

Reproductive Health

Reproductive health care is the constellation of information and services designed to help individuals attain and maintain the state of reproductive health by preventing and solving reproductive health problems. Reproductive health care includes a variety of prevention, wellness and family planning services as well as diagnosis and treatment of reproductive health concerns. Gynecology (GYN) is an important part of health care for women. It protects your sexual and reproductive health.

Each year about 10,000 women in the U.S. are diagnosed with cervical cancer. Women who do not have regular gynecological care are up to seven times more likely to be diagnosed with cervical cancer.

More than 260,000 women in the U.S. are diagnosed with breast cancer every year. The survival rate for women who detect their cancers early is 79-97 percent, depending on how early. The survival rate is only 16-56 percent for women with advanced cancers that have spread to other parts of their bodies.

Don't let it happen to you...

Whether you're young or old, married or single, sexually active or not, or whether you're lesbian, straight, or bisexual — good gynecological care can keep you healthy and may save your life.

Periodic GYN visits and exams may include:

- talking about your personal, family, sexual, and medical history
- laboratory tests and screening for Sexually Transmitted Infections and other conditions
- counseling
- a pelvic exam
- a breast exam

Pap tests are part of GYN exams. They can detect:

- the presence of abnormal cells in the cervix
- infections and inflammations of the cervix (Pap tests cannot specifically identify most Sexually Transmitted Infections, but they may detect symptoms.)
- thinning of the vaginal lining from lack of estrogen commonly related to menopause

Women should start having Pap tests three years after they have vaginal intercourse or when they become 21 years old — whether or not they have had vaginal intercourse. Talk with your health care provider about how often you should have periodic GYN visits and exams.

GYN Exams are your key to good health. Routine gynecological care can:

- prevent illness and discomfort
- allow for early detection of cancers of the breast and cervix – when they are more curable
- detect Sexually Transmitted Infections and other conditions before they cause serious damage
- prevent sterility
- promote healthy pregnancy and childbirth



For more information:

Association of Reproductive Health Professionals, (202) 466-3825, www.ahrp.org

National Family Planning and Reproductive Health Association, (202) 293-3114, www.nfprha.org

Family planning has far reaching benefits for women and their families. Family planning helps couples space births, prevent unwanted pregnancies, and avoid Sexually Transmitted Infections (STIs), including HIV. The typical American woman wants – and has – two children. She therefore spends roughly three decades trying to avoid becoming pregnant. Contraception is key to helping women and their partners realize their family size goals.

The Wisconsin Family Planning Program works to provide safe and effective contraceptive (birth control) services to enable women and couples to achieve their family planning goals. Family planning services in Wisconsin consist of routine and preventative health and educational services involving:

- Reproductive Health;
- Preconception;
- Sexually Transmitted Infections;
- Contraception (birth control); and
- Pregnancy testing; risk assessment, and early pregnancy-related care.

These services include:

- Reproductive health screening and assessment
- Breast and cervical cancer screening
- Sexually Transmitted Infection testing and treatment services
- Pregnancy testing and short-term care coordination services
- General preventative health examination



There are many different kinds of family planning methods. No one contraceptive is right for every person. That's why it's important to find out what works best for you. Even if you are not currently having sex, it is always a good idea to think ahead about birth control. To determine which family planning methods are right for you, consult with your health provider.

Family Planning Waiver (FPW) is a Medicaid Program for women between 15 and 44 years of age. It covers selected family planning services and supplies.

If you are determined eligible for the FPW you will have coverage for family planning related services, some of which include:

- Initial family planning office visits
- Contraceptive services and supplies
- Natural family planning supplies
- Family planning pharmacy visits
- Pap tests
- Test and treatment for Sexually Transmitted Infections (STIs) and other select lab tests
- Tubal ligation
- Annual and routine preventative primary care services

For more information, please call (800) 362-3002.

For more information:

Health Care Education and Training, Inc., www.hcet.org/wfpp/clinics.asp

National Family Planning and Reproductive Health Association, (202) 293-3114, www.nfprha.org

Planned Parenthood, (800) 230-PLAN, www.ppwi.org

Wisconsin Family Planning Program, (800) 772-2295, dhfs.wisconsin.gov/womenshealth/FamilyPlanning.htm

Every year nearly one million American women deliver babies without receiving adequate medical attention. Babies born to mothers who received no prenatal care are three times more likely to be born at low birth weight, and five times more likely to die, than those whose mothers received prenatal care.

Prenatal care is an important factor in achieving a healthy pregnancy outcome. Prenatal care is the care you get while you are pregnant and can be provided by a doctor, midwife or other health care professional. The goal of prenatal care is to monitor the progress of a pregnancy and to identify potential problems before they become serious for either the mother or the baby.

A woman with a chronic medical condition or a “high-risk” pregnancy may have to see her health care provider more often. Make sure you go to all your prenatal care appointments, even if you’re feeling fine. A typical prenatal care schedule for a low-risk woman with a normally progressive pregnancy is:

Weeks 4 to 28: 1 visit per month (every 4 weeks)

Weeks 28 to 36: 2 visits per month (every 2 to 3 weeks)

Weeks 36 to birth: 1 visit per week

Nine questions to ask your doctor or nurse

- How can diabetes, high blood pressure, infections or other conditions affect my pregnancy?
- How can certain medications (prescription, over-the-counter, or home remedies) affect my pregnancy?
- How does taking a multivitamin with folic acid daily, especially before pregnancy, help me have a healthy baby?
- What is my ideal weight?
- How can I stay away from cigarettes, alcohol and illegal drugs?
- How can I manage the stress in my life?
- How long should I wait between my pregnancies? (Wait at least 6 months between delivery and the beginning of the next pregnancy.)
- What if premature birth runs in my family?
- What are the signs of premature labor and what should I do?

Make these choices for a healthy pregnancy:

- Stop smoking, drinking alcohol and doing drugs. Help is available if you need it.
- Take a basic multivitamin with 0.4 mg of folic acid and no more than 8000 I.U. of Vitamin A every day.
- Eat a variety of foods rich in folic acid such as dried beans and peas, breakfast cereals fortified with folacin, broccoli, peas, spinach, okra, orange juice, baked beans, turnip greens, peanuts or peanut butter.
- Don’t eat uncooked or undercooked meats or fish.
- Get some daily exercise such as walking or swimming.
- Get regular sleep.
- Take deep breaths to relax and control stress.
- Eat small, frequent meals and don’t skip meals to help with nausea.
- Avoid secondhand smoke.
- Eat food that is nutritious like breads and cereals, fruit, vegetables, milk and meat or eggs.
- Limit caffeine. Caffeine is in foods like coffee, chocolate, tea and soft drinks.
- Talk to your health care provider about any prescription or over the counter drugs you are taking.
- Avoid hot tubs, saunas, and x-rays.

For more information:

A Healthy Start, (800) 311-BABY, www.mchb.hrsa.gov/programs/womeninfants/prenatal.htm

March of Dimes, (414) 778-3500, www.marchofdimes.com

Maternal and Child Health Hotline, (800) 722-2295, www.mch-hotlines.org

Wisconsin Perinatal Care Association, (608) 267-6060, www.perinatalweb.org

Infertility is defined as the inability to conceive a child after trying for one year, or the inability to carry a pregnancy to live birth. This condition affects about 5.3 million Americans, or 9% of the reproductive age population. Infertility is not always a problem that affects only the woman. In 40% of the cases, female factors are responsible, while in another 40% male factors are responsible; combined factors account for 10% of cases, and 10% of cases have unknown causes.

Stress, diet, excessive athletic training, or medical problems can cause infertility by interfering with ovulation. Diseases like endometriosis or pelvic inflammatory disease may cause infertility by blocking the fallopian tubes that connect the ovaries to the uterus. Cigarette smoking also has a negative impact on the ability to become pregnant and carry a pregnancy to term.

Infertility is different for each couple that faces it. During the last decade, health care providers have made great strides in the ability to diagnose and treat infertility. Roughly 2/3 of couples who seek medical intervention are able to give birth. The most important thing you can do is to be an informed consumer.

There are treatments available for infertility. Most infertility cases—85 to 90 percent—are treated with conventional therapies, such as drug treatment or surgical repair of reproductive organs. While vital for some patients, in vitro fertilization and similar treatments account for less than 3% of infertility services.

Many ob/gyns and urologists are specially trained to treat the patient having difficulty getting pregnant. Often a situation will warrant a visit to a reproductive endocrinologist; a physician who specializes in infertility. To get assistance in finding a physician that is right for you, call RESOLVE's National HelpLine toll-free (888) 623-0744.

Tips to Optimize Fertility:

Healthy Living Because your weight, health and lifestyle can all affect your fertility, it is important to make sure you are eating well, managing your weight, and exercising.

Healthy Eating Good nutrition can help to prepare your body for pregnancy. It is important to ensure you are eating the right foods and optimizing your health. Being overweight or underweight can have consequences for your fertility.

Exercise Physical activity in moderation can help to reduce the stress of infertility. It can be a time for quiet reflection or a time to sweat out the frustration.

Relaxation There are numerous methods for decreasing stress, including learning relaxation techniques and stress management strategies.

Before trying any of these techniques, however, check with your doctor to be sure they are appropriate for you and will not interfere with your treatment.

For more information:

American Society for Reproductive Medicine, (205) 978-5000, www.asrm.org

RESOLVE National, (888) 623-0744, www.resolve.org

RESOLVE Wisconsin, (262) 521-4590, www.resolvewi.org

HIV/AIDS is one of the most urgent health issues facing women today. Women are the fastest rising HIV infection group in the U.S. and AIDS is the 5th leading cause of death among U.S. women. Although having HIV can have a devastating impact on an individual's life, women with HIV are living longer and stronger lives filled with love and happiness.

What women need to know about AIDS

Women are at risk for HIV infection. Many women think AIDS is a disease of gay men, but women get HIV from sharing needles and from heterosexual sex.

During sex, HIV is transmitted from men to women much more easily than from women to men. A woman's risk of infection is higher with anal intercourse, or if she has a vaginal disease.

Get tested. Many women don't find out they have HIV until they become ill or get tested during pregnancy. If women don't get tested for HIV, they seem to get sick and die faster than men. But if they get tested and treated, they live as long as men.

Women should protect themselves against HIV infection. Having male sex partners use a condom every time can lower the chance of HIV infection. Other forms of birth control, such as birth control pills, diaphragms, or implants do NOT provide protection against HIV.

Gynecological problems can be early signs of HIV infection. Ulcers in the vagina, persistent yeast infections, and severe pelvic inflammatory disease (PID) can be signs of HIV. Hormone changes, birth control pills, or antibiotics can also cause these vaginal problems. See your doctor to make sure you know the cause.

Women get more and different side effects than men. Women are more likely to get skin rashes and liver problems, and to experience body shape changes than men. They also have more problems caused by human papillomavirus (HPV).

Many women are full-time parents in addition to dealing with their health and employment. This can make it more difficult to take medications and schedule medical appointments. With proper support, however, women do very well on HIV treatment.

Reduce your risk of HIV or other STI transmission:

- Choose not to have sex, or make an agreement with a partner who is HIV-negative to be sexually faithful to each other, and stick to it. If you or your partner is HIV-positive, talk with your health care provider about how to reduce your risk, including using latex condoms or dental dams.
- Always use a condom for vaginal or anal sex, and barrier methods, such as a condom or dental dam, for oral sex.
- If you are HIV-positive and are pregnant, see your health care provider to get appropriate treatment. Treatments are available to significantly reduce the risk of passing HIV to your child during pregnancy and delivery. Do not share needles or syringes for any kind of injection drug use.
- Get tested! Ask partners to do the same.

For more information:

AIDS Network.org, (608) 252-6540, www.aidsnetwork.org

HIV Prevention Issues for Women, www.thebody.com/whatis/prevent.html

KNOWHIVAIDS.org, (866) 344-KNOW, www.knowhivaids.org

Wisconsin AIDS/HIV Program, (800) 334-2437, dhfs.wisconsin.gov/aids-hiv/

Sexually Transmitted Infections or STIs affect women of all backgrounds and economic levels. However, STIs are most prevalent among teenagers and young adults.

Health problems caused by STIs tend to be more severe and more frequent in women than in men. However, women often do not show any symptoms of STIs and women may not seek care until a serious problem develops. When diagnosed and treated early, most STIs can be treated effectively. However, some infections are resistant to medications.

Some Major Sexually Transmitted Infections

Chlamydia is the most common of all bacterial STIs, with an estimated 4-8 million new cases each year in the U.S. Women may experience symptoms of abnormal vaginal discharge and burning with urination, but more often do not experience any symptoms. Left untreated in women, chlamydia may lead to pelvic inflammatory disease and infertility. When diagnosed, the infection can be treated with antibiotics.

Gonorrhea infects an estimated 400,000 Americans each year. Common symptoms include discharge from the vagina and painful urination. As with chlamydia, women may then contract pelvic inflammatory disease that can lead to infertility. New drugs are used to treat the infection.

Genital herpes affects an estimated 60 million Americans. The viral infection exhibits symptoms of painful blisters or open sores in the genital area. These may be accompanied by a burning sensation in the entire area. The herpes sores disappear within two to three weeks but the sores may reoccur at any time. Antiviral drugs can help to control the symptoms but do not get rid of the disease.

HPV or the Human Papilloma Virus affects about 20 million people in the U.S. Although most HPV infections go away within eight to 13 months, some will not. Some of these viruses are called "high-risk" types, and may lead to cancer of the cervix, vulva, vagina, anus, or penis. Others are called "low-risk" types, and they may cause mild pap test abnormalities or genital warts. Genital warts are single or multiple growths or bumps that appear in the genital area, and sometimes are cauliflower shaped. Most women are diagnosed with HPV on the basis of abnormal Pap tests. There is no "cure" for HPV infection, although in most women the infection goes away on its own. The treatments provided are directed to the changes in the skin or mucous membrane caused by HPV infection, such as warts and pre-cancerous changes in the cervix.

STI Prevention Tips:

Abstinence is the best way to prevent STIs. For people who choose to be sexually active, ways to reduce the risk of contracting an STI include:

- Practice mutual monogamy – have sex with only one, uninfected partner who only has sex with you.
- Limit the number of sex partners you have.
- Talk with your partner(s) about STIs, sexual health, and prevention prior to sexual activity.
- Get tested and get your partner tested before being sexually active, especially if either of you has had other partners.
- Use latex condoms consistently and correctly for all types of sexual contact even if penetration does not take place.
- Avoid using spermicides.
- Get annual check-ups if you are sexually active. Talk to your health care provider about your sexual practices and what tests you need.
- If you and/or your partner has a bacterial STI, don't have sex until all partners have been treated.
- Call the National STD Hotline at (800) 227-8922 for referrals to free and low-cost clinics.

For more information:

National STD Hotline, (800) 227-8922

Planned Parenthood, (800) 230-PLAN, www.ppwi.org

Wisconsin STD Program, (608) 266-7365 or (414) 286-5526, www.dhfs.wisconsin.gov

Menopause and Hormonal Therapy

Menopause is the time when a woman stops having menstrual periods. The average age of menopause in the U.S. is 51 years. The transitional time when a woman's periods become lighter and less frequent is called perimenopause. It typically lasts three to five years, but may be longer or shorter. Menopause may occur in younger women due to premature ovarian failure, cancer therapy, or the surgical removal of both ovaries.

More than one-third of women in the U.S.—about 36 million—have been through menopause. With an average life expectancy of almost 80 years, women are spending more than one-third of their lives beyond menopause.

Steps to take to cope with menopause:

- **Hot flashes.** Avoid a hot environment, eating or drinking hot or spicy foods, alcohol, or caffeine, and stress, all of which can bring on hot flashes. Dress in layers and keep a fan in your home or workplace. Regular exercise might also bring relief. Ask your health care provider about taking an antidepressant medicine. These medicines can be helpful for some women.
- **Vaginal dryness.** Use an over-the-counter vaginal lubricant. There are also prescription estrogen replacement creams that your health care provider might give you. If you have spotting or bleeding from estrogen creams, see your health care provider.
- **Problems sleeping.** Avoid alcohol, caffeine, large meals, and working out right before bedtime. Try to keep your bedroom at a comfortable temperature. Avoid napping during the day and try to go to bed and get up at the same times every day. Exercise can also help. But avoid exercise close to bedtime.
- **Memory problems.** Ask your health care provider about mental exercises you can do to improve your memory. Try to get enough sleep and be physically active.
- **Mood swings.** Try to get enough sleep and be physically active. Ask your health care provider about relaxation exercises you can do and about taking antidepressant medicine, which could help.

Doctors sometimes prescribe hormone replacement therapy (HRT) to ease symptoms of menopause and protect against risks of heart disease, stroke, and osteoporosis. Today, the term hormone replacement therapy is used to describe treatment with either estrogen alone or with estrogen and another hormone called progestin. Progestin is added to prevent the risk of uterine cancer. Although millions of women take HRT, women should discuss this option with their health care provider as it may not necessarily be the right choice for everyone.

What you can do to feel better during menopause:

- Don't smoke
- Exercise regularly
- Eat a healthy diet
- Get enough calcium and vitamin D
- Stay cool to relieve hot flashes
- Ease vaginal dryness
- Improve bladder control
- Talk to family and friends
- Ask for help if you need it
- Learn new ways to relax
- Laugh a lot
- Stay healthy and active



For more information:

National Women's Health Resource Center, (877) 986-9472, www.healthywomen.org
North American Menopause Society (NAMS), (800) 774-5342, www.menopause.org
WomensHealth.Gov, (800) 994-9662, www.womenshealth.gov/menopause