

A guide to **Women's Health Care**



Courtesy of

Assemblymember

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Dear Friend,

Women face unique health risks. One of the best things you can do to take care of yourself is to learn about symptoms and preventive measures for some of the most prevalent health issues affecting women.

This pamphlet contains resources to help inform you, but should not be seen as a replacement for professional care or advice. For complete information, see your doctor. If I can be of assistance in this or any other matter, please call my office.

Sincerely,

Linda B. Rosenthal
Member of Assembly



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Women and heart disease



Many people are surprised to learn that coronary heart disease – not cancer – is the number one killer of American women. To decrease your risk of heart disease, the American Heart Association recommends that you:

■ Don't smoke

Smoking is a major cause of heart disease in women. Even long-term exposure to secondhand smoke can increase the risk of heart problems.

■ Control high blood pressure

High blood pressure is a major cause of heart disease and increases the risk of stroke, even though there may be no warning signs. Have your blood pressure checked regularly.

■ Control high cholesterol

High cholesterol can lead to arteriosclerosis, or hardening of the arteries, increasing the risk of heart disease and heart attack. Check with your health practitioner about the right cholesterol reading for you.

■ Get physical

Women who are physically inactive are more likely to develop heart disease than those who are physically active.

You can contact the American Heart Association at 800-242-8721 or visit www.nhlbi.nih.gov, the National Heart, Lung, and Blood Institute website.

HIV/AIDS: Know the facts!

In New York State, thousands of women live with HIV/AIDS – Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome. AIDS is the last stage of HIV.

HIV/AIDS is spread when bodily fluids, including blood, semen, vaginal secretions and breast milk, from a person with HIV get into another person's bloodstream. HIV is passed during unprotected sex, needle-sharing or from an infected mother to her baby during pregnancy, birth or breast-feeding.

The risk of mother-to-child transmission is low when women with HIV receive medication during pregnancy and childbirth, and, in some instances, have a scheduled caesarean

delivery. Infected women cannot breast-feed because HIV can spread through breast milk.

Recent medical advances show combination therapy – taking two or more drugs to fight HIV – can delay the onset of AIDS in people who are infected with HIV.

**For more information,
call New York's toll-free HIV/AIDS
Information Service at
800-541-2437.**



Postpartum depression



Having a baby can be a joyful experience, but it can also bring on a host of new feelings. It's very common for new mothers to experience the "baby blues," which is characterized by mood swings, anxiety, difficulty sleeping and crying spells. However, if these symptoms persist for more than a few weeks, the mother may be suffering from postpartum depression. Symptoms of postpartum depression are more severe and, in addition to the symptoms of "baby blues," include a loss of interest in activities and family, loss of appetite, intense irritability and thoughts of harming oneself or one's child.

Mothers who experience symptoms after two weeks are encouraged to seek help from their doctor or midwife. Postpartum depression can impact the mother-baby bond and therefore have long-term effects on the child as well as the parents.

Even more severe, but much less common, is postpartum psychosis, which is characterized by hallucinations, paranoia and obsessive thinking about one's child. If you or someone you know may be suffering from symptoms of postpartum psychosis, seek treatment immediately.

Experts are not exactly sure of the causes of postpartum depression, but they speculate that physical and emotional changes associated with pregnancy and childbirth play a role. Mothers who suffered from depression before pregnancy, have a child with health problems or have existing challenges, such as financial difficulties or an unsupportive spouse or family members, are at greater risk for postpartum depression. Treatment usually involves medication, psychotherapy or both. Partners, friends and family can be a great help by providing

support, encouraging the mother to care for herself and offering to help with the added burdens of caring for a child.

And remember, you are not alone. Seeking help is the best way to tackle postpartum depression and keep you and your baby healthy and safe.



For more information, contact the Postpartum Resource Center of New York at 855-631-0001 or visit www.postpartumny.org.

Fighting breast cancer with early detection

According to the state Department of Health, breast cancer is one of the most common cancers among women in New York State. Approximately 15,000 women are diagnosed with breast cancer and nearly 3,000 die from the disease in New York State each year. Men also get breast cancer, but it is relatively rare. About 150 men are diagnosed with breast cancer each year. Although it can strike at any age, more than three-quarters of women who get breast cancer are over the age of 50. The earlier breast cancer is found, the better the chances that treatment will work. That's why the most effective weapon against breast cancer is early detection.

More information is available from your physician or by calling the Cancer Information Service at the National Cancer Institute at 800-422-6237.

Early stage breast cancer usually doesn't cause symptoms, but as a tumor grows, symptoms of breast cancer may include:

- a lump or mass that is painless, hard and has uneven edges
- swelling of breast or underarm lymph nodes
- skin irritation, dimpling, breast pain
- nipple pain, discharge other than breast milk, nipple turning inward
- redness, scaliness or thickening of the nipple or breast skin

Mammography screening, breast self-examination and examination by your health care provider improve the chances that breast cancer will be diagnosed early. State law now requires health insurance companies to cover mammograms, breast ultrasounds and MRIs at no additional out-of-pocket cost.



It also requires clinics and hospitals to hold extended screening hours. All women should discuss their risk, screening and prevention options with their health care provider.

For more information on free breast cancer, cervical cancer and colorectal cancer screenings, visit www.health.ny.gov/diseases/cancer/services or call the Cancer Services Program at 866-442-2262.

For more information about breast cancer, contact the American Cancer Society at 800-227-2345.



Domestic violence

Domestic violence is the willful intimidation, assault, battery, sexual assault or other abusive behavior perpetrated by an intimate partner against another. One in four women will experience domestic violence in their lifetime. This epidemic affects women in all communities, regardless of age, economic status, race, religion, nationality, sexual orientation or educational background.

Does your partner:

- ▶ Hit, punch, slap, kick, shove or bite you?
- ▶ Threaten to hurt you or your children?
- ▶ Deny you access to family assets such as bank accounts, credit cards or cars?
- ▶ Insult you or call you derogatory names?
- ▶ Prevent you from working or attending school?
- ▶ Keep you isolated from your family and friends?
- ▶ Have sudden outbursts of anger or rage?

If you answered yes to one or more of these questions, you may be among the thousands of women who are abused every day.

For help, call the New York State Domestic and Sexual Violence Hotline at 800-942-6906.

In New York City, call 800-621-HOPE (4673) or dial 311; TTY: 866-604-5350.