and get you on track to keep meeting your goals.

### Diabetes Day-to-Day
Does life get in the way of type 2 diabetes management? Feeling unmotivated or burnt out? Get back on track now.

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If you feel overwhelmed, take steps to get back on track.
Better Sleep, Better Health

If you have metabolic syndrome, a good night’s sleep is essential. Here’s why.

MORE THAN ONE IN THREE AMERICAN ADULTS HAS THREE OR MORE RISK factors for heart disease, diabetes, or stroke. Together, the cluster of risks—which include any combination of high blood sugar, high blood pressure, low HDL (“good”) cholesterol, high triglycerides, and large waist circumference—is called metabolic syndrome.

Good diet and regular exercise can help—and, “if you have metabolic syndrome and poor sleep, sleep should also be a target of treatment,” says Julio Fernandez-Mendoza, PhD, a psychologist who specializes in sleep medicine at Penn State College of Medicine Sleep Research and Treatment Center.

In a study of 1,344 adults, those who had both metabolic syndrome and slept less than six hours during an overnight sleep study in a lab were two times more likely to die of a metabolic condition in the next 16 years compared to people with metabolic syndrome who slept more than six hours and to people without metabolic syndrome who slept less than six hours. Short sleepers at highest risk of death were the ones with high blood sugar (pre-diabetes) and high blood pressure (pre-hypertension).

“If you’re otherwise healthy and sleep less than six hours a night, for whatever reason you can tolerate shorter sleep and you have nothing to worry about,” says Fernandez-Mendoza. “If you have metabolic syndrome and you’re a short sleeper, you’re at an increased risk of death.”

While the study followed people for 16 years, researchers studied their sleep for just one night. “But we measured something important: sleep ability,” says Fernandez-Mendoza. “Whether you are able to fall asleep in a lab is a good marker of whether there’s something going on with your sleep.”

If you have risk factors for metabolic syndrome and don’t sleep more than six hours per night, “Talk to your doctor, nurse, or whoever is providing your health care, about your sleep,” he adds, “to find solutions for longer and better shut-eye.”

4 TIPS

JULIO FERNANDEZ-MENDOZA, PhD, A PSYCHOLOGIST WHO SPECIALIZES IN SLEEP MEDICINE, SUGGESTS WAYS TO GET THE SLEEP YOU NEED

IDENTIFY HEALTH ISSUES

Ask your doctor if you could have insomnia or sleep apnea. “It’s important to identify these disorders and get appropriate treatment.”

GET UP

Don’t lie in bed awake. “That’s how insomnia starts. Get out of bed, read, and go back to bed when you feel sleepy.”

RISE AND SHINE

Wake up at the same time every day no matter what. “Don’t compensate for sleep loss by sleeping in or napping. Compensate for the loss the next night.”

TURN IT OFF

Don’t watch TV or look at a tablet or smartphone in bed. Reserve your bedroom for sleeping.
**Hyper or Hypo?**

Too much thyroid hormone (hyperthyroidism), and your metabolism revs up. Too little (hypothyroidism), and you get sluggish. Take this quiz to see if your thyroid gland might be overactive or underactive.

**Quiz**

1. You’re chilly, even in warm weather
   - UNDERACTIVE THYROID
   - OVERACTIVE THYROID

2. You’re jittery
   - OVERACTIVE THYROID
   - UNDERACTIVE THYROID

3. You’re exhausted
   - OVERACTIVE THYROID
   - UNDERACTIVE THYROID

4. You have dry, scaly skin
   - OVERACTIVE THYROID
   - UNDERACTIVE THYROID

5. You’re constipated
   - OVERACTIVE THYROID
   - UNDERACTIVE THYROID

6. You’ve missed periods
   - OVERACTIVE THYROID
   - UNDERACTIVE THYROID

**Answers**

1. **Underactive.** Thyroid hormone regulates how your body burns energy for heat. When this hormone is in short supply, your core temperature drops. So even if it’s warm outside, you feel cold.

2. **Overactive.** A boost in thyroid hormone level revs up your body. As your metabolism goes into overdrive, you feel shaky, restless, and on-edge.

3. **Both.** A sluggish thyroid gland drains your body of energy. A revved-up thyroid gives you extra steam—but only temporarily. Eventually you’ll burn out, have trouble sleeping, and feel exhausted.

4. **Underactive.** When your metabolism slows, skin cells don’t renew and replenish as quickly as usual. Sweat production also slows, robbing your skin of moisture. As a result, your skin becomes dry, cracked, and flaky.

5. **Underactive.** When the rest of your body slows down, so does your gut. Because your intestines can’t push food through quickly enough, digested food gets backed up.

6. **Overactive.** Your thyroid gland controls your menstrual cycles. An overactive gland makes your flow lighter. You might even skip a few periods—or not get them at all.
Take 10

Shaun White
Olympic gold medalist, snowboarder, skateboarder, musician, CEO, 31, Los Angeles

1 What does it mean to be competing in your fourth Olympic games, beginning February 9? Every single time is its own unique experience. Obviously going for the first time was incredible . . . Now looking at my fourth time, I’m just as excited in so many different ways . . . and I’m even setting my sights on the next one.

2 Do you train differently now than you did in past Olympic games? The snowboarding is the same . . . but I feel like I need more time off. I ride more, but for shorter periods, and I take more days off.

3 As a child, you were diagnosed with the same heart condition Jimmy Kimmel’s son has (Tetralogy of Fallot, a defect in the heart structure that affects blood flow through the heart). Did it ever affect your ability to participate in sports? It was always something that was kind of weighing on me at times, but I never felt like it held me back. I never felt like I couldn't do something because of my heart condition.

4 Have you had to do anything to monitor or treat your heart condition? I would go in and do these stress tests to see how my lungs were operating, and they would do these really demanding workouts with all these machines to monitor my heart and my breathing and my pulse. That was a big scare. It was like, gosh, is this going to be the time we're going to find something wrong and I have to quit doing all the things that I love?

5 What do you do to unwind? I love movies. I play some video games at times. I take the dog for a walk.

6 Do you practice any relaxation techniques? I have a regimen of stretching, and I get a lot of physical therapy done. Those get me in a better mood. And I started to focus more on my sleep, because I feel like if I sleep better I’ll have a better day and I won’t be so anxious to do things. I’ll be able to calm my mind and relax and process things better.

“I never felt like I couldn’t do something because of my heart condition.”

7 What is your health philosophy? I always set obtainable goals. Don’t stop eating bread, just eat a little less . . . I try to slowly change patterns, rather than making drastic changes that are hard to stick to.

8 Do people ask you for health advice? They always want to know my workout regimen. And for me, honestly, I hadn’t worked out until about a year ago. I was always surfboarding, always skating, always snowboarding. That’s what’s great about being an athlete. You get fit just doing what you do.

9 You’ve done work with St. Jude and Make-A-Wish. Why are these charities so important to you? Obviously, my heart condition—my parents and family, we spent a lot of time in the hospital receiving treatment. I just really have a soft spot for the kids in that sense.

10 What health condition would you most like to see eradicated in your lifetime? Heart disease . . . having better care for people going through that. And the battle against obesity . . . [with so many] video games, social media. With your phone you can just sit all day. It’s a big thing to get kids out and get them exercising.

—STEPHANIE WATSON