Leading The Way

As a participant in the largest clinical trial ever conducted of women's health, you're making a tremendous contribution. There are many women, like you, who participate in WHI—not as participants, but as scientists working with the information you provide. They share your struggles of being involved with a demanding study that often competes with other priorities. They also share your passion for wanting better and more answers to women's health problems. We'd like you to meet a few of WHI’s outstanding scientists and hear their opinions about how far we've come, and what's ahead:

Sally Shumaker, PhD—Sally is a co-principal investigator for WHI's Clinical Facilitation Center at the Wake Forest University School of Medicine, the director of a national Center of Excellence in Women's Health, and the principal investigator of two WHI-related studies, WHIMS (a memory study) and WHISCA (which looks at cognitive functioning and aging). She's worked as a behavioral scientist for 20 years, studying human behavior as it relates to women's health and aging.

"My mission in life has been to bring the behavioral sciences to medicine, and open up the way medicine looks at health and behavior. There's a growing understanding and recognition of the critical relationship between the mind and the body. Also there's a strong recognition among WHI's investigators that a large part of participating in clinical research is behavioral. In WHI, we're asking women to come into clinics on a regular basis, which is a behavior change. We're asking some women to take pills, which is a behavior, and we're asking some women to change their diets, which involves very complicated behaviors. The women participating in WHI are incredibly dedicated. WHI is unprecedented in that so many women are willing to participate and spend this kind of time knowing that the majority of benefits are not going directly to them.

Just the fact that we are now doing research on women's health is a major advance. We also now have more women going into medicine. Women will look at women's health issues differently than men have traditionally looked at them. Only in the last 10 years has there been an emphasis on the inclusion of women in clinical research. WHI is the premiere study. We're going to be learning things from WHI for the next 30 to 40 years.

I want my children to feel social responsibility and see that part of having a career is because you have an obligation to society. We're trying to do work and generate information that helps everybody."

Shirley Beresford, PhD—Shirley is the principal investigator of WHI's Seattle Clinical Center at Fred Hutchinson Cancer Research Center and a professor of epidemiology at the
Leading The Way
Continued from page 1

University of Washington. As an epidemiologist, Shirley studies why and when diseases or conditions occur in certain people. She is a leading researcher on the role of folic acid in reducing the incidence of neural tube defects, such as spina bifida.

"Over the last 20 years, women's research has moved from being almost exclusively focused on maternal and child health and reproductive issues into much more general interest in chronic disease and conditions in women. WHI will be making a contribution in many, many different areas of women's health research when it is finished.

I have responsibilities as a spouse and as a mother and as a scientist, and the way that I handle it is to try and give exclusive attention to one part at any given time. Our oldest child was born with spina bifida in 1983, and at that time, there wasn't a lot known about the causes of neural tube defects. This led to my research in folic acid.

My interest is much more from the exposure end of things than the disease end of things. I think it is very important to understand all of the consequences of behaviors. I am interested in women's choices of behaviors, such as hormone replacement therapy and dietary change, and how to help people make changes."

JoAnn Manson, MD, DrPH—Besides serving as the principal investigator for Boston's WHI Clinical Center at Brigham and Women's Hospital, JoAnn has a clinical practice as an endocrinologist, teaches at Harvard Medical School where she is a professor of medicine, and is the chief of Preventive Medicine at Brigham and Women's Hospital. She also is a co-investigator of another landmark study, the Nurses' Health Study. Her research has focused on women's health, prevention of heart disease and adult-onset diabetes, and the role of hormonal factors in the development of cancer.

"When my mother died from ovarian cancer 20 years ago, I changed my focus from clinical practice alone to women's health research and disease prevention. My involvement with the Nurses' Health Study first inspired me to become involved with WHI because that study suggested the tremendously important role of nutrition and lifestyle factors in prevention of chronic diseases in women.

WHI is addressing in a randomized trial setting some of the most pressing questions concerning women's health. I think the women in the study are tremendously dedicated, because participating in the study, especially the dietary modification component, requires a major time commitment.

I have two children and it is a challenge to juggle all of these different responsibilities. The one thing that keeps me going is the importance of getting answers to these crucial questions and advancing women's health. I consider it a privilege to be involved. It is an exciting time to be in women's health research because there is so much to be learned."

Smooth Sailing With WHI

Front row, from left to right: Bente Cooney, Mary Thomson, Carol Zervas, Alice Gregal, and Cyndi Reeder (Group Nutritionist). Back row, left to right: Corrina Atwell and Annie Una

Members of the "Ice Cream Cones," a Dietary Change group from the George Washington University Clinical Center in Washington, D.C. sailed into spring with a potluck aboard participant Bente Cooney's sailboat. The group meets in the evenings, as most of its members work during the day. They enjoy peer get-togethers on land, as well!
Bean/Corn/Tomato Salad

1 (15 ounces can) black, dark red kidney, or other cooked dried beans, rinsed and drained
1 (11 - 15 ounces can) whole kernel corn, drained (or two ears fresh, cooked and cut off cob)
2 medium fresh tomatoes, chopped
1/2 - 1 medium raw sweet onion, finely chopped (can use frozen chopped onion)
1/8 cup fresh cilantro (or parsley), chopped
1 tablespoon olive oil
2 tablespoons fresh lemon juice, or to taste
salt, to taste

Mix all vegetable ingredients lightly. Mix dressing (oil, lemon juice, salt & pepper). Add dressing to vegetables. Adjust salt and pepper to taste. Refrigerate overnight if possible to blend flavors.

Great lunch: Serve salad in pita pocket bread.

Alternatives: Add other chopped vegetables, i.e., red or green bell peppers.

Servings: 9 (1/2 cup each)
Fat: 2 grams per serving
Fruit/Vegetable Servings: 0.5 per serving
Grain Servings: 0.5 per serving
Recipe from Janice Taylor, WHI Stony Brook clinic
Died-and-Went-to-Heaven Chocolate Cake

1-3/4 cups all-purpose white flour
1 cup white sugar
3/4 cup unsweetened Dutch-process cocoa powder
1-1/2 teaspoons baking soda
1-1/2 teaspoons baking powder
1 teaspoon salt
1-1/4 cups skim buttermilk
1 cup packed light brown sugar
2 large eggs, lightly beaten
1/4 cup vegetable oil, preferably canola oil
2 teaspoons pure vanilla extract
1 cup hot strong black coffee

Preheat oven to 350°F. Lightly oil a 12-cup bundt pan or coat it with nonstick cooking spray. Dust the pan with flour, invert and shake out the excess. In a large mixing bowl, whisk together flour, white sugar, cocoa powder, baking soda, baking powder and salt. Add buttermilk, brown sugar, eggs, oil and vanilla; beat with an electric mixer on medium speed for 2 minutes. Whisk in hot coffee until completely incorporated. (The batter will be quite thin.)

Icing:
1 cup confectioner’s sugar
1/2 teaspoon pure vanilla extract
1-2 tablespoons skim buttermilk or 2% milk

In a small bowl, whisk together confectioner’s sugar, vanilla and enough of the buttermilk or milk to make a thick but pourable icing. Set the cake on a serving plate and drizzle the icing over the top.

Pour the batter into the prepared pan. Bake for 35 to 40 minutes, or until a cake tester inserted in the center comes out clean. Cool the cake in the pan on a rack for 10 minutes; remove from the pan and let cool completely.

Makes: 16 servings
Fat: 5 grams per serving
Grain servings: 1/2 per serving
Recipe from Eating Well magazine, March/April 1995
Tart Lemon Pie

1 container (8 ounces) fat-free Cool-Whip, thawed
1 container (8 ounces) fat-free lemon yogurt
6 ounces (1/2 of a 12-ounce can) frozen lemonade concentrate, thawed (do not dilute)
Juice from 2 fresh lemons
1 to 2 teaspoons finely grated lemon peel, depending on taste
1 reduced-fat graham cracker crust pie shell

Combine first five ingredients. Pour into graham cracker crust. Place in freezer until firmly set. Allow to sit at room temperature about 5 minutes before slicing. Garnish with twists of lemon peel.

Serves 8
Fat: 3 grams
Recipe from Bobbette Jones, WHI Chapel Hill Clinic
Swiss Chard Sauté

Serve this colorful side dish with poached fish or grilled chicken.

1 bunch (about 1/2 pound) red Swiss chard
1 teaspoon olive oil
1 small onion, thinly sliced
1 large clove garlic, minced
1 large tomato, coarsely chopped (optional)
1 tablespoon grated parmesan cheese
pepper to taste

Remove stems from the chard leaves. Thinly slice stems into approximately 3/8-inch wide pieces. Stack the leaves and cut into 1-inch wide strips. Set aside. In a 12-inch non-stick skillet, heat oil over medium heat. Add chard stems and onion; cook, stirring, for 5 minutes. Add garlic; cook, stirring for 30 seconds. Add chard leaves; cook, stirring, for 1-2 minutes until the leaves are wilted. Cover and cook for 6 minutes, or until tender. Add tomato, if desired, and heat through. Sprinkle with cheese, season with pepper and serve.

Serves 4
Fat: 2 grams per serving
Fruit/Vegetables: 1 per serving
Recipe from American Institute for Cancer Research Newsletter, Spring 1997, Issue 55
Full Speed Ahead

Some people make mountains out of molehills. Others, like Dietary Change participant Eloise Carter, do the opposite—they take mountains and reduce them to molehills. Despite her full-time use of a walker due to arthritis, repeated cornea implants, diabetes, and the inability to drive, 75-year-old Eloise thrives on learning, friendships, and helping others.

Anne Owens, Eloise's Group Nutritionist at the Birmingham Clinical Center, raves about this outstanding participant: “Eloise is a great role model. She doesn’t see anything as a barrier. She feels like there’s always something to learn. Her presence has a tremendous impact on her group, and any group she visits. In her ordinary way, she’s extraordinary!”

Eloise refers to her WHI materials as her “fat studies.” “I tell my friends I’m going to class, like I’m going to school,” she explains. “I love my group...it’s just like old family and friends getting together.”

In addition to joining WHI six years ago, Eloise has also been involved in other health-related activities. She often escorts other seniors to doctor’s appointments: “When they [the doctors] see me, they want to know which one is the patient!” She also enjoys going to sports events, jazz concerts, and to the circus, and volunteering at a local mental health clinic. “I don’t have anyone to sit here at home with me,” she says, “so I need to get out where the people are. The more people around me, the better I feel.”

Eloise feels best when she’s helping others, which motivated her to work as a surgical technician for 20 years, followed by 20 years of running assisted-living homes for older adults. She helped lead the residents in meals, games, outings, and other activities. “We never gave them the idea that they were too old to do anything,” she recalls. Eloise applies the same principles to her own life: “I think I’m doing pretty well for my age as far as getting around and doing things other people can do. Some folks feel like you’re doing a little too much for your age. But you’re not doing too much if it’s not hurting you!”

The WHI eating plan has been fairly easy for Eloise to follow since she was already monitoring her diet due to her diabetes. But she’s picked up some habits that make sticking to her goals easier. “I eat on a divided plate,” she says, “so I can measure the size of my meat portion and get my three vegetables. And the portions—I never eat seconds—no matter how good it is. You’re better off just eating smaller portions and waiting two or three hours to eat something else than to eat so much at one time.”

Eloise enjoyed hosting her Dietary Group meeting at her home last summer. An avid gardener, she was eager to share her beautiful yard with her WHI friends. In addition to growing many flowers year-round, Eloise tends fig and pear trees, as well as pomegranate bushes. “I usually bring flowers to our meetings,” she says, “because they are just so pretty that I want to share them with somebody. Other group members that live on farms bring in something, too, so we just make fun when we’re together!”

Like most things in her life, WHI is a challenge that Eloise takes on with enthusiasm—and everyone she encounters is grateful that she’s a part of finding answers for women’s health.
Low-Fat Bites

■ Spring brings its long-awaited bounty of fresh produce. Along with savoring strawberries, asparagus, and other familiar fruits and vegetables, try something new. Swiss chard is similar to spinach, but with broad leaves and stalks. It can be used in soups, stews, stir-fries, or pasta recipes, or it can be steamed or sauteed and served on its own. To store, wrap in plastic wrap and keep in the refrigerator for up to two days. Trim the ends and peel the tough outer stalks before cooking.
■ For a change of pace, toast a crumpet instead of bread for breakfast. Spread the crumpet with fruit spread, apple butter, honey, or jam.

■ You may not miss the mayonnaise on your sandwich if you try an unusual mustard blend instead. Unique mustards such as tarragon, honey Dijon, dill, curry, garlic, ale, and sweet and sour are fun to sample. Your local supermarket or specialty food store should have plenty to choose from. Try buying smaller jars for more variety.
■ In bean soup or stew recipes calling for ham hocks, substitute roasted red peppers or smoked turkey for smoky flavor without the fat, or use Goya Ham Flavored Concentrate (ham bouillon found in your grocer’s Mexican foods section).

A revised version of the “Died-and-Went-to-Heaven Chocolate Cake” recipe is included in this issue. The recipe, originally published in the Fall/Winter ‘99 newsletter, omitted coffee in the ingredient list. We apologize for the error.