health front

Cutting the Fat-and-Diabetes Link

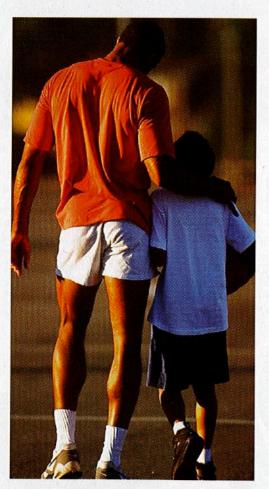
lack women may have an especially good reason to adopt the "fat ain't all that" mantra when it comes to adult-onset (Type II) diabetes, which affects an estimated 25 percent of African-Americans by the time they hit their 70s.

A small study from Louisiana State University's Pennington Biomedical Research Center in Baton Rouge compared the effects of a high-fat diet (with 50 percent of calories coming from fat) on the "insulin sensitivity" of Black and White women. (The lower your insulin sensitivity, the more trouble your body has using insulin to get sugar out of your bloodand the higher your risk of becoming diabetic.) Although

insulin sensitivity fell for both groups of women on the high-fat diet, the Black women's drop was triple that of the White women.

Experts know that the biggest single risk factor for Type II diabetes is being overweight-and we sisters do tend to carry more pounds than the White gals. But as study author Jennifer Lovejoy, Ph.D., points out, "Independent of obesity, Black women had a reduced insulin sensitivity, compared with White women."

So what's your best strategy for staying diabetes-free? Controlling your weight-and maybe improving your insulin sensitivity—by eating a low-fat diet and exercising aerobically.



Having Dad in his life can

help keep a

young Black

bright future.

boy on the

road to a

Good News for Single Moms

If you're a single sister working hard to raise your son to be healthy, safe, and strong, here's an encouraging news flash: Whether or not Black teenage boys live with Dad, they greatly benefit from a relationship with him. Researchers looked at the lives of more than 250 Black, male teenagers from an East Coast city, including their mental outlook and the strength of their relationships; whether they used alcohol, cigarettes, or drugs; and whether they had ever been arrested. The boys, whose average age was 16, came from a range of family structures. Most lived just with their mom, but some lived with both parents; others lived with their mom and a stepparent or extended family.

Turns out that the boys not living with their father were not at greater risk for using drugs or being arrested. Why? Researchers suggest that it may be because of the continued presence of Dad (or another male role model) in these boys' lives: Of the boys living just with their mom, 25 percent spent at least ten hours a week with their dad, and more than 50 percent got emotional support from him. More than half the boys living just with their mom said that they had a male role model.

The benefits of that relationship are clear: Boys who spent some time with their dad (whether or not they lived with him) were less likely to be depressed, and boys who got their dad's emotional support were happier and had higher self-esteem. Boys missing that support were more likely to have been arrested.

If you're in a position to do it, encourage your son and his father to keep in touch. Whether it's going to the movies, the park, or out to dinner-or just going over homework-there's plenty that father and son can do together, says study coauthor Marc A. Zimmerman, Ph.D., associate professor of public health at the University of Michigan School of Public Health in Ann Arbor: "Kids will feel better about themselves and more secure if their father is involved in their lives; family structure isn't critical."

health front

DO YOU NEED TO "BULK UP" YOUR DIET?

If you're a fan of black-eyed peas and collard greens, you're not alone: Your colon probably likes them too. Past research has shown that both fiber and calcium may protect against colorectal cancer; now a small study from the Arizona Cancer Center in Tucson helps

> explain what makes these nutrients so powerful.

> Ninety-five men and women ages 50 to 75 with a history of precancerous colorectal growths were split into four groups, each group receiving different levels of the nutrients: 1) high calcium, high fiber; 2) high fiber, low calcium; 3) high calcium, low fiber; or 4) low calcium, low fiber.

Folks in all but the last group had lower levels of fecal bile acids. (Higher levels appear to increase the risk of developing colorectal cancer.) Although fiber was the more effective of the two nutrients, your best bet is to get plenty of both. (See

the chart below.) African-Americans have a higher incidence of colorectal cancer than White people do-and tend to get it at an earlier age. And here's some more food for thought, from William McBride, M.D., clinical associate professor of medicine at Morehouse School of Medicine—and principal author of a recent study on colorectal cancer among Black Americans: "In Africa [our ancestors] ate a lot of fiber and low-fat foods, and colorectal cancer was-and still is-very rare."



Wheat bran may be your colon's best friend.

Daily Value

FIBER: 25 grams (based on a 2,000-calorie-a-day diet). The National Cancer Institute recommends between 20 and 30 grams a day.

CALCIUM: 1 gram (or 1,000 milligrams).

Good Sources

Wheat bran, found in raisin bran and all-bran cereals and wholewheat bread and pasta; beans; fruits; and vegetables.

Low-fat dairy products; collards; and canned salmon (with the bones).

Reducing Our Risk of Premature Births

here's still a lot of mystery about why some women give birth prematurely (before 37 weeks' gestation); but a recent study may have shed light on one risk factor-and it's something that you can get taken care of quickly and easily.

In a study of more than 10,000 women (about a third of them Black), researchers led by Sharon L. Hillier, Ph.D., at the Magee-Womens Research Institute and the University of Pittsburgh found that women diagnosed with bacterial vaginosis (BV) in their second trimester were 40 percent more likely than noninfected women to deliver low-birth-weight preemies. It also turns out that 23 percent of the Black women in the study had BV (compared with 8 percent of White women)—and we know that Black women are more likely than White women to give birth prematurely.

The classic symptoms of BV—the most common vaginal infection are a thin, milky-white or gray discharge and a strong, fishy odor (especially after sex); itching and burning are less common. Only a prescription topical or oral antibiotic, like metronidazole, will cure BV. Pregnant women are not routinely screened for BV, so if you have symptoms, see your OB-GYN. And even if you don't have symptoms (because sometimes there are none), ask her or him whether you should be screened anyway.

Is Red Your Man's Favorite Color?

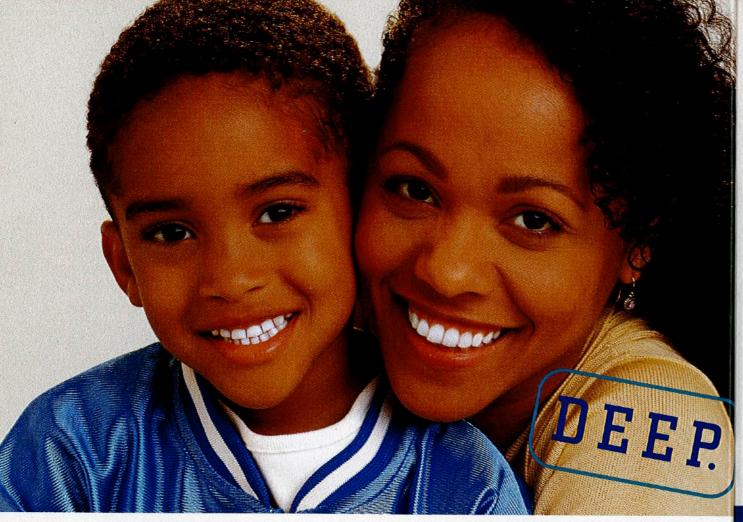
So you've noticed that your man has a thing for Italian food. Well, he may be on to something. According to a Harvard study, eating lots of tomatoes and tomato-based foods may lower a man's prostate-cancer risk.

For six years, researchers tracked the dietary habits of more than 48,000 men ages 40 to 75. The men with the lowest prostate-cancer risk were those who ate more than ten servings a week of tomatoes, tomato juice, tomato sauce, or pizza. (One serving equals a tomato, a cup of tomato sauce or tomato juice, or a slice of pizza.) Unfortunately, Black men in the study averaged the fewest number of servings (2.45 a week).

The star ingredient appears to be lycopene, a powerful antioxidant that gives tomatoes their color but that is not easily absorbed by the body. Study coauthor Edward Giovannucci, M.D., points out that a spoonful (or less) of fat seems to help this particular medicine go down: "What helps the absorption is cooking the tomatoes in oil; tomato sauces are the best sources because of their oil content. You need some fat in there, but not a lot."

Experts say that a diet high in saturated fat may make a man more prone to developing prostate cancer, but your typical marinara sauce actually isn't high in fat. The key is being aware of what's hanging out on, in, and around that red sauce. So what's our advice? Next time you and your honey visit your favorite trattoria, just ask the chef to hold the meatballs!





health front

KEY HEALTH OBSERVANCES FOR

october-november

- •Make time during Fire Prevention Week (October 6 to 12) to replace old batteries in your smoke detector and map out a fire escape plan.
- •Got the serious blues? You can get help on October 10, National Depression Screening Day, when there will be sites set up across the U.S. offering free screenings, consultations with professionals, and referrals if necessary. For the location nearest you, call this hotline anytime: (888) 805-1000.
- •October is Domestic-Violence Awareness Month; if you need info about local emergency shelters or safe houses or legal assistance, call the National Domestic Violence Hotline at (800) 799-SAFE (the lines are open 24-7).
- October is also Breast-Cancer Awareness Month; to find the location of the nearest FDA-approved mammography center, call (800) 4-CANCER.
- •National Diabetes Month (November) is the perfect time to start reducing your risk by keeping fit, eating right, and getting regular exercise. For more info call the American Diabetes Association at (800) DIABETES.

Caring for our elders

We don't like the idea of our partents or grandparents in a nursing home, do we? (We usually insist on taking care of them, at home, ourselves.) That spirit does us proud, but we also need to know when we're burning ourselves out—and, as one study suggests, not able to give our folks the care they need.

Researchers at the George Warren Brown School of Social Work at Washington University in St. Louis looked at the posthospital care of Black and White patients 65 or older who had been admitted for congestive heart failure. The Black patients were more likely to rely on family and friends, while the White patients relied more on professional home care and nursing homes. The Black elders—who were poorer, older, and sicker overall—just did not get the same quality of care.

If you're a stressed-out sister trying to do the right thing, don't risk your own health by going it alone. Check out these resources:

•Call the national Eldercare Locator at (800) 677-1116 for a referral to an agency in your area.

·Send for these free pamphlets: "Where We Stand-Home Care" (#D-12973) and "Nursing Home Life: A Guide for Residents and Families" (#D-13063) are both from the American Association of Retired Persons; call (800) 424-3410, "Thinking About a Nursing Home?"; "Thinking About an Assisted Living or Residential Care Facility?"; and "What Consumers Need to Know about Private Long Term Care Insurance" are all from the American Health Care Association. For each guide (write the name on the envelope), send a business-size SASE to the association at 1201 L Street N.W., Washington, DC 20005.



out that the effect of caffeine on conception may have to do

If you've been trying... and trying... to get pregnant and you're wondering what's up, the answer

Caffeine And Conception: A Weak Blend?

could be at the bottom of that biggest-size-they-got coffee mug sitting on your desk at work, according to a Johns Hopkins study.

Researchers took ten-year pregnancy histories from more than 1,000 mothers. The women were also asked how often they had drunk caffeinated beverages and whether they had smoked while trying to get pregnant. (Smoking has already been shown to interfere with conception.) The results show that nonsmokers whose daily jolt of caffeine exceeded 300 milligrams (which works out to more than three cups of coffee or six cups of cola) were more than twice as likely not to conceive within a year as were the no-cigarettes, no-caffeine moms.

Study coauthor Ronald H. Gray, M.D., M.Sc., points line at (617) 623-0744.

with how the body metabolizes it during menstruation: "Caffeine stays in your system longer in the second half of the menstrual cycle [around the time that you would get pregnant]."

Of course, there are many reasons you could be having trouble conceiving (including diseases like diabetes, lupus, asthma, and hypertension). If you've been trying to get pregnant for more than 12 months, talk'to your doctor. To get the free pamphlet "Preserving Your Fertility: Risk Factors," send a business-size SASE to Resolve (a national group that provides information about infertility, as well as support to folks dealing with it) at 1310 Broadway, Dept. HS, Somerville, MA 02144-1731; or call the help line at (617) 623-0744.

