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A PUBLICATION OF THE WOMEN'S HEALTH INITIATIVE • 2016-2017

## WHI Continues Working to *Advance* Women's Health

**T**HE INITIAL WOMEN'S HEALTH INITIATIVE clinical trials began in the 1990s and ended more than 10 years ago. But scientific work aimed at improving women's health has been ongoing through contact with you, the study participants. In 2015, the National Heart, Lung and Blood Institute (NHLBI) of the National Institutes of Health (NIH) extended its commitment to funding the WHI study. WHI scientists are working to better understand cardiovascular disease, cancer, fractures, and other important medical issues affecting women.

The average age of WHI participants is now over 80, and because a large number of women are still involved in WHI, investigators are able to examine how factors related to aging can affect quality of life for older adults. WHI researchers are working with the rich set of information already collected while inviting WHI participants to become involved in additional studies that will further our understanding of women's health. We could not do this without your continued and active support—thank you!

A number of WHI participants are taking part in a study that looks at whether increased physical activity can reduce heart disease and stroke in older women. This NHLBI-funded study is led by Dr. Marcia Stefanick of Stanford University,

Dr. Andrea LaCroix of the University of California San Diego, and Dr. Charles Kooperberg of Fred Hutchinson Cancer Research Center.

Another group of participants, including some who were in the Long Life Study in 2012–2013, are again wearing a monitor to track physical activity. These women will wear the monitor for three periods over three years and keep a sleep diary. This NIH-funded study will provide important information about aging and the role of physical activity in maintaining health.

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## WHI CONTINUES WORKING TO ADVANCE WOMEN'S HEALTH

*Continued from cover*

Many WHI participants were invited to join the **COcoa Supplement and Multivitamin Outcomes Study (COSMOS)**, an exciting

new clinical trial of 18,000

people nationwide led by

Dr. JoAnn Manson and

Dr. Howard Sesso of

Brigham and Women's

Hospital and Dr. Garnet

Anderson of Fred Hutchinson

Cancer Research Center. Relatives and friends of

WHI participants are also being invited to join the

trial. COSMOS is testing whether taking two cocoa

extract capsules and a standard multivitamin every

day can reduce the risk of developing cardiovascular

disease and cancer. **Women 65 and older and men**

**60 and older in the United States who have not had**

**a heart attack or stroke or a new diagnosis of cancer**

**within the past two years are eligible to participate.**

Participants should be willing to forgo personal

use of multivitamin supplements during the study.

Eligible WHI participants were the first to be invited

to enroll in COSMOS, but whether or not you are

personally joining the study, we hope you will spread

the word about COSMOS to your male and female

relatives and friends. For more information, please go

to [www.cosmostrial.org](http://www.cosmostrial.org) or call (800) 633-6913.

Women who participated in the original **Diet**

**and Vision Study (2001–2004)** are participating in

a follow-up study. The original study revealed that

healthy food choices combined with physical activity,

limited smoking, and adequate vitamin D may work

together to better preserve eye health. In the follow-

up study, funded by the NIH, investigators are

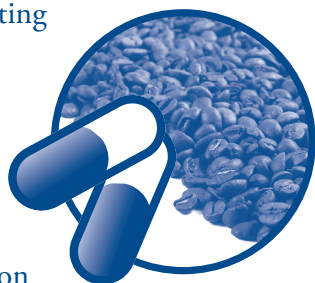
continuing to study whether certain aspects of diet

contribute to age-related eye changes, including the

development or progression of macular degeneration

and loss of vision function. This research is led by Dr.

Julie Mares of the University of Wisconsin-Madison,



Dr. Steven T. Bailey of Oregon Health & Science

University, Dr. Robert Wallace of the University

of Iowa, Dr. Barbara Blodi of the University of

Wisconsin-Madison, and Dr. Karen Gehrs of the

University of Iowa.

The **Life and Longevity After Cancer (LILAC)**

study, funded by the National Cancer

Institute, will continue through

2017. The study follows women

who have been diagnosed with

certain types of cancer. More

than 10,000 women have been

invited to participate in this study. Participants are

contributing important information about how their

cancer diagnosis and treatment have affected their

lives. Investigators are also characterizing cancer

treatments and collecting tumor tissue for future

studies about cancer survival, quality of life, and

health after cancer. The study is led by Dr. Garnet

Anderson of Fred Hutchinson Cancer Research

Center, Dr. Bette Caan of Kaiser Permanente

Northern California, and Dr. Electra Paskett of

Ohio State University.

The **WHI Memory Study (WHIMS)** will

continue for another five years with funding from

the National Institute on Aging. In addition

to studying the predictors of cognitive decline

and impairments, WHIMS researchers will be

investigating cognitive resilience.

(A sub-study of COSMOS

called COSMOS-Mind

will determine whether the

COSMOS supplement

improves or protects

cognitive functioning.

This sub-study is open to

non-WHIMS participants

who are enrolled in

COSMOS.) ■





## Focus on Findings



**I**N THE PAST YEAR, 181 papers using WHI data have been published in scientific journals! Here are summaries of just a few of the papers published in the past year.

### ■ Coffee and Caffeine Consumption and the Risk of Hypertension in Postmenopausal Women

*(American Journal of Clinical Nutrition, 2016)*

High blood pressure, or hypertension, is a risk factor for many diseases, including stroke and heart failure. This study by Dr. Jinnie J. Rhee of Stanford University School of Medicine and her colleagues looked at the link between coffee and caffeine consumption and high blood pressure in nearly 30,000 WHI participants. They found that caffeinated coffee, decaf coffee, and caffeine are not risk factors for hypertension in postmenopausal women. Previous studies of these associations had produced mixed results.



### ■ High Glycemic Index Diet as a Risk Factor for Depression

*(American Journal of Clinical Nutrition, 2015)*

Dr. James E. Gangwisch of Columbia University and his colleagues used WHI data to examine the association between a high-glycemic diet—such as one heavy in refined carbohydrates and sugary beverages and snack foods—and the risk of depression.

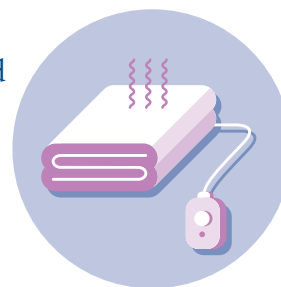


They found that progressively higher consumption of added sugars is associated with increasing odds of depression among postmenopausal women. The source of dietary sugars is important—for example, they discovered that increased consumption of fruit (not including juice) is not associated with increased risk of depression. The study also found that as consumption of whole grains increases, risk of depression decreases.

### ■ Electric Blanket Use and Risk of Thyroid Cancer in the WHI Observational Cohort

*(Women Health, 2015)*

Thyroid cancer is the fifth most commonly diagnosed cancer in U.S. women, and thyroid cancer rates continue to increase. The best-established risk factor is exposure to ionizing radiation, and other environmental factors have been suspected. A study by Dr. Ikuko Kato of Wayne State University and her colleagues used WHI data to look at one suspected risk factor: use of electric blankets, which emit non-ionizing radiation in the form of extremely low-frequency electromagnetic fields. They found no association between electric blanket use—of any duration—and subsequent risk of thyroid cancer among postmenopausal women. ■





# Accessible SEATING



## What Are Your Rights?

The Americans with Disabilities Act (ADA) has made it easier for users of wheelchairs (and other mobility devices, such as electric scooters) to enjoy activities they love, including attending movies and performances and eating out. Most public facilities are required to meet specific requirements to ensure that accessible seating is available to anyone who needs it. Compliance can vary, however, so here are some important things to know about your rights.

### Ticketed Venues

The ADA requires ticketed venues—such as movie theaters, concert halls, and sports arenas—to offer accessible seating. That means space designed to accommodate a wheelchair as well as an accessible way to get to that space.

Here are some of the key requirements for ticketed venues:

- Accessible seats must be available for sale during the same hours that regular seats are sold and using the same methods (such as box office, online sales, and/or phone).
- Customers cannot be charged more for an accessible seat than a regular seat in the same section.
- Tickets for accessible seats must be available at all price levels that are offered to the general public.
- Customers can buy up to three additional seats for companions in the same row as the accessible seat, if they are available.
- Venues cannot ask for proof of disability before selling an accessible seat, but they can ask customers to affirm their need for an accessible seat.
- Accessible seats cannot be released for general purchase unless the rest of the section, price range, or venue is sold out.

### Restaurants

Restaurants are subject to these requirements, among others, with certain exceptions in older buildings:

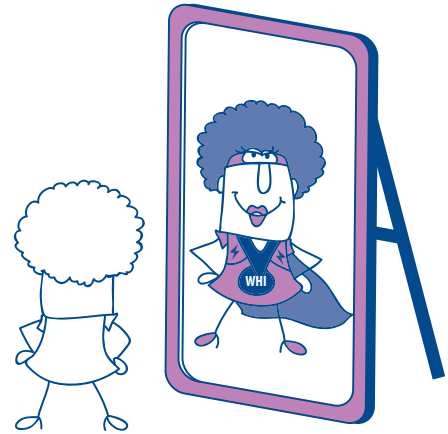
- Five percent of all eating surfaces in a restaurant must be accessible, and they must be dispersed throughout. For example, if a restaurant has a bar, a dining room, and outdoor seating, it must offer accessible seating in all three areas.
- Restaurants must provide a path at least 36 inches wide to reach the accessible seating.
- To accommodate wheelchair users, accessible restaurant tables must have at least 27 inches of clearance underneath and must be between 28 and 34 inches high.

For more information, visit [www.ADA.gov](http://www.ADA.gov). ■



# How Has WHI Changed Your Health Habits?

Four women reflect on how being a study participant has affected their choices



## Alva Bustamante Torres, age 84

Alva Bustamante Torres of Tucson, Arizona, is unequivocal about the benefits of WHI for her health and her family's health: "It changed our lives," she says.

*"I owe my longevity and good health to the Women's Health Initiative."*

— Alva Bustamante Torres

Torres learned two crucial things when she enrolled at age 57. "Right away, they found out I had osteoporosis, which I would never have guessed at that age," she says. And by keeping a food diary, she learned that her diet was high in fat. Born in Tucson, she was raised on the food of her Mexican heritage, which included lard.

"I knew that if I could educate myself, I could educate my children and grandchildren," she says. She changed her diet, began taking extra vitamins, and started exercising regularly. In recent years, she switched from riding a bicycle to using a stationary bike, which she keeps in her kitchen. "That way, it makes me get on it—more than if I had it in another room," she says. Her great-grandchildren also use it when they visit.

In 2016, Torres had a bad fall—she tumbled off a porch, breaking her pelvis. But she says her recovery has been remarkably fast. "I really feel that if I had not been doing all these things that began with the Women's Health Initiative, I wouldn't be in as good health now," she says.

Her experience with the WHI even led her to write a small cookbook on healthy Mexican cuisine, which she gives out for free, asking only that people make a donation to a food bank or other organization that feeds the hungry. "All of this came out of the Women's Health Initiative," she says.

Torres says she has no ongoing health problems besides a sun allergy. She has never smoked, and she drinks a small amount of red wine with dinner or eats a square of dark chocolate each day.

"I owe my longevity and good health to the Women's Health Initiative," she says. "It helped the entire family."

## Beth Silvercloud-Severance, age 79

Beth Silvercloud-Severance enrolled in the WHI in 1998, after reading about how much medical research—including breast cancer research—was done on men. "And then I heard that the funding had come through for studies on women," she said. "And I thought: that makes good sense; I want to be part of that."

Her participation in the study began around the same time as her interest in natural medicine, which has led her to take a number of herbal supplements, vitamins, and amino acids—and to gradually get off all prescription medications, including medication for Raynaud's disease.

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## HOW HAS WHI CHANGED YOUR HEALTH HABITS?

*Continued from p. 5*

She wants to avoid putting strain on her liver and kidneys and to keep her organs healthy so she can be an organ donor one day. “I was determined that when I don’t need my organs anymore, they’ll be passed on to someone who needs healthy ones,” she says.

Silvercloud-Severance is currently in the Life and Longevity After Cancer (LILAC) study, having had colon cancer. She has been in remission since 2004. She lives in Georgia and has three children and six grandchildren.

She is one-quarter Native American, with Cherokee and Chickasaw heritage, and she hopes that Native American

women can be better represented in medical research, given the health issues that many of them face.

“I just think it’s wonderful that women’s health and the things that are likely to affect women’s health have actually now been codified and studied and researched and can become basic information that can be harvested,” she says. “The value of the Women’s Health Initiative has been recognized by funding sources again and again. And I applaud that—because that doesn’t always happen.”

*“...the things that are likely to affect women’s health...can become basic information that can be harvested.”*

— Beth Silvercloud-Severance



*“I was able to bring my blood sugar under control by changing my diet and losing weight. I don’t diet, I just eat properly.”*

— Ann Tyler

### Ann Tyler, age 81

Ann Tyler of Pittsfield, Massachusetts, says that her participation in WHI has led to better eating habits and overall health, as well as greater awareness of preventive measures because of the required checkups and tests. She enrolled in 1998 and has participated in the randomized hormone therapy, dietary modification, and calcium/vitamin D studies and is currently in the COcoa Supplement and Multivitamins Outcomes Study (COSMOS). “I feel that these studies are very important to find the impact on women’s lives of various treatments,” she says.

Tyler was diagnosed as pre-diabetic about two years ago. “I was able to bring my blood sugar under control by changing my diet and losing weight,” she says. “I don’t diet, I just eat properly.” She has lost about 60 pounds. She says that the only prescription medication she takes is for high blood pressure.

Tyler spent 36 years working for General Electric and had a second career as a tax advisor with an accounting firm. She has lived in the same home for 60 years and now spends winters in Florida. She has two children, five grandchildren, and 18 great-grandchildren.



## Mary Jo Alexander, age 83

Mary Jo Alexander of Newton Center, Massachusetts, recalls her motivation to join the WHI study in 1993. “I was hearing about how clinical trials were mostly done with men, and this study was focusing on women,” she says. Her participation in the dietary modification study changed her eating habits for the better. After being diagnosed with lymphoma 12 years ago, Alexander lost weight and had to focus on gaining it back. What she learned through WHI helped her in that effort, she says. She is still undergoing chemotherapy, but her appetite has improved and she is exercising again. She is now enrolled in the Life and Longevity After Cancer (LILAC) study.

A clinical social worker, Alexander still sees several patients in her private practice. “It keeps my mind on something else,” she explains. Despite lingering fatigue and a slow recovery from a hip replacement nearly two years ago, “I’m still here,” she says. About the WHI study, she adds, “We found out something. It was an important thing to do, and it’s something I’m glad I participated in.”

Alexander has six children, all of them working in service professions, and 12 grandchildren. ■

*“It [participation in WHI] was an important thing to do, and it’s something I’m glad I participated in.”*

— Mary Jo Alexander

## Legacy pendants

The positive response to WHI’s 20th Anniversary token sent to participants in 2014 included requests to re-create it in gold. In response, we have produced a sterling silver and a 22-karat gold plated Legacy pendant that are available for sale on the WHI website ([www.whi.org/participants](http://www.whi.org/participants)).

**Order yours today!**



**Letters:** We love to hear feedback on the newsletter. We regret that we cannot answer questions about individual medical conditions. Send letters to:

### **WHI Matters**

Fred Hutchinson Cancer Research Center  
1100 Fairview Ave. N  
M3-A410  
P.O. Box 19024  
Seattle, WA 98109

### **Staff Information:**

WHI Matters is produced by the WHI Coordinating Center at the Fred Hutchinson Cancer Research Center.





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## Stay in Touch } Please call your Regional Center if your address or phone number changes.



To locate your Regional Center, find the name of your WHI clinic center on the list below.  
 The Regional Center and phone number for each center is shown in the right-hand column.

### WESTERN REGIONAL CENTERS

Kaiser Permanente/Bay Area Clinic, Oakland, CA	<b>Stanford University</b> (650) 725-5307 (888) 729-8442
South Bay WHI Program, Torrance, CA	
Stanford University/San Jose Clinical Center, Palo Alto, CA	
UCLA Center for Health Sciences, Los Angeles, CA	
University of California, Davis, CA	
WHI-UC Irvine Clinical Center, Orange, CA	
Center for Health Research, Portland, OR	<b>University of Arizona</b> (520) 626-5487 (800) 341-7672
University of Arizona, Phoenix, AZ	
University of Arizona, Tucson, AZ	
University of Hawaii School of Medicine, Honolulu, HI	
University of Nevada, Reno, NV	
UC San Diego Clinical Center, Seattle, WA	<b>Fred Hutchinson Cancer Research</b> (800) 514-0325
Seattle Clinical Center, Seattle, WA	

### MIDWESTERN REGIONAL CENTERS

Evanston Hospital (Northwestern University), Evanston, IL	<b>Ohio State University</b> (614) 688-3563 (800) 251-1175
Northwestern University, Chicago, IL	
Medical College of Wisconsin, Milwaukee, WI	
Rush-Presbyterian-St. Luke's Medical Center, Chicago, IL	
Ohio State University, Columbus, OH	
University of Cincinnati College of Medicine, Cincinnati, OH	<b>University of Iowa</b> (515) 643-4840 (800) 347-8164
Berman Center for Outcomes and Clinical Research, Minneapolis, MN	
University of Iowa, Davenport, IA	
University of Iowa, Des Moines, IA	
University of Iowa, Iowa City, IA	
University of Wisconsin, Madison, WI	
Detroit Clinical Center, Detroit, MI	<b>Univ. of Pittsburgh</b> (412) 624-3579 (800) 552-8140
University of Pittsburgh, Pittsburgh, PA	

### NORTHEASTERN REGIONAL CENTERS

New Jersey Medical School, Newark, NJ	<b>University at Buffalo</b> (855) 944-2255 (716) 829-3128
UMDMJ – Robert Wood Johnson Medical School, New Brunswick, NJ	
Albert Einstein College of Medicine, Bronx, NY	
School of Medicine, SUNY, Stony Brook, NY	
University at Buffalo, Buffalo, NY	
Brigham and Women's Hospital, Chestnut Hill, MA	<b>Brigham and Women's Hospital</b> (617) 278-0791 (800) 510-4858
Charlton Memorial Hospital, Fall River, MA	
Memorial Hospital of Rhode Island, Pawtucket, RI	
UMASS/FALLON Women's Health, Worcester, MA	
George Washington University, Washington, DC	<b>Nation's Capital Medstar</b> (855) 944-2255 (716) 829-3128
WHI of the Nation's Capital – Medstar, Hyattsville, MD <i>(Please contact the Buffalo Regional Center at the numbers provided.)</i>	

### SOUTHEASTERN REGIONAL CENTERS

UNC Women's Health Initiative, Chapel Hill and Durham, NC	<b>Wake Forest University School of Medicine</b> (336) 713-4221 (877) 736-4962
Women's Health Initiative of the Triad, Greensboro, NC	
Women's Health Initiative, Winston-Salem, NC	
University of Tennessee, Germantown, TN	
University of Tennessee – Medical Center, Memphis, TN	
Baylor College of Medicine, Houston, TX	<b>University of Florida, Gainesville</b> (352) 294-5211 (800) 944-4594
University of Texas Health Science Center, San Antonio, TX	
University of Alabama, Birmingham, AL	
Emory University, Decatur, GA	<b>University of Florida, Gainesville</b> (352) 294-5211 (800) 944-4594
University of Florida Clinical Center, Gainesville, FL	
University of Florida Clinical Center, Jacksonville, FL	
University of Miami School of Medicine, Miami, FL	

### WHI CLINICAL COORDINATING CENTER

Fred Hutchinson Cancer Research Center, Seattle message line (800) 218-8415