

# Olson Center for Women's Health

## Women's Health Overview

## Thinking About the Future...

### *It's Yours to Create*

For someone who is 18 or 20 years old, the concept of being old is a stretch. Twenty-five is old and 30 is really old. In young adulthood, planning for old age consists of getting a good education and preparing oneself for selecting a potential mate, having children and buying a home. Thoughts of saving for retirement, building bone mass and selecting a home that will afford one the luxury of aging in place are absent. Yet, thinking about aging now rather than later can have tremendous benefits on all levels of life.

Thinking about what our lives will be like is enhanced through the use of various planning activities which prompt us to consider what our lives will be like in the next 20, 30, or 40 years. Having a tool to visualize the future has benefit in prompting a person to consider all angles of the aging experience. In this case the five key focal points include the physical, psychological/spiritual, social, environmental, and financial aspects of our lives. While seemingly disparate, they are all interconnected. Thinking about one really leads to thinking about the others.

Realizing the challenges students have in understanding the aging process, my colleague, Lyn Holley, PhD and I developed a technique for use in the classroom and the community that affords persons of all ages, including those well into the aging experience, to think about

their future selves. The exercise, "Anticipating your Future Self," directs people to think ahead and visualize what they will be like at a future age. The exercise is for anyone from young college students to perhaps age 77 or even older. Those who participate in the exercise as part of a community group presentation can still walk away the exercise's benefits.

Drawing on the work of Merton and Kitt from 1950, the Future Self exercise is based on the concept of anticipatory socialization – a process whereby people imagine what they will be like in the next phase of life. For example the kindergarten-age child may think about grade school, the grade-schooler about high school, and so on. Students in their final semesters of college may begin to think about

*continued on page 3*

### **Inside this Issue**

**Dr. Marvin Stancil to see patients at  
UNMC Campus only**

**Resident Research Grants**

**A diet you can trust**

# Message from the Chairman



This year one of the most well-respected medical publications, The New England Journal of Medicine, celebrates its Bicentennial. For a journal to last 200

years is particularly noteworthy and it's even more impressive given its consistent quality. In a recent issue Dr. Margaret Hostetter, a pediatric infectious disease expert, views the history of the journal through the lens of her specialty. This view also serves to explain medical practice in its entirety. She entitled these epochs "See it", "Fix it", "Prevent it" and "Disseminate it".

Initially providers were merely observers in biological processes ("See it"). As one of my early clinical mentors said: "You can't diagnose it, if you ain't ever heard of it." Early treatments were frequently ineffective and often toxic to the patient. Providers observed illness and in some cases began to notice associations with disease. As medicine matured, treatments that were effective were developed and began to be studied in a scientific manner. Broader use of these treatments alleviated some of the burden of disease ("Fix it"). The ability of communities and providers to prevent disease with hygiene, clean water, and immunizations began to be a reality ("Prevent it"). The eradication of Small Pox in 1980 is the penultimate example of this era. These principles remain valid today; but in addition we now add a healthy lifestyle, exercise, and weight loss to the mix. Finally, all the good work becomes irrelevant if patients and their providers never know about it ("Disseminate it").

The next major challenge for health care has to do with implementing the best practices and then holding ourselves accountable. To accomplish this, partnerships with patients, their employers, and families will be critical to our success. Preventing disease, using proven strategies to treat disease when it occurs, and monitoring our successes will reduce cost and improve health.

**Carl V. Smith, M.D., F.A.C.O.G.**  
Chairman, Department of Obstetrics & Gynecology



Women's Health Overview newsletter is published quarterly for health care professionals and the general public with special interest in women's health issues by the Olson Center for Women's Health. Address all comments to: Lana Molczyk, Olson Center for Women's Health, UNMC, 989450 Nebraska Medical Center, Omaha, NE 68198-9450; or call: 402-559-6345 or 800-775-2855; e-mail: LJMOLCZY@UNMC.EDU. Any part of this newsletter may be reproduced provided credit is given to the Olson Center for Women's Health. The information provided by the Olson Center for Women's Health is for educational purposes only and should not take the place of advice and guidance from your own healthcare providers.

## Mission Statement

The Mission of the Olson Center for Women's Health is to provide a national comprehensive health science center at the University of Nebraska Medical Center. Based in the Department of Obstetrics and Gynecology, the center enables UNMC to make distinctive strides in education, research, and service through innovative approaches to women's health issues.

Women's Health Overview newsletter is available to everyone. If you would like to receive the newsletter free of charge, please contact the Olson Center at 402-559-6345 or e-mail your request to LJMOLCZY@UNMC.EDU. If you do not wish to receive the newsletter, please contact us.

## Want More Information?

Visit our website ~ [www.olsoncenter.com](http://www.olsoncenter.com)  
Learn more about our healthcare providers, services, and programs available at the Olson Center for Women's Health. Our website also offers women's health information. Here are a few topics:

- Breast Health & Disease
- Cardiovascular Health
- Gastrointestinal Health
- Gynecologic Health
- Reproductive Endocrinology/Infertility
- Pregnancy
- Skin Health
- Wellness
- Incontinence

## Newsletter Committee

Richard Blum, MPA  
John S. Davis, PhD  
Christin Curry McDermott, BA  
Lana Molczyk, MA  
Karen C. Olson, MD  
Leni Rauschenberg, BS  
Carl V. Smith, MD

## Olson Center for Women's Health Advisory Committee

Carl V. Smith, MD, Chairman  
Leland J. Olson, MD  
David L. Olson, MD  
Karen C. Olson, MD  
Nancy D. Olson, MS, MBA  
Joseph C. Scott, Jr., MD  
McClure L. Smith, MD  
Gail Walling-Yanney, MD



*continued from page 1*

## Marvin Stancil, MD Expanding Hours at UNMC Campus clinic

Dr. Marvin Stancil will be seeing patients only at the Olson Center UNMC Campus location. He will no longer have a clinic at the UNMC Physician's Ob/Gyn Clinic at Bellevue Medical Center. To schedule appointments with Dr. Stancil, please call 402-559-4500.

The Olson Center for Women's Health has two locations. The UNMC Campus clinic at 4400 Emile St. and the Village Pointe Medical Center clinic at 175th & Burke St. We are here to serve you and appreciate your understanding with these changes.

[www.OlsonCenter.com](http://www.OlsonCenter.com)



work, marriage and starting a family. Anticipatory socialization is all about thinking of the next chapter of life. Yet, how many people take the time to think about old age?

On October 5, 2012, the Omaha Women's Health & Wellness Conference will present members of the community the opportunity to attend and actively participate in a program featuring the "Future Self" exercise. Participants will be given some homework in advance by calculating their own life expectancy using the Livingto100.com calculator and completing the future self worksheet found at <http://www.unomaha.edu/gero/research.php>. Thinking about your aging process now will make a difference to you today and in the future. The future is yours to create!

---

**Contributed by Julie Masters, PhD**  
Department of Gerontology  
University of Nebraska Omaha



# Research News

## Resident Research Grants

This year, two residents from UNMC’s Department of Obstetrics & Gynecology received grants for their outstanding research efforts in women’s health.

### **Assessing Women’s Health Care Needs of the South Sudanese Refugee Population**

Libby J. Crockett, MD received a Research Fellowship in Disparities in Care for Underserved Women, which is supported by the American Congress of Obstetricians and Gynecologists and Merck & Company, Inc. Dr. Crockett, a third year resident in the Department in collaboration with Renaisa S. Anthony, MD, MPH, Deputy Director of the Center for Reducing Health Disparities at the University of Nebraska Medical Center in the College of Public will conduct this study titled “Assessing Women’s Health Care Needs of the South Sudanese Refugee Population.” This research is timely and important since Omaha is home to the largest South Sudanese refugee population in the United States. Approximately 10-12 thousand first generation South Sudanese reside in Omaha with the majority under the age of 36. The project will collect basic demographic information and assess 1) basic knowledge of specific women’s healthcare topics; 2) lifestyle and cultural barriers that impede access to healthcare for South Sudanese women; and 3) items that may help physicians better understand how to provide education to these patients. Results from the survey will be utilized to create recommendations for physicians and other healthcare workers on preventative medical counseling to their patients. In addition educational tools to enhance preventive healthcare education will be developed with knowledge gained from this project.

### **Contraception and Fertility in the Female Transplant Patient**

Valerie French, MD received a Research Award in Contraceptive Counseling, which is supported by the American College of

Obstetricians and Gynecologist and Bayer HealthCare Pharmaceuticals. Dr. French, a third year resident in the Department is leading the project titled “Contraception and Fertility in the Female Transplant Patient” with Serena Wu, MD and John S. Davis, PhD serving as research advisors. Every year about 10,000 women receive solid organ transplantation in the United States, and 44% of these women are between the ages of 18 and 49 years. There is a consensus among health care providers for women to wait 12-24 months after their transplant before trying to become pregnant, which allows for stabilization of the transplant, lower maintenance doses of immunosuppressive agents, decreased risk of rejection, and optimizing treatment of other medical conditions. With the return of fertility after transplantation and the recommendation to wait one to two years before becoming pregnant, sexually active women who have received an organ transplant are in need of effective contraception. The objective of this study is to determine how often healthcare providers discuss contraception and pregnancy (or fertility) with female transplant recipients of reproductive age.

The twenty-fifth annual Residents’ Day and Leon Steiner McGoogan Lecture were held on June 8, 2012 at the Durham Research Center on the University of Nebraska Medical Center campus. This event culminated the efforts of all the residents and their faculty advisors to either complete ongoing research or initiate new clinically relevant research projects during the past year. For a detailed listing of each resident and their project, awards, and faculty advisors, please visit [www.unmc.edu/obgyn](http://www.unmc.edu/obgyn) and click on the research tab.

---

**Contributed by John S. Davis, PhD**  
Department of Obstetrics & Gynecology



## Could the DASH Diet be for You?

Let's face it, if eating healthy were easy, we all would be doing it. For those wanting to make better food choices, knowing where to start can be a challenge. Many fad diets have come and gone over the years. They are appealing because they provide a quick fix and a rigid outline of dos and don'ts to be followed. What they don't offer, however, is valid research that supports their long term safety and success. One healthy eating plan that has been shown to safely offer health benefits is the DASH (Dietary Approaches to Stop Hypertension) diet. The DASH diet was created to help reduce hypertension (high blood pressure). It can be a helpful diet for those with hypertension, pre-hypertension, as well as those trying to prevent hypertension. If left untreated, hypertension can lead to damage to the kidneys, heart, and blood vessels which can result in heart disease and stroke.

### What does the DASH Diet include?

The diet includes foods that are rich in nutrients such as magnesium, potassium, and calcium while being low in sodium. It consists of a variety of fruits and vegetables, low fat or fat free dairy, whole grains, nuts, beans, seeds, poultry, and fish. It is limited in sweets, added sugars, fats, red meats, and sodium. The two recommended sodium limits are 1,500mg and 2,300mg per day. Typically, more significant drops in blood pressure are seen with following the lower of the two limits. (Just to give you an idea of what this means, one cup of canned tomato soup contains around 800mg of sodium on average!) The number of servings from each food group you need varies based upon your individual calorie needs. You can visit with a registered dietitian for help with determining your calorie needs.

### DASH Diet Tips

Here are a few easy ways to work in some of those healthy foods:

- Top your whole grain cereal with skim milk and fresh blueberries or strawberries.
- Why not fruit for a snack? Grab a banana or apple on the run. Maybe try a mango or papaya.
- Prepare fresh or frozen vegetables seasoned with salt free seasonings such as lemon, garlic, or onion powder.
- Get out and grill! Make up a foil packet with diced potatoes lightly drizzled in olive oil and seasoned with dill weed.

Studies have shown that by incorporating the guidelines of the DASH diet, not only can blood pressure improve, but the diet can also result in weight loss and decreased risk of stroke and heart disease. Other factors that should be considered are physical activity, limiting alcohol use, and maintaining a healthy weight as these can have a positive impact on overall health. So, is the DASH diet right for you? If you or a family member would like more information on treating or preventing hypertension, start by talking to your doctor to see if the DASH diet would be an appropriate step for you to take. Visit the National Heart, Lung, and Blood Institute and American Heart Association web pages for more information on the DASH diet.

---

Contributed by Heidi Klasna, RD, LMNT  
Cardiology Services  
The Nebraska Medical Center

SAVE THE DATE TO THE 15<sup>TH</sup> ANNUAL

SAVE THE DATE

# Omaha Women's Health & Wellness Conference

*Becoming Your Best Future Self*

Friday, Oct. 5, 2012  
8 a.m. to 4 p.m.

La Vista Conference Center  
12520 Westport Parkway  
La Vista, Neb.



**Keynote Presenters:**

Larra Petersen-Lukenda, PhD, Jane Potter, MD  
Julie Masters, PhD, Dan Anderson, MD

Call the Olson Center for Women's Health at **(402) 559-6345**  
or go to **OmahaWomensHealthandWellness.org** for more information.

Cost for the conference is \$59 general registration  
and \$89 nursing registration.

To exhibit at the conference, please call (402) 559-5852 or email  
[cmcdermott@unmc.edu](mailto:cmcdermott@unmc.edu).

The University of Nebraska Medical Center College of Nursing Continuing Nursing Education is accredited as a provider  
of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.



**Save the Date**  
 Omaha Women's Health & Wellness  
 Conference - October 5  
 For more events, visit  
[OlsonCenter.com](http://OlsonCenter.com)

Olson Center for Women's Health  
989450 Nebraska Medical Center  
Omaha, NE 68198-9450  
ADDRESS SERVICE REQUESTED



NON-PROFIT  
U.S. POSTAGE  
PAID  
Omaha, Nebraska  
PERMIT NO. 454