



Hope Ricciotti, MD, and
Monique Doyle Spencer

THE REAL LIFE
body book

A young woman's complete
guide to health and wellness

"This book is honest, frank, smart, and easy to understand. Owning it is a must."

—Nancy L. Snyderman, MD, *NBC News* chief medical editor and associate professor at the University of Pennsylvania

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guide to health and wellness



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First Edition

THE REAL LIFE

body book



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acknowledgments

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We wanted women to find this book to be a constant reference they could turn to over many years. The first step was to make sure we sought the best expertise we could find. We therefore send many thanks to social worker Jane Morgenstern MSW. Her unique understanding of the complex issues facing young women was invaluable.

We wish we could thank all of our friends and families by name. They offered their own experiences, which added important sections, and their support and enthusiasm, which carried us through writing a lengthy and evidence-based book. Family and friends make everything possible!

Hope is very grateful to the many women who have allowed her the privilege of caring for their health and sharing in their lives, and in so doing, have taught her so much about the many strengths of a woman. As a writer, Monique says the most important requirement is that you have a friend who is part inspiring mentor and part terrifying critic, preferably a Marine, for which she thanks Mr. Ed Fouhy.

Many, many thanks.

Hope Ricciotti, MD, and
Monique Doyle Spencer

welcome to the real life body book!

Good news: Even if you've taken less than stellar care of yourself until now, you can move in the direction of better health, regardless of your age. And you can start right now.

A healthy body makes life easier. It's like having a new car all day, every day—one that has new tires, windshield wiper fluid filled to the top, and that new car smell. You can count on a healthy body to give you the energy you need to live well for a very long time.

When we're young, though, we tend to take health for granted, and it's easy to feel like nothing really bad could ever happen to you or your body. The younger you are, the more invincible you feel. But if you haven't been taking care of your body, maybe you can already feel that you need to make some changes.

Well, we understand the body better now than ever and we learn more with each passing year. If your mother reads this book, she'll be stunned by how much we now know about preventing illness. Today an ounce of preven-

tion isn't worth a pound of cure—it's worth a ton of it. Opening *The Real Life Body Book* is a great first step.

How do you make decisions about your body? Think about your body and your health for a minute and then let's look at how you find information and make choices.

Maybe you're the research type. As a medical student I loved having access to unlimited medical information. All of those expensive subscription websites and reference books that I could hardly lift were now mine to explore. It was a gold mine to a young aspiring doctor. So what was the problem?

Within a week, I had diagnosed myself with bacterial meningitis, dengue fever, and a dozen different kinds of cancer, all of them so rare that to this day I have never seen a case. I ruled out rattlesnake bite, but just barely. It's irresistible: the more unfiltered information you have, the more scary diseases you'll find in yourself. You're not alone—if you get a group of doctors talking about medical school,

Welcome to the Real Life Body Book!

ask them if they've ever had the plague. The room will fall silent. Feet will shuffle. Someone will make an embarrassed cough. They're all remembering those nights of shivering fear from doing too much research.

Maybe you rely on the Favorite Four: best friends, Mom, magazines, and the Internet. You already know the problem there: the information may be old (Mom, God bless her) or faddish (magazines) or based on rumors (best friends) or downright crazy talk (the Internet).

So what's the big deal with getting to know the real life facts about your body?

It's this: the decisions you make today will make your future body healthy, sturdy, and energetic—or vulnerable, sickly, and sedentary. Look around at the older people you know. By the time you've read this book, you'll recognize the good or bad decisions they made when they were your age!

You don't need any more stress in your life and a little knowledge can relieve a lot of anxiety. We hope you keep this book for a long time: for the day that you find a lump . . . or develop a zit the day before a job interview.

You can read the book straight through or bounce around or just look up something you

need to know today. Right now you might be worried about that discharge you've got, but later you might be more interested in learning about fertility—or adult acne, or what it really feels like to get a mammogram.

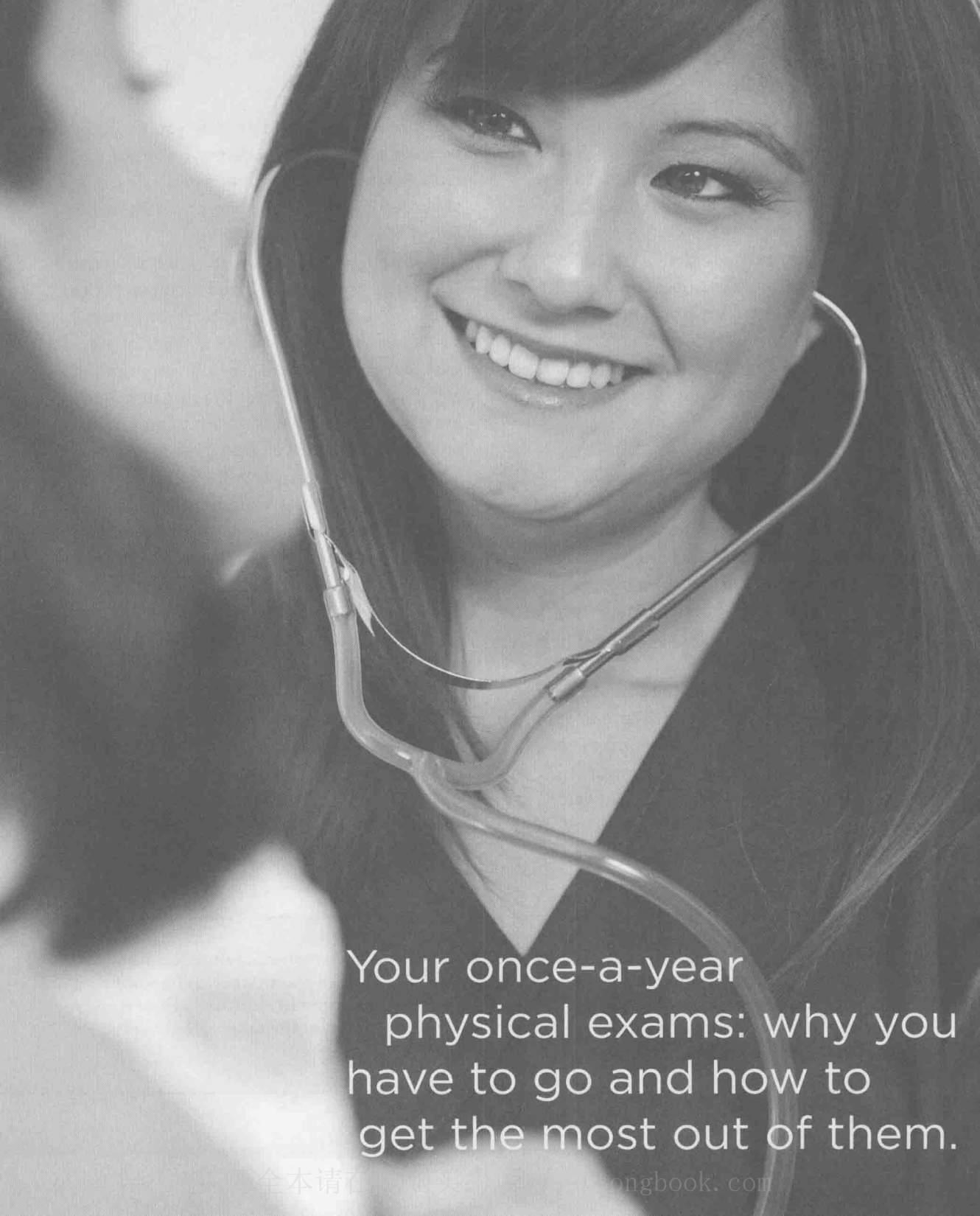
Throughout these pages, when we write "I," that's Hope speaking, and when we write "we," we're referring to doctors in general. You'll also find three different types of sidebars that give you more essential information about your health. A *Real Life Fact* highlights important things that we want to emphasize or that we didn't cover elsewhere in the text, a *Real Life Question* answers the questions that Hope commonly gets from her patients, and a *Note to Self* covers details that you'll want to remember. Words that appear in **blue** are defined in the glossary (see page 430).

Knowledge is the first step if you want to lead a healthy life. This book answers, in full detail, the basic questions: How does your body work? How can you keep it healthy?

It will also help you to become an equal partner with your doctors—a skill that's useful for a lifetime.

Here's to good health!

The material in this book is for informational purposes only. As each individual situation is unique, you should use proper discretion, in consultation with a health care practitioner, before utilizing the information contained in this book. The author and publisher expressly disclaim responsibility for any adverse effects that may result from the use or application of the information contained in this book.



Your once-a-year
physical exams: why you
have to go and how to
get the most out of them.

meet your body and your doctor

You really want to cancel your appointment for a physical today.

You haven't shaved your legs since your cousin's wedding. It's a busy day at work. You're not even sick. Your best friend agrees. Cancel, she says, because that gives her permission to cancel hers too.

You've had physical exams before, but as you've matured, your body has entered a different category. It has stopped growing, you're out of training bras, and your doctor wants to take a look at you from the inside out. No more sweet pediatricians with a teddy bear on the stethoscope. Now there are stirrups involved.

Why bother keeping this appointment? Because your annual physical (also called a preventive-care visit) is one of the most important things you can do for your future health. If you want your first car to look great in five years, you take it in for regular maintenance checks. If you want your face to look great in ten years, you wear sunscreen. Your body needs the same care, so you really need to see your doctor at least once a year, even if you feel fine.

This chapter tells you exactly what an adult woman's physical and gynecologic exams are like, exactly what tests they will do and why you have them, and exactly how to collect a urine sample and whether or not you should carry your sample back to the reception desk. (No, you shouldn't.)

Your annual examination with a family practice doctor or general practitioner is preventive maintenance. Many older women regret that they didn't do a better job with preventive medicine

REAL LIFE FACT: Living on the Edge

The Centers for Disease Control says that the leading causes of death in women ages nineteen to thirty-nine are accidents, cancer, violence, HIV, heart diseases, and suicide. So as you get ready for your annual physical, think about these issues and expect your doctor to discuss them with you and offer advice.

when they were young. Now they look older and feel older than they should, and they know it. Just watch any TV show aimed at older people; almost all of the commercials are for prescription drugs. So many of those ailments could have been prevented years ago. And prevention is always easier than cure.

Many young women only see a **gynecologist** (or “gyn” for short) once a year, and that’s it for health care. As long as you are young and healthy, that can work for you. However, if you have health issues such as **asthma**, high blood pressure, **diabetes**, or a significant family history of heart attacks or **cancer**, you’ll also want to have a primary care doctor, who can refer you to specialists as needed. If you rely on your gyn as your primary doctor, it’s very important that you tell him or her that! You don’t want him or her to assume that somebody else is taking care of your high blood pressure problem.

In the following sections, I’m going to explain what you’ll experience during your annual exam with a general practitioner and what to expect during a gynecology exam. The two exams can be pretty similar, so why don’t

you read both sections, especially if your primary doc is your gynecologist.

Some good news: Today we understand a lot about which exams and tests are necessary for health and which are a waste of your time and energy. You don’t have to worry about issues you can’t control or those that are unlikely to affect you. Instead, you can focus your efforts on the health strategies that can really make a difference for your future well-being.

Getting Ready for Your Annual Visit

Your annual visit should include a physical exam, getting your questions answered, and, if needed, a recommendation for some blood testing and ultrasound or other imaging. You should expect questions and conversation about your mental health and any issues of abuse in your life. You’ll be asked questions about your own health and the health of your family members. And you may be asked if there’s any special reason for your visit. If

you're having any health concerns, now is the time to bring them up.

Before the Visit: Planning Ahead

To get the most out of your annual visit, spend some time on a few issues in advance. Start by thinking carefully about your body and any questions you have about it. Be prepared to discuss any health problems you have now or have had in the past. Is your period a problem for you, perhaps giving you abnormal pain or arriving on an irregular schedule? Is the vaginal discharge you have normal, or should you be concerned? What should you do about a persistent headache? What's your sex life like? Are you at a healthy weight and fitness level? How do you handle stress? Any rashes? How's your mood? Your doctor will ask you about

smoking, alcohol, and other drug use. S/he wants to make sure you're driving safely and soberly and using protective gear for sports, such as a bicycle helmet.

Take the time to find out about the health of your immediate family members—mother, father, brothers and sisters, and grandparents. Your personal risk for illness is often influenced by the health history of your family. When your health history is complete, tests and exams can be tailored for any risk factors for illnesses.

This counseling and education part of your annual physical is as important as the physical examination and laboratory testing in many ways. Improving your health knowledge and talking openly with your doctor are two of the biggest reasons to come for an annual exam. It's worth taking the time to build a

REAL LIFE FACT: Family Checklist

Before your first annual physical with a doctor, one of your jobs is to research your family's health history. Sometimes it's nearly impossible to collect an accurate family history, for many reasons. You may be adopted, or your parents may be. You may come from a family that rarely talks about illness, so nobody knows the health problems of your aunts and uncles or grandparents. Just do your best to gather what is known. It helps to have as many pieces of information as possible, but screening tests can fill in many blanks. Your doctor can still take very good care of you!

Use this checklist to review your immediate family's medical history. Does anyone (parents, grandparents, brothers, or sisters) have any of the following?

- | | | |
|---|--|---|
| <input type="checkbox"/> Alcoholism/addiction | <input type="checkbox"/> Diabetes | <input type="checkbox"/> High cholesterol |
| <input type="checkbox"/> Breast cancer | <input type="checkbox"/> Heart attacks before the age of sixty | <input type="checkbox"/> Obesity |
| <input type="checkbox"/> Colon cancer | <input type="checkbox"/> High blood pressure | <input type="checkbox"/> Ovarian cancer |
| <input type="checkbox"/> Depression | | <input type="checkbox"/> Thyroid disease |

comfortable, trusting relationship with your doctor. This can be hard for a healthy person to do, as you may see your doctor only once a year. So make the most of each physical to connect and communicate.

Confidentiality: Is It Really Safe to Talk?

Your visit with your doctor is confidential. If you don't speak openly about any issues you have, you might not get the right counseling and screening done at your appointment. You really can tell your doctor that you have used drugs or had unsafe sex, and your news must be kept confidential. If you share openly, your doctor will have better information, which means better medical care for you.

To safeguard the privacy of your health care information in our electronic world, in 1996 Congress passed the Healthcare Insurance Portability and Accountability Act (HIPAA). This is incredibly complex legislation, but it basically means this: your health care information is private. Under HIPAA, no one, not even your family members, can view your medical records or obtain information from your doctor (there are some exceptions for patients under eighteen, which vary by state). HIPAA can sometimes cause you some extra red tape, as you have to sign release forms to allow your information to be transferred to your insurance company and other health care systems, but generally it's worth it to maintain your privacy.

But Why Does the Doctor Have to Ask That?

Expect some open discussions about sexuality and contraception. Your physical is a good place to be completely honest about your sex life. Your doctor needs to know if you're having sex and what protection you use against disease and, if you want to avoid it, pregnancy. These can have a big impact on your health. You can also expect to discuss these issues with your gynecologist during your annual exam; see the section later in this chapter for more information about your gyn visit.

If you feel that your doctor isn't being as thorough as we're describing here, you should raise these issues yourself, or perhaps think about changing doctors! Your doctor is not being nosy—well, maybe s/he is in his or her private life, but in this meeting it's his or her job to understand your life and background so that s/he can partner with you in your health care. In fact, one of the most important messages to you in this book is to encourage you to be an equal partner in your health care!

Remember that I'm talking about your visit with your own doctor. Some employers require physicals with a doctor they choose. I'm not a lawyer, but in my opinion that is not the place to share every little detail about your health or your lifestyle.

Is This You? "I Would Go If They Didn't Weigh Me."

Your doctor should also ask about your diet and physical activity. S/he hopes that your

weight is in a healthy range, but also knows that for many of us, it's not. Some heavy women even delay their doctor appointments out of fear of feeling uncomfortable about being weighed. As tough as this may be for you, try to put these feelings aside. Make and keep the appointments you need to maintain a healthy body, whatever weight it is.

I want to repeat this. Don't ever let your weight keep you from seeing the doctor. Please.

The Physical Exam—What Actually Happens?

Maybe you've already had a physical someplace besides the school infirmary, but we'll start with a refresher course. You'll check in at the front desk and will be handed forms to fill out. These may include a detailed health questionnaire about your family medical history, plus your insurance information and HIPAA form. If you have insurance, bring your insurance card with you. You may be required to make a co-payment.

What Are My Vitals and Why Are They Being Checked?

Then you'll be called to have your "vitals" checked: your height, weight, and blood pressure. Some people hate being weighed. Try to remember that everyone who examines you has had the same experience, because they all have to have annual physicals too.

NOTE TO SELF

If you're uninsured, you may be asked to pay a portion, or even all, of your bill at your appointment. If your income is low, you may qualify for Medicaid. If you can't afford the care you need, consider looking for a community-based health center that offers care on a sliding scale based on your income. If you have an emergency and require hospital care, some nonprofit hospitals offer free or discounted care as part of their mission or tax status.

Low-cost health care differs by state or region. You can do research on the Internet or by calling toll-free to see what assistance is available in your area. Work with the finance staff at the hospital or clinic to help you navigate the system. Be sure to read the appendix, Tools to Use, for a lot more information.

To check your blood pressure, the medical assistant will put a cuff around your upper arm and put a stethoscope under it. Then s/he will pump air into the cuff until it feels extremely tight. Don't worry; this lasts for only a few seconds. Sometimes it's done by a little machine. S/he'll release the air and record the results. (More on blood pressure in chapter 5, Your Heart.)

NOTE TO SELF

If your blood pressure tests high, ask that it be taken again later in the exam. Many people (including one of the authors!) have "white coat" hypertension (high blood pressure), which is when the anxiety you feel during the exam causes a high result that's not typical for you.

Top Off Your Tank: The Urine Sample

Step two may be a urine sample, so be sure you've had some water before your appointment. Someone will hand you a cup and send you to the bathroom to collect it.

All you have to do is sit on the toilet, pee into the cup, put the cap on, and wipe the spills off with toilet paper. Sometimes, though, s/he will ask you to do what's called a clean catch test. S/he will hand you some wipes that you'll clean yourself with before peeing, wiping from front to back, from around the **urethra** where you pee, back past the **vagina**. S/he will want your midstream pee, which is not the first few drops, so you pee for a second or two, stop if you can, then start catching the pee. S/he will tell you where to leave the collected sample. If s/he doesn't, ask someone. Don't stay in the bathroom wondering what on earth to do. Everybody has been in your shoes, including the front desk staff, the nurses, and the doctors.

The Gown

Next, you'll be shown to a small exam room with a table or platform that you sit on. They'll

ask you to get undressed and then leave the room while you do. You'll be given an unattractive gown (also called a johnny) to keep you covered. Some are cotton, others are made of thick paper that make you feel wrapped like the fish you bought for dinner. If you're cold, keep your socks on, unless you've noticed anything unusual about your feet that you want to show the doctor.

The johnny opens in the back, so put it on that way unless you're told to put the opening in the front. It lets the doctor look at one body part at a time. We think that makes it more comfortable for you.

As you know from the movies, some patients have a habit of walking around in a gown without closing the back. You'll notice

NOTE TO SELF

If you need a plus-size gown, ask for it. Many doctors have them. If s/he doesn't, you can ask for two gowns. Put one on with the opening at the back, and then drape the other one over your shoulders and down your back. Or do whatever makes you feel most comfortable. And remember that many, many people before you have had the same problem.

REAL LIFE QUESTION: Why do you want to see my pee?

Pee tells us a lot about your health in a quick snapshot. It's an easy way to find anything that shouldn't be there—like excess sugar, blood, protein, or bacteria—that might alert us to a health problem. It can also be used to test for pregnancy.