

THE BRIDGE

"Let every man praise the bridge that carries him over."
-- English Proverb

Welcome to the third issue of the monthly newsletter, *The Bridge*. This publication is a product of the Community Center and is designed to be an informative source about reentry.

This month's issue focuses on reproductive health. Each month we will focus on one main topic or theme and deliver information pertinent to that area of discussion.

"An Ounce of Prevention is Worth a Pound of Cure."

Good health doesn't happen simply because we want to be healthy. It is the result of being responsible to our bodies by eating healthy amounts and types of food, exercising regularly, having safe sex, avoiding harmful toxins, getting regular check-ups, paying attention to warning signs of health problems, and following treatment recommendations. While clinicians can treat symptoms, they can only treat what we report to them and if we request medical visits. Ignoring a health problem or delaying a routine medical visit is hazardous to your health. Indeed, preventing illness is the best way to stay healthy. Prevention requires making healthy choices, which includes visiting the doctor regularly and having routine diagnostic tests for common problems.

One of the most important annual medical appointments for women is to a **gynecologist**. Having an annual **Pap testing** (also referred to as a pap

smear) can diagnosis abnormal cells that may result in serious health problems, particularly related to sexually transmitted infections and cancer. A **mammogram** is another important diagnostic test for women. This test is recommended annually for women 50 years or older and for women 40 to 49 after consideration of the risks and benefits. Monthly self breast exams are recommended for women of all ages.

Seeking Safety Reentry Research Study

Researchers from Rutgers are conducting a study of a new trauma and reentry program. To be eligible for the study, you must

- have experienced or witnessed emotional, physical, and/or sexual abuse at some point during your life ;
- have a history of drug/alcohol use problems; and
- be within 12 to 24 months of your parole eligibility date.

Eligible women will be enrolled in a 14-week program called Seeking Safety, followed by Community 101.

If you think you are eligible and want to learn more about the **Seeking Safety Reentry Study**, drop a slip addressed to Dr. Wolff with your name, number, and housing unit in the Community Center box.

The Bridge's Mission

The Bridge provides reliable, timely, and useful information about reentry and the process of returning to the community.

About *The Bridge*

The Community Center's newsletter is produced monthly and will feature topics related to reentry.

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The Community Center and its newsletter are part of the practice initiative of the Rutgers' Center for Behavioral Health Services & Criminal Justice Research.



What is Human Papillomavirus (HPV)?

Human Papillomavirus (HPV) is a virus that infects the skin and mucous membranes. Roughly 30 to 40 types of the over 140 types of HPV are sexually transmitted. Some of the sexually transmitted types of HPV cause genital warts, some cause cervical cancer, and others have no symptoms at all. In most cases, the immune system of the body will naturally fight off the HPV infection.

Over 30 different types of HPV are responsible for producing genital warts. All these virus types are spread by direct contact with infected sites on the skin where warts have appeared or by contact with a surface that has been contaminated by contact with warts. HPV infects only the topmost layer of the skin and is responsible for the appearance of skin growths called warts. They may appear anywhere on the outer surface of the body, including the moist mucous membranes near the mouth, anus, and genitals. Genital warts are painless and tend to occur as clusters of up to 10 small, pink growths with rough surfaces. It may take as long as 3 to 4 months or even 2 years for a person who has had contact with HPV to develop warts.

While the most common symptom of HPV infection of the skin is the appearance of warts, it is possible to have the infection without any symptoms.

Not for Women Only – HPV affects Men

Men are often infected with the virus without ever showing symptoms. Far more men than women carry the virus without

knowing they have it. Infected men are suspected for the spread of the infection because their lesions are not detectable. Currently there are no tests for HPV in men.

For women, HPV can take a deadly turn. At least five of the HPV types that cause genital warts have been linked to cervical cancer.

How is HPV diagnosed?

HPV can be detected visually if warts are present or by a Pap test. A pap smear is a routine part of the annual gynecological exam.

The Pap Smear or test, is short for Papanicolaou test, named after Dr. George Papanicolaou, who introduced the cell-sampling technique in 1949.

The Pap test examines cervical cells for abnormal or pre-cancerous changes in the cervix that may suggest cancer. There are now DNA tests to detect an HPV infection in women without symptoms; these tests are done on cells scraped from the cervix.

How is HPV treated?

Visible genital warts can be surgically removed or cauterized electronically, both are simple outpatient procedures. Other treatments include freezing the warts (cryosurgery) or applying strong topical medications. Several office visits may be required to remove the warts completely and permanently. Warts, however, can grow back after removal if the human papillomavirus is not completely removed from the infected skin.

Cervical cancer is treated with surgery, radiation therapy, and chemotherapy.

How to prevent HPV?

HPV is transmitted by skin-to-skin contact, not through the

exchange of bodily fluids. For this reason, intercourse is not needed for HPV transmission. This means that condoms have limited effectiveness preventing the transmission of HPV.

Abstinence is the only known way to prevent HPV infection. The next best method of prevention is to limit the number of sexual partners over your lifetime and avoid partners who have had multiple partners. Vaccinations against HPV have been developed for females from ages 9 to 26. The current vaccine protects against four types of HPV related to cervical and genital warts.

If you want to learn more about HPV, there are books available in the Community Center Library.

DID YOU KNOW?

Human Papillomavirus (HPV) is the most common sexually transmitted virus. There are over 140 strains of HPV and over 30 are sexually transmitted. An estimated 50% of sexually active adults will acquire genital HPV at some point of their lifetimes.

Most people do not know that they have the virus because they have strains that a healthy immune system can fight off. Some strains of HPV, however, can cause cervical cancer. A **Pap test** can identify early changes in cervical cells (cancer).

Routine Pap testing can identify problems *before* cancer develops. Preventing cervical cancer depends on timely diagnosis. If treatment is required, cervical cancer is most treatable when detected early.

BOOK CORNER

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Our Bodies, Ourselves

The Boston Women's Health Book Collective

This is a CLASSIC book about women's health and sexuality that is written by women, for women. Since its first newsprint version in 1970, *Our Bodies, Ourselves* has been created and revised by women speaking from their own research and experiences about our bodies, health, and medical care.

This book offers women the tools to take care of themselves, from eating well and becoming more physically active to learning how to cope better with stress. *Our Bodies, Ourselves* provides helpful, clear information about substance abuse, heart disease, eating disorders, and many other conditions that confront women.

Our Bodies, Ourselves is about much more than self-help. Many aspects of our health, from workplace safety to sexual violence, are beyond an individual's control. There are political, economic, and social factors that affect our health and medical care: the industrial plants polluting the environment, the fast-food giants pushing junk food, the pharmaceutical companies unethically promoting drugs, and the dismantling of our social safety net. *Our Bodies, Ourselves* addresses these issues and advocates for collective action; we can change these conditions only by working together, sharing our stories with other women, and advocating for policies and programs that protect the health of our families, our communities, and the world.

One of the most distinctive features of this book is the use of real women's voices. These first-person stories throughout the text have been collected from conversations, letters, and e-mail messages that span the globe. No matter who we are, we often need information and support to make healthy changes. If we are trying to get more exercise, for example, inviting a friend to share a walk may make it more fun. The same principle extends to issues beyond our individual well-being: by working together, we can bring about change. *Our Bodies, Ourselves* serves as a first step on such paths, offering information, stories, and resources so that we can take care of ourselves – and one another.

If you are interested in learning more about your body and women's health in general by reading *Our Bodies, Ourselves*, fill out an appointment slip for the Community Center (check off library time); drop it in the Center's box, and look for your name on the daily absentee sheet.

Myths about STIs: DON'T BELIEVE THEM!

1. You can tell by looking if someone's infected.
2. Being faithful to one partner will keep you safe.
3. If he pulls out before he comes, you won't be exposed.
4. Birth control pills or a diaphragm will protect you.
5. Lesbians don't get STIs.

Q & A



Q: What are STIs and how are they transmitted?

Sexually transmitted infection (STI) or sexually transmitted disease (STD) is a term applied to a variety of infections (diseases) that are passed from one person to another primarily through vaginal, oral, or anal sex. Infections transmitted through sex include HIV, chlamydia, gonorrhea, syphilis, genital herpes, HPV, hepatitis B, trichomoniasis, and bacterial vaginosis (BV).

STIs are spread primarily through blood, semen, vaginal secretions, and the discharge from STI-related sores or lesions. The most likely way to get an STI is to have vaginal, oral, or anal sex without any protective barrier between the body parts involved. You can also get infected through contact with sores or lesions on other parts of the body, or through sharing razors, needles, or an object like a sex toy, if body fluids from another person are on it. Some STIs, like herpes, pass from one person to another through skin-to-skin contact.

RECOMMENDATIONS

Prevention is the best way to avoid getting a STI. This may include delaying sex until we know our partner(s) well enough to talk about the risks of disease and ways to protect against it. The willingness to talk about safer sex and STI prevention may be a good indicator of whether both partners are really ready to have sex. If you want to have sex, be prepared to protect yourself. Keep your safer-sex supplies within easy reach. Latex condoms (rubbers), used during vaginal, oral, and anal intercourse, are the safest and best-known barrier protection.



IN THE SPOTLIGHT

Joyce Phillips was released last month from the Maximum Compound to The Apostles' House in Newark. In just three weeks, she has a room of her own, an abundance of personal items, lots of privacy, a vibrant business making clothes and crocheting slippers for \$5 a pair (she had orders for 20 pairs to be completed over the weekend), personal identification (social security card, birth certificate, and a New Jersey state ID), and she is signed up for school. She is "happy" and "so grateful." Joyce has relied on support from The Apostles' House, Forge, the One-Stop Center, and the Ex-Offender Program (all of which she learned about from the Essex County Resource Binder in the Community Center). In the spirit of giving back, Joyce nurtures the young mothers and their children at The Apostles' House, and helps them to set boundaries, resist temptation, stop attitude wildfires, and other skills learned in Community 101. She is working with Dr. Wolff to begin Community 101 workshops at The Apostles' House and a chapter of the Book Club. Joyce is practicing her "voice" and the philosophy of "each one, teach one," and living with healthy boundaries and goals. ☆☆☆☆☆

What is Inflammatory Breast Cancer?

Inflammatory breast cancer is a rare and aggressive form of invasive ductal breast cancer. The first symptom is redness of the skin, which is why it is called inflammatory. It is treated with antibiotics. If symptoms persist, a biopsy of the breast and the skin is used to diagnose cancer. The usual treatment is chemotherapy first, followed by mastectomy and radiation.

Most women who get breast cancer have no family history or known genetic risk, and 70 percent have none of the known risk factors besides age. About 267,000 women per year will get a diagnosis of various kinds of breast cancer. The rate at which new cancers are diagnosed has increased over 40 percent since the early 1970's, and the number of cases continues to rise.

Even though the cause of most breast cancer is unknown and nothing is guaranteed to prevent cancer, some studies have shown that certain health strategies are associated with lower risk.

- **Be physically active** – get at least three hours of exercise every week.

- **Eat more vegetables and fruits and less fat.** Limit alcohol to no more than one drink a day.

- **Carefully weigh risks and benefits before using hormone-related medications,** such as birth control pills, fertility drugs, and hormone treatment for menopausal discomforts.

- **Breast-feeding our babies** not only develops their immunities to disease but also lactation reduces cancer risk in the mother.

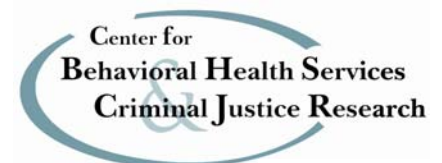
- **Microwave in glass or ceramics, not plastic.** Don't let plastic food wraps touch high-fat foods such as cheese or meats during heating.

Why get a mammogram?

A mammogram is an x-ray of the breast. Mammography is a safe, simple procedure requiring low doses of radiation. The resulting breast x-rays, or mammograms, help a doctor to diagnose breast cancer. Doctors recommend a mammogram for women younger than age 40 years for specific reasons or if there is a strong family history of breast cancer. Women ages 40 to 50 years should have a mammogram done every 1 to 2 years. Women 50

years or older are recommended to have a mammogram annually. Mammography exposes a woman's breast to radiation; however, the dose is lower than the amount received naturally from the environment over a year's time. Before having a mammography procedure, you should not wear powders, lotions, or deodorants because they can show up on the x-ray. For each x-ray procedure, one of a woman's breasts is compressed between two flat, transparent plates. The pressure of the plates may cause brief discomfort. A mammogram is just one method of detecting breast cancer and is best utilized in conjunction with regular self-examinations, visits to the doctor, and possibly ultrasound scans.

Books are available in the Community Center on these and other issues related to women's health.



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