

THE JEAN HAILES NATIONAL MAGAZINE

WINTER
2005

The
JEAN HAILES
Foundation
Creating healthier futures for women

For further information
please contact:

The Jean Hailes Foundation
173 Carinish Road, Clayton Vic 3168
PO Box 1108, Clayton South Vic 3169
Telephone: 03 9562 6771
Tollfree: 1800 151 441

The Jean Hailes Medical Centre for Women
Telephone: 03 9562 7555
Facsimile: 03 9562 7477

The Jean Hailes Education Unit
Telephone: 03 9562 6771
Facsimile: 03 9548 9120
email:education@jeanhailes.org.au

The Jean Hailes Research Unit
Telephone: 03 9543 9612
Facsimile: 03 9543 9609
email:research@jeanhailes.org.au

Media Enquiries
Janet Michelmore
Telephone: 0411 115 456

www.jeanhailes.org.au

Privacy Statement

Due to recent changes in Australian privacy laws your permission is required for The Jean Hailes Foundation to continue sending you information about our activities. You will continue to receive information unless you indicate otherwise. If you wish to be removed from our mailing list, or would like to make changes or additions to your contact details, please contact us on 03 9562 6771 (1800 151 441 tollfree).

THE JEAN HAILES FOUNDATION NATIONAL MAGAZINE IS DESIGNED TO BE INFORMATIVE AND EDUCATIONAL. IT IS NOT INTENDED THAT THE JEAN HAILES FOUNDATION NATIONAL MAGAZINE PROVIDE SPECIFIC MEDICAL ADVICE OR REPLACE ADVICE FROM YOUR HEALTH PROFESSIONAL. THE JEAN HAILES FOUNDATION DOES NOT ACCEPT ANY LIABILITY TO ANY PERSON FOR THE INFORMATION OR ADVICE (OR THE USE OF INFORMATION OR ADVICE) WHICH IS PROVIDED IN THIS NATIONAL MAGAZINE OR INCORPORATED INTO IT BY REFERENCE. INFORMATION IS PROVIDED ON THE BASIS THAT ALL PERSONS READING THE NATIONAL MAGAZINE UNDERTAKE RESPONSIBILITY FOR ASSESSING THE RELEVANCE AND ACCURACY OF ITS CONTENT.

© THE JEAN HAILES FOUNDATION. APART FROM FAIR DEALING FOR THE PURPOSES OF PRIVATE STUDY, RESEARCH, CRITICISM OR REVIEW, AS PERMITTED UNDER COPYRIGHT LEGISLATION, NO PART MAY BE REPRODUCED OR REUSED FOR ANY COMMERCIAL PURPOSES.

DESIGN: JANE KLEIMEYER DESIGN 03 9421 2428

**YOGA FOR MIND -
BODY BALANCE**

**WHAT YOU SHOULD
KNOW ABOUT
PROLAPSE**

**NUTRITIONAL
LABELLING: WHAT
DOES IT MEAN?**



The Jean Hailes Foundation gratefully acknowledges the support of the Australian Department of Health and Ageing

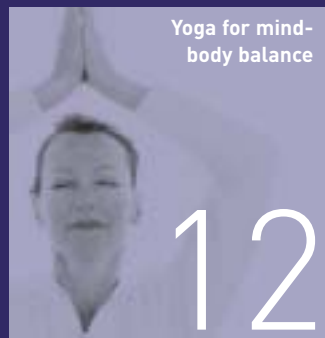
News

- 2 Growth and diversity in research at The Jean Hailes Foundation:
- 3 What You Should Know About Prolapse
- 6 Nutrition Labelling: what does it mean?
- 11 The nutritional value of sardines
Recipe: Sardines with Tomatoes and Beans
- 12 Yoga for Mind-Body Balance
- 14 Events and Resources
- 15 Farewell to Professor Davis and Team
- 16 Partnerships: making a difference to women's health worldwide



3

What you should know about prolapse



Yoga for mind-body balance

12

Fat	- Total
	- Saturated fat
Carbohydrate	- total
	-sugar
Dietary Fibre	

Nutritional labelling: what does it mean?

6



Recipe: Sardines with tomatoes and beans

11

The Jean Hailes National Magazine
Editor: Aleeza Zohar
Queries: tollfree 1800 151 441

Dear Friend of Jean Hailes

2005 is proving to be a year of diversity and growth for The Jean Hailes Foundation.



1

Here at Jean Hailes we are at the forefront of medical research into women's health. So it is with great pleasure we welcome endocrinologist Dr Helena Teede to lead our research team of talented scientists and health professionals.

With Helena's appointment there will be the opportunity to diversify and attract skilled researchers and support junior researchers and research students. Already we have a number of PhD students enrolled under Dr Teede's supervision with backgrounds in endocrinology, dietetics, psychology and complementary therapies.

Collaboration between research, education and medical care will remain vital with a new focus on GP involvement in research and education.

Helena Teede has been actively involved in all three arms of the Foundation for a number of years. She has conducted various ongoing research projects, such as polycystic ovarian syndrome, diabetes, prevention of heart disease, prevention of osteoporosis, hormone therapy and complementary therapies for the treatment of menopause symptoms. She has worked with women in the medical centre and she has actively been involved in designing and delivering education programs in metropolitan and rural areas across Australia.

She is passionate about her research and clinical work, and is equally passionate about ensuring that research results are translated into medical practice and education for women and health professionals.

The next phase of research, education and medical care at Jean Hailes will be richer with Helena at the helm of research. In particular, her ability to explore all options, think outside the square to come up with innovative solutions, and her inclusive approach together with her sheer energy are professional and personality traits that will take The Jean Hailes Foundation into the future

Dr Teede holds several distinguished positions, including Director of Diabetes (as a clinical endocrinologist) at Southern Health. She is also an undergraduate lecturer in medicine at Monash University and an accredited supervisor and examiner in advanced training for the Royal Australasian College of Physicians. Her new role will see her combine the strengths of Southern Health and The Jean Hailes Foundation to broaden and strengthen research into women's health issues.

Dr Teede follows on from Professor Susan Davis in an expanded collaborative research role. Professor Davis, together with her research team, has relocated the Centre of Clinical Research Excellence (CCRE) to the Alfred Hospital Campus of Monash University. Susan Davis has made an invaluable contribution to the establishment and development of the Jean Hailes Research Unit and we wish her and her team well in their new location.

New directions at Jean Hailes will work to meet the current challenges of our ageing population. With midlife being the springboard for the later stage of life we remain committed to encouraging and supporting multidisciplinary research in women's health, translating this into best practice in caring for women and ensuring that health information is constantly updated and accessible for all Australian women.

Best wishes,

Janet Michelmore

Janet Michelmore AO
Director

Growth and diversity in research at The Jean Hailes Foundation:

what it will mean for women across Australia



Helena Teede

The Jean Hailes Foundation is entering an exciting new era of clinical and health services research led by new director, Dr Helena Teede.

Given Australia's high life expectancy and a worldwide trend towards ageing populations, women can now expect to live half their adult life postmenopause. Many of the health issues affecting women at midlife and beyond can be prevented, reduced or postponed through preventative health education and information, particularly through nutrition and lifestyle modifications, and through early detection and intervention.

The Jean Hailes Foundation is committed to preventing ill health in women and supporting both women and their health professionals in taking an active role in their own health and wellbeing as they age.

The Jean Hailes Research Unit will:

- **diversify** its research interests
- **expand** collaborative research
- **conduct** clinically significant research that will tackle the gaps that currently exist in research literature

Primary areas of research interest

Research undertaken at The Jean Hailes Foundation is driven by women's own medical needs and the prominent gaps that currently exist in both national and international research literature. The Research Unit will be working to find direct answers to the clinical questions/issues raised by women across Australia.

Current gaps to be researched at Jean Hailes:

Options for dealing with hormonal changes in midlife women

- * The effects of herbs on menopausal symptoms
- * Yoga: physical and psychological benefits in midlife women
- * How to create sustainable lifestyle programs

Hormones and the cardiovascular system

- Polycystic ovarian syndrome
- Diabetes in pregnancy
- Metabolic syndrome
- Type 2 diabetes
- Sex steroid effects and the cardiovascular system
- Androgens
- Oestrogens and progestins
- Phytoestrogens and the cardiovascular system
- Mechanisms of cardiovascular disease and identifying early therapeutic targets

Healthy ageing and health services research: women & health professionals

Research at Jean Hailes will focus on a dual approach in health services research and healthy ageing.

Healthy ageing will take on a community approach: for example *'how to do the things we know we should be doing'* to prevent ill health, such as osteoporosis, diabetes, heart disease and obesity, as well as looking after our emotional wellbeing.

Health services research will take on a health professional and health care systems approach: for example *'how to provide better and more efficient services'* and *'how to improve the care and management of medical conditions'*.

This dual approach (educating and informing women alongside their health professionals) will allow us to find ways to make cultural and behavioural changes in health care in order to achieve health outcomes based on what we know through research and implementation.

Educational research will help us bridge what we learn from important advances in the prevention of disease so that we effectively communicate these findings to the community and into clinical practice.

A key way of doing this is through our national profile, using our interface with women across Australia, through various communities, health professionals and the media to address women's health issues head on.

We believe that keeping in touch with women, their families and their health practitioners is essential if we are to be successful in improving the health and wellbeing of women.

What You Should Know About Prolapse

By physiotherapist Janetta Webb and gynaecologist Dr Elizabeth Farrell

While many women may have heard of prolapse, some of us may not understand what it is, how to recognise it and what you can do to prevent prolapse.

What is prolapse?

Prolapse is caused by a stretching of the ligaments that support the pelvic organs, causing those organs to stretch and 'drop down'. The word prolapse literally means 'to fall out of place'.

What causes prolapse?

The walls of the vagina, which may have been overstretched by childbirth, can bulge downwards towards the vaginal entrance. This is known as vaginal prolapse. The bulging can either be the front vaginal wall with the bladder in front of it or the back vaginal wall with the rectum immediately behind. In some women the cervix and uterus also prolapse down towards the vaginal entrance. This is known as uterine prolapse.

Vaginal and uterine prolapse are more likely to occur after menopause, when the vaginal and supporting tissues lose elasticity, but can also occur before. The loss of muscle tone strength and coordination, which are associated with normal ageing and a reduction in the female hormone oestrogen, are also thought to play an important role in the development of prolapse.

Prolapse can also occur in some postmenopausal women who have not had children because of a loss of elasticity in their tissues. Other causes can be chronic coughing or lung disease, regular straining with constipation, heavy lifting or being overweight.

Prolapse can also be caused by a pelvic tumor, for example an enlarged uterus containing fibroids, however, this is quite rare.

How does prolapse differ from incontinence?

Incontinence is unwanted leakage of urine or faeces. Poor muscle tone in the pelvic floor can result in bladder and/or bowel problems. As well as leakage, associated urinary problems include frequency (wanting to go to the toilet often) and urgency (a sudden urge to go to the toilet).

Some women may experience both prolapse and incontinence.



What are the symptoms of prolapse?

- The presence of a lump at the vaginal entrance *"It feels like a golf/tennis ball"*.
- Dragging feeling or pain in the lower abdomen and lower back.
- Stress incontinence – leakage of urine (or bowel contents) with coughing, sneezing or changing position.
- Incomplete emptying of either bladder or bowel.
- Having to manually aid opening of bowels by putting pressure on the vaginal wall.
- Discomfort with intercourse.
- Inability to hold in a tampon during menstruation and for many women, symptoms worsen pre-menstrually.

Who is at risk?

As mentioned women who are postmenopausal, have given birth vaginally, have a chronic cough or lung disease, strain with constipation, lift heavy objects or who are overweight are all at risk.

Research has also shown that women who are hyper flexible (have an unusually high level of flexibility) are more at risk of prolapse.

Also, women whose mothers or sisters have a history of prolapse may be more at risk due to inheriting a weaker type of supportive tissue.

How is prolapse diagnosed?

Prolapse is diagnosed by symptoms and a vaginal examination performed by your doctor.

What can I do?

Without intervention the symptoms of prolapse usually worsen over time. The good news is that there is much that we can do ourselves, or with the help of a physiotherapist, to strengthen our pelvic floor.

Before a prolapse occurs, there may be slight slackening in the walls of the vagina, so awareness and prevention are vital in preventing further weaknesses.

4

What You Should Know About Prolapse

Janetta Webb



Liz Farrell



Prevention

- Always aim to keep your weight in the ideal range for you height, regardless of other health issues you may have.
- NEVER strain to empty your bowels - always take your time!
- One incidence of straining can be enough to cause prolapse. Always aim to keep your bowel actions soft. You may need to add some extra fibre into your diet, increase your water intake and do some general physical activity, such as walking, every day.
- If you have respiratory problems, use your preventer and treatments to limit coughing and sneezing episodes.
- Always avoid heavy lifting at home and at work. That one move of the freezer or repetitive lifting of young grandchildren may be enough to cause problems.
- It shouldn't be necessary to strain to empty your bladder and don't 'hover' over public toilets. Sit down!
- Be aware if you know that you have an unusually high degree of flexibility or if you have a mother or sister who has had a prolapse.
- Choose low impact forms of physical activity such as power walking or dancing rather than running. Chose the 'low impact' classes at your gym.

- If you need to stand for long periods of time, use breaks to sit down whenever possible to partially relieve the pressure of gravity. Women who have a prolapse are advised to lie down for up to 30 minutes in the middle of the day. Lying down eliminates gravity.

How can physiotherapy help?

Physiotherapy aims to strengthen and improve coordination of the pelvic floor muscles. These muscles provide support to the pelvic organs from below. Pelvic organs include the uterus, bladder and bowel.

Your muscles will be individually assessed and a program worked out for you. This can be helpful if you have tried pelvic floor exercises in the past with little success, or if you cannot successfully work your muscles when you try to. Treatment may also involve equipment, such as biofeedback or muscle stimulation, that a physiotherapist may use to help you to learn how to effectively work and strengthen you muscles.

Believe it or not, most of us don't go to the toilet in the most effective way. A physiotherapist will teach you the correct positioning and muscle coordination so you don't ever have to strain again.

You can learn how to modify your daily activities to complement your pelvic floor exercise program and also how to strengthen other core stabilisers, such as abdominal muscles.

5

Hot tips

- It is important to do your pelvic floor exercises, even if you have no symptoms.
- Make pelvic floor exercises a lifelong habit.
- Always contract your muscles well. It's not that easy to do pelvic floor exercises at traffic lights. You really need to concentrate more than that!
- Contract your muscles when you cough, sneeze, laugh, lift or blow your nose to ensure good support to pelvic organs and good bladder control.
- Muscle strengthening can take months...persevere and seek help if needed.

Treatment options

Treatment will depend on the severity of the prolapse and the degree that it interferes with a woman's lifestyle. In some women strengthening pelvic floor and modifying daily activities (see tips for prevention) may be all that is required. Some women may benefit from a personalised physiotherapy program, or by using a

pessary to hold the prolapse up in place. A pessary is a rubber-like ring, which is fitted into the vagina, holding up the vaginal walls and lessening the symptoms. It is sometimes used as a temporary measure before prolapse surgery but in elderly women may be used as a long-term treatment.

How to strengthen your pelvic floor

- start by lying down or sitting comfortably in a chair.
- tighten the muscles around the anus, vagina and urethra all at once and try to lift them up inside.
- Try to hold this while you slowly count to five then let go.
- Rest while you count to five then try again.
- If you can't feel anything happening at all, you may need help from a physiotherapist to learn how to work your muscles effectively.
- If you can hold for a little longer, do so. Gradually build up until you can hold for 10 counts and rest for 10 in between.
- Do as many as you can up to 10.
- Then rest for a minute or two.

- Now do some really strong squeezes...as strong as you can, then let go. Do as many of these as you can up to about 10.
- Do the above routine a few times a day.
- Remember...don't bear down, hold your breath or squeeze buttocks or legs together.
- Don't practise stopping the flow of urine mid-stream as an exercise. This can send incorrect messages to your bladder and stop it from emptying completely.

To find an Australian Physiotherapy Association physiotherapist please log onto www.physiotherapy.asn.au and click on *locate a physio*. For those without Internet access please call the national office on 03 9534 9400.

PROFILE

Janetta Webb has worked as a physiotherapist in both public and private health over the past 18 years, in Australia and overseas. She works with women of all ages from adolescence onwards and throughout pregnancy, the post-natal time and menopause. She has post graduate training in continence and pelvic floor muscle rehabilitation.

Here are Janetta's passions, inspirations and life challenges.

My passions

Anything to do with my family.

What I feel strongly about

Greater access to health information for women. When a commitment is made, see it through. All women are equal in health care, whether they are the provider or the client.

What inspires me

I gain much inspiration from women in groups discussing their lives, whether it be an exercise class I am teaching, book club, a group of physiotherapists discussing their latest research or my two daughters telling me about their day.

What motivates me

By accepting praise when it is given to me. By keeping hold of that great feeling when I achieve a goal. By realising that there is always something else I can learn about a particular topic.

What I find challenging

As for so many of us, keeping the balance between my family, interests, free time, work and exercise. To not dwell on things that I cannot change. I can be a bit of a procrastinator...sometimes I just need to do it!

Why women's health

My first professional mentor, physiotherapist Sue Clabburn, was passionate about her work. She inspired me so much over the two years we worked together that I have never considered anything else.

Qualities I admire in women

Honesty when it would be simpler to bend the truth. Perseverance to achieve goals. Our ability to compliment another woman without feeling embarrassed.

What I get from working with women

Little hints that they have found helpful that I can pass onto someone else. Proof that what research shows really does work. An ability to put our experiences into perspective.

My messages to Australian women

You are the best judge of how your body is working, because you know it better than anyone else. If something isn't right, seek help early.

NUTRITION LABELLING: WHAT DOES IT MEAN?

BY DIETICIAN CATE LOMBARD

6

Protein		3.6g	12.0g (12%)
WITHOUT READING THE SMALL PRINT DO YOU KNOW WHAT YOU'RE GETTING WHEN YOU BUY YOUR WEEKLY GROCERIES?			
Saturated fat		0.4g	1.3g (1.3%)
Trans fat		0.1g	0.3g (0.3%)
Carbohydrate	- total	20g	67g
	-sugars	0.8g	2.8g (2.8%)
Dietary Fibre		3.3g	11.0g (11%)
Sodium		84mg	280mg
Potassium		102mg	340mg
Thiamin		0.55mg (50%RDI)*	1.83mg

NUTRITION PANEL

All manufactured foods have a nutrition information panel so you can make comparisons between similar foods. Nutrition panels provide information on energy (in kilojoules) protein, total fat, saturated fat, carbohydrate, sugars and sodium, as well as any other nutrient for which a claim is made on the label.

NUTRITION CLAIMS

When a manufacturer makes a special claim about a food, such as *high in fibre* or *low glycemic index* (see below) or *low in saturated fat* then they must put information on the label to verify that claim.

USE BY DATE

Food is not necessarily spoiled immediately after this date but the quality may begin to decline.

MY FAVORITE BREAKFAST CEREAL

AVERAGE SERVING SIZE 40G OR 2/3 CUP

	PER SERVE	PER 100G
Energy	584 kJ	1486kJ
Protein	4.6g	11.5g
Fat		
-total	2.0g	5.0g
-saturated	1.3g	3.3g
Carbohydrate		
-total	25g	63.6g
sugars	15.1g	34.7g
Dietary Fibre	4.7g	11.7g
Thiamin	24mg(22%RDI)	.61mg
Niacin	2.2mg(22%RDI)	5.6mg
Iron	2.7mg(22%RDI)	6.7mg

Ingredients

Wheat flour, cocoa, fruit juice, desiccated coconut, salt, malt, honey, peanuts, raw sugar, monosaccharide, vitamins (niacin, thiamin), mineral (iron), natural flavour, preservative (230).

✓ High in fibre
✓ Added vitamins and iron
✓ Low in fat
✓ No artificial colours or flavours

Best before 24 Feb 2007
Made and packed in Australia
Contains peanuts, gluten, may contain traces of dairy.

SERVING SIZE

Average serving size may vary between manufacturers.

INGREDIENT LIST

Ingredients are listed from greatest to smallest by weight. Some ingredients, such as sugar, can be broken up into a variety of similar ingredients, such as fruit juice, malt, honey, sucrose, raw sugar or monosaccharide.

INFORMATION FOR ALLERGY SUFFERERS

The main foods, food ingredients or components of an ingredient that can cause severe adverse reactions in some people (such as peanuts, seafood, milk, eggs, soybeans and gluten) must be declared on the label.

7

ARE YOU SURPRISED BY THE FOLLOWING?

APPLE AND STRAWBERRY FRUIT PUREE - WITH ONLY 1% STRAWBERRY
LEMON CRUMBED FISH - WITHOUT ANY LEMON
BACON AND ONION SAUCE - WITH NO BACON

Are you a label or a non label reader?

When it comes to the weekly shopping do you spend hours in the supermarket reading labels and choosing products or do you just throw the products in the trolley and get out as fast as you can?

A food label will tell you a lot of information if you know what you are looking for. Here we will try to explain labels, what they mean, how to choose the best products for your health and how to compare products.

How to choose a healthy product

Whilst it is preferable to eat fresh whole foods where possible, there are times we need to use manufactured foods to supplement our diet. For a healthy diet it is important to choose foods that assist in maintaining the correct balance of nutrients. Because there are hundreds of thousands of manufactured products containing a huge range of ingredients it is impossible to advise on exactly what to look for on a label for each food. Here are some general guidelines related to important nutrients that might be helpful.

When looking at labels don't just look at the kilojoules and the fat content. Compare the fibre, sugar and salt or sodium content.

SUGAR → 10g sugar per 100g is a lot, 2g sugar per 100g is a little

FAT → 20g of fat per 100g is a lot, 3g of fat per 100g is a little

SALT → 500mg sodium per 100g is a lot, 100mg per 100g is a little

FIBRE → 10g fibre per 100g is a lot, 2g per 100g is a little

A lot of foods make claims on their labels about benefits to health. Often these claims are promoted with a tick. However, the only strictly tested labelling program available in Australia is the *National Heart Foundation Tick Program*. Foods with the National Heart Foundation red tick logo must meet strict nutrient standards and be tested before they carry the tick. There may be similar products that are just as healthy as the Tick product, so check and compare the labels.

HINT Compare the nutrition value of similar products using the per 100g information. Add up your individual intake using the serving size information, but check the size of your serving first.

Fibre

Fibre is the indigestible part of plants. Choose foods high in fibre, preferably wholegrain. This is particularly important for bread and breakfast cereal, as these can provide a large proportion of our fibre needs for the day. The ingredient list will contain words such as wholegrain, wheat or wholemeal flour, whole oats or bran.

HINT The average intake of fibre in Australian women is approximately 21g per day. We should aim for an intake of 30g per day.

Hi Bran Cereal		
	Per serve	per 100g
Dietary Fibre	7.3g	18.3g
Wholemeal Bread		
	Per slice	per 100g
Dietary Fibre	3.5g	6.0g

NUTRITION LABELLING: WHAT DOES IT MEAN?

Fat - Total
- Saturated fat

Carbohydrate - total

FAT

Not all fats are bad. We do need to keep the total amount of fat in our diet reasonably low, but the trick is to make the fat we do eat come from oils such as nuts, seeds, fish or avocado and to avoid saturated fat from meat, chicken and dairy foods and even palm oil or vegetable shortening.

Polyunsaturated fats help reduce the risk of heart disease. They come in two forms: **omega 3 fats** found in fish and **omega 6 fats** are the more common type found in nuts, soy bean, sunflower and safflower oils and margarines. Generally we get plenty of omega 6 fats but not enough omega 3 fats in the Australian diet. The label will help you identify foods that have a lot of saturated fat. The example below tells us that most of the fat in this product is saturated and therefore should be avoided.

Frozen Oven Fry Chips

	Per serve
Total fat	25g
-saturated fat	20g

Ingredients: potatoes, tallow, vegetable shortening, salt, preservative

With recent interest in omega 3 fatty acids and their importance for health, some manufacturers now point this out on the label. For example canned tuna is naturally a good source of these fats. The manufacturer might include this on the label, but it does not mean they have added any additional omega 3 fatty acids.

HINT If you are a moderately active woman an intake of 50 -60 grams per day would be considered a moderate fat intake. If you are wanting to reduce your weight or reduce fat intake for health reasons aim for 40g per day.

HINT 1 teaspoon fat is approximately 5g so if a label says 25g fat that is equal to about 5 teaspoons per serve .

HINT Fat can also be disguised on labels as animal fat, vegetable oil, coconut, copha, cream, di or monoglycerides, lard, mayonnaise, milk solids, palm oil, shortening or tallow.

SUGAR

Sugar on the nutrition panel comes under two headings: *total carbohydrate* and *added sugar* or just *sugar*. The total carbohydrate includes the sugar or starch that occurs naturally in a food such as milk, flour, grains such as rice, fruit, vegetables such as potato, as well as any added sugar. The total sugars tell you how much sugar is in the product but still includes the natural sugars from fruit, dried fruit and milk. This is why some foods with dried fruit in them seem to have a high sugar content. Of course manufacturers can add these in place of sugar to 'naturally' sweeten foods. Natural or added sugar have the same kilojoule value.

Lite Apricot Yoghurt

	per 100g
Total carbohydrate	15g
Sugars	14g

Yoghurt is made up of milk, fruit and sugar. All of these are high in simple sugar such as lactose, fructose and glucose and so will show up on the label as sugars. It is impossible to know how much sugar has been added. However if you compare this with a plain yoghurt with no sugar on the label you will find that -

Plain yoghurt with no added sugar

	Per 100g
Total carbohydrate	8.3g
Total sugars	6.7g

You would expect that the flavoured yoghurt has about 7g added sugar for each 100g.

HINT 5 grams sugar is equal to 1 teaspoon. Check the breakfast cereal in your cupboard now and calculate how much sugar you or your children are having for breakfast each day. If the cereal says 25g sugars per serve then that is equal to 5 teaspoons of sugar for breakfast.

HINT Sugar can also feature on labels as malt, malt extract, maltose, maltodextrines, dextrose, glucose, glucose syrup, raw sugar, fruit juice, fructose or apple juice.

HINT Low fat products often labelled light, lite, or fat free are often high in sugar. They do contain little fat but have so much added sugar that the final kilojoule content can be just as high as a regular product.

Summary

- Eat whole fresh foods where possible.
- Compare the labels of manufactured foods. Compare the nutrition panels of similar products using the per 100g information.
- Don't just look at the fat and kilojoule content. Compare the fibre, sugar and salt.
- Don't be fooled when some breakfast cereals are advertised as being healthy: check and compare the labels and ingredient list.
- The ingredient list will tell you what foods are providing the highest proportion of sugar and fat. Don't forget some fats and sugars can be disguised with a number of names.
- Choose foods low in saturated fat.

Explaining the terms

Low GI means Low Glycemic Index

This is a rating of the effect of the food on blood sugar levels and is not necessarily related to the sugar content or the total carbohydrate. Foods considered to be low GI will raise blood sugar slowly and may satisfy our hunger for a longer period. Low GI foods can help people with diabetes control their condition.

Carbohydrate occurs naturally in food as starch or sugar and provides energy. Carbohydrate is important to the normal functioning of the body. Foods are now appearing with labels stating they are *low carbohydrate*. This is in response to a number of 'Fad Diets' claiming the benefits of low carb and high protein diet over a traditional low kilojoule balanced diet. There is little evidence that reducing carbohydrates has any advantage over other eating patterns.

97% fat free means the food contains 3 percent fat, or 3 grams in each 100 grams.

Cholesterol free can be confusing and these foods may still be high in fat.

Light or lite can mean a number of things: light taste, light salted, less fat: check the label carefully.

Cooked in vegetable oil. Palm oil is often used to fry snack foods. This is still high in saturated fat. It would be better to choose foods with polyunsaturated, canola or olive oil.

Reduced salt 25% less salt than their counterparts.

No artificial colours or flavours can be misleading as some foods such as bread and breakfast food are not permitted to contain these anyway. They can still contain natural colour such as caramel, or beta carotene to give a brown or golden colour and flavour such as cocoa. These foods may still contain preservatives.

Recommended Daily Intake (RDI) for nutrients such as vitamins and minerals. Vitamins and minerals are permitted to be added to foods. However the Australian New Zealand Food Authority (ANZFA) Standards Code only allows added vitamins and minerals where there is a demonstrated benefit to health and where there will be no harm caused. If a manufacturer wishes to make a claim regarding the vitamin or mineral content, the food needs to provide at least 10% of the recommended daily intake (RDI) for that vitamin or mineral. The nutrition panel will also include a reference to that nutrient and provide information about the proportion of the RDI for that vitamin or mineral.



Cate Lombard

PROFILE

Cate Lombard is a qualified dietitian with a science degree and post graduate qualifications in nutrition and dietetics. She has worked in community health, hospitals, research and as a consultant. She recently spent two and a half years at VicFit managing statewide physical activity programs. Cate is currently completing a PhD in research into nutrition and physical activity in women and has been associated with The Jean Hailes Foundation for over 10 years in the medical centre, research and education.

Share in Cate's passions, challenges and her health message to women.

My passions

My husband and three children: Tess 16, Marcus 14 and Annais 10.

Why I do what I do

I love the science of health, the idea of discovery and finding out how things work, and particularly interpreting that science into practical advice that women can follow.

Why women's health

Women are extraordinarily complex, never boring, each has a different story to tell and very influential in a family setting. Change the behavior of women and you can change the whole family.

My motivation

Discovery, learning something new about myself, my family and what influences health.

The challenges

At the moment it is trying to maintain my own fitness as I get older, and like all women juggling work, family and home.

To Australian women

Set your health priorities, don't try to be perfect, do the best you can by eating well and being active and stop comparing yourself with everyone else.

THE NUTRITIONAL VALUE OF SARDINES

by naturopath Sandra Vilella

During women's health workshops and seminars I have presented at for The Jean Hailes Foundation, I always talk about the benefits of sardines. I have included the following delicious recipe to inspire even the most reluctant sardine eater.

Sardines are a rich source of omega 3 fatty acids, and because we eat the bones, they are also an excellent source of calcium. As they are very small fish, we don't have to worry about the heavy metals that often contaminate large fish.

Population studies have shown that people who eat diets high in omega 3 have a reduced risk of heart disease. In basic terms, fish-eating populations are less likely to die prematurely of coronary heart disease. Current recommendations for those who have been wary of fish are to include two fish meals a week. Oily fish are best because they are highest in omega 3 fatty acids. It has been suggested that eating fish may delay brain ageing.

Canned fish – sardines in particular – are among the easiest and cheapest sources of omega 3 and calcium. Sardines tend to be regarded as lowly, perhaps because they are so cheap. Canned sardines make a perfectly acceptable snack, first or main course.

Did you know?

- Sardines are a healthy choice for the environment too! Since these fish reach sexual maturity quickly and spawn several times per year, they are very resilient to fishing pressures.
- Sardines are named after the Mediterranean Island of Sardinia in Italy where almost every restaurant is reputed to serve sardines.
- Sardine candy? As a spin off of the Harry Potter franchise, Jelly Belly gourmet jelly beans introduced Bertie Botts Every Flavour Beans, including sardines!

RECIPE: SARDINES WITH TOMATOES AND BEANS

This is a recipe that my sister Wendy created. It is excellent for those nights when you get home late, are ravenously hungry and want something quick and easy. As it's a one pot dish, by the time you've showered and changed, your meal is ready.

INGREDIENTS

2 x cans 105g sardines, in brine, springwater or olive oil
2 x 400g tins of chopped tomatoes (I like the organic ones)
500 - 750g of fresh green beans (French, snake, flat beans)
1 small onion, chopped
2-3 gloves of garlic, chopped or just bashed with the flat end of a knife
1 dessertspoon of olive oil (or you can use the olive oil from the sardines)
Tablespoon of tomato paste
Good few splashes of balsamic vinegar
6 large basil leaves roughly chopped
Pinch of dried oregano
Salt and pepper to taste

METHOD

In a large saucepan, heat the olive oil and add the onions and garlic and sauté for about a minute. Then add sardines, tinned tomatoes and green beans and stir through. Add few good splashes of balsamic vinegar, herbs and seasoning, put the lid on and simmer. Add tomato paste if you prefer a thicker consistency. Cook until beans are the texture you like (15 - 30 mins). This can be a meal on its own, served with rice or pasta, as a side dish or is perfect over firm tofu that has been cut into steaks and pan fried.



YOGA FOR MIND-BODY BALANCE

BY YOGA TEACHER AND PSYCHOLOGIST, JANET LOWNDES

12

What is Yoga?

Yoga is an ancient way of healthy living that promotes fitness of the body and mind by incorporating gentle exercise, breath control and relaxation. Now widely practiced in Australia, the word yoga means union in Sanskrit, the language of ancient India where yoga originated. Yoga is the union occurring between mind, body and spirit.

Yoga practices are designed to make you strong physically, mentally and emotionally and to increase vitality, balance and a sense of calm. Yoga is not only about exercising the body, but also uses physical postures to help you feel calmer and happier.

Many people believe that yoga is stretching. But while stretching is involved, yoga is really about creating balance in the body through developing both strength and flexibility.

Key elements of yoga

Yoga classes differ in style, emphasis and content depending on the training and background of the teacher, but there are a few key things you should find in any yoga class:

- Awareness of breath – working with your breathing to calm the nervous system and to enhance self-awareness.
- Physical postures – to build strength and flexibility and release tension stored in the muscles.
- Relaxation – taking the benefits of the physical practice into the mind, enabling your thoughts to become calm and clear, aiding a general feeling of wellbeing.

Yoga is suitable for people of all fitness and activity levels and all ages, shapes and sizes. Anyone, from the very young to the elderly, can benefit from the practice of yoga. It is important to choose a style of class and teacher appropriate to your needs.

What if I've never tried Yoga before?

Do some research to find out what yoga studios are in your area, call up and ask to speak to one of the teachers. Ask them about their style, approach and your suitability to their classes. Ask if you can watch a class to get an idea of what happens. Remember, there are many different styles of yoga, so it is a matter of finding one that feels right for you.

The style of yoga that is best for you depends on what you are wanting from your yoga practice. For people who are naturally fast-paced and driven, yoga ideally can be a time to slow down and learn to relax. For others feeling a little low on energy other forms of yoga can help increase motivation and get the body moving.

There are many different names and styles of yoga schools in Australia, most of which originate from Hatha Yoga. Hatha is the traditional umbrella term for styles of yoga that use the physical postures as a basis for practice. All other names identify styles which emphasise particular elements in their classes. Ask the teacher what his/her emphasis is.

My passions

Being in the moment and appreciating life for whatever it offers at any given time. Smelling the garden after the rain, watching waves roll onto the sand, hearing a child laugh... being able to appreciate all of these things.

What drives me

People caring about other people.

What motivates me

I've learnt the importance of taking care of myself, so that I can help others take care of themselves. I practice yoga and meditation every day and this gives me fantastic energy and vitality.

My greatest challenges

Finding balance. Giving out versus holding in, talking versus keeping quiet, helping versus staying out of it, doing versus being, work versus rest... I think there's a place between all of these things, but the balance can sometimes be challenging to find.

PROFILE

Janet Lowndes is a practising psychologist who became curious about the relationship between body and mind. She studied yoga in India and was exposed to a whole new way of viewing the interaction between body and mind.

Some of her work is still very much traditionally psychological counselling, but she may also bring in elements of yoga (particularly body and breath awareness) into counselling. She also regularly uses psychological concepts in her yoga teaching, inviting people to consider the relationship between the body, breath and mind.

Here Janet talks about her passions, challenges and what she gains from working with women.



13

Yoga and Women's Health

Yoga helps us to learn more about our body, to understand the way we move, and the natural rhythm of our body. This understanding will help us feel more balanced and calm. The specific benefits of yoga for women's health may include the following:

- Menstruation, premenstrual syndrome, endometriosis and other gynaecological conditions – practices designed to open the abdomen, alleviate cramps and lower back discomfort, facilitate deep relaxation and alleviate physical and emotional tension.
- Pregnancy – relieve back strain, strengthen and stretch the muscles that aid childbirth, calm body and mind. Please note, it is important to inform your teacher if you are pregnant and ask for appropriate alterations to the practice.
- Perimenopause and menopause – practices designed to stimulate the ovaries and pituitary gland to regulate hormone functioning, alleviate fatigue and restlessness and balance mood.

Mind-Body Balance

The way we feel physically has a profound effect on our state of mind or emotional wellbeing. Similarly, when we are emotionally agitated, our physical health and vitality are affected.

Consider the body's natural response to threat or a sudden fright – the breath speeds up, muscles tense, heart rate increases, all in preparation to respond to a perceived threat. Over time this stress can accumulate

Why women's health

Women are predominately the carers in our lives. I've been fortunate to meet many wonderful strong women who have inspired and motivated me. Now is my chance to share that with other women.

The qualities I admire in women

The ability to love unconditionally, and to do anything for those you love.

What I gain from working with women

I am constantly inspired by the courage that comes from within when we really need it, the ability to get through the hard times and come out stronger.

My message to Australian women about their health

I think being healthy is about so many things. It's about our body, breath, mind and spirit. It's not just about a physical body that allows us to do the things we love, but also a mind and heart which allows us to love the things we do.

in the body and mind causing physical and emotional symptoms, which can clearly be linked to anxiety, depression, and other mental health and emotional issues.

Specific yoga practices are designed to counter this accumulation of tension and create positive mental states. Creating openness in the body has a corresponding effect on the mind, calming the breath, slowing the thoughts and aiding general health and wellbeing.

When used along with other approaches such as psychological counselling, yoga practices can help to alleviate the symptoms of emotional health issues, such as depression and anxiety and may also assist the individual to find more clarity and calm to deal with life stressors which contribute to overall mental and physical health.

What to Look for in a Yoga Class

The points below provide a guide to help you choose a yoga class suitable for you:

- Qualifications – check your teacher has been formally trained in yoga teaching, either in a particular style of yoga, or as part of a government accredited training course.
- Awareness – look for a teacher who asks for an indication of your general health and wellbeing (particularly relevant injuries, illnesses and associated health factors, which may affect your yoga practice) and who offers suggestions to suit your personal needs.
- Personality – as when choosing any health practitioner, it is important that you feel comfortable with your yoga teacher and change classes, if necessary, to find a teacher you like.
- Approach – a good yoga teacher combines an awareness of the body, breath and mind in the yoga class, emphasising the benefits of yoga on many levels and the importance of integrating these elements.
- Style – find a style of yoga to suit your needs. Ask your teacher about the effort level of the class and the emphasis of the practice. The diversity of yoga styles reflects the diversity of approaches required to suit different types of people, so look for a style that you feel comfortable with.
- Most of all, yoga should be about you. Rather than feeling like you are being forced into a set of postures that may or may not be right for you, look for a teacher who recommends a yoga practice to suit your needs and who helps you to feel happy, healthy and calm.

Yoga for Women at The Jean Hailes Foundation
For information see page 16,

EVENTS AND RESOURCES

Education at
The Jean Hailes
Foundation -
sharing what we
know so that you
can make better
decisions about
your health.

14

The Jean Hailes Education Unit and the Rural Health Education Foundation (RHEF) are seeking input and ideas from health professionals for future women's health topics to be presented on the RHEF satellite television network. You can complete a survey by logging onto www.jeanhailes.org.au

For women

Brand new...online shop! www.jeanhailes.org.au

The Jean Hailes website now has an online shop facility, enabling you to purchase a range of health resources. A sample of items available include:

Color Me Healthy by Rita Erlich and Dr Alice Murkies

This book offers a new and easy approach to healthy eating. Using a multi-colour approach to food, each chapter focuses on foods of a particular colour and outlines the nutritional benefits of each food, with easy recipes and suggestions.

\$35 (incl GST) + P&H \$5.80

If Not Dieting, Then What? By Dr Rick Kausman

The book explores how to:

- Enjoy food without feeling guilty
- Increase your eating awareness
- Improve how you feel about yourself
- Fit activity into your day
- Achieve and maintain a healthy, comfortable weight for you, without being deprived of food or quality of life

\$25 (incl GST) + P&H \$5.80

If not dieting Pedometer

This is a simple to use, discreet pedometer, which counts steps, making us more aware of our current level of physical activity.

\$24.95 (incl GST) + P&H \$4.20

These resources can also be purchased by contacting the Education Unit on 1800 151 441.

For health professionals

The Jean Hailes Foundation has developed a *Women in Midlife RACGP Check Program* (April 05).

Five case studies cover topics on menorrhagia in the menopausal transition, premature menopause, assessment and management at midlife, menopausal symptoms in a woman with past history of breast cancer and osteoporosis.

Successfully working with women and their health will be held on:

16 July Werribee Park

15 October Melbourne

Topics covered include: assessment of the well woman, hormone therapy - risks & benefits, diet & lifestyle, depression in women, violence against women & contraception. Implanon training is available at the end of the day.

Train the trainer workshops Training days to facilitate the use of a national Jean Hailes Foundation midlife education resource across regional Australia titled: *Midlife: a resource for Health Professionals*.

Active Learning Modules (ALM) A variety of ALMs are currently being developed for GPs and will be available as distance education packages. These include:

- *Midlife: A resource kit for health professionals*. The ALM will cover strategies for developing education sessions for community and health professionals whilst giving an update on midlife health issues.
- *Osteoporosis*. The ALM will use the *Bone Health For Life website* (www.bonehealthforlife.org.au) developed by The Jean Hailes Foundation and combine a variety of online activities with practical education that GPs can use in their everyday clinical care.
- *Successfully working with women and their health* will be produced as a Distance Education ALM. This program is specifically designed for international medical graduates and is particularly useful for rural practitioners who find it difficult to access updated information on women's health.

For further information on any of the above programs please contact the Education Unit on 1800 151 441 or visit the health professional section of the website at www.jeanhailes.org.au.



FAREWELL TO PROFESSOR SUSAN DAVIS AND TEAM

By Professor Henry Burger
Chair, Research Committee

15

At the end of 2004 we farewellled Professor Susan Davis after eight years as our first director of research, and more recently as the first Chair of Women's Health in the Department of Obstetrics & Gynaecology, Monash University.

Professor Davis and her research team have relocated to the Monash University Department of Medicine at the Alfred Hospital. This change is to ensure the ongoing development of her research through additional insurance provision and academic support and accommodation.

Professor Davis has been a highly successful research director. She is a widely recognised authority on the role of androgens in female sexual dysfunction. In addition to writing many articles on this topic, she has been the Principal Investigator for a number of therapeutic trials involving androgens for women with low libido. In addition, she and her team have contributed to knowledge in a variety of areas of women's health, including the reproductive function of indigenous women, the role of Chinese herbs in menopause management, the role of oestrogens and

androgens in vascular function and coronary artery disease in men and women, the characteristics of Tibolone, an agent used for menopausal therapy, and the roles of phyto-oestrogens.

A particularly significant milestone in Professor Davis' career at The Foundation was the award of a NHMRC Centre for Clinical Research Excellence (CCRE) Grant for five years. She and her colleagues are studying various aspects of the role of hormones in women's health. Publications in major international journals have resulted and team member, Dr Sonia Davison, subsequently won three international and national awards for her work during 2004.

Professor Davis' Deputy, Associate Professor Robin Bell, has made extremely important contributions to the team's work, bringing a wealth of expertise in epidemiology and statistics.

The Foundation wishes Professor Davis and her team every success in their new department. The Foundation will move forward with a new, diversified and exciting research program in collaboration with Southern Health and Monash University.

Women Wanted for Ovarian Health Study

Are you a healthy woman, at least five years past your last menstrual period?

A new study will set the parameters for a health program to be available to postmenopausal women to check their ovaries.

Women who qualify for the study will have a blood test and a highly sensitive gynaecological ultrasound test of their ovaries on entry into the study and one year later.

The study is a collaboration between the National Australia Bank Ovarian Cancer Research Foundation, Monash University, Prince Henry's Institute and The Jean Hailes Foundation.

It is funded by the National Australia Bank Ovarian Cancer Research Foundation, Diagnostic Systems Laboratories Inc and Inhibin Pty Ltd.

For more information contact 9544 0599 or go to www.ocrf.com.au.

PARTNERSHIPS: MAKING A DIFFERENCE TO WOMEN'S HEALTH WORLDWIDE

SUE ISMIEL &
DAUGHTERS
TOGETHER WITH
THE JEAN HAILES
FOUNDATION



Sue Ismiel

Sue Ismiel, successful Sydney businesswoman and mother of three, has made a tremendous contribution towards the future health and wellbeing of Australian women. Sue's passion for her business (Nad's Hair Removal Gel) is matched by her vision for a healthier community.

Through her generous \$600,000 donation the Sue Ismiel International Study into Women's Health and Hormones is investigating the role hormones play in women's health and wellbeing and finding out the link between hormones and depression.

16

The study has aimed to:

- Establish a base platform for hormone levels for women at different ages and different stages of life
- Examine the relationship between women's hormones and various health concerns, most notably depression and emotional and physical wellbeing
- Develop biochemical and clinical definitions of hormone deficiency in women

The results so far

The Sue Ismiel International Study into Women's Health and Hormones has examined extremely important aspects of women's health and will set new benchmarks in international research. Results have been presented at major international scientific meetings and endocrinologist Dr Sonia Davison has won three prestigious awards in 2004 for her work on the Sue Ismiel Study.

New Jean Hailes director of research Dr Helena Teede has explained that "the results of this study are very exciting and will be released to the general public as soon as they're published in the international medical literature. This study is an excellent example of how a private charitable donation can contribute to important knowledge on women's health that can impact women globally".

Exercise Training Study for Women struggling to manage their weight with Polycystic Ovary Syndrome

Background

In Australia 7 in 100 women suffer from Polycystic Ovarian Syndrome (PCOS). A key feature of PCOS is an abnormal metabolism, and many women struggle to manage their body weight problem. Women with PCOS often also have irregular periods and fertility problems. They are also at risk of developing type 2 diabetes and potentially heart disease. Exercise training is a well established lifestyle intervention that is successful at preventing and treating these conditions, but little is known about the role of exercise training for the treatment and management of PCOS.

We are looking for women with PCOS to participate in a 12 week training study:

Are you:

- A premenopausal female aged 18-40 years
- Diagnosed with PCOS
- Not participating in any regular exercise
- A Non-smoker?

Level of involvement:

- Trial lasts up to 6 months (during which time no medication for the condition can be taken)
- Two sets of strength tests and two fitness tests
- Two insulin clamps with four muscle biopsies
- Two measures of cardiovascular function
- Two DEXA and CT scans
- 12 weeks of professionally supervised exercise training (1 x 1 hour session 3 times a week)

For Further information please contact:

Dr Nigel Stepto
Department of Physiology, Clayton
Tel. 9905 2543, Email.
nigel.stepto@med.monash.edu.au

Our Donors

The Jean Hailes Foundation actively seeks grants, sponsorship and corporate donations to support our key programs in research and education. However, grants and donations are only accepted on the basis of full academic freedom to publish all results deriving from the studies and complete editorial control of education material. Study results are published in international peer reviewed scientific journals that ensure objective scrutiny and assessment of all information before results are released publicly. Donors have no influence over what information is published or released.



Tetleywellbeing4life.com.au – Tetley tea and The Jean Hailes Foundation join forces to inspire women

Tetley tea and The Jean Hailes Foundation have joined forces to present Tetley Wellbeing 4 Life, a new website offering loads of useful tips about staying healthy and happy in today's busy world. With advice on everything from attitude and lifestyle to diet and disease, it's a powerful resource for women of all ages. **Check out www.tetleywellbeing4life.com.au**

17



Uncle Tobys Healthwise for women 40+ - a partnership created specifically to help women achieve a balanced diet and healthy lifestyle

Healthwise for women 40+ has been developed with the scientific and nutritional help from The Jean Hailes Foundation. Created specifically with the 40+ woman in mind who may not be getting enough key nutrients like fibre, zinc and calcium and may also benefit from soy phytoestrogens, antioxidants, folate and vitamin B6.

These nutrients are vital to maintaining a healthy weight, cardiovascular health, immune function and bone health. Research indicates that it is important to obtain these nutrients from a diverse range of foods rather than supplements.

Yoga For Women

The Jean Hailes Foundation will introduce Yoga For Women classes in Melbourne, facilitated by Janet Lowndes, in the second half of the year. Janet, who is a qualified yoga teacher, is also a psychologist at The Jean Hailes Foundation, providing counselling for women. Janet's mind-body approach considers the many elements that contribute to physical and

emotional wellbeing. The Yoga For Women classes will specifically focus on yoga practices that are designed to benefit women. Classes are suitable for beginners or those who have already practiced yoga.

To find out about Janet's yoga classes please contact the education unit on 03 9562 6771.

Have you had a spinal fracture?

The University of Melbourne needs volunteers for our Osteoporosis studies. To be eligible you must be over 50 and at least 5 years post menopausal (if female), have been diagnosed with osteoporosis and

have had one or more fractures in the spine in the last 2 years. You may receive free physiotherapy treatment and/or a free bone density scan.

Contact Andrew Briggs or Alison Greig
on 03 8344 0423.