

7 health questions you must ask your mom today

Her answers can help you slash your biggest medical risks (including those for cancer, osteoporosis, and heart disease). **BY KAREN J. BANNAN**



You have yet another reason to be grateful for Mom this Mother's Day: She can provide you with details of her own (and your family's) health history that may help you head off serious medical problems down the road. Uncovering all aspects of that history isn't as simple as it seems, though. Your mom and your other relatives may have potentially serious but undiagnosed conditions, while other problems may be too sensitive to bring up in casual conversation. That's why we asked experts for the best ways to get an accurate answer from your mother to the health questions below—and for smart strategies to ward off disease now.

"How much milk did I drink as a child?"

Every glass of the white stuff you drink counts: In a study at Cincinnati Children's Hospital Medical Center, women aged 20 to 49 who consumed less than one serving of milk a week in childhood had 5.6 percent less bone mass than those who drank more than one serving a day. Those who drank less than one serving a week also had a greater risk for bone fractures in adulthood.

Genetics are also a culprit: If your mom or grandmother ever broke a hip or wrist in a "non-traumatic" event after the age of 40, you may also be at increased risk for osteoporosis, says Catherine Waud, a clinical physician at UMass Memorial Health Care in Worcester: "It's a predictor that the person is more likely to have fragile bones." (An injury is considered non-traumatic if, say, a person trips and falls when walking and breaks a bone.)

stay-well strategy: Waud says that whether you're 20 or 40, there's plenty you can do today to build bone mass

and prevent osteoporosis. Getting 1,000 to 1,500 milligrams of calcium every day from supplements or dairy products is your best bet. Upping your amount of weight-bearing activity, such

Wulf Utian, M.D., the executive director of the North American Menopause Society in Cleveland. Your risk for heart disease rises because ovarian hormones help protect women against this illness,



as walking or jogging, is also crucial, says Waud. Add in weight-training to improve bone density, too; she recommends alternating between walking and weight lifting (for upper-body strength) for 30 to 60 minutes every day.

“How old were you when you started menopause?”

You may be destined to reach it at the same time as your mom, since the age at which a woman enters menopause is 85 percent genetically determined, according to a Dutch study. So if your mother stopped menstruating at 45, and you're 38 and thinking of having a baby in a few years, you may want to move up your time frame. Why? Even if you're still menstruating, the hormonal changes that decrease fertility begin years before menopause hits.

stay-well strategy: Be sure to tell your doctor about your genetic connection: Knowing that you may enter perimenopause in your 30s can help her guard against conditions that to you may seem unrelated to your fertility, says

so your doctor should keep an eye on your cholesterol and blood pressure readings. Lower estrogen levels also lead to accelerated bone loss, increasing your odds of developing osteoporosis (see question 1 for prevention pointers).

“Did you or Dad have a heart attack before the age of 60 that you didn't tell me about?”

If the answer is yes, you'll have to undergo preventive screening tests right away, since 80 percent of all heart disease patients have genetic links that contribute to the disease, says Marianne J. Legato, M.D., a professor of clinical medicine and head of the Partnership for Gender-Specific Medicine at Columbia University. In fact, you're three times more likely to have a heart attack before age 60 if your parents did.

stay-well strategy: See your doctor today to gauge your heart health, say experts. “Women with this kind of family history should have a serum lipid profile blood test, a stress echocardi-

ogram, and perhaps a CAT scan of the coronary arteries,” says Legato, who adds that the genetic link is so strong that the extra care is worth it.

The good news is that making a few simple lifestyle changes may be all it takes to start preventing heart disease today, according to Legato. Heart-healthy habits, such as exercising vigorously for 40 minutes three times a week, should reduce your risk, she says.

“Does anyone in our immediate family have diabetes?”

The number of people with diabetes (a disease in which the body doesn't produce or properly use insulin, a hormone that helps metabolize sugar) is climbing, so it's more important than ever to reduce your risk. While much of the rise in Type 2 cases (wherein the body doesn't produce enough insulin or the cells ignore it) is due to poor lifestyle choices, people with a family history of Type 1 (the body produces no insulin) and Type 2 are more likely to develop it. The strongest link, says Patrick Bowen, an endocrinologist and assistant professor at Emory University School of Medicine in Atlanta, is having a first-degree relative—a parent or sibling—who suffers from the disease.

stay-well strategy: If you do have any family history, don't wait until you experience symptoms of diabetes—including increased thirst, frequent trips to the bathroom, and blurred vision—before seeing your doctor. Even if you feel fine, get screened for diabetes at your annual checkup and rescreen every three years no matter what, says Bowen. Women with no family history can wait until age 40 for their first screening.

You should also add exercise to your prevention plan. Women who exercise regularly—at least 30 minutes three to five times a week—and eat healthy significantly reduce their risk of developing Type 2 diabetes, says Bowen.

“Did you have more than one miscarriage before giving birth to me?”

If the answer is yes and you were born before 1972, (continued on page 46)

If there is a history of diabetes in your family, get screened now.

ask your mom

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you may have been exposed to a drug called diethylstilbestrol, or DES, in utero; women with a history of miscarriage were prescribed it when they became pregnant again, to prevent their losing the baby. Many didn't know they were on DES, since it was prescribed under many names, so ask your mom if she recalls taking any prescription drugs during her pregnancy.

Since then, DES has been found to cause a rare vaginal cancer; researchers say that one in 1,000 women exposed to DES in utero may develop this disease. The most common complications include infertility and problems with pregnancy, such as frequent miscarriages, according to DES Action USA, a DES advocacy group in Oakland.

stay-well strategy: If you believe that your mom took DES, find a gynecologist who's familiar with DES exposure. You can get a free list of such gynecologists from DES Action (des.action.org; 800-DES-9288). During your yearly exam, the doctor will perform two Pap smears, one of the cervix and one of the upper portions of the vagina, to check for abnormal cells. She'll also palpate your vagina, ovaries, and cervix. And if you were exposed and plan to get pregnant, you'll require monitoring by an ob/gyn who's knowledgeable about DES, since your pregnancy will be considered high-risk.

"Were you or Dad ever treated for depression?"

If your parents have experienced depression, you're three to six times more likely to become depressed during your lifetime, according to Michael D. Yapko, Ph.D., the author of *Hand-Me-Down Blues: How to Stop Depression from Spreading in Families*. Recognize that just because they may not have sought help doesn't mean they weren't depressed; only 20 to 25 percent of people who suffer from depression get treatment. A more precise way to feel your mom out, says Yapko, is to ask her if she or Dad ever experienced the symptoms of depression, such as pervasive sadness, insomnia, and anxiety.

stay-well strategy: If one or both of your parents suffered from depression or you suspect they did, take steps now to protect your mental health, says

Yapko. Studies show that surrounding yourself with friends is essential. "You need people who can help you question your negative feelings," he explains. And boosting your activity level is a must: "Exercise is the cheapest, safest, most effective form of therapy."

If you're already suffering from symptoms of depression, however, see your doctor right away. He'll evaluate you and may refer you to a mental health professional, says Yapko.

"Did I have a sunburn that blistered when I was a kid?"

Ask your mom to think back to your early days at the beach and in the kiddie pool before answering this. The burns

New York. "The more sunburns you have before age 20, the higher your risk of skin cancer is," he says.

Also ask your mom if she or Dad was ever diagnosed with melanoma. Even if you stayed in the shade as a child, you're eight times more likely to develop melanoma, a serious form of cancer that affects more than 55,000 people every year, if it runs in your family.

stay-well strategy: Minimize your skin-cancer risk now by following the standard smart advice to use sunscreen with an SPF rating of 30 or more any time you're out in the sun. In addition, take a few minutes every month to check your skin. Look for irregularly shaped moles (healthy moles tend to be no larger

Lifesaving info:

Do you carry the breast cancer gene?

Wondering whether your family history makes you susceptible to breast cancer? Finding the answer isn't easy—and neither is deciding whether to be tested for the gene. "Even if your mother or sister died from breast cancer, it doesn't necessarily mean you should be tested for the gene. Before you are given the blood test used to detect the gene, you need to speak to a genetics professional who will use tools (like a computerized risk-assessment model and a family tree) to tell you whether this screening would be useful for you," says Debbie Saslow, Ph.D., director of breast and cervical cancer for the American Cancer Society. Here's the lowdown on who should ask her doctor for a referral to a genetics counselor:

- Women who have multiple occurrences of breast and ovarian cancer on one side of their families (either the paternal or the maternal side), especially if their relatives developed it before menopause, or before age 50
- Women who have a relative who was affected by a gynecological cancer in more than one area (either in both breasts or in the ovaries and one breast)
- Women who have one or more male relatives (brother, father, uncle, cousin) on either side of the family who were diagnosed with breast cancer (yes; although it's rare, men can get it)

"You should also be honest with your genetics counselor about what you plan to do with the results," says Saslow. "If you're trying to decide whether to have more-frequent mammograms, you should just get the mammograms. On the other hand, if you're so frightened by your family history that you are considering a prophylactic mastectomy, the test may be valuable." Most insurance plans cover the consultation and testing if you're in a high-risk category. If your doctor can't suggest a genetics counselor, contact the National Society of Genetic Counselors (nsgc.org). —Amelia R. Farquhar

may have healed, but the ultraviolet rays of the sun may have permanently damaged your skin, causing your cells to become cancerous later in life. And with each new sunburn, your risk for skin cancer increases, says Bruce Robinson, M.D., clinical instructor in dermatology at Lenox Hill Hospital in

than a pencil eraser and to have a distinct outline), moles that aren't a uniform color or that change color, and skin lesions. Once a year, your dermatologist should also check your moles for signs of abnormality and inspect the areas of your body that you can't see or that were severely burned in the past. □