

WOMEN'S HEALTH TOOLKIT

Information and
Tips for Wellness



Weill Cornell Medicine

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WOMEN'S
HEALTH
MATTERS



Women have unique health concerns and issues. These include menstruation, pregnancy, menopause, and conditions that affect the female organs, such as uterine fibroids, pelvic floor disorders (such as uterine prolapse), and cervical cancer.

Both women and men can develop many of the same health issues, yet women are often impacted differently or to a greater degree. For example:

- Osteoarthritis affects more women than men.¹
- The symptoms of a heart attack are often different for women than men.²
- Depression is more common in women than in men.³
- Women are twice as likely as men to experience urinary incontinence.⁴
- Women are 5-10 times more likely to develop hypothyroidism than men.⁵

Additionally, while more women (38%) than men (30%) suffer from one or more chronic diseases, women's health complaints and issues have historically been more likely to be dismissed, poorly addressed, or ignored.⁶

And, there are some significant differences in rates of disease within the female population as a whole. African-American women, for example, have a higher risk of developing heart disease (the number one killer of women in the U.S.) than white women.⁷ They also tend to develop high blood pressure (hypertension) earlier in life than white women, and they have nearly double the rate of type 2 diabetes as white women.^{7,8}

There are many factors to consider when it comes women's healthcare. They include socioeconomic status, healthcare access, insurance coverage, genetic factors, lifestyle choices, cultural beliefs and attitudes, and others. These factors are not always properly considered by treating physicians, which can lead to discrepancies in care.

The good news is that the medical community and society at large have made strides in recent years in creating a more inclusive, equitable healthcare system that meets the needs of all women.

The expert healthcare providers at Weill Cornell Medicine take women's health to heart.

That's why we've compiled the following "health toolkit" for women, covering several important areas of women's health and highlighting some of the most common health conditions women experience.

Women are busier than ever today—many are juggling demanding work schedules while raising families and caring for their own aging parents. In the daily grind of life, it's easy to overlook aches, pains, and warning signs of health problems. Yet, it's important to address health issues and concerns as they emerge. The earlier problems are discovered, the better.

Read on for helpful tips and information.

MAINTAINING
OPTIMAL HEALTH
THROUGH THE YEARS



Ahead we'll explore several different areas of women's health. First, it's important to understand the factors you can control when it comes to your health versus those you can't control.

Risk factors you can't control include your age, gender, family history of disease, ancestry, and existing health problems (such as type 1 diabetes), which can increase your risk for developing another health condition.

Risk factors you can control include your diet, level of physical activity, whether you smoke, how much alcohol you consume, whether you use illicit drugs, and whether you take everyday safety precautions, such as using a seat belt and wearing a helmet while bicycling.

It's important to share with your doctor your complete health history and as much information as you can gather about your family's health history—your children, siblings, parents, grandparents, and even aunts, uncles, nieces, and nephews.

This information will help your doctor assess your risk of disease, so he or she can address any existing health issues and make recommendations on how you can modify your lifestyle for optimal health.

Nutrition & Digestive Health

"All disease begins in the gut." –Hippocrates (known as "the father of modern medicine")

At Weill Cornell Medicine, we have a slightly different take. We like to say that "good health begins in the gut." Indeed, new discoveries are being made every year about just how much gut health affects overall wellness.

The human digestive tract is a complex system of organs that work in concert to help the body break down food and absorb nutrients. It extends from the mouth to the rectum and includes the esophagus, stomach, small and large intestines, plus the "accessory" organs of digestion—the pancreas, gallbladder, and liver.

Both women and men experience a range of digestive problems, but there are some key differences between the two sexes. For example, there is evidence that women's stomachs and colons tend to empty more slowly than men's, which may help explain why women experience bloating and nausea more frequently than men, and why women tend to have more issues with constipation.⁹

Then there are digestive issues related to pregnancy and menstruation, explored below.

Digestive Problems During Pregnancy

A woman's body goes through many changes during pregnancy. Gastrointestinal issues are common and can include:

Morning sickness, nausea that usually occurs during the first trimester of pregnancy but can persist throughout a woman's pregnancy. Morning sickness is common and may be a reaction to the pregnancy hormone human chorionic gonadotropin (hCG).

Constipation, a common issue during pregnancy that is often a precursor to other digestive problems, such as chronic gas and bloating, and hemorrhoids. Elevated hormone levels relax the muscles of the large intestine (bowel) during pregnancy, which can disrupt muscle function and lead to constipation; the uterus also gets larger, which can press on the bowel and disrupt normal functioning; iron in vitamin supplements can also make stools hard, dry, and difficult to pass.

- **Hemorrhoids** (varicose veins of the rectum) are a common side effect of chronic constipation during pregnancy; to prevent hemorrhoids, women should eat enough fiber to help prevent constipation, avoid straining on the toilet, and prop the feet up on a stool during bowel movements, which allows for easier passage of stools.

Heartburn is common during pregnancy and may be caused by increased levels of progesterone, which relaxes the muscle that normally prevents stomach acid from splashing up into the esophagus.

Gas is especially common during the second trimester of pregnancy, as the digestive system slows down. Gas buildup can cause belly pain, cramps, burping, and flatulence.

Pregnant women experiencing any of these issues should consult their OB-GYN before taking any medications, even over-the-counter (OTC) formulas.

Digestive Problems During Menstruation

Many women experience digestive issues during and around the time of their period, due to hormonal fluctuations. These can include:

- Constipation
- Diarrhea, or looser bowel movements
- Bloating
- Gas
- Vomiting (rarely)



Abdominal pain and cramping are common but are usually associated with the shedding of the endometrium (lining of the uterus). Depressed mood, anxiety, and pelvic pain are also common during menstruation and can exacerbate digestive issues.

Women should discuss any menstruation-related digestive issues with their primary care physician or gynecologist, who can recommend medications, lifestyle changes, or complementary therapies (e.g. massage, acupuncture) that may help.

Outside of pregnancy and menstruation, issues with digestion can be related to diet, medications, stress, activity levels, inherited diseases, and even an imbalance of gut flora—the healthy bacteria that live inside the digestive tract.

Three of the most common digestive conditions affecting women include:

- 1** ***Gastroesophageal Reflux Disease (GERD)***: Also known simply as heartburn, GERD develops when stomach acid (and even stomach contents) splashes up into the esophagus; symptoms vary, but can include chest pain, a burning sensation in the back of the throat, sour taste in the throat and mouth, cough, sore throat, and hoarseness.
- 2** ***Irritable Bowel Syndrome (IBS)***: A chronic disorder that causes diarrhea, constipation, or both; symptoms can include frequent cramping, gas, bloating, constipation, and/or diarrhea.
- 3** ***Inflammatory Bowel Disease (IBD)***: A blanket term for a variety of chronic conditions that involve inflammation and immunity problems, IBD includes ulcerative colitis, Crohn's disease, and others; symptoms can include abdominal pain, cramping, fever, and bloody diarrhea.

Unfortunately, stories of women with digestive conditions like IBS and Crohn's disease being dismissed by their doctors are common. If you're experiencing troubling symptoms like frequent gas, bloating, nausea or vomiting, abdominal pain, burning pain in the chest, or blood in the stool, and your doctor hasn't taken your complaints seriously or provided a satisfactory solution, it's time for a second opinion.

Tips for a Healthy Digestive System

Earlier we mentioned Hippocrates, who also famously said, “Let food be thy medicine.” The expert physicians at Weill Cornell Medicine couldn’t agree more. A nutritious diet rich in whole foods is a key part of good health. Follow these tips for a healthy digestive system:

Eat a high-fiber diet that includes both soluble fiber (e.g. whole oats) and insoluble fiber (e.g. leafy greens).

Choose low-fat foods and lean meats; fatty foods like fried potatoes and fatty cuts of meat can be difficult to digest.

Incorporate probiotic foods containing healthy bacteria into your diet, such as kefir yogurt, and pickles with live cultures.

Stay hydrated, which (along with eating enough fiber) helps your body form softer, bulkier stools.

Enhance your diet with superfoods, including berries, green tea, nuts, chia seeds, oats, dark leafy greens, and unsweetened yogurt.

Exercise regularly; physical activity helps your digestive system function optimally.

Manage stress, which can reduce immunity and cause a range of problems, from increased stomach acid production to esophageal spasms.

Limit consumption of caffeine and alcohol, which can trigger or worsen heartburn and other digestive problems.

When to See a Doctor:

See a gastroenterologist right away if you experience troubling or painful digestive problems. These can include heartburn that won’t go away, abdominal pain or bleeding, excessive gas or bloating, diarrhea or constipation, nausea and/or vomiting, esophageal pain, dark urine, stool leakage, rectal bleeding, or other worrisome symptoms.

Are You a “Supertaster”?

Women’s digestive tracts (which include the mouth and tongue) tend to be more sensitive than men’s. In fact, more women than men are classified as “supertasters.” This means their tongues are better at detecting bitter and sweet foods.¹⁰

Women’s digestive tracts are also more sensitive to stimulation in general (e.g. from an inflated balloon placed in the esophagus during a medical procedure).⁹

Curious about whether you might be a supertaster? [Watch this video.](#)



Skin Care

As the body's largest organ, our skin protects us from the elements and infections. Whether triggered by allergens, irritants, infections, or reactions to stress, skin problems are ultimately a reflection of what's happening inside our bodies, and—more specifically—what's happening with our immune system.

Common Skin Problems in Women

Some of the most common skin conditions women experience include:

- Hives (urticaria)
- Cold sores (caused by herpes simplex virus)
- Contact dermatitis
- Psoriasis
- Acne
- Eczema
- Rosacea
- Skin cancer

Contact dermatitis is an example of a short-lived reaction by the immune system to an allergen or irritant, while psoriasis is an example of a skin condition that indicates an underlying immune system problem.

When to See a Doctor:

Skin conditions can range from mildly irritating (mild acne) to life threatening (e.g. malignant melanoma) and should not be ignored. If you experience signs or symptoms of a skin problem, such as itching, redness, swelling, rash, flaky/scaly skin, bumps, growths, or oozing blisters, see your doctor right away.

Cosmetic Skin Treatments

We all want to age well. Yet, it's inevitable that over time the elastin and collagen fibers that keep our skin firm and taut will break down. Fat deposits also diminish, causing loose, saggy skin and pronounced lines and creases. The skin also produces fewer natural oils, which can dry out the skin and make it appear more wrinkled.

Protecting your skin from harmful UV rays and keeping it hydrated with a quality moisturizer are essential. What if you could do more?

Advancements in medicine and technology over the years have made it possible for women to safely achieve a more youthful appearance.

Injectable skin treatments are a popular treatment option today. They can help restore volume, improve facial contours, and reduce the appearance of deep lines and creases. Commercial injectable products include:

Botox® (injectable that works by blocking signals from the nerves to the muscles, which helps reduce the appearance of fine lines, wrinkles, and deep creases)

Juvederm® (hyaluronic acid-based dermal filler)

Restylane® (hyaluronic acid filler formulated to work like the body's own naturally-produced hyaluronic acid)

Radiesse® (volumizing filler for wrinkle reduction)

Belotero Balance® (hyaluronic acid-based dermal filler)

Ask your **dermatologist** about the pros and cons of injectable skin treatments and which product might be right for you.

Spotlight on Skin Cancer

There are more new skin cancer cases reported among women every year than cancers of the breast, prostate, lung, and colon combined.¹¹ In 2017, there were an estimated 35,000 new diagnosed cases of melanomas of the skin—the deadliest form of skin cancer—among women.¹¹

Sun exposure and exposure to ultraviolet (UV) radiation from indoor tanning salons are leading causes of new skin cancer cases. Other risk factors include:

- Having fair skin
- Older age (older women have had more exposure to the sun as well as other contributing factors)
- A history of skin cancer
- Having a weakened immune system
- Smoking (a risk factor for squamous cell skin cancer)
- Genetics (certain people are at a higher risk of developing skin cancer from sun exposure)

Protecting Your Skin

Performing regular head-to-toe self-examinations of your skin can help you identify any new or changing growths that could be cancerous or precancerous. If you detect any new spots or growths that look suspicious, don't wait—see a dermatologist right away.

More ways to protect your skin:



Don't smoke. Smoking damages collagen and elastin, contributing to wrinkles; it also narrows the blood vessels near the surface of the skin, making the skin look paler.



Protect your skin from the sun. Use a broad-spectrum sunscreen with an SPF of at least 30; reapply every two hours. If you have a vitamin D deficiency, expose only part of the body (such as the legs) to direct sunlight for 10 minutes a day.



Eat a healthy diet and stay hydrated. Aim for a diet rich in vegetables, fruits, whole grains, nuts, seeds, and healthy proteins.



Treat skin gently. Moisturize skin regularly, pat skin dry after washing or bathing, avoid soaps with heavy fragrances and detergents, and limit bath or shower time (using warm, not hot, water).

Precision Medicine/Clinical Trials

Precision Medicine

An exciting emerging field, precision medicine aims to find prevention strategies and treatments for patients based on their unique genetic, environmental, and lifestyle factors.

Precision medicine holds many promises, including:

- Improving quality of life and longevity
- Reducing the risk of complications and unwanted side effects from medications and treatments
- Reducing the rate of unnecessary tests and procedures
- Lowering healthcare costs

Although still in its infancy, precision medicine shows particular promise in the area of cancer treatment. Imagine this: With precision medicine, a woman with ovarian cancer could receive tests that detail how her cancer differs from someone else's. With this information her oncologist could determine which course of treatment is most likely to effectively shrink her tumor(s). Read more about targeted cancer treatment and what researchers are calling "genotype to phenotype" trials [here](#).

Medicine is not and should not be a one-size-fits-all approach. As precision medicine becomes more advanced, doctors may one day be able to do things like determine the ideal diet for you, map out the specific makeup of bacteria in your digestive tract, and track your blood sugar levels, blood pressure, and heart rate—in real time!

The Englander Institute for Precision Medicine (EIPM) at Weill Cornell Medicine is changing the face of diagnosis, treatment, and care for patients using a personalized approach and genomic sequencing data. Some of the most serious diseases can be traced in our genome (“genome” refers to a person’s complete set of genetic instructions, or DNA). EIPM aims to deliver more effective treatments for these diseases by identifying and characterizing genomic changes underlying genetic-based ailments. Learn more about EIPM [here](#).

Clinical Trials

Clinical trials are research studies in which participants receive one or more specific medical interventions, such as a drug, medical device, or procedure, based on the protocol established by the investigators who created the study.

The goal of clinical trials is to determine how effective and safe a particular drug, procedure, or treatment approach is and, ultimately, to find new treatments that will benefit patients.

Clinical trials are vital for advancing medicine, yet participation is generally low in the U.S. Just 3% of U.S. adults with cancer, for example, participate in clinical trials.¹²

Why? Many people aren’t comfortable with the uncertainty of not knowing the outcome of using a new drug, device, procedure, or treatment approach. Yet, clinical trials have spawned many breakthroughs over the years, including improvements in blood pressure management, and diabetes care, among others.¹³

Prospective participants should know that investigators who create clinical trials are required to follow strict protocols and are overseen by regulatory agencies, which may include the Food and Drug Administration (FDA), and/or Independent Review Boards (IRBs), groups made up of independent medical experts, ethicists, and community members.

Why It’s Important for Women to Participate in Clinical Trials

In past decades investigators haven’t always enrolled adequate numbers of women in clinical trials or properly analyzed data specific to female participants. Without accurate data, it’s impossible to know how treatments can benefit (or harm) women.

By participating in clinical trials, women can gain access to new research treatments before they are widely available, and their participation can help further women’s healthcare, generally.

Weill Cornell Medicine is a leading research institution that conducts clinical trials in many areas of medicine. Our physicians are dedicated to the pursuit of breakthrough research and to the safe and ethical management of clinical trials. Find open clinical trials at Weill Cornell Medicine/NewYork-Presbyterian [here](#).



Pain Management

Pain is the body's way of signaling a problem. Nerve receptors (called nociceptors) in our tissues detect damage and transmit that information along the spinal cord to the brain.

Not everyone responds to pain in the same way. How efficiently the nerve receptors communicate with the brain determines how a person will feel pain. Pain is broken down into two general categories:

Acute pain: Short-lived and often intense, acute pain happens after an injury or from localized tissue damage; it can usually be corrected by treating the underlying injury.

Chronic pain: Ranging from mild to severe, chronic pain lasts longer than acute pain; it can come on occasionally (as with headaches or migraines) and vary in intensity; it's important to address chronic pain, since it can weaken the "fight-or-flight" response of the sympathetic nervous system over time.

More than 25 million American adults suffer from daily (chronic) pain. In fact, it's the leading reason Americans use the healthcare system.¹⁴

Top causes of chronic pain¹⁵ are:

- Fibromyalgia
- Low back pain
- Headache
- Pelvic pain
- Arthritis
- Neuropathy (nerve damage)

Studies have shown that women have more pain than men and require more pain relievers to control pain.¹⁶ Women experience more abdominal pain, more frequent headaches, more pelvic pain, and more musculoskeletal pain than men.¹⁷

Sex hormones, biological differences (e.g. menstruation, pregnancy, and childbirth), and brain structure and chemistry are some of the reasons why.¹⁸

Chronic pain is a leading cause of disability, lost work days, reduced productivity, and reduced quality of life for women.¹⁹ This is why it's vital to get pain under control.

Women don't have to accept pain as a part of life. The department of Pain Management at Weill Cornell Medicine offers state-of-the-art treatments for women suffering with chronic pain. Working in collaboration with NewYork-Presbyterian Hospital, Weill Cornell physicians provide coordinated care and individualized treatment plans to improve quality of life for patients. Learn more [here](#).



Bone Health & Osteoporosis

Osteoporosis is extremely common in women. In fact, 80 percent of the estimated 10 million Americans with osteoporosis *are* women.²⁰ It's more common after menopause and in those who have a family history of the disease.

Hip fractures are especially common—one of every two women over age 50 will likely have an osteoporosis-related fracture in her lifetime.²¹ A woman's lifetime risk of fracturing a hip is equal to her risk of breast, uterine, and ovarian cancer *combined*.²⁰

There are several reasons women are at an increased risk of osteoporosis. Among them:

- Decreases in estrogen (a hormone that protects bone health) during menopause, which can lead to bone loss, increasing a woman's risk of developing osteoporosis.
- Women tend to have smaller, thinner bones than men, generally.

Young women can help prevent osteoporosis by doing weight-bearing exercises (walking, hiking, climbing stairs, weight training) and by eating a diet rich in calcium and vitamin D.

Older women who have been diagnosed with osteoporosis can't reverse the condition, but they can do things to maintain and improve their bone density and reduce their risk of fractures by staying active and getting enough calcium and vitamin D (through diet and/or supplements). Certain medications, such as bisphosphonates, hormone replacement therapy, and hormonelike medications, may also help.

Spine Health

A healthy spine is vital for overall health. Back problems are not only painful, they can limit your ability to move freely, work, and exercise. Over time this can lead to weight gain, which, in turn, can lead to other health problems, like high blood pressure and type 2 diabetes.

Housed inside the bones of the spine is the spinal cord, a bundle of nerve fibers that connects the body and brain. The spinal cord controls nearly all the body's tissues and organs. A woman's first line of defense against potentially-disabling [spine conditions](#), such as [herniated discs](#), [spinal stenosis](#), and [spondylolisthesis](#), is to actively care for her spine.

Certain spine conditions are more common in women, especially those associated with osteoarthritis, which also affects more women than men.²²

Spine conditions that are more common in women²³ include:

- Coccydynia (tailbone pain)
- Degenerative spondylolisthesis (slipped vertebra)
- Piriformis syndrome (buttock pain caused by spasms of the piriformis muscle)

Low Back Pain

Back pain—specifically, low back pain (LBP)—is one of the most common causes of persistent pain among American women (and men). In fact, it's the second most common cause of disability in the U.S., leading to many lost days at work each year and reduced quality of life.²⁴

More than two-thirds (69%) of respondents to a survey by the American Physical Therapy Association said that low back pain affects their ability to exercise, sleep, work, travel, spend time with their families, or be intimate with their partners.²⁵

Keeping Your Spine Healthy

There are things you can do to keep your spine healthy and prevent injuries, including:

- Strengthening your core muscles with [targeted exercises](#)
- [Lifting heavy objects correctly](#)
- Exercising good posture by using an ergonomic chair at work, setting reminders to check your posture throughout the day, and taking frequent breaks to walk and stretch
- Staying in shape with regular physical exercise
- Stretching your hamstrings regularly to reduce the risk of low back injury

The **Center for Comprehensive Spine Care at Weill Cornell Medicine** offers world-class spine care for women of all ages. We provide state-of-the-art, integrated care for patients with back pain and all types of spine-related conditions and injuries. Our team of specialists, nurses, therapists and staff provide a complete continuum of care, from diagnosis to treatment and recovery. Learn more about the [Center for Comprehensive Spine Care](#).



Gynecologic, Sexual, & Reproductive Health

From the time of her first period to the onset of menopause, a woman's body undergoes many changes.

Women must make important decisions throughout their reproductive and post-reproductive lives, including deciding which birth control method to use (if any), deciding whether to breastfeed or bottle feed, and weighing the pros and cons of taking hormone therapy during menopause, to name a few.

Choosing a Specialist

Women are often unsure about which type of doctor they should see—a gynecologist or an OB-GYN—or whether they need to see a specialist in addition to their primary care physician (PCP) at all. What's the difference between specialties?

- Gynecologists are doctors who specialize in reproductive and breast health.
- Obstetricians are specialists who care for women while they are pregnant, during delivery, and for a short period of time after childbirth.
- OB-GYNs are specialists who have expertise in all these things—reproductive health, pregnancy, and childbirth.

Ideally, women should see a gynecologist in addition to a primary care physician, since the former are trained to address complex gynecological issues and are usually able to offer a broader range of contraceptive options.

Depending on her age, a woman may have a pelvic exam and/or a Pap smear test during her visit to a gynecologist. These tests can help detect viral infections and other problems, such as uterine fibroids. Infection with human papillomavirus (HPV) is very common, and certain strains of the virus are known to cause cervical cancer.

Pelvic exams can also help doctors identify problems like a prolapsed pelvic organ, which can cause urine leakage (known as **urinary incontinence**), a very common problem in women—especially those who have had multiple children.

Other common gynecologic conditions include endometriosis, uterine fibroids, polycystic ovary syndrome (PCOS), gynecologic cancers (such as cervical and ovarian cancers), interstitial cystitis, sexually-transmitted infections (STIs), and others. Read more about them [here](#).

Which periodic screenings and exams a woman should have varies by her age and stage of life, as follows:

Women Ages 19-39

- Full pelvic exams and pap smears, beginning around age 21, or sooner for women who have had multiple sexual partners or are experiencing problems like abnormal bleeding or pelvic pain.
- Screening for cervical cancer every 2 years (Pap smear) from age 21 to 30.
- Screening for cervical cancer, age 30 and over, Pap smears and HPV testing every 3-5 years.
- Regular screenings for chlamydia and gonorrhea (sexually-active women).
- Periodic HIV testing.

Questions to Ask Your Doctor:

- What's normal when it comes to vaginal discharge?
- What are my birth control options?
- Is it safe to have unprotected sex during my period?
- What PMS symptoms are considered normal?
- Why are my periods so heavy?
- Why am I spotting between periods?
- Why do I experience pain with sex?
- Why do I feel a bulging sensation in my vagina?
- What should I use for feminine hygiene?
- What's causing my low libido?
- Why do I keep getting yeast infections?
- Why do I have pelvic pain?

If you're pregnant/thinking about becoming pregnant, be sure to ask your doctor the following:

- How often should I have checkups/ultrasounds?
- What vaccinations will I need, and when should I get them?
- Can I safely have sex during pregnancy?
- Can I exercise while I'm pregnant?
- How long into my pregnancy can I continue to work?
- Which over-the-counter (OTC) medications are safe to take during pregnancy?
- How much weight should I gain during pregnancy?
- How many calories do I need per day while I'm pregnant?
- Is cramping/bleeding during pregnancy normal?
- What can I expect during labor and delivery?
- What are the pros and cons of hospital birth versus home birth?
- What if I can't or don't want to breastfeed—what are my options?
- What are my options if I want to postpone having kids until my 40s?

It's important to tell your doctor about your number of sexual partners and any high-risk sexual activity (e.g. unprotected vaginal, anal, and oral sex). Don't hesitate to ask questions—even ones that might feel embarrassing. Remember that your provider is there to help, not to judge.

Spotlight on Cervical Cancer & HPV Infection

The American Cancer Society (ACS) estimates that more than 13,200 new cases of invasive cervical cancer will be diagnosed in 2018; approximately 4,170 women will die from cervical cancer in 2018, according to the ACS.²⁶

Human papillomavirus (HPV) infection increases a woman's risk of developing cervical cancer. This is because the virus produces certain proteins that turn off tumor suppressor genes, which can allow the cells lining the cervix to grow too much and develop gene mutations; this, in turn, can lead to cancer.

The good news: A vaccination for HPV is available for girls and women ages 9 to 26. The vaccine protects against the strains of human papillomavirus that cause cervical and other cancers. Ask your doctor about the HPV vaccine.

Weill Cornell Medicine employs some of the best oncologists in the country. Our esteemed physicians dedicate their lives to providing world-class cancer treatment, and many are involved in cutting-edge cancer research. Weill Cornell Medicine is committed to slashing cervical cancer rates among women.

Women Ages 40-64

- Screening for cervical cancer (Pap smear and HPV testing every 3-5 years, based on individual risk).
- Periodic HIV and STD testing.
- Mammography every 1-2 years beginning at 40 (for those with low risk); every year beginning at age 50.
- Perimenopausal and menopausal women should discuss any urogenital issues with their doctor—these can include vaginal dryness, vulvovaginal atrophy (when the vulva and the tissue lining the vagina become thinner, drier, and less elastic/flexible), low libido, urine leakage, hot flashes, night sweats, sleeplessness, and others.

Spotlight on Ovarian Cancer

Ovarian cancer is cancer that begins in the ovaries, the organs that produce a woman's eggs. Ovarian cancer is the fifth leading cause of cancer death among women in the U.S.; more than 22,000 new cases are expected in 2018, and more than 14,000 women will die of the disease in 2018.²⁷

Ovarian cancer can develop at any age, but it's most common in women between the ages of 50 and 60. It usually has no signs or symptoms until it has spread beyond the ovaries—this is why it's so important to talk with your doctor if you have a family history of the disease.

Risk factors for ovarian cancer include inherited gene mutations, older age, family history of ovarian cancer, and long-term use of large doses of hormone replacement therapy.



Using oral contraceptives may help reduce the risk of developing ovarian cancer. Talk with your doctor about whether oral contraceptives might be beneficial for you.

Questions to Ask Your Doctor:

- Why are my periods so irregular?
- When will I start menopause, and what should I expect?
- How can I improve arousal?
- How can I boost my libido?
- What can I do about vaginal dryness?
- Why do I have pain with sex?
- What can I do about my hot flashes/night sweats?
- What are the benefits and risks of hormone replacement therapy?
- Why do I keep getting UTIs?
- Why do I feel a bulging sensation in my vagina?
- Why do I leak urine when I laugh, cough, or sneeze?

A woman's body goes through many changes during middle age as she transitions into menopause. It might feel embarrassing to ask certain questions, but remember that your OB-GYN is there to help, not to judge. No question is silly or trivial—ask about anything and everything you're concerned about or that you'd like more information on.

Women Ages 65+

- Possible continued screening for cervical cancer every 3-5 years until age 70, unless the person has had 3 negative tests within the past 10 years; women with several negative prior screenings may no longer need screenings after age 70.
- Mammogram every 1-2 years until age 75, depending on breast cancer risk.
- Post-menopausal women should discuss any urogenital issues with their doctor—these can include hot flashes, night sweats, vulvovaginal atrophy (when the vulva and the tissue lining the vagina become thinner, drier, and less elastic/flexible), urine leakage or urgency, recurrent urinary tract infections (UTIs), and others.

Questions to Ask Your Doctor:

- What can I do about urinary leakage?
- How can I make sex more comfortable?
- Which screenings do I need?
- Do I still need to have Pap smear tests?
- Should I still do self-breast exams?
- Why do I keep getting UTIs?
- Do I still need to see a gynecologist, or can I see my primary care doctor exclusively?

When to See a Doctor:

It's important to see a gynecologist or OB-GYN for regular checkups and as any problems arise. If something doesn't feel right, whether it's pelvic pain or discomfort, unusually heavy periods or vaginal discharge, reduced libido, or vaginal dryness that makes sex uncomfortable, don't wait—see your doctor right away.

And, if you're pregnant or thinking about becoming pregnant, seeing an obstetrician early and regularly is essential for your baby's health and yours.

Pelvic Floor Disorders in Women

The stress and strain of pregnancy, childbirth, and hormonal changes during menopause can weaken the pelvic floor—the hammock-like system of muscles that holds the uterus, bladder, bowel, and vagina firmly in place.

Weak pelvic floor muscles can lead to stress urinary incontinence (bladder leakage), a common pelvic floor disorder (PFD) that tends to affect more women than men.

In one large-scale survey, 35% of female respondents reported urinary incontinence, compared with just 4% of male respondents.²⁸

What you can do: Urogynecology doctors recommend strengthening the pelvic floor muscles with **Kegel exercises** as a woman's first line of defense against stress urinary incontinence and other PFDs. It's never too soon to start, whatever your age or stage of life.



Brain & Mental Health

Brain Health

We all want to stay sharp and focused as we age, yet our brains change over time. Problem-solving, memory and recall, spatial reasoning, and information processing can slow or diminish over the years. This is a normal part of aging, but it doesn't have to slow you down.

Your genes are not your destiny. Even women who have a family history of Alzheimer's or other forms of dementia are not destined to develop it themselves. The choices we make every day matter.

Here are 5 ways to protect brain health over the decades:

- 1** ***Eat a healthy diet.*** A **Mediterranean-style diet** high in vegetables, fruits, legumes, and whole grains, with moderate amounts of fish and dairy and minimal meat, sugar, and saturated fat, may help reduce the risk of dementia.
- 2** ***Get plenty of exercise.*** Moving your body is not only essential for physical health (exercise can help lower blood pressure, improve blood sugar balance, and improve cholesterol levels), it's also known to improve mental function and feelings of wellbeing. Plus, exercise triggers the development of new nerve cells and synapses in the brain, leading to greater efficiency and brain "plasticity."
- 3** ***Watch your alcohol consumption.*** Heavy drinking is a major risk factor for dementia, because alcohol produces a byproduct that is toxic to brain cells.²⁹ Women should limit alcohol consumption to no more than one drink per day.
- 4** ***Build or maintain social networks.*** Strong social bonds can help stave off loneliness and depression and may reduce a woman's risk of dementia.³⁰
- 5** ***Stimulate your mind.*** Mentally-stimulating activities like playing games, solving puzzles, or taking courses can help stimulate connections between neurons (nerve cells) and may even help generate new brain cells.

Mental Health

Women are more prone to depression, anxiety, and sleep problems than men. In fact, women experience depression at twice the rate as men.³¹ But why?

There are several possible explanations, biological, psychological, and sociocultural in nature.

- Women are more prone to fluctuating hormones, especially around pregnancy, childbirth, and menopause (biological).
- Women tend to think more about life events and relationships than men, which can predispose some to developing depression (psychological).
- Women often bear more of the day-to-day responsibilities of raising children as well as the responsibilities of housework and caring for aging parents, often while working full time (sociocultural).

It's important to get depression, stress, and anxiety under control, since they can lead to a host of other problems, from headaches/migraines to weight gain to sleep problems.

If you're experiencing troubling symptoms, such as ongoing feelings of hopelessness, sadness, or guilt, sleep disturbances (such as trouble falling or staying asleep), loss of interest, problems concentrating, physical aches, and pains, suicidal thoughts, muscle tension, irritability, restlessness, or others, see your doctor right away.

National Suicide Prevention Lifeline

Call: 1-800-273-8255

Visit: [suicidepreventionlifeline.org](https://www.suicidepreventionlifeline.org)



Cancer Prevention

Cancer takes the lives of more than 250,000 women in the U.S. each year.³² According to the Centers for Disease Control (CDC), the most common cancer types affecting women are:

- Breast cancer
- Skin cancer
- Lung cancer
- Colorectal cancer (cancer of the rectum or colon)
- Uterine cancer

Although many cancers have a genetic component, it's important to know that *your genes are not your destiny*. Even if you have a family history of certain types of cancer, there are actions you can take every day to reduce your risk. These include:

- Eating a high-fiber diet rich in vegetables, fruits, whole grains, and healthy proteins
- Staying physically active
- Limiting alcohol consumption (the [Centers for Disease Control](#) recommend no more than 1 drink per day for women and no more than 2 drinks per day for men)
- Not smoking, and avoiding secondhand smoke
- Protecting your skin from the sun; this includes avoiding indoor and outdoor tanning
- Seeing your doctor regularly
- Getting recommended screening tests for cervical, breast, and colorectal cancers

There is growing evidence that certain alternative therapies, including acupuncture, certain herbal products, and mind-body therapies such as massage, yoga, and behavior-therapy can help reduce symptoms related to cancer and cancer treatments, including pain, nausea and vomiting, insomnia, and others.³³

If you have received a cancer diagnosis, ask your doctor about the possibility of incorporating alternative therapies into your treatment.

Cervical Cancer Statistics in the U.S.

Each year the American Cancer Society (ACS) estimates how many new cases of cancer are expected to occur, as well as the number of expected deaths from different cancers in the U.S. In 2018 the ACS estimates there will be:

- 13,240 new cases of invasive cervical cancer³⁴
- 4,170 deaths from cervical cancer³⁴

Regular screenings and vaccination against HPV (available for girls/women ages 9-26) can help prevent cervical cancer.



Maintaining Healthy Hearts & Managing Stress

Getting enough cardiovascular exercise and managing stress are two of the most important things women can do for their health.

Your cardiovascular system includes your heart and blood vessels (arteries, veins, capillaries), which move oxygen-rich blood to every part of your body, every moment of every day.

Heart disease was once thought of as a “man’s” disease, yet women are just as likely as men to develop heart problems. In fact, heart disease is the leading cause of death among women in the U.S., accounting for nearly 1 of every 4 female deaths.³⁵

Risk factors for heart disease include:

- Overweight or obesity
- Diabetes
- Poor diet
- Lack of physical activity
- Excessive alcohol use
- Family history of heart disease

Heart Disease: A Silent Killer

Heart disease is sometimes called a silent killer, because many women experience no symptoms until they have a heart attack. Women who do have symptoms may notice chest pain (angina), heart palpitations (arrhythmia), shortness of breath, and extreme fatigue. Women are more likely than men to have pain in the neck, jaw, throat, back, or abdomen.

If you experience any of the symptoms of a heart problem, such as chest pain or tightness, or heart palpitations, don’t wait—see a **cardiologist** right away.

The HeartHealth Program at Weill Cornell Medicine/NewYork-Presbyterian Hospital

HeartHealth, a program of the Dalio Institute of Cardiovascular Imaging at the NewYork-Presbyterian Hospital, is a state-of-the-art clinical program that evaluates women at risk of cardiovascular disease.

Utilizing advanced tools to assess patients' overall physical and emotional wellbeing, including cardiac imaging, biomarkers, lipid profiling, and psychosocial inventories, our multi-disciplinary team is able to determine the presence or extent of cardiovascular disease with precision.

Our mission is to prevent cardiovascular disease and promote overall health and wellbeing in every patient we treat. Learn more about the HeartHealth program [here](#).

Managing Stress

Both men and women experience stress, but research has found that women often react to it differently than men. Rather than responding to stressful situations with a “fight-or-flight” response, women are more likely to negotiate, or as some psychologists call it, “tend and befriend.”³⁶

Researchers believe this may be an adaptive response that has helped women protect their children throughout the ages. They also suggest that a chemical called oxytocin (sometimes called the “cuddle hormone”) can help relieve stress in women after an upset.³⁶ This may help explain why women often report that physical contact—especially hugging—has a calming effect after a fight.

Even low levels of chronic stress can seriously impact physical and emotional health. Chronic stress can bring on or trigger digestive problems, skin reactions (such as hives), sleep issues, reduced immune response, difficulty concentrating, and other problems.

Mindful meditation, yoga, deep breathing, and other techniques can help you get stress under control. So can creating a more manageable schedule. Talk with your healthcare provider for more ways to manage stress.



In-Vitro Fertilization (IVF)

Since the first baby conceived via in-vitro fertilization was born in 1983,³⁷ thousands of couples in the U.S. and around the world have benefited from this remarkable technology. Today, couples (and single women and men) who thought having a baby was out of reach have many options, thanks to assisted reproductive technology (ART).

There are many reasons women and their partners seek IVF. Some are unable to conceive or carry a pregnancy to term. Some have a family history of genetic diseases (such as chromosome abnormalities; these women may choose to have a fertilized donor egg implanted). Others have sustained damage to their ovaries from previous cancer treatments. Some women want to delay having children and wish to have their eggs frozen for later use.

How Common Is Infertility?

In a word: common. Around 6% of married women are unable to get pregnant after 12 months of trying. And, around 12% of women ages 15-44 (regardless of marital status) have difficulty getting pregnant or carrying a pregnancy to term.³⁸

How Long Should Women Try to Get Pregnant Before Seeing a Doctor?

Women ages 35 and under who have been trying to conceive for more than a year, or who are 35 or older and have been trying to conceive for more than 6 months should consider seeing a doctor about infertility.

It's important to know that fertility problems are not exclusively the domain of women. Men can also have problems with sperm production or complete infertility due to testicular/ejaculatory disorders, hormonal disorders, and genetic disorders.

Couples having difficulty getting pregnant should see a doctor together to determine the source of the problem.

Latest IVF Techniques

Assisted reproductive technology, including IVF, has come a long way in the past decade. Today, advanced techniques have greatly improved the chances of establishing successful pregnancies (and healthy babies). These include:

- **Intracytoplasmic Sperm Injection (ICSI):** A technique in which a single sperm is injected directly into a woman's egg for fertilization. The resulting embryo can then be implanted onto the patient's uterus or cryopreserved (frozen for later use).
- **Preimplantation Genetic Diagnosis (PGD) and Preimplantation Genetic Screening (PGS):** Genetic testing to identify specific eggs and/or embryos affected with certain genetic disorders. These tests can be used with IVF.
- **Microscopic Testicular Sperm Extraction (micro-TESE):** Performed in conjunction with IVF, micro-TESE is a revolutionary treatment for male infertility caused by the absence of sperm (azoospermia) in the semen due to anatomical obstructions (such as blockages in the ducts that carry semen) or very low/no sperm production.

These are just some of the advanced IVF techniques available today. Learn more [here](#).

The Ronald O. Perelman and Claudia Cohen Center for Reproductive Medicine at Weill Cornell Medicine is a leader in assisted reproductive technology, including IVF. Please visit our [website](#) to learn more.



Integrative Health

Integrative health combines *conventional medicine* (also called mainstream or Western medicine) with *alternative therapies*, such as acupuncture, massage therapy, and meditation. Integrative medicine takes a “whole-person” approach, considering not just a person’s physical state, but also their emotional, social, and environmental wellbeing.

When used in conjunction with conventional medicine, alternative therapies are often referred to as *complementary*. These therapies include (but are not limited to):

- Acupressure
- Acupuncture
- Herbal medicines (e.g. St. John’s wort, ginger, turmeric, saw palmetto)
- Massage therapy
- Meditation, mindfulness, guided imagery, healing touch
- Nutritional counseling
- Yoga, Pilates, Tai Chi, Qi Gong

Evidence shows that certain complementary therapies are particularly effective. For example, studies have shown that meditation can actually change the physical makeup of the brain and effectively reduce high blood pressure. It can also reduce the symptoms of anxiety and depression, and (possibly) reduce pain, among other benefits.³⁹

Complementary Therapies for Cancer Patients

There is also evidence that certain complementary therapies can help reduce cancer pain and other symptoms related to cancer or cancer treatment. For example, evidence from clinical trials indicates that acupuncture may help relieve nausea and vomiting from chemotherapy. Other trials have studied the use of acupuncture to relieve other cancer symptoms, including fatigue and hot flashes.⁴⁰

Cannabinoids in the cannabis plant may help control nausea and vomiting in cancer patients, as well as increasing appetite, relieving pain, and improving sleep.⁴¹

Mind-body therapies, including massage, yoga, and cognitive-behavioral therapy (CBT) are additional alternative therapies that may benefit cancer patients, as demonstrated in clinical studies.^{42,43,44}

Many American adults (around 30%) already use one or more complementary therapies, according to the National Institutes of Health (NIH). The [2012 National Health Interview Survey](#) by the NIH found that 17.7% of respondents reported using natural products as a complementary health approach.⁴⁵

The top 10 most common complementary health approaches Americans used in 2012 were:

- Natural Products: 17.7%
- Deep Breathing: 10.9%
- Yoga, Tai Chi, or Qi Gong: 10.1%
- Chiropractic or Osteopathic Manipulation: 8.4%
- Meditation: 8.0%
- Massage: 6.9%
- Special Diets: 3.0%
- Homeopathy: 2.2%
- Progressive Relaxation: 2.1%
- Guided Imagery: 1.7%

Benefits of Integrative Health

Complementary therapies are designed to enhance conventional medicine. Therapies like acupuncture, Pilates, yoga, and mindful meditation can help:

- Reduce stress, anxiety, and depression
- Promote relaxation
- Relieve symptoms caused by certain conditions or their treatments (for example: cancer, heart disease, digestive disorders, diabetes, and chronic pain)
- Help prevent disease

More people are embracing integrative medicine today, and so is the medical community, especially as new scientific data emerges showing its usefulness. Read [“Is Integrative Health the Future of Medicine?”](#) to learn more.

The Integrative Health and Wellbeing Program at Weill Cornell Medicine aims to promote physical, psychological, and social wellbeing through complementary therapies. Learn more about our [Integrative Health and Wellbeing Program](#). Always consult your physician before starting any new alternative treatments.

**HEALTHY
WOMEN,
HEALTHY
COMMUNITIES**



Healthy women are the cornerstone of healthy communities. Women play an integral role in every area of society—in the home, in the workplace, in government, and in public life. As mothers, women play a vital role in fostering good physical and mental health in their children, from pregnancy onward.

It's critical that women have access to quality healthcare at every age and stage of life. Weill Cornell Medicine is proud to offer world-class care to girls and women of every age. Our robust, interdisciplinary team of skilled physicians, scientists, and administrators strive to provide the best patient care and to discover innovative cures and treatments.

[Learn more](#) about our physicians, our [clinical services](#), and how our collaborative, patient-centered approach inspires us each day to improve the lives of those we treat.

Preparing for Your Next Doctor's Visit

Finding a good doctor is essential. So is preparing and asking plenty of questions during your visit. Being an active member of your health care team can help ensure you get the best possible care.

Let the person at the front desk or the nurse know you have questions for the doctor. During your visit, start by asking the questions that are most important to you.

Bring a notepad and pen with you and take notes as your doctor answers your questions. Or, bring a trusted friend or loved one with you who can help remember what you heard. Don't hesitate to ask the doctor for clarification if you are confused about something.

The questions you ask will vary based on whether your doctor gives a diagnosis, recommends a treatment or medical test, or prescribes a medication. Here are some questions to consider asking:

- How is my general health (weight, blood pressure, cholesterol levels, vitamin levels, etc.)?
- What is causing my symptoms (i.e. what is my diagnosis)?
- Why do I need this test? What will results reveal?
- What are my treatment options? What are the advantages and disadvantages of each treatment option?
- What does the medicine you are prescribing do? Are there side effects? Are there alternatives?
- Do I need surgery? What are the risks and possible complications?
- I Googled my symptoms, and here's what I found. What do you think?
- What medical resources can I trust on the internet?
- How can I change my lifestyle to improve my health?
- When should I see you again? What should I do before my next visit?

Ask your doctor for written instructions and materials, such as brochures, as well as videos or websites that can help you learn more about your condition. Playing an active role in your own health is empowering and can help you make the most of each doctor visit.

We hope you've found this eBook helpful, and we welcome your [comments and questions](#). From the entire team at Weill Cornell Medicine: We wish you good health, now and always.



Weill Cornell Medicine

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ABOUT WEILL CORNELL MEDICINE

Weill Cornell Medicine is the biomedical research unit and medical school of the prestigious Cornell University.

Located on the Upper East Side of Manhattan in New York City, Weill Cornell Medicine is one of the most selective medical schools in the United States. We offer a broad range of patient services, from allergy and immunology to gastroenterology to urology and vascular surgery. Browse our [clinical services](#) page to learn more.

Our physicians are clinical leaders in their field who embody our patient-centered mission across all aspects of clinical care, research, and medical education at our institution. As full-time faculty members of Weill Cornell Medical College, our physicians and are integrated into our hospital partnership with NewYork-Presbyterian, ensuring seamless continuity of health care services for patients.

Weill Cornell Medicine physicians deliver coordinated medical care across our multispecialty clinical practices through close departmental collaboration and the utilization of electronic health records in all of our physician offices.

Our Affiliations

Weill Cornell Medicine's network of expert physicians works with partner institutions across all medical specialties. This includes NewYork-Presbyterian, the #1 hospital in New York for 17 years running, and the Hospital for Special Surgery, which has the top-ranked orthopedics program in the country.

Our partner institutions encompass physicians who are all faculty members of Weill Cornell Medicine's Medical College. They are also attending physicians at NewYork-Presbyterian. Weill Cornell Medicine also maintains major affiliations with Memorial Sloan-Kettering Cancer Center and Rockefeller University.

This vast network of affiliations with the best patient care and medical education institutions in New York City and nationwide is one of our greatest strengths. It means that patients of Weill Cornell Medicine physicians get the benefit of a varied base of medical expertise and an enormous range of world-class facilities.

Learn more at www.weillcornell.org. New patients: Call 1-855-926-9268 to schedule an appointment with one of our world-class physicians.



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