Black Women's Health Study





July 2001 Newsletter

THE 2001 BWHS HEALTH QUESTIONNAIRE HAS BEEN SENT OUT

VISIT THE BWHS WEBSITE AT www.bu.edu/bwhs

IN THIS ISSUE:

- * News from the BWHS
- * Food Data from the BWHS
- * Mouthwash Study

* Physical Activity Validation Study

WORKING TOGETHER TO IMPROVE THE HEALTH OF BLACK WOMEN



Since 1995 when the BWHS began, we have recorded about 75,000 address changes for BWHS participants. Now the Boston University BWHS staff is moving too, just a mile away. The move is scheduled for September, but moves rarely go as planned so it could be later. Our new address will be 1010 Commonwealth Avenue, Boston, MA 02215. Everything else is the same as before — telephone: 1-800-786-0814, email: bwhs@slone.bu.edu, website: www.bu.edu/bwhs. We love hearing from you, so please call with your questions, concerns, ideas, and suggestions.

HAVE YOU VISITED THE BWHS WEBSITE?

The BWHS website, www.bu.edu/bwhs., is up and running. It contains information on the BWHS investigators, advisory board, study methods, and study results. It also contains links to other sources of health information. If you have ideas about other links or features that you would like to see incorporated into the website, please let us know. We'd love to hear from you.

Please complete your 2001 BWHS Health Questionnaire. It's that time again. As you know, BWHS members provide updated information on their health status every two years. The 2001 BWHS health questionnaire was sent to everyone in May. If you haven't received yours, please call us toll-free at 1-800-786-0814 and leave your name, address, and telephone number. The longer the study goes on, the more informative it becomes. We are just getting to the point of having useful data on a number of important topics. The success of the BWHS depends on you. Many thanks for sending in your questionnaire. If you want to check on results that have been published from the BWHS, visit our website at www.bu.edu/bwhs.

FOOD, FOOD, FOOD

Good food is one of the great pleasures of life. But too much food, or the wrong kind, can lead to poor health — for example, poor diet contributes to the development of diabetes and hypertension. Many organizations, among them the National Cancer Institute and the Centers for Disease Control, are recommending "Five A Day" for better health — that is, at least five servings a day of fruits and vegetables. A serving is any of these — a medium piece of fruit, 3/4 cup of juice, 1/2 cup of dried fruit, 1/2 cup of raw or cooked vegetables, 1 cup of raw leafy vegetables (like lettuce), or 1/2 cup of cooked beans or peas.

How are BWHS participants doing in terms of diet? Here are some results based on responses to the diet questions on the 1995 BWHS health questionnaire.

- **★** 33 percent of calories came from fat. Current recommendations are to keep the total fat content of your diet below 30 percent and reduce the intake of fats that come from animals.
- * Average intake of cholesterol was 211mg a day. The recommendation is to eat less than 300mg.
- * Average calcium intake was 440mg. The recommendation is at least 1000mg a day, but most women do not get that from the diet unless they eat a great deal of dairy products. Calcium supplements are a help in getting enough calcium.
- * Average sodium (salt) intake in the BWHS was 2,420mg. The recommendation is to consume less than 2,400mg a day.
- * Average number of servings of fruits and vegetables was about three a day, below the recommended five or more. If you're hungry, it makes sense to reach for a piece of fruit or some raw veggies much better for you than chips or a sweet, and it's great for keeping your weight where you want it.

The 2001 questionnaire includes a section on diet, similar to what you filled out in 1995. You may notice that we have added some new food items that are eaten more commonly nowadays and that some of you wrote in as extra foods on the 1995 questionnaire. Examples are turkey sausage, tofu and soyburgers, and different types of pasta dishes. Once we've received all the 2001 questionnaires and "cleaned" and analyzed the dietary data, we'll tell you how food intake in 2001 compares to that in 1995.

NEWS FROM THE BWHS

MOUTHWASH FEASIBILITY STUDY IS A SUCCESS

Cheek cells are a good source of genetic material. Over the past year, about 250 BWHS participants took part in a study to assess the collection of cheek cells with mouthwash or with cotton swabs rubbed on the inside of the mouth. We found that much more genetic material was obtained with the mouthwash. Participants swished a small amount of mouthwash (Scope) in their mouths for about a minute, spit the mouthwash into a small container, and mailed it to the laboratory that we are using. The lab successfully extracted genetic material from the samples. We are now beginning to collect cheek cell samples from all women in the BWHS who would like to participate. Those who agree will be sent a kit for obtaining and then sending the sample to the laboratory, where the DNA will be extracted and stored. The purpose of collecting genetic material is to determine whether specific genes involved with processing toxins or other substances in the body are related to the development of disease. The results will be for research use only. For that reason, and because of our concern and yours for absolute confidentiality, the samples will be identified by number only and the results will not be linked to individuals. We will be contacting participants over the next one to two years.

PHYSICAL ACTIVITY VALIDATION STUDY BEGINS IN WASHINGTON, D.C.

Dr. Lucile Adams-Campbell has begun a physical activity validation study, operating out of Howard University. BWHS participants from Washington, D.C. and surrounding areas are being invited to take part. Over the course of a week, participants wear activity monitors (accelerometers) that look like watches — these devices measure movement. The measures from the monitors will be compared with information on activity from diaries and from the BWHS questionnaires. Finding out how well our questionnaires measure what women actually are doing physically will help us to better study how physical activity influences the occurrence of disease. Participants have been very enthusiastic about the study — they enjoy wearing the monitors and having the opportunity to assess their own physical activity levels.

NEWS FROM THE BWHS

BWHS DATA PRESENTED AT SOCIETY FOR EPIDEMIOLOGIC RESEARCH MEETING

Reports from the BWHS were presented at the annual meeting of the Society for Epidemiologic Research held in June in Toronto. This is one of the major epidemiology meetings held each year. Dr. Lynn Rosenberg reported on factors related to the age at which women have a natural menopause. We found that smokers reached menopause earlier than nonsmokers (as has been reported in studies of white women), and some measures of experiences of racism from the 1997 questionnaire were also related to an earlier menopause. Many illnesses are affected by the age at menopause. For example, women who reach menopause early are thought to have a reduced risk of breast cancer and an increased risk of coronary heart disease. Yvette Cozier reported the results of our study assessing methods for obtaining cheek cell samples from BWHS participants. The study was a success and full scale collection of samples is in progress, as described in this newsletter.

ORANGE COUNTY AFRICAN-AMERICAN WOMEN'S HEALTH COALITION LEARNS ABOUT THE BWHS

Through Dr. Mary Watson, a BWHS participant who belongs to the Orange County African-American Women's Health Coalition, Dr. Lynn Rosenberg was invited to be the keynote speaker at the Coalition's Biennial Meeting in Orange, California on May 5. Her report on the BWHS was received with great interest and tremendous support was expressed for the BWHS. The Coalition members provided valuable information about their health concerns.