

Conversation One

I Am Woman

Health and Sexuality

I was nineteen in 1972, and one of those young women who wanted to experience the pill. Actually, it wasn't the pill I wanted; what I wanted was what the pill allowed me to experience. AIDS was not a concern back then (AYDS was the diet candy my mother ate to control her weight) so my only concern was not getting pregnant with my husband-to-be. I can still remember making a nervous phone call to an OB/GYN who was recommended by my sophisticated college friend, Colleen. She promised he would prescribe birth control pills without asking if I were married and a legal adult (age 21 in Wisconsin). I was told to request a pap smear and then casually request birth control pills before I left. When I arrived, I avoided eye contact with other women as I paced in the small waiting room, and felt my body shiver as I walked into the exam room and saw the stirrups awaiting me for the first time. After looking up at the ceiling for what seemed like forever, my first gynecological checkup was finally over. I took a deep breath, cleared my throat, asked the question exactly as coached, and walked out with three months worth of sample birth control pills and a prescription for another year. Overcome with relief, I celebrated my success and never, ever thought about telling my mother.

What about you? What were your first experiences of becoming a sexually mature woman? Was there a defining moment? Was it the first time you menstruated? First time you wore a bra? First time you went to the doctor for a "female" checkup? First time you experienced sex? Did you tell your mother? What did she say? Write down a paragraph or two on what you remember about growing into a woman. The next time you're with

your mother, ask her the same question. Not only will you find some interesting, touching, and maybe even humorous stories, but your dialogue will also prepare you for a discussion of current health issues that you and your mother will want to be aware of.

Why Should I Talk with My Mother about Her Health?

The top three killers of women are heart disease, lung cancer, and breast cancer, with more women dying each year from heart disease than all cancers, accidents, and diabetes combined. Depression, osteoporosis, ovarian cancer, cervical cancer, alcoholism, and obesity also plague women in astonishing numbers. And if that isn't enough to make us want to talk to our mothers about health issues, consider this: At least 80% of all heart attacks and cancers occur in people over the age of 55.

What concerns me most about these statistics is that so many women know about the risks, but live in denial, thinking health problems happen to other people, not them or their families. Or they worry obsessively, in private, but don't check out their body's messages. They ignore warning signs until their illness has progressed to a crisis stage. I am not exaggerating when I say that in every single one of the hundreds of stress management seminars I've done over the years, at least one woman tells a story – without my prompting -- of how she ignored early warning signs that led to her cancer or heart disease. What amazes me even more is that many of the women in the room are nodding in agreement with her, but are not able, for whatever reason, to heed that call in their own lives.

Thousands upon thousands of persons have studied disease.

Almost no one has studied health.

-- Adelle Davis, *Let's Eat Right To Keep Fit*

Finding a way through the medical maze requires information, awareness, and assertiveness. If your mother doesn't understand the medical system and is faced with navigating her way through it, I urge you to become her advocate. Not just for her sake, but also because it will better prepare you if the time comes for you to confront the system yourself. Trust me on this: I've been there. Working women's healthcare costs are 45% higher than men's¹, and knowing how to keep your own costs down, yet still get the care you need, in many cases requires a heavy dose of chutzpah and research.

It's a different world today than the one in which our mothers were born. We've learned that a long life doesn't always go hand-in-hand with a healthy life, and what a woman does in her 20's through her 50's is shaping the health she will have in her 60's, 70's, and 80's. We are part of the movement that is creating a cognitive shift in our culture from thoughts of illness and treatment to health and prevention. Let's use this knowledge to help our mothers live healthier lives for as long as they are with us.

Of all the conversations you can have with your mother, health is one of the most important. Your life and your mother's may depend on it. In my seminars, so many women tell me how they wished they'd had this information for many reasons including:

- 1) Their mother had died and these daughters no longer had access to their medical history to clarify their own health challenges.

- 2) Conversations about their mother's health had saved their mothers a lot of needless suffering, and in some cases, an untimely death.
- 3) When their mothers got sick, the daughters had been forced to respond in crisis mode, rather than prevention mode.
- 4) Many daughters hadn't known how to deal with a sudden accident or illness that required them to be caregivers to their mothers.

Things are Not Always What They Seem

A month after my mother died, I was at a cousin's wedding and sat down to talk with my mother's three sisters. I asked them to tell me about the family's health history. One of my aunts said, "Well, you know your grandmother died of colon cancer."

"Colon cancer? Since when?" I said incredulously. "I thought Mom said she died of breast cancer." My mind raced as I recalled the last conversation I could remember having with my mother about my grandmother's death. I was seventeen. What did I miss in the translation? Suddenly, I was overwhelmed with memories. My father had had a malignant tumor removed from the outside of his colon ten years earlier, and his mother had died from colon cancer; I also knew that there is a strong connection between ovarian cancer, which my mother died from, and colon cancer. I saw my life and my colon flash in front of me. Two words immediately took on new meaning: "fiber" and "colonoscopy."

I'm lucky that my mother's three sisters are still alive and can fill in some of the blanks for me, but there are still important questions I'll never know the answer to because she's no longer here, such as "What caused your depression? What was it like for

you to have a hysterectomy? What was menopause like?” It’s not that I couldn’t have asked these questions while she was alive; I just never thought about it. And like so many women, I sometimes wonder what might have happened if I’d had more health information and questions to share with my mother even a few years earlier. Please be brave about talking with your mother about her health. It could save both of your lives.

“If we are to take care of ourselves, and teach our daughters and their daughters how to do the same, we must know how to access the health-care system, how to talk to doctors, and how to demand respect and appropriate treatment from a system that is not always kind to women.”

-- Dr. Nancy Schneiderman

Dr. Nancy Schneiderman’s Guide for Women Over Forty

The women of our mothers’ generation have not had access to the assertive communication courses and books that we have. They were taught to keep their personal matters, especially their health, to themselves. Inquiring about the details of another person’s health was seen as rude and intrusive. Women were taught to turn their care over to their physicians and “follow doctor’s orders.” While some of this thinking still exists today, it is counteracted with the strong presence of female physicians, therapists, writers, and politicians. These women are working diligently to promote a stronger awareness of women’s health issues such as Dr. Nancy Schneiderman, who pioneered healthcare tips on television news shows. Dr. Christiane Northrup, an OB/GYN physician and Joan Borysenko, Ph.D., a medical researcher and healer who have made the mind-body

connection a household word in women's health. Carolyn Myss Ph.D., a medical intuitive, whose work has changed how we view energy and the body. Gail Sheehy, who wrote *The Silent Passage*, the definitive book on menopause, and former Texas governor Anne Richards.

If your mother is conscientious about her health, then your main goal will be to review your family health history, including physical, emotional, and mental well-being. If your mother lacks a healthy awareness of her body, if she is ill, or if you have not talked about her health with her, creating a family health tree together is a good starting point for discussing her health.

Once you have a good idea of your family's health history, you'll be better equipped to talk with her about things she can do to take better care of herself. Consider starting a walking routine, cooking a weekly low-fat meal together, or participating in some shared activity that acknowledges healthier choices.

Create a Family Health Tree

At least 3,000 of the 10,000 diseases known to medicine have a genetic component. Studies have found genetic links to many types of cancer, heart disease, diabetes, depression, Tay-Sachs disease, Alzheimer's disease, and multiple sclerosis. Afflictions such as alcoholism, and even obesity can be inherited. By going back a few generations, you can uncover recessive genes that have been handed down through generations, while bypassing the carrier of the gene; for example, if your father's mother had breast or uterine cancer, and your father is a carrier, he can pass those genes onto you.

When you sit down with your mother to discuss your family history, take your journal with you and record her memories. Corroborate her feedback with other family members to make sure that your information is correct. If you've filled out an insurance form, or a complete medical history at your doctor's office, you'll most likely already have most of the information for your immediate family, but do make sure to include the health history for your parent's siblings, as well as both sets of grandparents.

An individual doesn't get cancer, a family does.

-- Terry Tempest Williams, *Refuge*

Carol Krause, author of *How Healthy is Your Family Tree?* is a Washington public affairs specialist, who became interested in her family's health history upon the death of her mother and sister from cancer. After interviewing family members and investigating death certificates, she found that more than a dozen family members had died from some type of cancer. Carol chose to have a preventative hysterectomy because of the history of ovarian cancer in her family, and was also successfully treated for colon and breast cancer. She says, "There's a lot of denial out there. When I go and speak to groups and ask, 'How many of you know what all four of your grandparents died of?' they don't know."

Like Carol Krause, I became more concerned about my own health when my mother became ill. After her death, I began researching my family's health history, including listing all the major problems my mother had throughout her life—an exercise I will ask you to do with your own mother. The first time I made a list of her ailments, I was

overwhelmed by how poor her health was throughout her entire life. It was also hard to ignore the fact that I also experienced the same debilitating headaches and reproductive problems as my mother. Difficult as it was to face up to it at the time, I'm so glad I did; it was a wake-up call for me, and forewarned me to have my hearing checked and a bone density scan done earlier than I would have previously thought necessary.

Go to your journal and at the top of a blank left-sided page, start a health history chart for yourself. On the right hand side, make a chart for your mother. You'll be identifying any major physical injuries, illnesses, and diseases both of you have had and grouping them by decade to provide you with as much detailed information as possible. Look for patterns. You may find that you have injuries as well as diseases at similar ages; this can be helpful information for your future. On the following pages, you'll be creating a health history for other family members. In addition to listing any illness, accident, or disease, include medications. For some women, this is critical information to have, for example, daughters whose mothers were treated with DES (diethylstilbestrol), which was widely prescribed to pregnant women as an anti-miscarriage drug for more than 20 years, until it was banned in 1971. Many of these daughters were diagnosed with reproductive cancer in their twenties and thirties. Recent research is showing that their daughters are also showing a higher incidence of reproductive cancer at the same age.

	Me	Mom
Birth - 10	Swallowed lye, burned throat, age 1	3 surgeries for eye problems throughout childhood
10 - 20	-----	Exploratory eye surgery – age 18
20 - 30	Panic attacks (late 20's)	Anxiety, panic attacks. Migraine headaches (continued until death) treated w/ Fiorinal
30 - 40	Tension headaches (continue in 40's)	Clinical depression, anxiety treated w/ Valium, insomnia treated w Doriden through the remainder of her life
40 – 50	Fibroids, ovarian cysts Hysterectomy – cervical, ovaries adenocarcinoma insitu	Fibroid tumors, excessive bleeding, hysterectomy – age 40, large weight gain.
50 – 60	---	Ear surgery to correct a genetic hearing loss, 2 hearing aids – age 50 Depression returns when youngest daughter leaves for college – age 58
60 – 70	---	Falls and injures back -- age 65 Degenerating disks -age 66 Spinal Surgery Ulcer that included a transfusion of tainted blood that put her in a coma for three days – age 67 “Silent killer,” ovarian cancer, diagnosed – dies age 70

Depression Isn't Normal

I grew up thinking that my mother's illnesses were a normal part of our family's life, yet still something that no one spoke about openly. I once overheard my father call my mother a hypochondriac and while I was too young to know what it meant, I knew from the sound of his voice that it wasn't a good thing and promised myself I would never be like my mother. It wasn't until I took my first college psychology class that I realized that my mother was clinically depressed and that depression *wasn't* normal. And only in recent years did I discover that I was equally at risk for the disease because of my mother's history.

During my mid-twenties, before I came to realize that my marriage needed to end, I experienced anxiety attacks while driving and when I was around my friends' new babies. I snuck off to an internist who knew my parents and secretly explained my fears. "I don't feel physically ill, I said, "but more and more often I get this panicky feeling in my heart and stomach like my mother." His response stunned me. "Stop seeing your mother for a month, take these pills, and you'll be fine." "These pills" turned out to be an anti-anxiety drug called Librium. I flashed back to my memory of a shoebox filled with pill containers that my mother kept in her closet on a shelf too tall for me to reach when I was young.

Not knowing what else to do, and never considering telling my mother, I filled the prescription like a good girl, but couldn't bring myself to take the pills. They sat in the medicine cabinet for a week, while I felt my panic grow. In an anxious moment, I took one pill. An hour later, feeling no different and sure that if I looked in the mirror I'd see my mother's face, I frantically flushed the remaining pills down the toilet and prayed for

a miracle. Not willing to tell my mother what happened, I avoided her phone calls as much as I could.

The panic continued off and on for months until one early morning I told my husband, “If you leave me alone today I’m afraid I’ll commit suicide.” My husband said he would call the hospital where he worked to see what to do. After arranging an appointment with a psychiatrist, he said he had to go to work and would come home to pick me up and take me to my appointment in the afternoon. I called my father and told him I was having a really rough time. He said he’d be right over. I asked him not to bring my mom, but when he showed up, she was right behind him. I asked to talk to my father alone for a few minutes, and began to sob, telling him I was afraid I was becoming “just like Mom.” He looked at me defiantly and yelled through his whisper, “You will *never* be like your mother. None of you kids will be. Don’t you *ever* think that again. Your mother is different. She can’t help herself. You can.” I saw tears in his eyes as he turned and walked out the room. My mother came and sat on the bed, patting my hand and telling me that everything would be just fine. If she heard my father’s words, she never let on, and continued to comfort me. I sat there numbly, wondering what would happen to me.

Sadness is more like a head cold – with patience it passes.

Depression is like cancer.

-- Barbara Kingsolver, *The Bean Trees*

Three hours later I was sitting in the psychiatrist’s office, wondering what would happen to me. At the end of our hour he said, “Honey, there’s nothing wrong with you

that a little talking wouldn't help. You don't need me. You need a therapist." I was so relieved. I was ushered into another room where I met with a nurse therapist who listened to me cry my heart out and asked that I return for a second session. At the second session, the therapist divulged (with permission) that she had also been working with my mother. What a shock! What a relief! I felt like fireworks were exploding in my body, celebrating these new thoughts in my mind, "This therapist really understands my life and my challenges. This is *so* affirming and freeing. I can breathe again." I drove over to my mother's house right after the appointment and shared my secrets, describing my unhappiness in my marriage, my fear of having children, my concern about her health and her relationship with my father. We both cried at how scary this whole experience of anxiety and depression was, and how much pressure there was to hide feelings of fear and failure from others. I had reached another turning point in my life.

I learned that avoiding my mother was not the answer for me, and the more open I was with her about my concerns – both about her and myself – the easier it was to control my anxiety. I felt better. This experience marked the beginning of my commitment to more self-disclosure in all of my relationships. It has been extremely uncomfortable at times, but ultimately freeing.

As you begin this journey into sensitive issues, I promise you that there will be times when you will want to pull back like I did and avoid the tough stuff (if you haven't already). There will be times when you think that you cannot possibly relate to your mother's situation, nor she to yours. I urge you to push through that part of you that resists doing what you know is good for you—to be straight with yourself, and to talk

honestly with your mother. Communication, whether it's with yourself or your mother, is truly healing.

The World Health Organization ranks depression as the world's fourth most devastating illness. By 2020, it will have climbed to second place, exceeded only by heart disease.²

If you suspect depression in your mother, knowing how to talk with her about it is critical to her health. Depression is an isolating disease that affects 20% of the population over 65 according to Dr. Barry Liebowitz, chief of the Mental Disorders Among the Aging Research Branch at the National Institute of Mental Health. The National Institute of Mental Health points out that depressed people often don't recognize their own depression, thereby foregoing helpful treatment. Untreated, depression can lead to an increased risk of heart disease, stroke, cancer, and osteoporosis.

Mom, Do You Think You Might Be Depressed?

There are different types of depression, which are helpful to distinguish in relationship to your mother. There is the ordinary symptom of feeling "down" which is normal when you've experienced a loss. Depression is also a mood that exists over a period of time, which can evolve into a "syndrome." Described as a sad mood that continues for more than two weeks, a depressive syndrome is usually accompanied by some of the following symptoms: change in sleep, eating, concentration and memory,

suicidal thoughts, a lack of pleasure, increased fatigue and -- at times -- feelings of worthlessness and guilt.³

If your mother exhibits a combination of the above symptoms, gather up your courage and talk with her. Find a quiet, relaxed time, in person, when the two of you are alone (so you can see her reaction and respond supportively) to gently ask, “Mom, do you think you might be depressed?” Simple as that question sounds, and as difficult as it might be to say to her, or for her to hear, asking the question can act as a wake-up call. If she says no, your response is a caring, “Just checking. You’ve mentioned a few of the symptoms that I’ve read cause depression.” This may open the door for her to talk more openly. If your mother says yes (or if she says no, but you sense otherwise), suggest she see her doctor and ask her/him to give her the Beck Depression Inventory, an uncomplicated 21-item questionnaire, which has been tested for validity and reliability and is very successful in alerting a physician to potential depression.

If you sense that depression is not a factor in your mother’s health, I still suggest you ask her if she ever felt depressed in her life. Some women may not be comfortable talking about “depression” as a clinical diagnosis, but they have felt depressed, particularly in the case of “post-partum” depression, or after the loss of a spouse or other loved one. While talking about those feelings may create a feeling of vulnerability in your mother, with your loving support and interest, this can help you shed light on vague memories or lead you into a discussion about the connection between depression and other diseases for which she could be at risk.

Researchers at Johns Hopkins University recently completed a study on 6,000 patients with high blood pressure. Those who were also diagnosed with depression were

twice as likely within the next five years to have had a heart attack as those who were not depressed.⁴ If you chose to mention this study to your mother as a fact you found startling, you could then introduce a few questions about whether depression and heart disease have ever been found in your family.

Talking about Heart Disease Symptoms

Many women are aware that heart disease is the number one killer of both men and women, and kills 10 times more women than breast cancer. What women tend to miss are the behaviors and symptoms in their own lives that lead to a heart attack. Thirty-five percent of adult women in this country are overweight, 24.8 percent smoke, and 62 percent don't exercise regularly, all of which contribute to heart disease. Symptoms of a heart attack are often mistaken for the flu or the normal aches and pains of aging: nausea, a feeling of congestion across the entire chest, body aches (as opposed to a shooting pain down the left arm for many men), extreme fatigue, dizziness and ankle swelling. Just talking with your mother about the symptoms of a heart attack could save your mother's life, as it did in the case of Penny's mother, Alice.

Penny, a medical records technician at a hospital, overheard a conversation by two nurses about an elderly woman who had been admitted for a heart attack. The sick woman said she had no idea that the persistent nausea she had felt the entire day before was the beginning of a heart attack. It wasn't until she couldn't catch her breath as she walked from the bed to the bathroom and started feeling dizzy that she knew something was wrong and called 911. An alarm bell went off in Penny's mind. Her mother, a healthy but sedentary woman in her 70's, had been complaining recently of a shortness of

breath whenever she walked back up the basement steps of their single-story home. She anxiously called her mother that night and mentioned what she had heard. Her mother dismissed the idea of a heart attack, saying she wasn't overweight and didn't smoke. Penny began to cry, telling her mother how horrible she'd feel if something happened to her, and begged her mother to call her doctor and get it checked out. Annoyed, but also touched by Penny's obvious concern, Alice called the doctor the next morning, explained her symptoms, and was told to come to the clinic immediately. Several tests were ordered, which led to Alice being diagnosed with angina (chest pain that can be a precursor to a heart attack). She was treated with medication, and today remains symptom-free. Had she waited, the doctor told her, a heart attack was imminent. Thanks to her daughter's sensitivity and willingness to discuss a touchy subject, Alice is back to playing golf and enjoying her grandchildren.

Four Life-Saving Strategies To Save Your Mother From A Heart Attack

When Penny shared her story with me, we talked about what she could do in the future, should her mother actually have a heart attack. Based on my own experience of being unprepared when an elderly shopper who fell into my arms in a department store one Thanksgiving weekend, I suggest four things:

- 1) Take a CPR course, if you haven't already. If you have, renew your certification (suggested by the American Heart Assn.)
- 2) Carry a cell phone.
- 3) Stay calm, breathe, and call 911.

- 4) Learn your mother's doctor's names and numbers, and carry them in your wallet, so you can call and alert them in an emergency.

Go to the Doctor with Your Mother

Penny can also better protect her mother and herself by going with her mother to her next doctor's appointment. Lenore Howe, editor of the *Wellness Web*, an online healthcare information provider, suggests that daughters and mothers go along to each other's doctors' appointments and take notes. Whether your mother is health-savvy or not, oftentimes, it is difficult to remember all the things you want to cover, or what a doctor tells you, and having someone else there can be reassuring and helpful.

If your mother is more reserved, quiet, or even passive, before the appointment have her write down her questions, and then make sure they are asked while she is there. Because so many women still treat a physician as an authority figure, they are reluctant to speak up, and in the midst of illness or pain, may forget the question and the answer. Howe reminds women that doctors depend on women's input and that we need to remind ourselves that physicians are hired help. "They may be expensive hired help," Howe explains, "but they are being paid to take care of us."

Know How to Access Your Mother's Health Records

As important as asking the right questions of your doctor is knowing how to access medical records for your mother or yourself. With the number of specialty physicians, referrals, and insurance billing mistakes dramatically increasing, you want to periodically check these records. Jane Sarasohn-Kahn, a healthcare economist and consultant says that

access to medical records is different from state to state and from doctor to doctor. To secure your mother's records for her, the first place to start is with her primary care physician. Any specialists that your mother sees should send their records to the primary doctor; however, Sarasohn-Kahn points out, this exchange is too often overlooked. If you want to access your mother's records for her, you will want her to write and sign a letter explicitly giving you permission to access the records. Make two copies – one for yourself and one for her safe-deposit box (make sure you are a joint signer on her box). Even better, ask your mother to have her attorney include the permission in her will. Some medical practitioners have different ideas about what constitutes a medical record, so be prepared for surprises and the potential need to retain an attorney if the records are denied.

From Hot Flashes to Power Surges

Gail Sheehy, in *The Silent Passage*, cites a study done by Professor Phyllis Mansfield that found that mothers are third in line when a woman comes to asking for information about menopause. Five hundred women were surveyed and said that they sought out a friend first, books second, their mother third, and their doctor last.

Almost 4000 women become menopausal every day in the United States and over 40 million women will pass through menopause in the next twenty years according to the North American Menopause Society (NAMS). NAMS reminds women that menopause is a natural event, not a disease, with physical as well as psychosocial change accompanying midlife that can contribute to serious health problems such as heart disease, breast cancer, and osteoporosis.

Stacy, 35, who was mystified by her inability to conceive, finally went through a battery of tests and was shocked to find out she was going through early menopause. When she told her mother Ruth about it, her mother responded matter-of-factly, “Oh yes, all the women in our family did. Your sister started at 27.” Stacy was stunned that neither her mother nor sister had thought to tell her this vital piece of information. When she asked her mother, “Why didn’t you tell me this before?” Ruth, clearly baffled, said, “I thought we had all talked about this.” Stacy’s sister agreed. Fighting back tears, Stacy said she had no memory of being told, and asked her mother what other health mysteries existed in the family. The conversation led to a meeting with Stacy’s mother, sister, and grandmother to talk about their health history.

Judy had a very different experience with her mother than Stacy -- one that we all hope for. When Judy felt her first hot flashes, she apprehensively went to her mother, Lois, and asked, “When did you first experience signs of menopause?” Lois, in her early 70’s, and still volunteering at her local church, laughed and said, “It was the year I turned fifty! I woke up one night craving chocolate, which I’d given up for Lent, and realized I was sopping wet. I thought it was withdrawal from lack of chocolate, but when I went to my doctor, he said it was the beginning of menopause.” Just like a small child who falls and then looks to her mother before she decides whether to laugh or cry, Judy heard her mother’s laugh and mirrored it. She told Lois she felt relieved to hear it wasn’t difficult for her, and that she appreciated her mother’s openness in discussing such a personal subject.

Honey, those aren't hot flashes! Those are power surges!

-- Very Wise Anonymous Woman

As our mothers enter these postmenopausal years, their personalities become more defined and they become more settled in their ways. This can, at times, cause us to feel that a discussion on any topic of importance is not worth the effort because as one daughter said, "It will, probably lead to nowhere." Instead of giving up, I'm going to encourage you to think differently -- especially when it comes to sensitive health issues -- and talk to your mother, not about what she's doing wrong, but about making healthier choices.

Helping Your Mother Make Healthier Choices

One of the most sensitive health issues to discuss with women, which contributes to heart disease and most types of cancer, is the issue of weight. Yes, we talk about our diets and how much weight we've gained, or how much weight we need to lose, but it is a brave person who confronts a woman about her need to do something about her weight. Some weight issues are connected to genetic predisposition, others to lack of exercise, or poor eating habits. If you have attempted to talk to your mother about her weight and have met with resistance, look at the way you're approaching her, and ask yourself, "Is there a better way to do this?"

Jane, an avid exerciser and self-professed health nut, is a three-hour plane ride from her mother, Kay, who is retired, in her mid-seventies and living with her second husband.

Both Kay and her husband are in poor health. Jane made a conscious decision after watching her mother suffer from high blood pressure that she would do whatever it took to keep herself healthy and help her mother get healthier. Kay knows she should lose weight and exercise, but just doesn't have the interest or energy to do much about it, nor does she get support from her husband. Jane lost count of the times she told her mother she needed to be more vigilant about her health, and was almost ready to give up.

It is now recognized that 60 percent of women's cancers
and 40 percent of men's cancers are nutritionally related.

-- Eberhard Kronhausen, Ed.D.

and Phyllis Kronhausen, Ed.D.

Formula for Life

After Jane and I talked about how she was approaching her mother, Jane realized that she had been too focused on telling her mother to change instead of supporting and encouraging her when she did take small steps to improve her situation. When Kay mentioned during a phone call with Jane that she'd seen a talk show discussing healthy eating for seniors, Jane recognized Kay's interest. Over the next few months, Jane went to the library and found several magazine articles relating to healthy eating, copied them, and every few weeks sent an article to her mother. Jane also included a simple recipe from her favorite cookbook, with a note saying how much her mother would enjoy preparing the recipe. Since they talked about every two weeks, Jane would ask her mother if she'd had a chance to fix the recipe she sent. Her mother often said no, which

was disappointing to Jane, but she didn't give up. On her next visit to see her mother a few months later, Jane brought along the classic book, *Let's Get Well*, by Adelle Davis, as a gift. She gave the book to her mother and said with excitement, "Mom, you're going to love this book. Why don't you skim through it while I'm here and choose three recipes that appeal to you and we can cook them together."

Jane's mother was surprised at how good the results tasted. She added that she felt less bloated and tired after she ate, and was looking forward to making the recipes again. Then Jane and Kay began to talk about about food habits, their favorite comfort foods, and how to fuel the body to make it work better. Much of Kay's response had to do with the new way Jane approached her mother by continually reinforcing her ideas without being overbearing. Here are a few suggestions to help you talk with your mother about her health.

1. Watch for signs of interest. Listen to what she's complaining about or what she mentions is interesting to her, and build from there. Jane heard her mother mention a talk show, and used that way to begin talking about healthier foods.
2. Build slowly and introduce one idea or subject at a time. Jane introduced a few short articles with one recipe every few weeks so that her mother wasn't overwhelmed and had a chance to absorb the information, before she introduced an entire book.
3. Use enthusiasm in your voice when you suggest ideas. This is important. People are much more apt to try something new when you are excited about what you're asking them to do.

4. Don't give up if your mother resists. Take a deep breathe, relax, and start the process over with step one. The brain needs eight to sixteen repetitions to learn something new, so repeat, repeat, repeat.

If Your Mother is Dealing with a Chronic Illness

There are stages of conversation when talking about chronic illness just as there are stages to a disease itself. Should you find yourself in a situation where your mother is chronically ill, there is no question that talking about health concerns can be extremely challenging. All the uncomfortable feelings of fear, anger, sadness, disappointment, resentment, and guilt seem to show up in the oddest ways at the most inopportune times. When I found myself in this situation with my mother, my way of responding to these feelings was to face the truth head-on with her. There were times that she wept as we talked, and I encouraged it, and there were times I felt myself breaking, and allowed the tears to come. What I found with my mother is that she looked to me to help her cope, and the more open I was, the easier it was for her to respond bravely to her challenges. This in turn inspired me to continue encouraging her, while also remaining honest.

Your listening skills will be more important than ever in responding to your mother's illness. More than anything else, though, she'll be looking for confirmation that you're not going to abandon her. It is a strange role reversal children experience when their parents become chronically ill at an advanced age – parent becomes child and child becomes parent. What we're aiming for here is a balance of parental nurturing and caring friendship.

Helping Your Mother Stay Healthy is a Gift of Love.

As your mother enters her silver years, your conversations with her about health may change, but the desired result is still the same – to provide information and support so that your time together is rich and fulfilling for both of you. Listed below are several suggestions for maintaining a healthy lifestyle with your mother. Each of the suggestions includes supportive research that will provide you with several topics of conversation.

- Be part of a loving community. If your mother is a sedentary person, or lives alone, getting out with others will help her stay healthier. A study done by Dr. L.F. Berkman with 7,000 people in Alameda County, California, found that close social ties dramatically lower disease and premature death when compared to isolated living. Breast cancer survivors in a Stanford University study who participated in weekly support groups lived on average twice as long as those who didn't participate in the support groups.⁵
- Move your body at least 30 minutes a day. The bones and heart become stronger. Independent research done by Harvard University and “The Nurses Study” (an ongoing program with 84,000 nurses) found a 30-minute walk reduced risk of heart disease by 40%. Exercise also has a more beneficial impact in changing eating patterns, according to a study done at Baylor University.
- Weight train two times a week. Yes, weight train. Miriam Nelson, Ph.D., author of *Strong Women Stay Young* and *Strong Women Stay Slim*) proved that 20 minutes twice a week of simple weight training in postmenopausal women, even

- sedentary women as old as 90, builds stronger bodies and helps women live more youthful lives.
- Lower your overall fat intake and choose “good fat” over “bad fat.” Switching from saturated and trans fat to monounsaturated fat (canola, flax, and hemp oils instead of butter) lowers total cholesterol without lowering HDL," says the May 1998 *Pritikin Perspective*. “In population studies in the Mediterranean where olive oil is used instead of butter and animal fat, heart disease rates are lower than that of the U.S." If you have to have your cheese Danish, eat half and share the rest.
 - Drink 64 oz. of water day (8 eight-ounce glasses) of water a day, which flushes the colon and kidneys and keeps the body and brain lubricated. If you’re thirsty, you’re already dehydrated. Two early signs you’re not drinking enough water are fatigue and lack of concentration.
 - If you smoke, quit. Smoking not only increases the possibility of lung cancer, but also leeches nutrients out of the bones, leading to osteoporosis, and narrows the blood vessels, upping the risk of heart disease. According to the American Heart Association, quitting smoking is the single most important thing you can do to prevent heart disease.
 - Get an annual check-up that includes a mammogram, bone density test, breast, pelvic, and rectal exam. Do a monthly breast exam. Dr. Nancy Schneiderman schedules all her annual health screenings the week of her birthday.

- Keep a list of all medications you've taken and are taking including dates and reasons for taking them. It's too easy to forget the names and dosages should you encounter a crisis, and need to recall them in a hospital emergency room.
- Think humorous, loving, and grateful thoughts. Loma Linda University found that fake laughter is just as effective as real laughter in reducing stress. The HeartMath Institute determined that positive emotions such as appreciation, compassion and happiness change patterns of activity in the nervous system, reduce the production of the stress hormone, cortisol, and calm the heart. Listen for your own laughter three times today. If you haven't heard it by the time you go to bed, sit up in bed and laugh out loud for ten seconds. You'll surprise yourself and when you wake up the next day, you'll have a smile on your face. Then go tell your mother to try it.

Unlock the Past and Move Toward Health

Dr. Christiane Northrup, a gynecologist, and pioneer in the mind-body health movement, writes in her book, *Women's Bodies, Women's Wisdom*, that by exploring your past health history you can find clues to how you are contributing to your present conditions. She believes that by uncovering the patterns of illness in your family, you unlock the past that is stored in the cellular memory of your body. If your family has a history of illness, becoming more aware of the underlying issues that were present before and during the illness can help you redirect your energy. This premise originates with the belief that recognition is the first step toward making change. Regardless of our age, we

have the ability to create better health, beginning with our thinking, which directs our feelings and choices, and ultimately influences the quality of our life.

One of the most significant insights I had upon completing my mother's health history was the pervasive theme throughout her life: illness was the status quo, punctuated with moments of health. As I began to uncover how deeply rooted this belief has been in my own mind, I was able to see how important it is to work every day at changing these messages. Some of my favorite methods include music therapy, guided imagery, intuitive meditations, and verbal affirmations while I'm walking or swimming laps. Movement and positive suggestion used at the same time strengthen your resolve. I also use affirmations such as "I choose to be healthy. I choose to nourish my body," when I'm getting ready to forego the gym or eat something I shouldn't. Affirmations are a powerful step in changing long-standing negative patterns, *and* they are only the beginning. Taking action is the final ingredient that will bring you and your mother better health. Before you talk with your mother, ask yourself these questions and write the answers in your journal:

- What are my beliefs about my health?
- How has my mother influenced my beliefs about health?
- If I were in control of my mother's health (which I'm not), I'd want her to:
- What I most need to do to maintain better health is:

When You Have Your Health, You Can Do Anything

Living a healthy life for as long as we're blessed to live is, to me, one of the biggest challenges and greatest responsibilities we have as human beings. A mother in one of my

stress management seminars said it so clearly, “I never thought about my health until it was taken away. It wasn’t until I had a heart attack that I realized I had so much control over my own health. I started fighting like hell to live, and found a new woman inside me – strong, brave, and determined to get well. When you lose your health, you lose everything. When you have your health, you can do anything.”

It began as a mystery, and it will end in mystery,
But what a savage and beautiful country lies in between.

-- Diane Ackerman

A Natural History of the Senses

Activities To Do With Your Mom...

- Walk in the woods, the mall, the mountains, the beach, walk around the block, around the house, wherever your legs will take you.
- Join a gym together and help each other strength train
- Hire and share a personal trainer
- Take a class together in yoga, tai chi, meditation, healthy cooking, massage
- Play team sports – tennis, golf, bicycling,
- Relax together at a weekend spa, treat each other to a massage

Questions for Your Mom...

- Tell me everything you know about your health history, starting with your childhood.
Tell me everything about Dad’s. My grandparents' medical conditions?

- Is there any history of:
 - Addictions: Alcoholism? Cirrhosis of the Liver? Drug abuse?
 - Allergies: Asthma? Drug allergies? Food allergies?
 - Bones: Osteoporosis?
 - Cancer: What kind?
 - Heart: High or low blood pressure? Heart Disease? Stroke?
 - Immune System: HIV? Candidiasis? Chronic fatigue? Lupus? Multiple Sclerosis?
 - Mental Illness: Depression? Anxiety? Panic Attacks? Migraine Headaches?
 - Reproductive System: Gynecological problems? Bladder infections? Fibroids? Ovarian cysts? Yeast infections? Breast cysts? Hysterectomy? Oophorectomy (ovaries removed)?
 - Surgeries: Gallstones? Kidney stones? Heart Bypass?
 - Weight: Obesity? Anorexia? Bulimia?
- What medications are you taking now?
- Are you allergic to any medications? Which ones?
- Have you ever seen a therapist? Psychiatrist? Taken anti-depressants or anti-anxiety medication? Anyone else in the family? Have you ever felt suicidal? If so, what was going on in your life?
- Are you taking any Vitamins? Supplements? What are they? How much? What are they for?
- When did you start menstruating? What were your periods like? Did you ever have PMS?

- How did you learn about menstruation? Did you and your mother ever talk about it?
- When did you start menopause? What symptoms did you experience? Was it different than what you expected? How old were you when you finished?
- What is your health insurance company and phone number? Your ID number?
- Who is your doctor? What is his or her phone number? Other doctors?
- When was the last time you had a pap smear? Mammogram? Colonoscopy? Bone scan? Blood work? When is your next appointment scheduled? Would you like me to go with you and be your secretary?
- Would you write a letter of permission, giving me access to your health records if that became necessary?
- How would you like to be cared for if you became seriously ill?
- Would you like some help with meal planning and food preparation?
- What kind of exercise are you doing? Would you like to work out a reasonable exercise plan with me?
- What concerns you the most about your health?
- If you became seriously ill, how would you me to respond?
- Is there anything I can do to help you be healthier?

¹ Survey done by Milliman & Robertson Inc., an actuarial company that sells guidelines to health insurance companies Copyright 1997, The New Republic Susan E. Reed, Is managed care unfair to women?: MISS TREATMENT. , The New Republic, 12-29-1997.

² "The Age of Anxiety." Ann Elliott Cutting. Newsweek Special Issue – Health for Life, Spring/Summer 1999

³ FAQ website of the North American Menopause Society <http://www.menopause.org/faq.htm>

⁴ Laura Beil / Public Health Writer of the Dallas Morning News, Depression may be major heart risk factor: Massive study ranks it near smoking, high cholesterol. The Dallas Morning News, 11-17-1997, pp 6D.

⁵ *Love & Survival*. Dr. Dean Ornish. HarperCollins 1998. Chapter 2, pp. 43, 53.