

# The WIHS Woman



## The Connie Wofsy Women's HIV Study

### National Women's History Month

By Yvonne DeSouza

This year's theme for Women's History Month is "Women Inspiring Hope and Possibility". We are celebrating the hope and sense of possibility that comes to our lives from the inspirational work of women. Hope comes in many forms from laws challenged and changed, new medical research, stories of compassion and courage, and watching women stand tall against great odds.

The National Women's History Project has selected eight women as women inspiring hope and possibility. This newsletter article will describe the work of four of these inspirational women.



**Marian Wright Edelman**, Children Rights Advocate and Civil Rights Activist

Learning from the example of her parents, Marian Wright Edelman has never stopped her battle for equality, freedom, and civil rights. Growing up in the segregated town of Bennettsville, South Carolina, Edelman saw the terrible effects of racial segregation.



Black children couldn't play in the park or sit in the drug store to order a soda. She also saw the power of positive action as her father created parks and soft drink stands for black children and a Home for the Aged for African Americans.

After graduating from college, she heard inspiring lectures by civil rights leaders and realized that law school would better allow her to create the change her country desperately needed. She graduated from Yale Law School in 1963 and moved to Mississippi, becoming the first African-American woman admitted to

*(Continued on page 2)*

### TABLE OF CONTENTS

National Women's History Month .....	page 1
Fasting Blood Tests Are Important for Your Health .....	page 4
The Importance of the Digital Rectal Examination (DRE) .....	Page 5
CAB Corner.....	page 5
Here's to Your Health .....	page 6
Part 2—Health Consequences of Tobacco Use Among Women .....	page 6
The Consequences of Tobacco Use and the Health of Your Teeth .....	page 7
What is Gingivitis? .....	page 7
Quit Smoking Resources .....	page 9

(Continued from page 1)

the state bar. It was in Mississippi that she saw illiteracy, poverty, hunger, lack of health care, and lack of hope. Edelman assisted in restoring national funding for the Head Start program, expanded food stamp eligibility, and served as council to the Child Development Group.

She married civil rights lawyer, Peter Edelman in 1968, and moved to Washington where she served as council to the Poor People’s Campaign and created the Washington Research Project, a public interest advocacy group.

In 1973, Marian Wright Edelman established the Children’s Defense Fund, the most powerful voice ever created for the millions of poor children in the United States. Marian Wright Edelman shines as a beacon of light illuminating what is possible for an individual to accomplish while safeguarding all American children.



**Maxine Hong Kingston**, Writer, Educator, Peace Activist



On October 1991 she was returning from her father’s memorial service and heard that a firestorm had swept through the hills of Oakland. She quickly learned that the firestorm had completely destroyed her home and with it the notes, manuscript, and all

back up copies and material for her nearly completed book.

Rather than give in to this loss and tragedy, Kingston turned the experience into the building blocks for her next book. As she formed the ideas for this new effort, she began to teach writing to Vietnam War veterans. Her goal was to help them give voice to their ex-

periences and to use their writing to work toward personal harmony as well as world peace. As she hoped, the writing became a process of healing, renewal and hope both for Kingston and for the veterans who had experienced so much devastation. She called on this experience in creating her recently released novel, *The Fifth Book of Peace*.

This was not the first time Kingston turned hardship into new hope both for herself and for her readers. Born in 1940 in Stockton, California, to Chinese immigrant parents, she grew up working long hours in the family-owned laundry. Her world was full of conflicting cultural messages mixed with the stories of other immigrants and immigrant children.

Maxine Hong Kingston blends her melodic and poetic storytelling ability with her rich Chinese ancestry and her own cultural struggles. The result is partly autobiographical, partly fiction, but her writings are masterpieces of literature that have helped recent generations discover the fullness of their own spirit.



**Vilma Martinez**, Civil Rights Attorney, Community Activist

Latina civil rights activist Vilma Martinez first felt racial prejudice at an early age. She achieved a stellar academic record in junior high school, yet her junior high guidance counselor forwarded her records to a vocational high school because he thought Vilma would “feel more comfortable” there.



Vilma Martinez has been battling stereotypes

(Continued on page 3)

*(Continued from page 2)*

and racial prejudice ever since. The fact that she is a Mexican-American woman was used to dismiss and dissuade her when she applied for college, and then for law school, and even for her first job after graduating from Columbia Law School. Determined to persevere in her personal vision, Martinez won every battle.

In 1973 Vilma Martinez lobbied to get the top post of the fledgling Mexican American Legal Defense and Education Fund (MALDEF) even though her friends and colleagues tried to discourage her. They told her that at 29 she was too young and that being female would be another liability. They said the job would be too demanding and that the Nixon Supreme Court was loaded with conservative judges unsympathetic to MALDEF's efforts. Under her leadership, MALDEF was able to promote the expansion of the Voting Rights Act to include protection for Mexican Americans, to end educational segregation for Latino students, and to support delaying the imposition of sanctions against employers who hired illegal immigrants. To help the Latino community gain more political influence, she started a nationwide program to encourage reluctant Latinos to participate in the census. She formed youth leadership programs and hired a public relations firm to ensure that news of the Hispanic community would be included in the newspapers that public policy makers read.

Vilma Martinez's steadfast determination to oppose discrimination and injustice presents an inspiring role model to all. Her work in education, community development, and employment litigation demonstrates that hope can create unimagined possibilities.



### **Sarah Buel, Domestic Violence Activist and Attorney, Educator**

Sarah Buel married her high school sweetheart and had a beautiful baby boy. She dreamed like all young married women that their lives would be full of hope and joy. She did not dream that her husband would become abusive and violent in their relationship. Sarah escaped the abusive relationship to find herself alone, as a welfare mom, struggling through the frustration, humiliation, and difficulty of searching for a productive life free of threats and violence.



Sarah Buel became an impassioned advocate for the legal rights of battered women and abused children. For seven years she worked full time during the day and took college classes at night to earn her bachelor's degree. Three years after that, she graduated cum laude from Harvard Law School where she founded the Harvard Women's Advocacy Project, the Harvard Women's Prison Project, and the Harvard Children and Family Rights Project.

She is also co-founder and co-director of the National Training Center on Domestic and Sexual Violence. Sarah's work and the work of hundreds of other victims and advocates helped create in 1994 the Violence Against Women Act. This Act and the 1996 additions to the Act recognize that domestic violence is a crime. She was profiled 1996 on NBC and asked about what she was most proud of and she said, her baby boy. For he, too, has taken what he has learned from the experiences of his life and counsels violent youths in Boston schools.

*(Continued on page 4)*

## FASTING BLOOD TESTS ARE IMPORTANT FOR YOUR HEALTH

By Dr. Phyllis Tien

For past few years, we have asked that do not eat for at least 8 hours (fast) before having your blood drawn for your semi-annual WIHS visits. Right now about half of the WIHS women are fasting when they come in for these visit. However, it is very important that all of you come in fasting for your main WIHS visit. Our goal is to get a fasting blood sample from every WIHS woman at least once a year.

Why is a fasting blood sample so important? Blood that is drawn after fasting for 8 hours is specifically used to check: (1) your blood sugar, which can tell you whether or not you have pre-diabetes or diabetes and (2) your blood cholesterol or fat. National guidelines for diagnosing and managing diabetes and high cholesterol are based upon results from blood that is drawn while fasting. Diabetes and high cholesterol are important risk factors for heart disease.

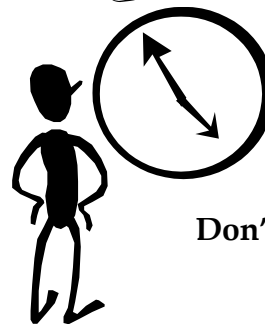
What exactly does fasting mean? When we say fasting, we mean not eating any food, including chewing gum, and not drinking any liquid except water for at least 8 hours. Chewing gum has sugar and the sugar may affect your blood sugar tests. Drinking water during the 8-hour fasting period is all right and in some cases, taking your medications with water is okay. If you are taking insulin or you take medications that need to be taken with food, please consult your provider.

When is the best time to come in for a fasting blood test? The easiest time to come in for a fasting blood test is after an overnight fast; since we generally don't eat anything after dinner and all you would need to do is skip

breakfast until the blood draw.

Not eating any food for at least 8 hours is not easy, but we hope that you can come in for your semi-annual WIHS visit after an 8-hour fast. We can provide food and snacks right after we draw your blood so that you can eat as soon as possible.

### ① Eat the Day Before



### ② Don't Eat for 8 Hours

### ③

Drinking Water During the 8-Hour Fasting Period is All Right!



### ④ Come in for Your Blood Test



### ⑤ Food & Snacks Provided after the Blood Test



## The Importance of the Digital Rectal Examination (DRE)

By Dr. Joel Palefsky

So it's time for your WIHS clinical exam, and you have been cheerfully agreeing to all of the requests of your clinician. You have answered all kinds of questions, stuck your arm out to give blood, been poked and prodded all over the place and now she has told you that it is time to be poked **THERE**. You're pretty fed up by now, politely or perhaps not so politely decline. You probably remember the last time this was done- it hurt and it was embarrassing. So you're probably wondering, since you've been so generous with just about everything else up to this point, why are they making me do this?

Here is the answer that you have been so desperately seeking: it's a **REALLY** important part of the physical examination. Using her finger your clinician can detect all sorts of problems at an early stage that could become much bigger problems later if nothing is done about it soon. Tumors can be detected at a very early stage, including cancers of the anus and rectum. Gynecologists have long included a finger up the butt as part of a "bimanual" examination that allows them to detect early cancers of the ovaries and other tumors. Early detection of any of these cancers can be lifesaving, and right now we don't know how often women with HIV infection get these cancers.

That's important enough, right? But it's not only about cancer. With that magical finger your clinician can find all sorts of other nasties. She can feel for the presence of several kinds of infection, including warts due to human papillomavirus (HPV). Syphilis and other infections can be hiding up there too,

even if you haven't had anal sex. Your clinician can also feel for hemorrhoids, fissures (painful breaks in the skin) and fistulas (tunnels under the skin).

So, the next time your clinician says, "It's time for the rectal", consider her request and tell her "Alright, this isn't my favorite part of the examination but I'm going to say YES because it's really a good thing- no ifs, ands or butts!

## CAB CORNER



### CAB NEWS

By Ann Groskin, CAB liaison

At the February CAB meeting, NCAB representative Sheila Bryant brought a documentary that she and several other WIHS women made in 2003. The film, titled "Reflections Unseen," is a powerful story of how HIV has affected the lives of a group of African American women. It is an amazing story of strong and beautiful women that embrace life and push on to educate their families and community about HIV and AIDS. If you missed this showing and are interested in learning more about the film, please contact the East Bay Perinatal Council at 510-779-3183. Thank you Sheila and all of the women in the film for letting us hear your story!

And coming up NCAB representative Sheila Bryant travels to Los Angeles in April for the WIHS NCAB annual conference. This year, the NCAB will be attending the HIV and Women's Health Symposium. The conference will focus on medical, psychological, and social issues that uniquely affect women living with HIV. Stay tuned for news from the meeting in the next WIHS newsletter!

## Here's to your Health

This is the second installment of a four part series on smoking and its related health issues among women. In Part 1, we discussed the facts about smoking that was excerpted from "Women and Smoking, A Report of the Surgeon General - 2001". In the last issue you read about the facts and health statistics surrounding the use of tobacco. In this issue (Part 2) we will examine the consequences and results of smoking as it relates to your health.

### Part 2 - Health Consequences of Tobacco Use Among Women

Excerpted from: *Women and Smoking, A Report of the Surgeon General - 2001*

It is well known that cigarette smoking is the leading cause of preventable death and disease among women. Lung cancer is now the leading cause of cancer death among U.S. women; it surpassed breast cancer in 1987. The risk for **lung cancer** increases with quantity, duration, and intensity of smoking. The risk for dying of lung cancer is 20 times higher among women who smoke two or more packs of cigarettes per day than among women who do not smoke.

Smoking is a major cause of **cancers** of the **oropharynx** and **bladder** among women. Evidence is also strong that women who smoke have increased risks of liver, colorectal, and cervical cancer, and cancers of the pancreas and kidney.

Smoking is the major cause of **coronary heart disease** among women. Risk increases with the number of cigarettes smoked and the duration of smoking. Risk is substantially reduced within 1 to 2 years of smoking cessation. This immediate benefit is followed by a more gradual reduction in risk to that among

nonsmokers by 10 to 15 or more years after cessation.

Women who smoke have an increased risk for **stroke** and brain hemorrhage. The increased risk for stroke associated with smoking is reversible after smoking cessation; after 5 to 15 years of abstinence, the risk approaches that of women who have never smoked.

Cigarette smoking is a primary cause of **chronic obstructive pulmonary disease** (COPD) among women, and the risk increases with the amount and duration of smoking. Approximately 90 percent of deaths from COPD among women in the United States can be attributed to cigarette smoking.

Adolescent girls who smoke have reduced rates of lung growth, and adult women who smoke experience a premature **decline of lung function**.

Women who smoke have increased risk for infertility and may have a modest increase in risks for **ectopic pregnancy** and spontaneous abortion. They are younger at natural menopause than non-smokers and may experience more menopausal symptoms.

Women who quit smoking before or during pregnancy reduce the risk of adverse reproductive outcomes, including infertility, preterm premature rupture of membranes, preterm delivery, and **low birth weight babies**.

*Fact: Exposure to environmental tobacco smoke is a cause of lung cancer among women who have never smoked and is associated with increased coronary heart disease risk.*

The association of smoking and **depression** is

*(Continued on page 7)*

(Continued from page 6)

particularly important among women, because they are more likely to be diagnosed with depression than are men.

## The Consequences of Tobacco Use and the Health of Your Teeth

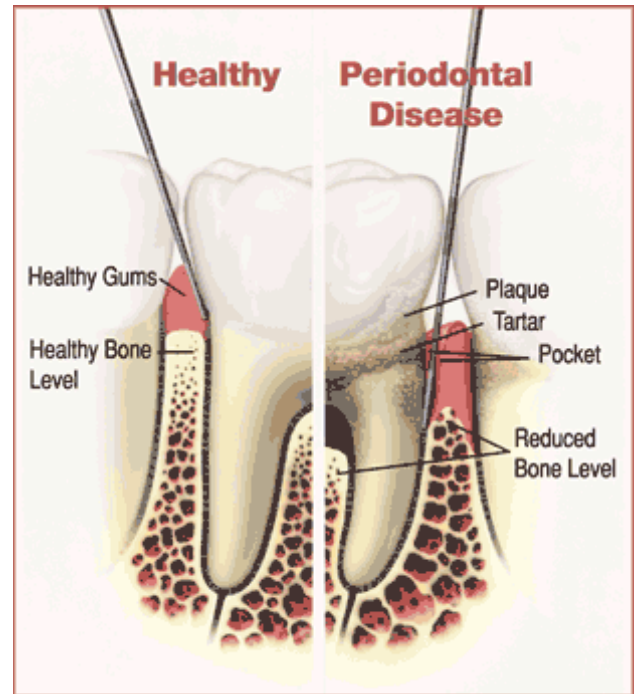
The American Academy of Periodontology concluded from a research study that chronic smoking led to an increased risk of periodontal disease and loss of periodontal bone height, as compared to non-smokers. The periodontal health condition in former smokers, similar to that of non-smokers, remained stable, suggesting that smoking cessation is beneficial to periodontal health.

**What Exactly is Periodontal Disease?** The word *periodontal* literally means "around the tooth." Periodontal diseases are serious bacterial infections that destroy the attachment fibers and supporting bone that hold your teeth in your mouth. When left untreated, these diseases will lead to tooth loss.

**Periodontal** (gum) diseases, including **gingivitis** and periodontitis, should not be taken lightly, again, if left untreated serious damage to gum and bone will ensue.

Periodontal disease can affect one tooth or many teeth. It begins when the bacteria in plaque (the sticky, colorless film that constantly forms on your teeth) causes the gums to become inflamed.

Untreated **gingivitis** can advance to periodontitis. With time, plaque can spread and grow below the gum line. Toxins produced by the bacteria in plaque irritate the gums. The toxins stimulate a chronic inflammatory response in which the body in essence turns on itself, and the tissues and bone that support the teeth are broken down and destroyed. Gums



Taken from American Academy of Periodontology Web Site [www.perio.org](http://www.perio.org)

separate from the teeth, forming pockets (spaces between the teeth and gums) that become infected. As the disease progresses, the pockets deepen and more gum tissue and bone are destroyed. Often, this destructive process has very mild symptoms. Eventually, teeth can become loose and may have to be removed.

### What is Gingivitis?

Gingivitis is the mildest form of periodontal (gum) disease. It causes the gums to become red, swollen, and bleed easily. Gingivitis is often caused by inadequate oral hygiene, which leads to plaque buildup. People with gingivitis usually experience little or no discomfort. Therefore, it is important to recognize the symptoms, such as gums that are red, swollen or bleed easily. Gingivitis is reversible with professional treatment and good at home oral care.

(Continued on page 8)

(Continued from page 7)



### Healthy Gums

Taken from American Academy of Periodontology Web Site



### Gingivitis Infection

Taken from American Academy of Periodontology Web Site

The bacteria in dental plaque irritate the gums and cause infection. When your body launches an immune response against these invaders, the gums become inflamed.

Other factors that may contribute to gingivitis include, diabetes, **smoking**, aging, genetic predisposition, systemic diseases and conditions, stress, inadequate nutrition, puberty, hormonal fluctuations, pregnancy, substance abuse, HIV infection, and certain medication use.

As we have previously discussed, tobacco use is linked with many serious illnesses such as cancer, lung disease and heart disease, as well as numerous other health problems. What you may not know is that tobacco users also are at increased risk for periodontal disease. In fact, recent studies have shown that tobacco use may be one of the most significant risk factors in the development and progression of periodontal disease.

In addition, following periodontal treatment or any type of oral surgery, the chemicals in

tobacco can slow down the healing process and make the treatment results less predictable.

### Other Oral Problems

Researches also have found that the following problems occur more often in people who use tobacco products:

- Oral cancer
- Bad breath
- Stained teeth
- Tooth loss
- Bone loss
- Loss of taste
- Less success with periodontal treatment
- Less success with dental implants
- Gum recession
- Mouth sores
- Facial wrinkling

### Save Your Smile

Research shows that smokers loose more teeth than nonsmokers do. In fact, according to data from the Centers for Disease Control and Prevention, only about 20 percent of people over age 65 who have never smoked are toothless, while a whopping 41.3 percent of daily smokers over age 65 are toothless. In addition, research shows that current smokers don't heal as well after periodontal treatment as former smokers or nonsmokers. But these effects are reversible if the smokers kick the habit before beginning treatment.

In short, smoking just doesn't cause lung cancer. Its connection and linkage as a causative agent in numerous health disorders is well researched and documented. So, if you keep smoking you run the risk of the following:

- Cancer of the Oropharynx
- Bladder Cancer
- Liver Cancer
- Cervical Cancer

(Continued on page 9)



(Continued from page 8)

- Pancreatic Cancer
- Kidney (Renal) Cancer
- Colorectal Cancer
- Coronary Heart Disease
- Stroke
- Ruptured Abdominal Aortic Aneurysm
- Peripheral Vascular Atherosclerosis
- Chronic Obstructive Pulmonary Disease
- Decline in Lung Function
- Lower Bone Density
- Increased Risk for Hip Fracture
- Depression
- Periodontal Disease

You have now been made aware of the health consequences of smoking. When are you going to stop smoking? We know it's not easy, but there are resources out there to help you stop!

**The following are some resources you can use to help you on your way to quit smoking:**

**On-line Web Sites:**

**United States Surgeon General Office**  
[www.surgeongeneral.gov/tobacco/](http://www.surgeongeneral.gov/tobacco/)

**Centers for Disease Control**  
[www.cdc.gov/tobacco/how2quit.htm](http://www.cdc.gov/tobacco/how2quit.htm)

**American Cancer Society**  
[www.cancer.org](http://www.cancer.org)

**The Smoking Quit line of the National Cancer Institute**  
**1-877-44U-QUIT**  
 Contact them for:

- Help with quitting smoking
- Answers to your questions
- Informational materials
- Other resources

By telephone:

**1-877-44U-QUIT**  
**TTY: 1-800-332-8615**

National Cancer Institute Smoking Quit line is available to answer cancer-related questions Monday through Friday, from 9:00 AM to 4:30 PM local time. They're on the East coast 3 hours ahead of California.

**California**

**Toll Free Telephone Numbers**

- 1-800-NO-BUTTS (1-800-662-8887)
- 1-800-45-NO-FUME (1-800-456-6386) - Spanish
- 1-800-778-8440 - Vietnamese
- 1-800-838-8917 - Mandarin & Cantonese
- 1-800-556-5564 - Korean
- 1-800-933-4TDD (1-800-933-4833) - Hearing Impaired (TDD/TTY)
- 1-800-844-CHEW (1-800-844-2439) - Smokeless Tobacco

**You Can Quit Smoking.**

**U.S. Department of Health and Human Services Public Health Service** (abbreviated for content and length)

Information kit for consumers. March 2003. U.S. Public Health Service. <http://www.surgeongeneral.gov/tobacco/conspack.html>

**Good Reasons for Quitting**

Quitting smoking is one of the most important things you will ever do:

- You will live longer and live better.
- Quitting will lower your chance of having a heart attack, stroke, or cancer.
- If you are pregnant, quitting smoking will improve your chances of having a healthy baby.
- The people you live with, especially your children, will be healthier.
- You will have extra money to spend on things other than cigarettes.

(Continued on page 10)

(Continued from page 9)

## **Five Keys for Quitting**

Studies have shown that these five steps will help you quit and quit for good. You have the best chances of quitting if you use them together:

1. Get ready.
2. Get support.
3. Learn new skills and behaviors.
4. Get medication and use it correctly.
5. Be prepared for relapse or difficult situations.

### **1. Get Ready**

- Set a quit date.
- Review your past attempts to quit. Think about what worked and what did not.

### **2. Get Support and Encouragement**

Studies have shown that you have a better chance of being successful if you have help. You can get support in many ways:

- Tell your family, friends, and coworkers that you are going to quit and want their support. Ask them not to smoke around you or leave cigarettes out.

### **3. Learn New Skills and Behaviors**

- Try to distract yourself from urges to smoke. Talk to someone, go for a walk, or get busy with a task.

### **4. Get Medication and Use It Correctly**

Medications can help you stop smoking and lessen the urge to smoke.

- The U.S. Food and Drug Administration (FDA) has approved five medications to help you quit smoking:
  1. Bupropion SR – Available by prescription.
  2. Nicotine gum – Available over-the-counter.
  3. Nicotine inhaler – Available by prescription.

4. Nicotine nasal spray – Available by prescription.
5. Nicotine patch – Available by prescription and over-the-counter.

### **5. Be Prepared for Relapse or Difficult Situations**

Most relapses occur within the first 3 months after quitting. Don't be discouraged if you start smoking again. Remember, most people try several times before they finally quit. Here are some difficult situations to watch for:

- **Alcohol.** Avoid drinking alcohol. Drinking lowers your chances of success.
- **Other smokers.** Being around smoking can make you want to smoke.

### **Special Situations or Conditions**

Studies suggest that everyone can quit smoking. Your situation or condition can give you a special reason to quit.

- **Pregnant women/new mothers:** By quitting, you protect your baby's health and your own.
- **Hospitalized patients:** By quitting, you reduce health problems and help healing.
- **Heart attack patients:** By quitting, you reduce your risk of a second heart attack.
- **Lung, head, and neck cancer patients:** By quitting, you reduce your chance of a second cancer.
- **Parents of children and adolescents:** By quitting, you protect your children and adolescents from illnesses caused by second-hand smoke.

In our next issue of The WIHS Woman we will provide you with more resources to quit smoking, and share with you actual accounts of smokers who have given up the habit.

## WIHS women with HIV and HCV co-infection:

### Are you interested in learning about the health of your liver?

We are recruiting WIHS women with **HIV and Hepatitis C (HCV) infection** for a sub-study to learn about new ways to study fat in the liver. To be eligible for this study, you must be both HIV and Hepatitis-C Positive, and you must be overweight.

If you are eligible, we will ask you to come in for two visits. During the first visit, you will have blood drawn and a MRI scan of your liver. The MRI scan will measure the amount of fat in your liver and the amount of fat in your belly.

At the second visit, you will have a liver biopsy done by an expert in liver disease- only if (1) you have not had a liver biopsy done in the last few years, (2) the MRI scan does not show severe liver disease already and (3) you do not have a bleeding disorder-the blood that we draw at the first visit will check for this.

A liver biopsy is the best way to find out about the health of your liver and is recommended in people with HCV, especially if you are thinking about getting treatment for your HCV. You will be reimbursed \$25 for the MRI scan and \$100 for the liver biopsy.

## **Hepatitis C and Alcohol Study University of California, San Francisco**

UCSF is conducting a long-term research study to find out more about the effects of light to moderate drinking of alcohol in patients with chronic Hepatitis C infection.

### **Eligibility:**

- If you have the Hepatitis C infection, you may be eligible to take part in the study.

### **Participation includes:**

- In-person and telephone interviews
- Providing blood samples
- Having a physical examination

**EACH** year for a total of **4** years

**FOR EACH VISIT, VOLUNTEERS MAY RECEIVE  
\$25 TO \$100 FOR THEIR TIME  
(Amount depends on time required)**

**FOR MORE INFORMATION  
CALL 1-888-286-1813**