Taking Care of Your Body

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Welcome

About this book
The Ohio State University Wexner Medical Center is committed to providing specialized care for your needs as a woman. Our staff is here to give you the highest level of care with the most advanced technology.

Use this book to talk with your healthcare providers. It will help you to understand:
• How your body works
• What health screenings are recommended
• Common medical conditions and concerns that are unique to women
• Healthy behaviors

Please ask questions and share your concerns, so your providers can give you the best support.

Why see a women’s health specialist?
These healthcare providers specialize in medical conditions and diseases that affect women and can help you understand your body and how to take care of it as you age. You may see a range of healthcare providers through the different stages of your life - from puberty, to child-bearing age, menopause, and beyond.

The care you receive may include:
• An annual health assessment and exam
• Help if you develop problems with your reproductive organs
• Care if you become or wish to become pregnant

Examples of healthcare providers a woman may see include:
• Primary care provider (PCP) - a doctor who coordinates your overall care, treats minor illnesses, manages chronic disease, and provides preventive care, such as screening tests and immunizations.
• Gynecologist - a doctor specializing in the female reproductive organs.
• Obstetrician - a doctor specializing in pregnancy and childbirth.

Find a doctor
Go to https://wexnermedical.osu.edu/find-a-doctor. Use these search terms to help you find a doctor:
• Obstetrics & Gynecology
• Women’s Health
• Family Medicine
• Internal Medicine
Making the Most of Your Visits

Before your visits
When you arrive for an appointment, it can be hard to remember everything you wanted to ask. Organize your information and write down your questions ahead of time to make the most of each visit.

Personal health information
You may want to keep a notebook of your health history to help you remember dates, health problems, or treatments you have had. This makes it easier to share your health history with your providers.

Record dates and notes about:
- Past and present health problems, including mental health issues
- Type of contraception you or your partner uses
- Surgeries or procedures
- Medical tests and results
- Vaccines
- List of past pregnancies, including miscarriages and abortions
- Date of last menstrual cycle (if you are still having periods)
- Any medical devices you use, such as a walker, nebulizer, or CPAP machine
- Family medical history, including cancer (type and age it started)
- Allergies you have and your reactions

You may also want to keep a list of your:
- Doctors and other providers with phone numbers and addresses
- Pharmacy phone number and location, including mail order pharmacies

Medicine list
Keep a list of all of the medicines you take with you. Include prescriptions, over the counter medicines, and any vitamin or herbal products you take. Include eye drops, inhalers, shots, and creams.

Your list should include:
- The name of the medicine
- How much you take
- When you take it
- What you take the medicine for

Each visit
- Bring your health insurance card(s) and a photo ID.
- Write down any questions you have and mark the important ones to ask first.
- Write down any symptoms or problems, especially new ones since your last visit.
- Ask a friend or family member to come with you to listen and take notes while you are talking with your provider.
- Ask about anything you don’t understand.
- Ask for written instructions or make your own notes about your care.
Most health and wellness exams include:

- A review of your medical history and a physical exam.
- Other services, such as vaccines, lab testing, breast exams, and screenings may be offered based on your age and your risk of developing certain conditions.

A pelvic exam is NOT a pap smear. During a pap smear, cells on the cervix are collected and sent to the lab for testing. Not every woman who has a pelvic exam will have a pap smear done at that time.

Tests and services

The tests and services you receive will vary by age. Recommendations from your provider may differ based on your particular clinical situation. For example, the recommendation for age 30 is a pap smear every 5 years, if there is a history of no abnormal paps.

Ages 13 to 18

- Physical exam that may include a pelvic exam and testing for sexually transmitted infections (STIs) if you are sexually active.
- Education about safe sex to prevent STIs, birth control, tobacco and alcohol use, fitness, hygiene and injury prevention.
- Vaccines: You may need a Tdap vaccine to prevent tetanus, diptheria and pertussis (whooping cough); a HPV vaccine to prevent cervical cancer; and an annual flu vaccine.

Ages 19 to 39

- Physical exam that includes a pelvic and breast exam. STI testing if needed.
- Pap smears start at the age of 21 and repeated every 3 to 5 years, if there is no history of an abnormal pap smear. Education about safe sex to prevent STIs, birth control, planning for pregnancy, breast care, tobacco and alcohol use, fitness, hygiene, and injury prevention.
- Vaccines: You may need a T-dap vaccine to prevent tetanus, diptheria and pertussis (whooping cough); a HPV vaccine to prevent cervical cancer (if you have not had it); and an annual flu vaccine.
Ages 40 to 64
- Physical exam that includes a pelvic, rectal, and breast exam. STI testing if needed.
- Pap smears every 3 to 5 years, if there is no history of an abnormal pap smear.
- Mammograms starting at age 40 and then every year. You may need this earlier depending on your risk factors.
- Colon cancer screening starting at age 50, and how often is based on your risk factors.
- Starting at age 50, talk to your healthcare provider about your risk for osteoporosis.
- Education about safe sex practices to prevent STIs, birth control, menopausal issues, breast care, tobacco and alcohol use, fitness, hygiene, and injury prevention.
- Annual flu vaccine.

Age 65 and older
- Physical exam that includes a pelvic, rectal, and breast exam. Pap smears may be ended.
- Mammogram yearly.
- Bone density screening for osteoporosis at least once. Talk to your healthcare provider about repeat testing.
- Education about sexual function, STIs, menopausal issues, breast care, tobacco and alcohol use, fitness, hygiene, and injury prevention.
- Annual flu vaccine.

Other Screenings
Your healthcare provider may recommend or refer you for other screenings based on your age and risk factors, such as screenings for colorectal cancer, breast cancer, and high cholesterol.
Female Pelvic Exam

About the exam
This exam is done to check your:
• Vagina
• Cervix - opening into your uterus
• Uterus - also called the womb
• Ovaries
A pelvic exam is not the same as a pap smear (pap test). Other tests may be done during this exam, such as a pap smear or testing for infection.
Reschedule your annual exam if you are having your period.

Day before the exam
For 24 hours before you have this exam, you need to avoid:
• Having sex.
• Vaginal douches or rinsing your vagina.
• Use of any perfumed sprays or powders around your vagina.

Having the exam
• Go to the bathroom and empty your bladder before this test.
• You will be asked to undress from your waist down and will have a paper sheet to cover you.
• You will be asked to lie down on the exam table and place your feet in holders at the end of the table, called stirrups.
• Let your knees fall to the sides. Take slow, deep breaths to relax the muscles around your vagina during the exam.
• Your provider will touch you and look at the skin around your vagina, called the labia, for signs of infection or other problems.
• A plastic or metal duck-bill shaped tool, called a speculum, will be placed into your vagina to allow the provider to see inside your vagina. If other testing is needed, such as a Pap smear, it will be done while the speculum is in place. The speculum is then removed.
• Using gloves, your provider will place 2 fingers into your vagina and the other hand will be placed on your lower abdomen to feel the size and shape of your uterus and ovaries.
• When the exam is done, the provider will remove the gloves and ask you to get dressed.
• Your provider will review the results of the exam with you.
Pap Smear (Pap Test)

Test for cancer of the cervix

This test is done to look for changes in the cells of your cervix, the lower end of your uterus.

Women are encouraged to have a Pap smear during their annual female pelvic exam, starting at age 21 and every 3 to 5 years after that. Based on your age and health history, your provider may make other recommendations.

Having the test

During your pelvic exam, your provider will look at your cervix. A small brush will be used to pick up cells from your cervix that will be sent to the lab for testing. This test is often painless.

The lab will send a report to your provider. Your provider will share the results with you and discuss any needed follow-up care. If your test results are abnormal, more testing may be needed. Most abnormal Pap smear results are from the human papilloma virus (HPV).

<table>
<thead>
<tr>
<th>Result</th>
<th>What it means</th>
<th>Follow up</th>
</tr>
</thead>
<tbody>
<tr>
<td>Within normal limits</td>
<td>No abnormal cells found.</td>
<td>Routine screening as recommended by your provider</td>
</tr>
<tr>
<td>Atypical</td>
<td>Some cells show changes that may be due to a vaginal infection or an infection with the HPV virus.</td>
<td>If due to infection, medicine is used to treat infection.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If due to HPV, more testing will be done. Based on your age and history, a repeat pap smear may be done or your doctor may use a magnifying device to look at your cervix, called a colposcopy.</td>
</tr>
<tr>
<td>LGSIL (low grade squamous intraepithelial lesion)</td>
<td>Changes in the cells are mildly abnormal and likely due to an HPV infection.</td>
<td>More testing will be done, either a repeat pap smear or colposcopy.</td>
</tr>
<tr>
<td>HGSIL (high grade squamous intraepithelial lesion)</td>
<td>Cells are very abnormal and may become cancer if not treated.</td>
<td>A sample of tissue, called a biopsy, may be removed to test cells. Surgery may be done to remove abnormal cells.</td>
</tr>
</tbody>
</table>
Menstrual Cycle

The menstrual cycle is a series of changes a woman’s body goes through over a month’s time to prepare for a possible pregnancy. Most women start having this cycle between ages 11 and 14. Some women have cycles that are longer or shorter. Women usually stop having this cycle sometime after age 50, called menopause.

- Uterine lining is prepared for the fertilized egg.
- At mid-cycle, the egg leaves the ovary and goes into the fallopian tube.
- The egg travels through the fallopian tube to the uterine lining. If the egg and sperm meet, conception can take place.
- If the egg and sperm do not meet, the egg dissolves and is part of the menstrual flow that begins, also called having a period.
Menopause

Menopause is the time in a woman’s life when her period stops because her ovaries stop producing the hormones estrogen and progesterone. A woman has reached menopause when she has not had a period for one year. The average age of menopause is 51, but it can happen as early as 40 or as late as 55. Sometimes menopause occurs due to a surgery, medicine or treatments such as radiation or chemotherapy.

Signs and symptoms

Changes and symptoms of menopause can occur for several years leading up to your last period. This time of transition is called perimenopause. Symptoms may include:

- Changes in periods or menstrual cycles
- Hot flashes or warm flush feeling and sweating
- Problems sleeping
- Mood changes
- Headaches
- Feeling anxious
- Vaginal dryness
- Lack of sex drive or painful intercourse
- Dryness of the skin or hair

Other symptoms that might bother you during this time are having less interest in sex and having trouble holding in your urine, called urinary incontinence.

Treatment

Menopause usually occurs naturally, and you do not need treatment unless your symptoms bother you. Talk to your healthcare provider about how to best manage your symptoms of menopause. There are medicines that can help. Talk to healthcare provider about their benefits and risks. Be sure to share your medical history and your family medical history. This includes whether you are at risk for heart disease, osteoporosis, or breast cancer.

Some women try herbs or other products that come from plants to help relieve hot flashes. Discuss any natural or herbal products with your healthcare provider before taking them. Getting exercise also helps in many areas, including improving your mood and helping with sleep.
Breast Health

About your breasts
Breasts are made up of ducts, lobules, fibrous tissue, and fat. Under the breasts are muscles and ribs. These tissues may make your breasts feel lumpy or uneven.

Changes in breast tissue are common over a lifetime due to aging and hormone changes. Women may have swelling, one or more lumps, tenderness or pain in the breast before and during their period or menstrual cycle.

Breast self-awareness
Know how your breasts normally look and feel, so you are able to detect any changes. It’s important to learn what is normal for your breasts. This is called breast self-awareness.

Many experts now say that women should focus on breast self-awareness instead of doing a breast self-exam. Breast self-awareness is about knowing what’s normal for your breasts. If you notice any changes report them to your provider right away.

Call your provider if:
• If you see or feel a change in either of your breasts, or if you are not sure what you are feeling.
• Your nipples have discharge, other than breast milk, are painful or more red than normal. Itchy, scaly sore or rash on the nipple.
• You have signs of infection in your breasts, called mastitis, such as swelling, pain, redness, or warmth.
• There are changes to your breast from your last exam such as new lumps in your breast or under your armpit.
• Change in size or shape of one of the breasts.
• You notice skin irritation such as redness, thickening, or dimpling of skin or nipple.
• Darkening of the breast.

Changes in breast tissue are common. Most changes are not cancer, but you should always have your breast checked by your healthcare provider if you see or feel any change.
Breast screening
In addition to practicing self-breast awareness, women should have:
- Yearly breast exams by your healthcare provider. Your provider may instruct you on self-breast exam.
- Mammogram every year starting at age 40. Your risk factors for breast cancer may change when it is recommended for you.

Mammogram
A mammogram is an x-ray of your breasts. It is used to check for signs of breast cancer. To do the mammogram, the technologist will compress or squeeze each of your breasts between two flat plates and take x-ray pictures from different angles. You will be told to hold your breath and not move while the pictures are taken. It may feel a little uncomfortable, but should not hurt.

After the test, there can sometimes be a change in the skin color of one or both breasts. This goes away in a day or two. You may feel achy or tender from the squeezing of the breasts. This will go away on its own.

The report of the mammogram will be sent to your healthcare provider and then shared with you. If there are any areas that are not clear, you may need to have the mammogram repeated.

About breast cancer
One in 8 women will develop breast cancer in their lifetime. Risk factors for breast cancer include:
- Being female
- Aging
- Family and personal history of breast or ovarian cancer
- Periods (menses) starting before age 12 or stopping after age 55
- History of abnormal breast changes or dense breast tissue
- Being inactive or overweight after menopause
- Drinking 1 or more alcoholic drinks a day
- Hormone therapy or birth control pills after menopause

Mammograms are the best way to find breast cancer early, when it is easier to treat and before it is big enough to feel or cause symptoms. Having regular mammograms can lower the risk of dying from breast cancer.
Heart Health for Women

Heart disease is the leading cause of death for women in the United States, killing 1 in every 4 women. Some conditions and lifestyle choices increase a person’s chance for heart disease. You may still be at risk for heart disease even if you have no symptoms.

Heart disease symptoms
Some women have no symptoms of heart disease. Others may feel a sharp chest pain or discomfort, pain in the neck/jaw/throat, or pain in the upper abdomen or back. Heart disease may cause different symptoms based on the heart problem, such as:

- **Heart Attack**: Chest pain or discomfort, upper back pain, indigestion, heartburn, nausea, being very tired, upper body discomfort, and trouble breathing.
- **Arrhythmia**: Fluttering feelings in the chest.
- **Heart Failure**: Shortness of breath, being tired, and swelling of the feet, ankles, legs, or abdomen.
- **Stroke**: Sudden weakness, being unable to move, or numbness of the face, arms, or legs. These symptoms may occur on one side of the body. Other symptoms can be confusion, trouble speaking or understanding speech, trouble seeing, shortness of breath, dizziness, loss of balance or coordination, loss of consciousness, or sudden and severe headache.

Your risk factors
There are risk factors that you cannot control, such as your age and family history. Risk factors that you CAN control include:

- High blood pressure
- High cholesterol
- High triglycerides
- Smoking
- Being overweight
- Not being active
- Not controlling diabetes
- Poor diet
- Excessive alcohol use
- Stress and tension

Lowering your risk

- **Eat a healthy diet** with fruits, vegetables, whole grains, and fat-free or low-fat milk products. Choose foods low in saturated fats, cholesterol, salt, and added sugars.
- **Exercise regularly.** Adults need 2 hours and 30 minutes (or 150 minutes total) of exercise each week.
- **Be tobacco free** and avoid being around other people that are smoking.
- **Limit alcohol use.** If you do choose to drink, limit to 1 drink a day and none if you are pregnant.
- **Manage medical conditions** that may put you at more risk, such as diabetes.
High blood pressure
Blood pressure is the force put on blood vessel walls when your heart pumps and relaxes with each heartbeat.
High blood pressure is also called hypertension. It is caused by the narrowing of arteries from plaque and cholesterol deposits, sometimes called hardening of the arteries.
Having high blood pressure puts you at risk for heart disease, kidney disease, and stroke. Most people have no symptoms. The only way to know is to have it checked.

Your Blood Pressure Reading
Blood pressure is one number over a second number. You may hear your doctor say 110 over 72 (110/72), for example.

• The top number is higher and is called the systolic reading. It is the pressure in the blood vessels when the heart pumps.
• The bottom number is lower and is called the diastolic reading. It is the pressure in the blood vessels when the heart rests between beats.

Normal blood pressure is a top number less than 120 (systolic) and a bottom number less than 80 (diastolic).

Lowering Your Blood Pressure
• Check your blood pressure often, and call your healthcare provider if it stays high.
• Take your blood pressure medicine as prescribed, and see your healthcare provider for checkups.
• Lose weight if you are overweight.
• Limit salt in your food and drinks.
• Stop tobacco use and avoid alcohol.
• Aim to be active 30 minutes a day.
• Do relaxation exercises to lower stress.

Cholesterol and triglycerides
Cholesterol and triglycerides are different types of fats found in your blood. Too much cholesterol or triglycerides in your blood can be harmful.
There are 3 main types of fats in your blood:

• High Density Lipoproteins (HDL): This is “good” cholesterol that lowers risk of heart disease. A healthy level is 60 and above.
• Low Density Lipoproteins (LDL): This is “bad” cholesterol that builds up in your blood vessels, causing them to narrow and making it hard for blood to flow. A healthy level is less than 100.

Your total cholesterol (sum of HDL and LDL) should be less than 200.

• Triglycerides: A healthy level is less than 150. Most people do not have signs of high cholesterol.

Lowering Your Cholesterol
See your healthcare provider to have your cholesterol and triglyceride levels checked at least every year.

• Medicine. Take cholesterol lowering medicine as directed.
• Diet. Talk to your doctor, nurse, or dietitian about starting a heart healthy diet.
• Stop tobacco use.
• Exercise.
• Lose weight if needed.
Your Reproductive Life Plan

Think about your life goals and how having children fits in with your goals. This can help you and your partner to be ready to have a baby or a plan to prevent pregnancy. Think about the questions below.

If you do want children

Questions to think about to start your plan:

• How old do I want to be when I have children?
• How many children do I want to have?
• How am I going to prevent pregnancy until I am ready to have children?
• What do I need to do to be as healthy as I can be to get ready to have a child?
• Do I have any medical problems that I need to talk to my healthcare provider about before I consider getting pregnant?

If you do not want children

Questions to think about to start your plan:

• How am I going to prevent pregnancy?
• What will I do if I become pregnant by accident?
• What do I need to do or change to help me be as healthy as I can be?
• Is it possible that I may change my mind and want to have a child some day?

Make your plan

Some people find it helpful to write their plan down in a notebook or journal. Start with your goals for the next 12 months for things like school, career, family, and other important things in your life. Then think about how having children fits in with your plans. What steps do you need to take to get to each goal?

Include steps that have to do with using birth control or getting ready for pregnancy, or getting healthier, depending on what your personal goals are. Try to include as many details as possible. If you have a partner, talk to them about what steps they may need to take to help you meet your goals.

Take action

Once you have a plan, take action. If you have decided to use condoms, for example, make sure that you use them every time you have sex. If you have decided to quit smoking, follow through and get the help you need to be successful. Review your plan each year. Things may change and you may want to make changes to meet your goals in life. Talk with your healthcare provider about your plan and your life goals.
Choosing a Birth Control Method

Many birth control methods are available. This guide lists the major types that are not permanent. **The list runs from the most effective to the least effective.** Only male and female condoms protect against sexually transmitted infections (STIs), including HIV.

These methods of birth control result in less than 1 pregnancy per 100 women in a year

<table>
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<th>Description</th>
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<th>Disadvantage</th>
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| The implant                   | A match stick sized plastic rod that is placed under the skin in the arm by your healthcare provider. It protects against pregnancy for up to 3 years. | • **Advantage:** You do not need to take anything every day or do anything before, during, or after sex. Your periods may be lighter and less painful, or you may have no period.  
• **Disadvantage:** You may have irregular bleeding or spotting. |                                                                            |
| The hormonal IUD              | A small, T-shaped piece of plastic that is placed in the uterus (womb) by your healthcare provider. It protects against pregnancy for up to 5 years. | • **Advantage:** You do not need to take anything every day or do anything before, during or after sex. You should check now and then that the string from the IUD is still in place. You will be instructed how to do this. Your period may be lighter and less painful, or you may have no period.  
• **Disadvantage:** You may have irregular bleeding or spotting. This often improves after a few months. |                                                                            |
| The copper IUD                | A small, T-shaped piece of plastic that is placed in the uterus (womb) by your healthcare provider. It protects against pregnancy for up to 10 years. | • **Advantage:** You do not need to take anything every day or do anything before, during or after sex. You should check now and then that the string from the IUD is still in place. You will be instructed how to do this.  
• **Disadvantage:** You may have heavier bleeding or cramping. This sometimes improves after a few months. |                                                                            |

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• **Disadvantage:** You may have heavier bleeding or cramping. This sometimes improves after a few months. |                                                                            |
These methods of birth control result in 6 to 12 pregnancies per 100 women in a year

The **birth control shot (Depo-Provera)** is given in the arm or buttocks by a healthcare provider every 3 months.

- **Advantage:** You do not need to take anything every day or do anything before, during or after sex. You may have no period.
- **Disadvantage:** You may have irregular bleeding or spotting. This often improves after a few months.

Oral contraceptives (birth control pills) contain hormones that prevent pregnancy. You need to swallow a pill at about the same time every day.

- **Advantage:** Your period may be lighter and less painful.
- **Disadvantage:** It can be hard to remember to take a pill every day and get prescription refills on time.

The **patch (Ortho Evra)** is applied to the skin like a band-aid each week for 3 weeks and then removed for 1 week to allow for a period.

- **Advantage:** Your period may be lighter and less painful.
- **Disadvantage:** The patch may be less effective if you are overweight. It may be hard to keep the patch in place or to change it on time.

The **vaginal ring (NuvaRing)** is a small, flexible ring that is inserted into the vagina to stay in for 3 weeks. It is then removed for 1 week to allow for a period.

- **Advantage:** Your period may be lighter and less painful.
- **Disadvantage:** It may be hard to keep the ring in place or to change it on time.

The **diaphragm** is a dome-shaped silicone device that is inserted into the vagina before sex and removed 6 hours after sex. A spermicide foam, gel or cream needs to be used with the diaphragm each time you have sex.

- **Advantage:** The diaphragm is easy to use and you can reuse it many times.
- **Disadvantage:** You need to have the diaphragm and spermicide available and use it correctly each time.
These methods of birth control result in 18 or more pregnancies per 100 women in a year

A **male or female condom** is placed over the penis (male condom) or inserted into the vagina (female condom). The condom blocks the sperms’ movement into the uterus (womb).

- **Advantage:** Both the male and female condom are easy to use and you can buy them over the counter. It is the only birth control method that can protect you against sexually transmitted infections (STIs).
- **Disadvantage:** The condom may leak, break or have holes. You need to have a condom available and use it correctly each time you have sex.

The **sponge** is a dome-shaped sponge that gets inserted into the vagina before sex and removed 6 hours after sex.

- **Advantage:** The sponge is easy to use and you can buy it over the counter.
- **Disadvantage:** You need to have a sponge available and use it correctly each time you have sex.

**Emergency contraception pills**

These pills can prevent pregnancy up to 5 days after unprotected intercourse. The pills delay ovulation or the release of an egg during the menstrual cycle. Emergency contraception does not affect a pregnancy that has already started. The pills are available in pharmacies and other stores without a prescription. It is not recommended as a regular method of birth control. Talk to your healthcare provider for more information.

**Natural family planning**

Birth control without the use of chemicals (vaginal spermicide or oral contraceptives) or barriers (condoms or diaphragms) is called natural family planning. You need to have regular menstrual cycles (periods) to use natural family planning. It uses body temperature, vaginal discharge or a calendar of your menstrual cycle to find out which days of each month you are most likely to ovulate or release an egg and get pregnant. You should not have sex during this time. It requires couples to not have sex for a large number of days each month. When used correctly, natural family planning is about 75% effective. Talk to your healthcare provider for more information.
Your Health Before Pregnancy

Pre-pregnancy checkup

Making sure you are healthy before you get pregnant is good for both you and your baby. Come prepared to talk about these things at your pre-pregnancy checkup:

- Any health problems you have now so you can get them under control, such as high blood pressure, thyroid problems, asthma, or diabetes.
- Any surgeries or hospital stays you have had in the past.
- Your menstrual history, Pap smear results, birth control use, vaginal infections, or any sexually transmitted infections you have had.
- Family history of health problems.
- Any medicines you are taking, including prescription, over the counter, vitamin, or herbal products.
- Use of alcohol, tobacco, or recreational drugs by you or your partner.
- If where you live or work exposes you to chemicals, cat feces, or other things that can impact pregnancy.
- Caffeine intake each day. You may be told to limit caffeine to no more than 300 milligrams (mg) each day or 2 (8-ounce) cups of coffee.
- Vaccines you have had to be sure you are protected from chickenpox and rubella.
- Genetic counseling if you are older, or if you have a family history of birth defects or genetic problems.

Your provider will likely do an exam and may order lab tests.

Keep yourself healthy

- Eat a variety of foods that are high in fiber, calcium, and other nutrients. Include fresh or frozen fruits and vegetables.
- Try to be at your ideal body weight before getting pregnant.
- Exercise unless you are instructed to limit your activity. If you have not been exercising, ask if it is safe for you to start.
- Start taking a multivitamin with folic acid 3 to 6 months before trying to conceive.
- If you have any dental work that needs to be done, it is a good idea to do it before you are pregnant. It is best to avoid x-rays when you are pregnant.
- Limit caffeine.
- Avoid using alcohol, tobacco, and street drugs.
- Avoid chemicals and other toxic substances at home and work.
- If someone is violent to you or you are violent to others, get help.
- Get help if you have feelings of sadness, anxiety, worry, or stress that interfere with your daily life.

Wait to try to get pregnant if you may have been exposed to Zika.

If you or your partner are thinking about becoming pregnant, talk to your healthcare provider about your plans and your risk of getting Zika. Follow steps to prevent mosquito bites if you travel to an area where Zika is spreading.
Hygiene to Prevent Vaginal Infections

Self care
Care for your private parts or genital area by following these practices:
• Wipe from front to back, away from the vagina and toward your anus.
• Keep your genital area clean by rinsing with warm water and gently patting it dry.
• Do not use a loofah or washcloth on your genitals. Use your fingertips only.
• Do not use perfumed soaps or liquid soap on your genitals. Use a gentle bar soap, like Dove for sensitive skin or Neutrogena.
• Do not use pads that have deodorant or a plastic coating
• Do not use tampons that have deodorant.
• Do not use douches, feminine sprays, or talcum powder.
• Do not wear tight fitting pants or underwear. Wear only cotton underwear.
• Do not use pads or tampons that contain a deodorant or a plastic coating.
• Do not wear panty hose or tights unless they have a cotton crotch.

Pubic Hair Protects - Don’t Shave It
Pubic hair protects your genital area from dirt, bacteria, and viruses. It also prevents chafing from areas that rub together.

Vaginal discharge
Most women have vaginal discharge. It keeps your vagina clean and moist. Normal discharge is clear, white, or yellow in color and has a mild odor. You may have a few days of heavy, clear, slippery discharge about halfway between your periods when your egg is released.

Signs of vaginal infection
Follow self care practices to decrease your chance of vaginal infections and see your provider if you have any signs of infection, including:
• Changes in vaginal discharge
• Itching or burning around the vagina
• Painful sexual intercourse
• Burning when you urinate
• Foul vaginal odor

Common vaginal infections
• Candidiasis (yeast infection) is caused by the overgrowth of yeast normally found in the vagina. The overgrowth of yeast in the vagina can cause discharge, itching, or burning. This is not a sexually transmitted infection.
• Bacterial vaginosis (BV) is caused by a change in the balance of normal bacteria present in the vagina. The discharge is thin and watery and may look gray, white, or yellow. It has a bad or fishy smell. This infection is more common in women who are sexually active, but it is not sexually transmitted.
• Trichomonias is caused by a parasite and it is sexually transmitted. Most often symptoms happen 5 to 28 days after infection, but many people do not have symptoms. Women may see yellow, green or gray discharge from the vagina, itching in or near the vagina, and vaginal odor. Antibiotic treatment is needed for you and your partner(s)
Vaginal Dryness

Many women have vaginal dryness. Vaginal dryness is when there is not enough moisture from your body to keep the lining of the vagina moist. This can problems such as painful sex or irritation.

Reasons for dryness

Vaginal dryness can happen for many different reasons, including:

- Menopause (stopping your periods)
- Infections
- Breastfeeding
- Pregnancy
- Douching
- Certain medicines
- Birth control pills, shots, or implants
- Removal of your uterus or ovaries
- Chemotherapy
- Radiation therapy

Signs of vaginal dryness

- Burning on urination
- Light bleeding after intercourse
- Painful sexual intercourse
- Slight vaginal discharge
- Vaginal soreness, itching, or burning
- Feeling of pressure

Treatments

Before treating yourself, talk to your healthcare provider about why you have vaginal dryness and possible treatments. Avoid scented soaps, lotions, perfumes, or douches. A water based lubricant can be used to help keep your vagina moist. Do not use a lubricant with a petroleum base because it can cause vaginal infections. Do not use mineral oil, baby oil, or body lotions. Do not use Vaseline internally. Your doctor may prescribe a lubricant or estrogen depending on the cause.

Do not be embarrassed to talk with your doctor or nurse about your vaginal dryness. They are there to help you.
Sexually Transmitted Infections (STIs)

**Facts about STIs**

Sexually transmitted infections (STIs) are infections most often spread from person to person through intimate sexual contact. Unprotected vaginal, oral, or anal sex or genital touching with an infected person puts you at risk.

There are many types of germs that cause STIs. The germs may live on the skin or in body fluids, such as semen, vaginal fluid and blood. The germs can enter the body through the vagina, mouth, anus, and open sores and cuts. Some germs, like the ones that cause herpes or genital warts, infect a person through the skin of the genitals.

**Key Facts**

- STIs affect both men and women, but health problems from STIs tend to happen more often and be worse for women than men.
- Unprotected anal sex puts women at even greater risk of getting STIs than unprotected vaginal sex.
- In women, some STIs can spread and cause pelvic inflammatory disease (PID). This can cause infertility and a higher risk of tubal pregnancy.
- Most STIs can be treated. Some can be cured, but others cause life long disease.
- STIs can be spread even if there are no signs of infection. It can be hard to tell if someone has an STI.
- A pregnant or breastfeeding woman who is infected can pass the infection to her baby.
- STIs are not spread through casual contact or by sitting on toilet seats or being in swimming pools.

**STI prevention**

There are some things you can do to limit your chances of getting a STI, such as:

- Don’t have sex.
- Be in a faithful relationship.
- Use condoms correctly each and every time you have intercourse.
- Talk with your partner about STIs before having sex.
- Have a yearly pelvic exam and have STI testing if you are sexually active.
- Avoid alcohol or drug use that could cause you to take greater risks.

**Signs of STIs**

Signs may develop in a few days or they may not occur for months. Sometimes signs go unnoticed or there are no signs. Often signs in women are the same as a yeast infection or urinary tract infection.

Common signs may include:

- Burning with urination
- Vaginal discharge
- Abdominal pain
- Blisters or open sores on genitals
- Warts
- Rash
- Bleeding between periods

*Getting tested is the only way to be sure you are treated for the right infection.*

Medicine is used to treat most STIs.

**To learn more**

Office of Women’s Health
www.womenshealth.gov

Centers for Disease Control and Prevention
www.cdc.gov/std
Human Papillomavirus (HPV)

**HPV is the most common STI**

Human papillomavirus or HPV is the most common sexually transmitted infection (STI). HPV is a different virus than HIV and HSV (herpes). HPV is so common that nearly all sexually active men and women get it at some point in their lives.

There are many different types of HPV. Some types can cause health problems including genital warts and cancers. But there are vaccines that can stop these health problems from happening.

**Quick Facts**

- You can get HPV by having oral, vaginal, or anal sex with someone who has the virus.
- HPV can be passed even when an infected person has no signs or symptoms.
- Anyone who is sexually active can get HPV, even if you have had sex with only one person.
- You also can develop symptoms years after you have sex with someone who is infected making it hard to know when you first became infected.
- In most cases, HPV goes away on its own and does not cause any health problems.
- When HPV does not go away, it can cause health problems like genital warts and cancer.
- Cigarette smoking doubles your risk of developing cervical cancer.

**Lower your risk**

**Get vaccinated.** HPV vaccines are safe and effective. They can protect males and females against diseases (including cancers) caused by HPV. All boys and girls ages 11 or 12 years should get vaccinated.

**Get screened for cervical cancer.** Routine screening for women aged 21 to 65 years old can prevent cervical cancer.

**If you are sexually active,** use latex condoms the right way every time you have sex. This can lower your chances, but may not give full protection. Also, have sex only with someone who only has sex with you.

**To learn more**

Centers for Disease Control and Prevention

[www.cdc.gov/std/hpv/](http://www.cdc.gov/std/hpv/)
Urinary tract infections or UTIs are caused by bacteria (germs) that enter the urinary tract. These germs typically come from outside the body, and travel into the urethra, bladder, and sometimes the kidneys. Women are prone to UTIs because the urethra is short and close to the rectum. Sexual intercourse is also a common cause of urinary tract infections.

**Symptoms of a infection**
- Burning with urination (most common symptom)
- Having to urinate often
- Having an intense urge to urinate, but not urinating much
- Lower abdominal pain
- Back pain
- Foul smelling urine
- Cloudy urine
- Blood in the urine
- Fever or chills (a sign that the infection may have reached your kidneys)
- Nausea/vomiting (a sign that the infection may have reached your kidneys)

The only way to know for sure if you have a UTI is to contact your doctor who will review your symptoms and test your urine. Most UTIs can be easily treated with antibiotics, which kill the bacteria. It is important to take the full course of antibiotics and not to stop as soon as you feel better. If you do not take all the medicine, your infection may not be cured.

If bacteria makes its way to the kidneys then it can become a kidney infection. This can be serious and damage your kidneys. In more serious cases, you may be treated in the hospital.

**How can I prevent UTIs?**
- Wipe from front to back after using the toilet.
- Drink plenty of water.
- Shower instead taking a bath.
- Do not douche or use feminine hygiene products.
- Avoid tight pants and nylon underwear that can trap moisture and making easier for bacteria to grow. Wear cotton underwear instead.
- Keep your genital area clean, but do not scrub too hard with harsh soaps.
- Wash your genital area before and after sex.
- Urinate after sex to flush away bacteria that may have entered your urethra.
- Use condoms during sex.
- Urinate before you go to sleep.
Maintaining a Healthy Weight

Getting to and maintaining a healthy weight is important for overall health. It can help you to prevent or control many diseases and conditions, such as heart disease, high blood pressure, type 2 diabetes, gallstones, breathing problems and certain cancers. It also helps you to feel good about yourself and gives your body energy.

Am I at a healthy weight?

Body Mass Index (BMI) is an estimate of body fat based on your height and weight. It helps you and your healthcare team find your ideal weight and create a goal for weight loss, if needed. Ask your team for help to determine your BMI or see the handout, Body Mass Index (BMI), for more information.

My height: __________
My current weight: __________
My current BMI: __________
My goal weight: __________

Aim for a BMI between 19 and 25.

If you need to lose weight, losing just 5 to 10 percent of your current weight over 6 months will lower your risk for heart disease and other conditions.

About energy balance

Reaching and maintaining a healthy weight involves a balance between the calories you eat (energy IN) and the energy you burn (energy OUT). To lose weight, you will need to make lifestyle changes that burn more calories than you eat.

How to reach and maintain a healthy weight

1. Set realistic health goals, such as losing 1 to 2 pounds per week or walking for 30 minutes, 6 days a week. Be willing to adapt your plans. For example, if you can only walk 4 days this week, add 15 minutes to your walk each day to meet your weekly walking goal of 180 minutes.

2. Get moving. Increase your physical activity and get moderate exercise most days of the week. Start slowly, such as walking briskly for 15 minutes twice a day, and keep the activity challenging. Do any activity that you enjoy, such as swimming and biking. Work towards exercising 180 minutes or 3 hours a week.

3. Keep a food journal. Studies show that food journals help people to lose more weight. Writing in a journal will increase your awareness of the calories in the amount of food you eat.
4. **Eat 3 meals and 1 or 2 snacks a day.** Eating at regular intervals boosts your metabolism and keeps you from overeating the rest of the day. Try to eat about every 3 or 4 hours during the day.
   - Women: 300 to 500 calories/meal
   - Men: 400 to 600 calories/meal
   - Snacks: 100 to 250 calories
Choose whole grains, vegetables, fruit, beans, lean meats and proteins, and fat free or low fat milk products over fried and processed foods. Limit the amount of oil, butter and mayonnaise you add to foods as they are high in calories.

5. **Eat more whole foods and limit processed foods.** Processed foods are changed from their natural forms. For example, choose grilled chicken over breaded and fried chicken nuggets or choose a plain baked potato over fried French fries and potato chips. Eating foods closer to their natural form provides more nutrients and fewer calories.

6. **Eat at least 5 servings of fruits and vegetables each day.** These foods are lower in calories and full of nutrients like vitamins and minerals, fiber and compounds (phytochemicals) that help to prevent diseases. **One serving is ½ cup fruit or cooked vegetables or 1 cup raw vegetables.** Work up to eating 9 to 11 servings a day for more weight loss (fiber fills you up) and cancer prevention benefits.

7. **Drink water and other no or low-calorie drinks, such as unsweetened tea and coffee,** instead of juices, sodas (regular or diet) and energy drinks.

8. **All foods can fit in a healthy diet.** You do not have to give up your favorite foods to lose weight. Eat foods with low nutrients and high calories less often and in smaller quantities. For example, instead of drinking a 20-ounce soda every day, drink a 12-ounce soda. Over time, decrease this to 3 or 4 days a week.

9. **Listen to your hunger levels.** On a scale from 1 to 10, eat when you feel slightly hungry (level 4) and stop when you are satisfied (level 6). Become aware of eating for reasons other than hunger, such as stress. See the handout, Mindful Eating, for more information.

10. **Sleep 7 to 8 hours a day.** Not getting enough sleep can lead to overeating or eating high calorie foods. Respect your body and give it the rest it needs.

Talk to your healthcare team for resources and support.
Being Active

You need two types of physical activity each week to improve and keep good health: aerobic and muscle strengthening. The total goal for adults to be active is 250 minutes per week, or 2 hours and 30 minutes. It way sound like a lot, but you can break it up into small amounts. Just 10 minutes at a time is fine!

Types of activity

Aerobic activities
These activities move large muscles in your arms, legs, and hips over and over again. Examples include walking, jogging, bicycling, swimming, and tennis.

Strength-training activities
These activities increase the strength and endurance of your muscles. Examples of strength-training activities include working out with weight machines, free weights, and resistance bands.

Stretching also helps you move more easily and helps prevent injury. Do stretching activities after your muscles are warmed up. Stretching before muscles are warm may cause injury.

How much you need
For adults, aim for the following each week:

- 2 hours and 30 minutes of moderate-intensity aerobic physical activity
- 1 hour and 15 minutes of vigorous-intensity aerobic physical activity
- A combination of moderate and vigorous-intensity aerobic physical activity
- Muscle-strengthening on 2 or more days

Moderate activity increases in your heart rate, but you should still be able to talk easily. Examples include walking briskly on a flat road, biking slowly, or cleaning.

Vigorous activity increases your heart rate a lot more and you are breathing hard enough that it is hard to carry on a conversation. Examples include jogging or bicycling uphill.

Ideas to get you moving

- Join a hiking or running club.
- Go dancing with your partner or friends.
- When it is cold outside, join an indoor fitness class or get a workout video.
- If you can’t set aside one block of time, do short activities throughout the day, such as three 10-minute walks.
- Try parking your car farther away from where you are headed.
- Walk or bike to work or the store.
- Use stairs instead of the elevator.
Quitting Tobacco Use

Why tobacco is harmful
Cigarettes, cigars, pipes, and smokeless tobacco all expose the body to toxic chemicals and make it harder for the body to get enough oxygen. The more you use, the greater your risk for:

- High blood pressure
- Blood clots that can lead to a heart attack or stroke
- Cardiovascular disease (CVD) where the blood vessels and arteries of the body get blocked or narrow
- Cancer, including cancer of the lungs, liver, throat, trachea (airway), larynx (voice box), and others
- Diseases such as emphysema or chronic bronchitis that make it hard to breathe and get enough oxygen
- Heart disease and heart attacks
- Type 2 diabetes
- Other problems, including vision loss, bone loss, or problems with pregnancy or reproduction

About E-Cigarettes
E-cigarettes deliver nicotine to the body with a vapor. As a nicotine product, they are addictive. The vapor also has propylene glycol and glycerol, chemicals known to cause throat and lung irritation. E-cigarettes are not recommended by the U.S. Food and Drug Administration as a quit aid.

Benefits of quitting - If you quit right now...
- Within 20 minutes, your heart rate and blood pressure drop.
- Within 12 hours, the carbon monoxide level in your blood drops to normal.
- Within 3 months, your circulation and lung function improves.
- Within 9 months, you will cough less and breathe easier.
- After 1 year, your risk of heart disease is cut in half.
- After 5 years, your risk of cancer of the mouth, throat, esophagus and bladder are cut in half. Your risk of cervical cancer and stroke return to normal.
- After 10 years, you are half as likely to die from lung cancer.
- After 15 years, your risk of coronary heart disease is the same as a non-smoker’s.

Resources

Quit Lines:
- Ohio Tobacco Quit Line, 1-800-QUIT-NOW (784-8669)
- Quit for Life program from the American Cancer Society, 1-800-227-2345
- American Lung Association, 1-800-586-4872
- BeTobaccoFree.gov Smoking Quit Line 1-877-448-7848

Ohio State Clinics:
- Ross Heart Hospital Smoking Cessation Clinic, 1-614-293-0932
- The Lung Center, Tobacco Dependence Clinic, 1-614-293-4925

Quitting Tobacco Use Book:
Available from your health care provider at this clinic.

Mobile Apps:
Search your mobile device’s app store for quit smoking apps, such as QuitGuide and QuitSTART.
The 5 steps to quit

1. **Set a quit date.** Pick a date within the next few weeks to quit tobacco. This will give you time to prepare. On your quit day, change your regular routine.

2. **Tell family and friends you plan to quit.** Having support is key to successful quitting. Share with your family and friends how they can help, such as being your “quit buddy” or doing tobacco free activities with you like going to the movies or playing basketball.

3. **Prepare for your quit date.**
   - Cut down on the amount of tobacco products you use now. It will make your quit date easier, such as only smoking half a cigarette at a time.
   - Use sugarless gum, carrots, celery, hard candy, toothpicks, or straws to replace tobacco when you have the urge for something in your mouth.
   - Throw away all tobacco products, matches, lighters, and ashtrays.
   - Clean your home, car, and clothes to remove tobacco odors.
   - Have your dentist clean your teeth to remove tobacco stains.

4. **Talk to your provider or pharmacist.** There are nicotine replacement products, quit aids, support groups, quality websites and mobile apps to help you quit.

5. **Plan a reward system for quitting.** Reward yourself for choosing healthy behaviors that replace tobacco use and meet certain milestones. Set reasonable goals, such as milestones of 1 day, 1 week, 1 month, 3 months and 6 months. Think of small and large rewards that will motivate you. Create a money jar for saved tobacco money.

Withdrawal and cravings

Withdrawal is your body’s way of ending tobacco dependency. The signs are temporary and include things like feeling depressed, problems sleeping, and being irritable.

Talk to your healthcare provider about your symptoms and how best to deal with them. Ask if nicotine replacement products are safe for you to use. Other things that may help:

- Tell your quit buddies that you plan to quit and let them know that you may need to talk, cry, laugh or stay busy to get through withdrawal.
- Get support by talking to friends, family, a counselor, or quit line.
- Drink plenty of water and other fluids to flush nicotine from your body.
- Cut back on caffeine.
- Increase your exercise.

The urge to use tobacco will come and go. There are people, places, things, and situations that may trigger the urge to use tobacco. You won’t be able to avoid all triggers, so it’s important to make a plan for how you will handle them.

Cravings often last 5 to 10 minutes. Make a plan to wait it out or to do an activity to distract yourself. For example, to avoid tobacco when driving a car, keep gum or mints in the car.
Alcohol Use and Abuse

Alcohol use can be another health challenge for women. Even in small amounts, alcohol affects women differently than men. In some ways, heavy drinking is much more risky for women than it is for men.

What’s in a drink
A standard drink is one that contains about 14 grams of pure alcohol, which is found in:

- 12 ounces of beer (5% alcohol content)
- 5 ounces of wine (12% alcohol content)
- 1.5 ounces or a “shot” of distilled spirits (40% alcohol content)

One type of drink is not safer than another. One 12-ounce beer has about the same amount of alcohol as one 5-ounce glass of wine, or 1.5-ounce shot of liquor. It is the amount of alcohol a person drinks that affects them, not the type of drink.

Who should not drink at all
- Anyone under age 21
- People of any age who are unable to restrict their drinking to moderate levels
- Women who may become pregnant or who are pregnant
- People who plan to drive, operate machinery, or take part in other activities that require attention, skill, or coordination
- People taking prescription or over-the-counter medications that can interact with alcohol

How much is too much
People who choose to drink should do it in moderation. For women, this means having up to 1 drink per day. Drinking too much includes binge drinking and heavy drinking. Heavy drinking for women is having 8 drinks or more per week and binge drinking is having 4 or more drinks within about 2 hours.

Drinking alcohol puts a woman at risk for making risky decisions, like not using birth control, or having many partners.

In terms of your health, alcohol puts you at risk for:
- Certain cancers, stroke, and liver diseases
- Heart disease
- Memory loss and brain damage
- Damage to a developing fetus if pregnant
- Motor-vehicle crashes, violence, and other injuries.
- Coma and death when drinking fast and in large amounts.

When drinking is a problem
Drinking is a problem if it causes trouble in your relationships, in school, in social activities, or in how you think and feel. If you think either you or someone you know might have a drinking problem, talk to your healthcare provider about getting help.
Diabetes

Diabetes is a disease in which your blood glucose, or blood sugar, levels are too high. Glucose comes from the foods you eat. Insulin is a hormone that helps the glucose get into your cells to give them energy. Without enough insulin, the glucose stays in your blood. Over time, having too much glucose in your blood can damage your body and cause serious health problems.

Types of diabetes

- **Type 1 diabetes**: The body does not make insulin.
- **Type 2 diabetes**: The body does not make enough insulin or is not able to use the insulin it makes.
- **Prediabetes**: Blood glucose is higher than normal but not high enough to be called diabetes. This puts you at a higher risk of getting type 2 diabetes.
- **Gestational diabetes**: Diabetes in pregnancy. For most women, their blood sugar returns to normal after the baby is born. They are at higher risk for having type 2 diabetes later in life.

Warning signs

Everyone responds differently to diabetes. Some of the common warning signs are:

- Having to go to the bathroom often to pass urine
- Feeling thirsty, even though you are drinking fluids
- Losing weight
- Blurry vision
- Healing is slow for cuts or scrapes on your skin
- Feeling tired
- Feeling hungry
- Being irritable or grumpy

Often people do not notice any signs.

Testing and prevention

Your healthcare provider will test you for diabetes if you have symptoms, are at high risk for developing it, or are pregnant. There are different types of blood tests they may do.

You can take steps to prevent or delay type 2 diabetes, which is the most common type:

- Lose weight. Losing just 5 to 10 percent of your body weight can reduce your diabetes risk.
- Eat a healthy diet that is low in fat and calories.
- Increase your physical activity. Exercise most days of the week, such as walking briskly for 30 minutes, 5 days a week.

Treating diabetes

Diabetes can be managed. The goal is to keep your glucose level as close to normal as possible. This may include:

- Meal planning
- Testing glucose levels
- Learning the signs of low or high blood sugar levels
- Exercising regularly
- Taking medicine: insulin or pills
- Regular visits with your healthcare team
- Attending diabetes classes
Osteoporosis

About osteoporosis
Osteoporosis, or porous bone, is a disease from the loss of bone mass and bone tissue. People may not know that they have osteoporosis until their bones become so weak that a sudden strain, bump, or fall causes a bone fracture. Osteoporosis usually occurs after menopause.
Fractures from osteoporosis may cause back or other bone pain, loss of height, or spinal deformities, such as hump in the spine, and a stooped posture.
If you have one or more of the following, you may be at greater risk for osteoporosis:

- Are small and thin
- Have a family history of osteoporosis
- Take certain medicines, like corticosteroids
- Are a white or Asian woman
- Have osteopenia (low bone density)
- Reached menopause before age 45
- Are a smoker
- A heavy alcohol drinker
- Have had an eating disorder, such as anorexia
- Have low calcium in your diet or a vitamin D deficiency
- Are over age 50

Preventing osteoporosis
Building strong bones may be the best defense against developing osteoporosis. A healthy lifestyle is the best way to have strong bones to help prevent osteoporosis.

- Eat a balanced diet rich in calcium.
- Exercise regularly, especially weight-bearing activities such as walking, jogging, and dancing.
- Limit alcohol intake.
- Do not smoke or use tobacco products.
- Talk to your healthcare provider about estrogen replacement therapy if you went through menopause at an early age or have had your ovaries removed.
- Talk to your healthcare provider about taking calcium and vitamin D supplements.

Your healthcare provider may use several tests to check for osteoporosis, such as a bone density screening, or densitometry, to measure bone mass in places around your body.

Although there is no cure for osteoporosis, there are treatments available to stop further bone loss and fractures. Talk to your healthcare provider about treatment options.
Urinary Incontinence

About urinary incontinence
Urinary incontinence means losing control of urine passing from the bladder. This is common in women and can occur because of problems with the muscles that help to hold or release urine flow. Incontinence can be caused by pregnancy and childbirth, menopause, aging, stroke, or other health problems.

Some women may lose a few drops of urine when they cough or laugh. Others may feel a sudden urge to urinate and cannot control it.

Urinary incontinence can be embarrassing, upsetting and get in the way of doing activities. Fortunately, it can often be treated. There are many treatment options depending on the cause, such as doing exercises, medicine, or surgery.

Treatment options
If you are having problems with urine leakage, talk to your healthcare provider about testing and treatment. Some options include:

• Kegel exercises - Also known as pelvic floor exercises, these strengthen the muscles that control urine flow.
• Electrical stimulation - A small non-painful electric pulse is used to help calm the nerves and muscles of the bladder.
• Biofeedback - You learn to control the muscles of your bladder based on measurements from devices.
• Medicines - Various medicines are used to treat this. Talk to your provider about their risks and benefits.
• Behavior modification - You change behaviors that may make the urine leakage more of a problem.
• Pessary - A ring that is put into the vagina that puts pressure on the opening of the bladder. The pressure helps control urine leaks.
• Implant - The tissues around the bladder opening are injected with a substance that surround the opening to the bladder.
• Surgery - If other treatments have not worked, surgery may be an option. The type of surgery can vary.

Types

Stress Incontinence
Urine leaks after a cough, laugh, sneeze, or other physical activity because the muscles that control the flow of urine are weak. This is the most common form.

Urge Incontinence
The bladder contracts and releases urine when it is not supposed to and leaking occurs. This happens when there is a sudden feeling or need to urinate. This can happen during sleep, after drinking water, or when you touch water or hear it running.

Mixed Incontinence
This is when a person has both stress and urge incontinence.

Overflow Incontinence
This happens when a woman is not able to empty her bladder well. The bladder gets full and overflows to cause urine to leak.
Domestic violence is a pattern of threatening or controlling behavior by an intimate partner without regard for your rights, feelings, body, or health. Domestic violence or abuse can happen to anyone regardless of race, age, sexual orientation, gender, religion, education, or income. There are many types of abuse. Here are some examples.

**Types of Abuse**

**Physical Abuse**
Using physical force that causes or could cause harm, such as:
- Hitting, slapping, punching, biting, and choking.
- Harming your children.
- Stopping you from getting medical help.
- Not letting you eat or sleep.

**Emotional Abuse**
Exerting control over a person through such things as:
- Calling you names, insulting, or criticizing.
- Refusing to trust you or being possessive.
- Isolating you from friends and family.
- Demanding to always know where you are.
- Humiliating you in anyway.
- Threatening to hurt you, the children, or family pets.
- Trying to control how you look.
- Saying you will never find anyone better.

**Sexual Abuse and Coercion**
Using sex as a way to control you, such as:
- Forcing you to dress in a sexual way.
- Forcing you into having sex or performing sexual acts.
- Holding you down during sex.
- Demanding sex when you’re sick, tired, or after hurting you.
- Involving other people in sexual activities with you against your will.
- Forcing you to watch pornography.
- Making you feel like you owe them, like if they spent money on you.

**Reproductive Coercion**
Taking away your ability to control your own reproductive system, such as:
- Refusing to use birth control.
- Forcing you to not use birth control.
- Forcing you to get an abortion, or preventing you from getting one.
- Withholding money needed to purchase birth control.

**Financial Abuse**
Extending power and control into the area of money, such as:
- Giving an allowance and closely watching how you spend it.
- Placing your paycheck in their bank account and denying you access to it.
- Maxing out credit cards in your name or not paying the bills to ruin your credit.
- Stealing money from you or your family members.
Digital Abuse
Using technology to bully, harass, stalk, or intimidate you, such as:

- Telling you who you can or cannot be friends with on Facebook and other social media apps.
- Sending you insulting or threatening emails, texts, or other messages online.
- Sending you unwanted, explicit pictures and demanding you send some in return.
- Looking through your phone often to check your texts, photos, and calls.
- Constantly texting you and expecting responses right away.

Have a safety plan
A safety plan can help you and your children get out of a violent situation quickly. You can take these steps ahead of time.

- **Pack a suitcase:** Keep a change of clothing for you and your children, bathroom items, and an extra set of keys to the house and car with a friend or neighbor.
- **Keep special items in a safe place:** Have important items handy, so you can take them with you on short notice. These include prescription medicines, identification, extra cash, checkbook, and credit cards. Also include medical and financial records, such as mortgage documents or rent receipts.
- **Talk to your children:** Let them know that it is not their role to try to stop the fighting. Tell them to call the police or get help from a family member, friend, or neighbor.
- **Know exactly where you will go:** Regardless of the time of day or night, know a friend’s or relative’s home or a shelter for battered women where you can go.

- **If you are hurt:** Call your healthcare provider or go the emergency room.
- **Be ready to call for help:** Call the police. Domestic violence is a crime.
- **Have a safe way to call for support:** If you don’t have a safe way to reach out for support, find a trusted person who will let you use their phone or get a secret phone that your abuser doesn’t have access to. There are programs that provide free phones for this reason. Know where community phones are located that you can use.

Visit [www.thehotline.org](http://www.thehotline.org) for more ideas.

Resources
If you think you or someone you know is being abused:

- Talk to your healthcare provider, social worker, counselor, close friend, or a family member.
- Call a helpline:
  - **The National Domestic Violence Hotline**
    24-hour, toll free
    800-799-SAFE (7233)  800-787-3224 (TDD)
  - **CHOICES**
    24 hours per day
    614-224-4663
    [choicescolumbus.org](http://choicescolumbus.org)
  - **The Center for Family Safety and Healing**
    614-722-8200

Visit [www.thehotline.org](http://www.thehotline.org) for more ideas.
Depression

When is it depression
Depression is a serious medical illness that can cause changes in your mood, thinking, and behavior. It may occur only once, or it may come back again.

Everyone feels “depressed” at times, and this is normal. When depressed feelings occur each day and last for more than two weeks, interfere with your ability to go to school or work, or affect your self-esteem, then it is time to seek help.

Treatment options
Depression is treated with psychotherapy (counseling), medicines, called anti-depressants, or both.

- **Anti-depressants**: Anti-depressants work by restoring the chemical balance in the brain. There are many different medications to treat depression. What works for one person may not work for another.

- **Psychotherapy**: Counseling helps you understand yourself better and learn ways to cope. Trained professionals that do this type of therapy include psychologists, social workers, mental health clinical nurse specialists, and pastoral counselors.

Tips to tackle stress
Stress is a normal part of life, but feeling ongoing stress can impact your health in different ways.

**A few ways to help reduce everyday stress:**
- **Take a walk.** Being active naturally makes your body release hormones that improve your mood.
- **Breathe.** Take 5 minutes to stop what you are doing and breathe deeply, focusing on your breaths.
- **Slow down.** Focus on what you are doing at the moment, not what you need to do later, tomorrow, or next week.
- **Call a friend.** Talking about what is worrying you with another person can help you feel a sense of relief.
- **Laugh.** Watch a funny movie or comic show, or talk to someone who always makes you laugh.

Know the signs
Use this list to check if you have these signs of depression:
- Feel sad, irritable, or empty
- Loss of interest or pleasure in activities
- Change in appetite, or weight loss or gain
- Unable to sleep or sleeping too much
- Moving more slowly or quickly than usual
- Tired or loss of energy
- Feel worthless or guilty
- Have trouble thinking, remembering, or making decisions
- Thoughts of death or suicide

If you have five or more of these signs or have thoughts of harming yourself or others, seek help right away.

Get help
- **National Suicide Lifeline**
  1-800-273- TALK (8255)
- **Franklin County Hotline**
  614-221-5445
- **Crisis Text Line**
  Text “4HOPE” to 741-741
Notes