

a sign of intelligent life

Mirabella®

SPRING FASHION

FROM SIMPLE TO SUMPTUOUS—
EXPRESS YOURSELF

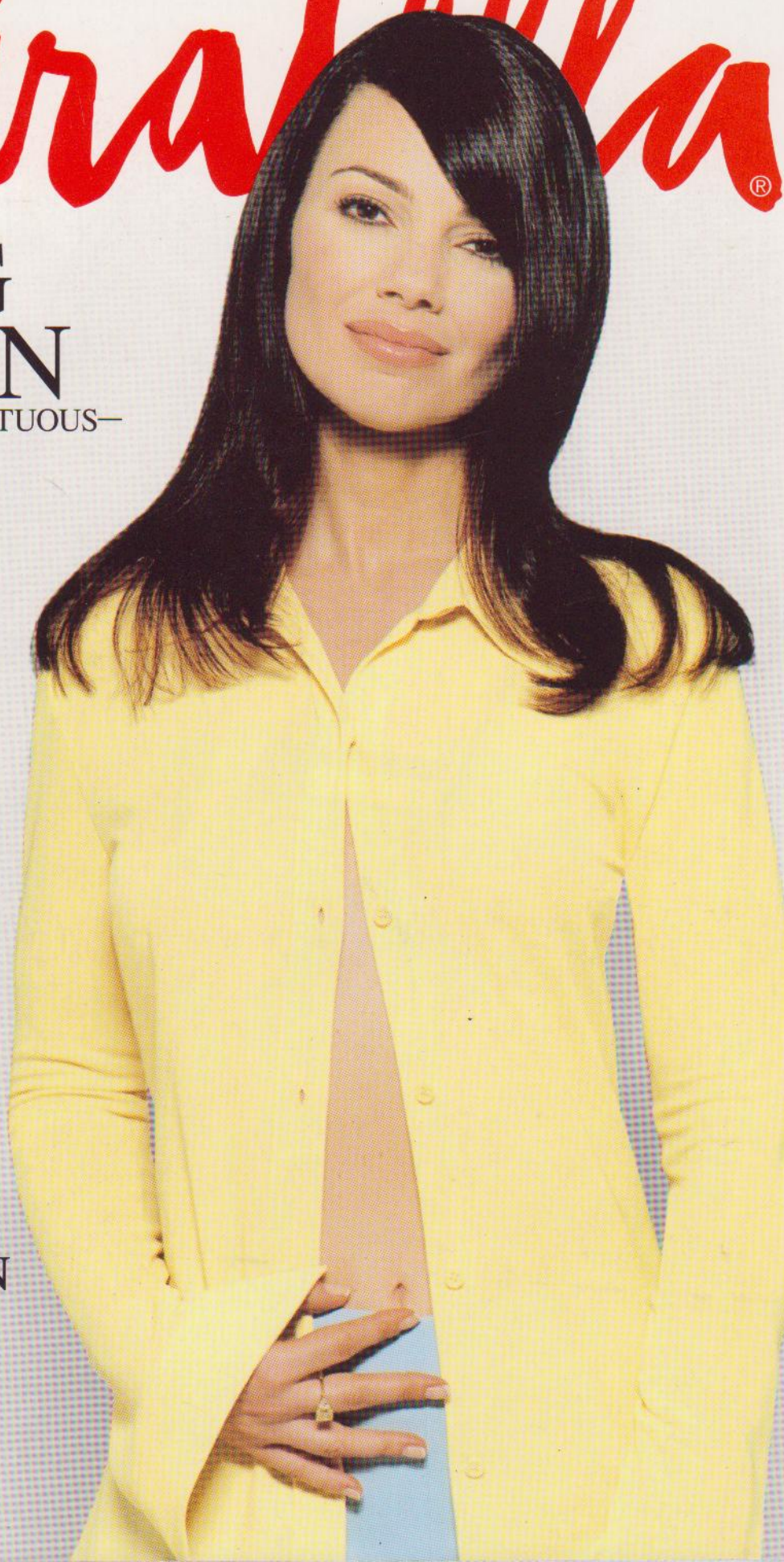
THE TRUTH
ABOUT
FACIALS

FORGIVENESS
A SHRINK'S TALE

**FRAN
DRESCHER**
A HEAD FOR BUSINESS,
A BOD FOR SIN

WHEN TO
CALL A
DOCTOR

THE AFFAIR '96
JANE SMILEY, LYNDA
BARRY, BARBARA
EHRENREICH, JUDITH
THURMAN, PHYLLIS
ROSE, ETC., ETC. ON
SEX, GUILT, FUN



March/April 1996
USA \$3.00
Canada \$3.50
UK £2.50



When To Call

Statistically speaking, Patty Martin was a highly unlikely candidate for a heart attack. She was only forty, thin, and hadn't touched a cigarette in fourteen years. So, until the implausible actually happened one night last spring, Martin says, she never suspected anything was wrong.

"For almost an entire year, I worked seven days a week, twelve hours a day," says Martin. "I built a new home and made all the decisions on that. So I was physically and mentally exhausted."

Throughout the preceding winter, she says, "I noticed I was short of breath a lot, but I shrugged it off," thinking it was a cold or the flu. Then, at eight o'clock in the evening last April 2, Martin began to have sharp pains in her chest. She lay down on her bed, thinking the pain would go away, but it just got worse. After trying to call her mother and sister, she drove herself to the hospital, two miles away. "The pain was so bad I couldn't hold my head up," she recalls. "I thought I was going to die right there."

Martin made it to the hospital, but it was only hours later, when the sedatives wore off, that she realized what had happened. "Even now," she says, "I can't believe I had a heart attack."

Despite centuries of being stereotyped as "the weaker sex"—given to hysterics, hypochondria, and exaggerations of pain—women are proving they can be just as guilty of ignoring significant medical problems as the average macho man. Not so surprisingly, one of the underlying causes of both hypochondria and the determined denial of serious medical symptoms is fear, an emotion endemic to men and women alike.

What if that lump is breast cancer? What if that recurrent headache is a giant brain tumor? The fact that most lumps and headaches aren't cancer—and that most cancers can be treated if caught early enough—doesn't seem to quell the fear.

A second reason for turning a blind eye to significant symptoms may, in fact, be gender-related. Many women "are so preoccupied as caretakers that they often put themselves last—they're more worried about their husband's cholesterol than their own,"

according to Carol Landau, PhD, co-founder of Women's Health Associates of Providence, Rhode Island. Working women with children are particularly vulnerable to what Dr. Landau calls "the selfless syndrome," which she describes as "an extreme version of caretaking" with overtones of clinical depression: These women martyr their health on the altar of responsibility to others.

This is not to say that every unexplainable, intermittent—often meaningless—ache and pain warrants a trip to the doctor. But what about a persistent headache, backache, or cough? The answer is a frustrating maybe. Which is why learning to read your body can help determine whether a common symptom requires professional attention or well-informed self-care. Here, a symptom-by-symptom guide to the countless shocks the flesh is heir to.

Headaches. According to the National Headache Foundation, more than 45 million Americans suffer recurring headaches. As a society, we spend more than \$4 billion a year treating them.

The muscle-contraction—or tension—headache accounts for about 90 percent of all headaches and can strike both sexes frequently but erratically. Typically, the pain is a dull throbbing that radiates from the temples or the base of the skull to the eyes. Most of us pop a couple of aspirin to treat such headaches, but cranial pain accompanied by any of the following conditions merits a doctor's visit: sudden, severe onset; convulsions; fever; mental confusion; vomiting; vision problems; localized head pain; headache following severe head injury; frequent headaches; headaches in someone who's never had them before; headaches that change pattern or character.

The remaining 10 percent of headaches are either vascular (including migraines and cluster headaches) or organically caused (such as by tumors, though these are often accompanied by other neurological problems, like impaired reflexes).

Women make up 70 percent of migraine sufferers. The pain, usually pulsating or throbbing, is often confined to one half of the

Some women have a hot line to their physicians; other women could be dying before they'd pick up the phone. Where's the middle road between hypochondria and neglect?

A Doctor

By Lamar Graham

head (though it may become generalized) and accompanied by a sensitivity to light and images of flashing lights and zigzag lines. Migraines may strike two to four times a month and can last from four to seventy-two hours. Medication and a doctor-prescribed prevention program may help.

Commonly beginning in adulthood, cluster headaches afflict six men for every one woman. The pain, which may be more severe than that of a migraine, is normally located around one eye or temple. Episodes lasting fifteen minutes to four hours can occur every six months to two years, with daily attacks (usually in the evening) for four to eight weeks; some people have episodes that are more frequent but that last only a day or two. A doctor can prescribe pain relief as well as advise lifestyle changes.

Cough. Most often, a cough is the body's effort to expel a foreign substance from the throat or lungs, be it a tiny irritant like dust or pollen, or even a virus or bacteria, says Bruce K. Lowell, MD, a New York internist/geriatrician and author of *Body Signals* (HarperCollins). Such coughs, he says, can often be alleviated with an over-the-counter cough medicine. But a thick, heavy cough that won't go away after a week, recurs off and on over a month or two, or is accompanied by night sweats or weight loss merits attention, says Dr. Lowell.

So does a cough that is brought on by physical activity and produces no phlegm; it may indicate exercise-induced asthma, which occurs most frequently in people in their twenties through forties. The condition can be treated by a variety of drugs.

A dry, all-day, all-night cough may be caused by an irritant or a new allergy. Accompanied by swollen glands and a low-grade fever, however, a constant dry cough could signal an infection (as could coughing up phlegm). A doctor can test for allergies or prescribe an antibiotic for infections.

Smokers or former smokers over fifty who are constantly short of breath and coughing up phlegm should see a doctor to rule out

emphysema. Phlegm flecked with blood could signal anything from a clotting problem to a bleeding ulcer. Coughing up blood demands immediate medical attention, period.

Fatigue. Constant exhaustion is probably the most common medical complaint of premenopausal American women, says Providence psychologist Carol Landau, who's also a clinical professor of psychiatry and human behavior at Brown University. Fatigue can signal a physical ailment, such as chronic fatigue syndrome (CFS), or a psychological problem, like clinical depression.

Look for a logical cause, Dr. Landau suggests. If you have a young child, you may simply be sleep-deprived. Try napping when your child does. If that doesn't help and the fatigue is accompanied by achy joints, it may be CFS. Many doctors diagnose chronic fatigue in women simply as a function of some other ailment. If your physician dismisses your complaints, get a second opinion.

Most commonly, though, Dr. Landau says, long-lasting fatigue in women is linked with clinical depression. About one-third of all American women report being seriously depressed at some point in their adult lives, she says. If a woman experiences a combination of fatigue, sadness, and an inability to concentrate that lasts longer than two weeks, depression is probably to blame. A variety of treatments are available.

Skin abnormalities. By the time a person reaches adulthood, his or her skin is likely to be covered with all kinds of "lesions," including freckles and moles. Debra Price, MD, a clinical assistant professor of dermatology at the University of Miami, recommends monitoring skin spots to identify those that might be basal-cell or squamous-cell carcinomas or melanomas, the most common forms of skin cancer. Basal-cell carcinomas look like shiny or scarlike bumps; sores that don't heal; or persistent red scaly patches. Squamous-cell carcinomas are rough and red. To help the public check for melanomas, the American Academy of Dermatology >

came up with the "ABCD" checklist.

- **Asymmetry.** One half of the mole or spot is unlike the other half, either in shape, color, or texture.
- **Border.** The edges are irregular—jagged or poorly defined.
- **Color.** Freckles and moles are consistent in tone; cancerous spots can be mottled—tan and brown, black, white, red, or blue.
- **Diameter.** The spot is bigger around than a pencil eraser.

If you notice any of these signs, see a doctor immediately.

Because skin cancer is closely associated with sun exposure, people with fair skin and hair are at greatest risk, Dr. Price says, but anyone with a suspicious lesion needs to have it checked.

Vaginal bleeding and/or pelvic pain. "Normal bleeding is having a period every twenty-one to thirty-five days, lasting four to six days," says William H. Parker, MD, chairman of obstetrics/gynecology at the Santa Monica-UCLA Medical Center and author of the upcoming *A Gynecologist's Second Opinion* (Plume).

Irregular bleeding or spotting of any kind is a clear signal to see a doctor, since it is often the only symptom of endometrial cancer, particularly for women over forty. An acute onset of pelvic pain without bleeding—especially when accompanied by vaginal discharge, fever, nausea, or vomiting—also calls for medical attention. Abnormal vaginal bleeding unaccompanied by pain may be triggered by such conditions as uterine polyps (small noncancerous growths that develop on the wall of the uterus and must be removed immediately) and fibroids (relatively large benign tumors in the uterine wall that may also require surgery).

Bleeding and pelvic pain, possibly associated with a feeling of fullness, may indicate ovarian cysts or even a tubal pregnancy. If the pain is cyclical—especially if it precedes the menstrual cycle and ends when bleeding begins—it could be endometriosis, a condition in which menstrual blood and tissue build up abnormally outside the uterus and is associated with backache and pain during or after sex. If left untreated, it can cause infertility.

Chest pain. When a man, even a man in his thirties, complains of chest pain, doctors start ordering tests. But when a woman of the same age describes the same symptoms, she's usually told not to worry, says Nathaniel Reichek, MD, director of the division of cardiology at Allegheny General Hospital in Pittsburgh. The ostensible reason: Estrogen—the sex hormone that women produce abundantly until menopause—has a dramatic effect in protecting against heart disease. After menopause, though, says Dr. Reichek, women start catching up: In fact, by their seventies, heart disease is the number-one killer of women.

Obviously, both men and women would do well to learn to read chest pains. An instantaneous and fleeting pain—like a pinprick—is almost never heart disease, says Dr. Reichek, whereas chest discomfort that feels like a heavy weight or an overpowering tightness is much more likely a sign of an imminent myocardial infarction and requires immediate medical attention. Sharp pains that radiate to the neck, the jaw, or either shoulder are also red flags; chest pain accompanied by shortness of breath, nausea, vomiting, or heavy sweating calls for an ambulance, not a doctor.

Body masses. The human body is an imperfect machine. Sometimes, according to Dr. Lowell, the appearance of a palpable lump in the lower left abdomen for a day or two may mean nothing more than constipation. A lump under the rib cage, however, could mean an enlarged spleen or an enlarged liver. Play it safe: Have any unexplained lump checked by a doctor.

The same is especially true for breast lumps. A spongy lump or cluster of lumps that seems to move around when palpated are probably cysts, little pockets of fluid-filled tissue. Cysts can be painful, particularly in the days before menstruation, but they're often absorbed by the body when the period is over and the body is no longer retaining water.

But don't take chances. *Any* breast lump that persists past a menstrual cycle—whether it feels like a cyst or a firm, well-defined lump that seems to move around under the skin or a small, hard mass that appears suddenly—should be examined by a doctor. If your physician ignores your concerns or recommends a "wait and see" approach for six months, find another doctor. Right away.

Backache. For most people, a stiff back is to be expected after the annual touch-football game, but unexplained back pain ought to

be checked out. In his book, Dr. Lowell outlines some conditions that call for a doctor's visit: sudden, localized spinal pain; back pain accompanied by weakness and a scaly rash; lower-back pain with buttock and leg numbness; upper-back and neck pain with arm numbness; a "ripping" back pain accompanied by sweating and overall weakness.

Tension has also been blamed for many a cranky back, but pain that runs from the hip all the way down to the foot and instantly worsens after a cough or a sneeze may indicate sciatica, or radicular pain, an affliction of the sciatic nerve that

may be relieved by medication, physical therapy, or surgery.

Eye disorders. By middle age, the upper eyelid begins to droop—that's normal. But droopy eyelids that bulge may also signify a thyroid condition that can be treated with medication. The lower eyelid can also lose elasticity and pull away from the eye, leaving the cornea at risk for damage and infection. This condition requires medical attention not only because it can be surgically corrected but because a doctor can determine whether a disease such as lupus erythematosus may be the underlying cause.

Achy, red eyes are something most of us chalk up to overwork and lack of sleep, enduring the mild discomfort with the help of eye drops and an extra hour in bed. But generalized eye pain or a change in vision that lasts longer than a day and is accompanied by a headache and a swelling of the temples should be checked.

Reading medical symptoms, Dr. Lowell emphasizes, is not self-diagnosis. Rather, it's understanding the pattern of your symptomology so that the decision to call a doctor is governed not by fear and anguish but by rational and responsible thinking. □

Lamar Graham, a New York-based writer, has written about health for publications such as Men's Journal, GQ, and Self.

Some women can
lapse into "the
selfless syndrome."
They're more
worried about their
husband's
cholesterol than
their own.