



Advancing **WOMEN'S HEALTH**

Center for the Advancement of Women's Health newsletter

KENTUCKY WOMEN ARE LEADING THE NATION!

The **Kentucky Women's Health Registry** is the first registry of its kind for women in the nation.

With a simple 20-minute survey, women from across the Commonwealth are helping to improve the health of more than 2 million women. The information received from more than 2800 women has provided researchers with a better understanding of what types of medical issues affect Kentucky women. For example, this issue focuses on causes, treatments and preventions of headaches, a problem reported by 69 percent of women on the registry.

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HEADACHES

common causes, treatments, and preventions

By **Yasmin Khan Parrish**

UK Medical Student
working with Dr.
Leslie Crofford



Almost all of us have suffered a headache at one time or another. For some people, headaches are a very common and disturbing part of their lives. Headaches can be triggered by many things, each of which is different among different people, although stress appears to be a unifying trigger among many people.

Tension headaches

One of the most common headaches is the so-called “tension” or muscle-contraction headache. It is caused by tight or tender muscles in the neck, shoulders, jaw or face. It can worsen throughout the day and is generally helped by heat or over-the-counter analgesics. Contributing factors may be non-ergonomic seating and posture, stress, anxiety, hunger, and dehydration.

Migraine headaches

Another very common headache is the migraine headache, estimated to affect perhaps 20 percent of the population. Migraine headaches are more common in women than men, by a factor of 3 to 1. Migraine headaches are thought to be vascular-based, rather than muscular

as seen in tension headaches. Migraine patients commonly report environmental triggers such as certain foods, smells or alcohol.

Migraine headaches can also involve an aura — a visual disturbance preceding the headache. These headaches are also associated with nausea and/or vomiting, and sensitivity to light and noise. Patients also report a throbbing quality to the headache and that it often starts on one side of the head. Migraine sufferers may wish to retreat to a cool, quiet, dark room to avoid the aggravating factors of the headache, when possible.

There are many treatments now for migraine sufferers that aim to interrupt the progression of the headache. Many are prescribed to be taken during the aura phase of the headache, or as soon as one feels the headache coming on, in order to stop the pounding throbbing portion. If you think that you may suffer from migraine headaches, talk to your doctor about possible treatments and try to

identify any triggers you think may cause the onset of a migraine.

Cluster and sinus headaches

There are other headaches that are rarer, such as cluster headaches and sinus headaches. Sinus headaches, contrary to common belief, are actually rare headaches, caused by infection in the nasal sinuses.

Headaches can be a debilitating problem, interrupting life on a regular basis. They affect a large portion of the population.



The most common headaches—migraine and tension headaches—can be treated by your doctor. If you experience a new headache, especially if it has a very

acute onset and is extremely painful, seek medical attention right away, as it may be a more serious condition.



“Stress appears to be a unifying headache trigger among many people.”

See our article on stress, page 4.

LETTER FROM THE DIRECTOR



Leslie J. Crofford, MD,
Gloria W. Singletary Chair
Chief, Division of Rheumatology,
Department of Internal Medicine
Director, Center for the Advancement
of Women's Health

The Kentucky Women's Health Registry is off to a fantastic start! The registry is the first statewide effort to collect health information from ALL women to allow us to learn more about the interactions between all of the factors that impact health. We are thrilled that you are a participant in the registry and hope that you will encourage your friends and family to join as well.

One of the greatest pleasures in working with the registry this past year has been the involvement of outstanding young women with a commitment to a career in medicine and public health. Mary Johnson, our registry coordinator, and I have benefited enormously from their enthusiasm and creativity in getting the registry off the ground. I hope you have interacted with these incredible women, and I wanted to share a little bit about them with you.



Cady Blackey has been instrumental in promoting the registry this year.

Cady Blackey, a native of Versailles and a history major from Davidson College in North Carolina, has been working with the registry since last summer. She will relax this summer prior to starting medical school in the fall — a well-deserved break after all her hard work for the registry last year. Her projects over the past year have included trips to the Women's Empowerment Conference, the KEHA Annual Convention in Bowling Green, and various talks across the state. Through the dedication and determination of Cady and Mary Johnson, the registry was able to achieve its goal of having 2500 members in the registry for 2006! In her spare time, Cady trained for the Country Music Marathon with Team-in-Training, raising more than \$10,000 to benefit The Leukemia & Lymphoma Society.

Sara Madison Davenport is from Paris. She graduated from Davidson College with a degree in English this spring and will be working with the registry for the summer prior to attending medical school this fall. Thus far, she has met with the Garden Club of Kentucky (Paris Chapter), Daughters of the American Revolution (Limestone Chapter) and Daughters of the Seventeenth Century (Lexington). She also participated in a health fair in Manchester.



Madison Davenport (left) and Ashley McCorkle, will work with the registry this summer. Ashley will continue to work throughout the year.

Ashley McCorkle is from Lexington and a recent graduate of Transylvania University. She will be working with the registry during this entire next year. Ashley is excited to be a part of our staff and will be working on the continued growth of the registry. In her spare time she enjoys swimming, ultimate Frisbee®, hiking, kite flying and bug collecting.

We wish Cady and Madison great success in medical school this year, and are thrilled to have Ashley with us until next year. Ashley would love to hear from you! Please contact her at (859) 323-5709 or **1-800-929-2320** or by e-mail at

ammcco6@email.uky.edu, or contact Mary Johnson at 859-323-1377 or by e-mail at majohg@uky.edu. We would be happy to provide your group with materials or come to your event!

Don't Stress

– it's bad for your health!

Okay, so that's probably not something your mom ever said to you, but maybe it should have been. More and more research is showing that consistent stress affects not only our emotional and psychological well-being, but also our physical well-being.

Where does stress come from?

Stress can come from a variety of sources. Some common causes of stress include:

- chronic health problems
- emotional difficulties
- relationship troubles
- work environment
- life transitions

No matter where the stress comes from, its presence can have a negative impact on your body.

A rapid heartbeat, headache, stiff neck, backache, rapid breathing, sweating and upset stomach are a few of the ordinary physical manifestations of stress. These are the symptoms we might commonly associate with being stressed-out.

Unfortunately though, there are many less commonly known ways that stress can affect our bodies.

Stress can be categorized as either acute (short-term) or chronic (long-term). The problems caused by these two types of stress are different. The body's reaction to any dangerous or demanding circumstance is considered *acute* stress. Your body



usually recovers from this type of stress if it does not occur so often that your body is unable to return to its normal state. For people who already have heart problems, acute stress can trigger an irregular heartbeat or a heart attack. Acute traumatic events, such as sexual abuse or military experiences, may cause long-term effects such as the development of acute stress disorder or post-traumatic stress disorder.

Stress that does not go away...

Chronic stress results from consistent hassles, such as your work environment or a

personal relationship—a stress you live with on a daily basis. Chronic stress can affect your muscles, your reproductive organs, your lungs, your skin, your immune system and your cardiovascular (heart) health.

Many of us know that stress often causes neck, shoulder and back pain and stiffness, in addition to an upset stomach. Perhaps though, you did not know that stress can worsen the condition of people with rheumatoid arthritis and may be a factor in long-lasting digestive problems, such as gastroesophageal reflux disease, peptic ulcer disease and irritable bowel syndrome.



Long-term stress also affects body parts we do not commonly associate with the stress response, including reproductive organs, lungs and skin. Chronic stress can be to blame not only for painful menstruation, but also decreased fertility. Worsened symptoms of asthma and chronic obstructive pulmonary disease can also be the result of chronic stress. Furthermore, chronic stress can exacerbate skin conditions such as acne and psoriasis.

In addition to these health issues, chronic stress can also have a broader influence on your health. When the body is under consistent stress, the immune system (the body's defense system against disease) becomes weakened and one becomes more susceptible to illnesses ranging from colds and infections to more serious diseases.

Minimize stress, maximize health

The way stress affects a person depends on a variety of factors, including traits inherited from your family, your past stress experience, your perceptions of stress, the way you cope and your social support. Women can lessen health problems caused by stress if they learn to manage their stress level in a healthy way!

Read our section on "De-stressing" for healthy ways to manage stress. Additionally, your physician may be able to help you with a stress-reduction plan if you feel your health is being hurt by stress.

De-stressing: healthy ways to cope with stress

It is important to remember that stress will not completely go away, and you don't necessarily want it to. Research shows that low levels of stress can be helpful in optimizing your efficiency and productivity. You need to find healthy ways to make your stress tolerable. Ways to decrease stress should relax both your mind and body and help you work through frustrating thoughts and emotions. Healthy ways include:

- reading or writing
- talking with trusted friends or family.
- engaging in mindfulness activities such as meditation, music therapy, humor therapy or imagery exercises.

As for relaxing your body, some of the methods that have proven most helpful include:

- physical activity.
- doing an activity you enjoy (playing the piano, gardening, etc).
- body-centered relaxation such as breathing exercises, massage or yoga.



You must find a method that works for you and use it frequently enough that it develops into a habit. Make a healthy stress-reduction method part of your daily routine, and you will notice a positive change!

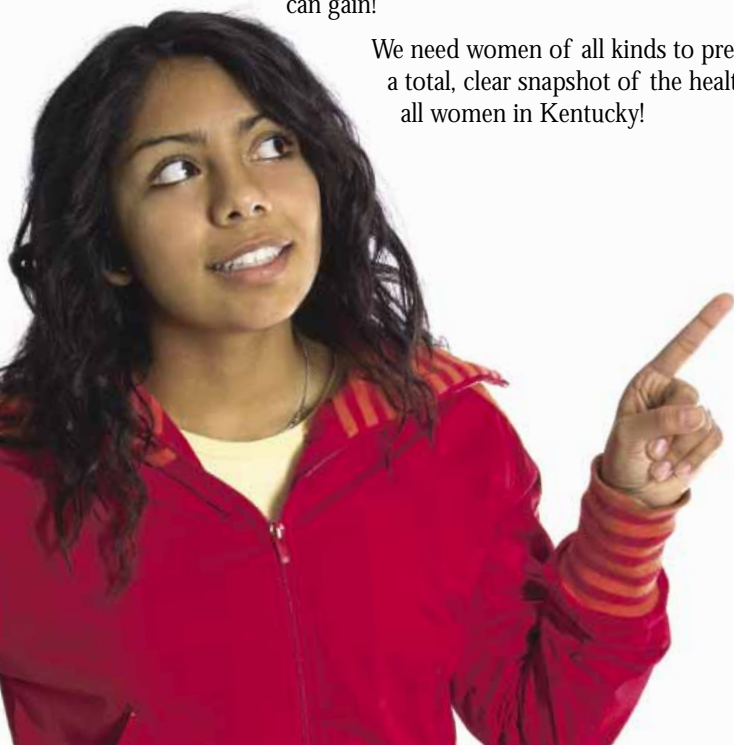
For online resources about managing stress, including links to an interactive tutorial, go to the "Resources" link on our Web site:

www.mc.uky.edu/womenshealth.

Interesting facts from the registry

- 1 Women are always interested in losing weight, 65.66 percent of registry participants say they are currently trying to lose weight.
- 2 Women are common sufferers of chronic headaches, 69.74 percent of those in the registry report having migraines, cluster headaches or tension headaches.
- 3 Current smokers make up 40.20 percent of registry members.
- 4 Of the women who reported being limited in their daily activities, the biggest reason they report being limited is by pain in muscles or joints (34.32 percent) followed by fatigue, tiredness or lack of energy (30.20 percent), depression (15.22 percent), problems breathing or heart problems (17.22 percent).
- 5 Women who work one job make up 60.55 percent of the women in the registry. Another 8.62 percent of women work more than one job! Disabled or unable to work women make up 5.45 percent. Students make up another 6.47 percent. Homemakers are 4.39 percent.
- 6 Of 2850 women in the registry, 724, or 25.4 percent, found out about the registry from family or friends. That is GREAT! Thanks for helping to spread the word. We can learn a lot from all the women in the registry, whether or not they have these problems. The more women we have in the registry, the more insight and knowledge researchers can gain!

We need women of all kinds to present a total, clear snapshot of the health of all women in Kentucky!



Take the Challenge! Enroll 3 friends



The CHALLENGE: In order to achieve our goal of enrolling 2,500 new women to the registry, we would like to ask each of you to help us enroll three new women. In order for the registry to get an accurate account of the state of women's health in Kentucky, we need women of all ages, all states of health, smokers and nonsmokers, sick and well, young and old from all across the Commonwealth to be a part of your Kentucky Women's Health Registry. All you do is simply complete a 20-minute survey once a year.

Visit the Web site:

www.kywomensregistry.com
or call **1-800-929-2320**
for more information.

Don't forget to renew your own survey each year!

Clinical Trials

Clinical research studies are scientific investigations in which people participate as volunteers to test drugs, devices or medical procedures. Controlled, scientific studies are necessary to help answer specific health questions and to develop safe and effective therapies.

Please review our clinical trials and consider taking part in any clinical trial that relates to you. You could help yourself and thousands of others!

Fibromyalgia

Dr. Leslie Crofford at the University of Kentucky's Center for the Advancement of Women's Health is recruiting patients with fibromyalgia for a clinical trial. This study involves taking a new medication intended to help alleviate the pain of fibromyalgia. Qualified participants will receive, at no cost, study-related medical procedures and study medication. Participants are compensated for their time. If you are interested in learning more about this study, please contact study coordinator Jenny Fuller at 859-323-3805 or by e-mail at jfull2@email.uky.edu. For additional information about clinical trials at the University of Kentucky, you may call UK Health Connections toll free at **1-800-333-8874**.

RIM Study

The RIM study (Rituximab in Myositis) is a study for those with Adult and Juvenile Dermatomyositis (DM) and Adult Polymyositis (PM). The purpose of this research study is to evaluate the effectiveness of the study drug, Rituximab, in people diagnosed with dermatomyositis (DM), a disease that causes muscle weakness and is associated with a rash, or polymyositis (PM), a disease that causes muscle weakness without a rash. This

study will be done at approximately 37 centers across North America and Europe, including the University of Kentucky. Further information about the RIM trial can be found at:

www.edc.gsph.pitt.edu/rimstudy or you can contact study coordinator Jenny Fuller at 859-323-3805 or by e-mail at jfull2@email.uky.edu. In addition, you may call UK Health Connections toll free at **1-800-333-8874**.

SCOT Study

SCOT is a clinical research study designed for people with severe forms of scleroderma. SCOT stands for Scleroderma: Cyclophosphamide Or Transplantation. The SCOT study will compare the potential benefits of stem cell transplant and high-dose monthly cyclophosphamide (Cytoxan) in the treatment of scleroderma. The coordinator in charge of this study is Mary Johnson at 859-323-1377 or toll-free at **1-800-929-2320**. More information about



the SCOT trial can be found at: www.sclerodermatrial.org or by calling UK Health Connections toll free at **1-800-333-8874**.

Arthritis

Arthritis suffers with unrelieved pain who are eligible for knee or hip replacement may qualify to be in a short clinical trial of a new compound that is designed to provide pain control. For further information, please contact Jenny Fuller at 859-323-3805 or by e-mail at jfull2@email.uky.edu. In addition, you may call UK Health Connections toll free at **1-800-333-8874**.

Inflammatory bowel disease (Crohn's disease or ulcerative colitis)

Needed for mail-back research survey: people with inflammatory bowel disease (either Crohn's disease or ulcerative colitis) and their first-degree relatives (mother, father, sister, brother, son or daughter). You may qualify if you are at least 14 years of age and are willing to commit 10 minutes to completing a mail-back survey. For more information please contact: Lisbeth Selby, MD at 859-323-5575 or laselb0@uky.edu, Chris Dunn, RN at 859-323-6423 or UK Health Connections at **1-800-333-8874**.

For any of the above studies, you can also call UK Health Connections toll free at **1-800-333-8874**.

KENTUCKY WOMEN,
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With your continued support the registry can move further toward enabling women to access the health services they need and deserve. So take the challenge! Become part of the registry. If you are already involved, invite three friends to enroll with you.

We need women of all ages, all states of health, smokers, nonsmokers, sick and well, young and old from all across the Commonwealth to be a part of

your **Kentucky Women's Health Registry**. All you do is simply complete a 20-minute survey once a year.

Please visit the Web site:
www.kywomensregistry.com or call
1-800-929-2320 for more information.

**YOU can advance
women's health**
— only a woman can!



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