

WELL NOW

Winter, 2004



UNIVERSITY OF OREGON

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Carbohydrates: Uncovered!

Why carbs are not as bad as they may seem.

Under pressure?

Blood pressure is not just an issue for our parents! Learn how you might be affected by high blood pressure.

Just Don't Dip It

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Learn how much caffeine is ok for your body

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Coming out with student herb use.

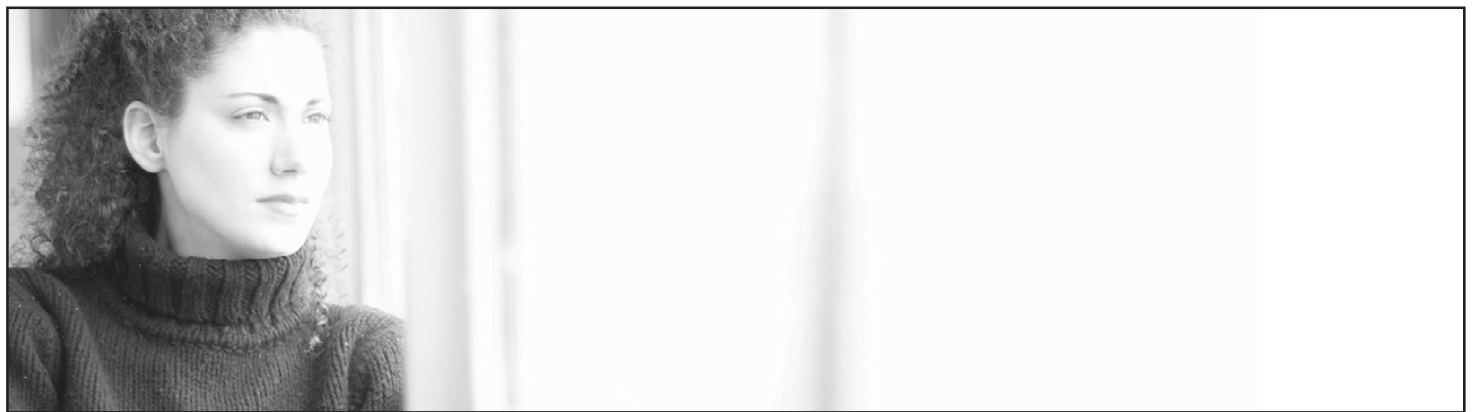
The Young Man's Cancer

What to feel for when checking for testicular cancer

Health Happenings

Find out about upcoming events through the University Health Center's Health Education Program

Feeling SAD? *shedding light on seasonal blues*



By Lauren Peters

It's that time of year again...the dark, dreary days of winter in Oregon. For many students this simply means pulling on a rain jacket and grabbing an umbrella on the way out the door. But for others, this darkness is the culprit for a condition called SAD, Seasonal Affective Disorder. Put simply, SAD is a kind of depression in the winter months, typically from October through March.

According to University of Oregon Psychiatrist, Dr. Jerome Vergamini, the onset of this disorder is correlated with the increased level of melatonin that is released from the pineal gland in the brain. Melatonin is a hormone produced only in the dark. The increased levels of melatonin have been shown to have a direct relationship with

increased levels of depression.

HOW COMMON IS SAD

Students, especially those new to the Northwest, may notice a change in their mood during these dark months. According to the National Institute of Mental Health, SAD affects 10 to 25 million Americans, with at least 80 percent of the cases being women. You may be at risk for Seasonal Affective Disorder if you have three or more of the following symptoms during the dark months of the year:

1. **Depression**
2. **Not motivated**
3. **Irritable**
4. **Lethargic**
5. **Sleep difficulties**
6. **Crave a high carbohydrate diet**
7. **Avoid friends and family**

LIGHT THERAPY ON CAMPUS

Luckily there are several resources available for students who may have Seasonal Affective Disorder. The Health Center employs two licensed psychiatrists that can help rule out other medical conditions, prescribe use of full spectrum lights and/or medication. The Counseling Center also has a set of full spectrum lights (often called SAD lights) that students can use on a drop-in basis or schedule by calling 346-2706. The SAD lights are 5-20 times brighter than normal indoor lighting. In a typical light therapy treatment, an individual reads under the light every day for 30-60 minutes. It takes about four days to have effects and should be continued daily throughout the winter months. For more information you can contact the Counseling Center at 346-2706 and the Health Center at 346-2770.

Helping a Friend *what to do when someone you love has a drug problem*

By Ursula Evans-Heritage

The use of alcohol and other drugs is common among college students, so it is sometimes difficult to make the distinction between social use and problem use. Seen by many of us as a fun way to be with friends, problems can creep into our lives with stealth. In an attempt to better identify problem use, I spoke with a professional at the UO Counseling Center. She talked to me about how I can help friends that I worry about.

WHEN IT'S A PROBLEM

Symptoms of problem drug use vary from person to person, but an easy indicator is if substance use is interfering with the

achievement of personal goals. According to Counselor Stephanie Allred, only the individual is truly able to determine whether or not they have a problem. However, if you are worried about a friend, here are a few strategies for approaching them.

First, do not approach your friend in an intimidating or embarrassing manner. Try to talk to them alone or with just a few close friends. Do not attack them by using accusations, such as "You're an alcoholic." Instead, focus the conversation on how you feel, and try to have specific events to back up your argument. For example, "I was really scared last weekend when you..." It is important that you express empa-

thy for the person, while at the same time empowering them to make their own decisions. One such decision can include visiting the counseling center.

HOW TO SUPPORT

If your friend does decide to get help, they will need your support. This can come in the form of listening to them or joining them in healthy social activities. It is important to realize that there is only so much you can do to help another person; the individual has to really want to get better in order for recovery to work.

For more information the UO Counseling Center may be reached at 346-3227. Both individual and group counseling are offered free of charge.

WARNING SIGNS OF DRUG RELATED PROBLEMS

<http://www.stopdrugaddiction.com/drug-facts.htm>

- **mood swings**
- **unreliable, unable to finish projects**
- **unexpressed resentment and secret hatreds**
- **dishonesty; lies to family, friends, employers**
- **withdraws from those who love them; isolates self**
- **may appear chronically depressed**
- **may begin stealing from family and friends**

The Dangers of Dip

By Josh Green

We all know about the dangers of smoking cigarettes; have heard the mortality stats, have seen the ads on television, and the billboards on the side of the road. Recognizing the dangers of cigarette smoking is very important. However, there is a lack of awareness surrounding the risks associated with chewing tobacco.

Chewing tobacco is no safer than smoking cigarettes. According to cancer facts and figures from the Journal of the American Dental Association, when chewed, tobacco delivers even more nicotine making it more addictive than smoking. Most people who do not chew see it as a disgusting, dangerous habit, but adolescents are very impressionable. Seeing professional athletes, older siblings, or friends dipping can provide the impetus to start. I myself started chewing when I was a sophomore in high school because I looked up to my older brother who chewed. Recently accepting the fact that I was addicted, I realize how naïve it was to assume that I could escape the cancer, gum disease and tooth loss associated with dip. I decided to try to quit and am glad to say that so far I have been successful.

If you or somebody that you know chews or smokes and is interested in quitting, you should know that the University Health Center is offering FREE nicotine replacement therapy (including nicotine gum and patch) through a generous grant from the Fred Hutchinson Cancer Research Institute. If you are interested call Health Education at 346-4456 or stop by our office just past the pharmacy on the first floor of the Health Center to set up an appointment.



Hypertension



By Missy Columbo

High blood pressure is an issue we typically associate with folks our parents' age. As young college students, we shouldn't have to worry about this condition also known as hypertension! Right? That is what I thought before I became a Peer Health Educator. Through this class I have come to learn that hypertension does indeed affect many people our age.

Blood pressure is measured routinely at the Health Center, and yet many students do not know what

their values are or what they mean. Healthy normal values are at or below 120/80. Hypertension is classified as blood pressure above 140/90. The upper number indicates the pressure of blood against the arteries immediately after the heart contracts. The lower number indicates the pressure against the arteries between heart beats. High blood pressure typically has no warning signs, so that many people with hypertension have it without knowing it.

Hypertension matters because it is linked to heart disease, the

leading killer in the US. It is also correlated to a number of other chronic diseases. And while it may take years to cause the damage associated with these diseases, it makes infinite sense to prevent hypertension in the first place. Fortunately there are measures we can take today to prevent hypertension. These measures are the general health promoting superstars: physical activity, a healthy diet that is low in saturated fat and sodium, alcohol in moderation or not at all, and

maintaining a healthy weight. Put most simply, this translates into 30 minutes of exercise most days of the week, limiting fat to 1/3 of your daily calories, and limiting alcohol to one drink/day for women and two for men.

Come in to the Health Education Office in the Health Center and get your blood pressure checked for free. One of the Peers can provide more details about heart health. It will only take a minute and may open your eyes to improved living!

Destigmatizing Carbohydrates

By Akiko Gordon

Carbohydrates are getting a bad rap these days. Processed and refined carbohydrates which are low in nutrient density have certainly contributed to this rap. The low-carb diet craze has also weighed in. I would like to remind us of the simple virtues of the often maligned carbohydrates and shed some light on a misleading labeling trend.

There are two types of carbohydrates— complex and simple. While both are sources of energy (i.e. 4 calories/g), complex carbs also provide essential vitamins, minerals and fiber. Dietary fiber is classified as a carbohydrate, present only in plant based foods, but it is not actually digested. Fiber is classified as soluble or insoluble. Soluble fiber has been shown to help lower blood cholesterol and insoluble fiber is an important aid in normal bowel function. Fruits, vegetables, whole-grains, nuts, beans and legumes are good sources of both soluble and insoluble dietary fiber. The RDA for fiber is 20-35 grams/day.

LOW CARB CRAZE

Low-carbohydrate diets have been popular in the mainstream since at least 1972, when the late Robert C. Atkins, M.D. introduced his book, "Dr. Atkins' Diet Revolution." The Atkins Diet promotes a reduction in carbohydrate intake so that the body will use fat, instead of carbohydrates, as its primary source of energy. In the induction period of the Atkins Diet, dieters must limit their carbohydrate intake to 20 grams per day, which eliminates most foods rich in fiber (e.g. whole grains, fruits, vegetables and legumes). The dieters are told instead to eat unlimited high protein foods such as red meat, eggs and cheese, which are typically high in saturated fat and low in fiber. Such a diet over time, increases the dieter's risk of developing heart disease, kidney stones and osteoporosis.

READING BETWEEN THE LINES

To know what you're eating, you probably turn to

the food label. According to the Food and Drug Administration (FDA), the values listed on food labels for total carbohydrate should include "all carbohydrate, including dietary fiber and sugars listed below it." Some food producers have been advising the consumer to subtract fiber (which is indigestible but does contribute calories through a process of fermentation) from the total carbohydrate count.

For example, Trader Joes offer a whole wheat tortilla by LaTortilla Factory with the total carbohydrates, fiber and total net carbohydrates clearly listed on the package. Pitching to the low-carb dieter, the package claims that one tortilla has 11 total grams of carbohydrates, yet only "three net carbs." Their website states: "To get three grams of carbohydrates you deduct the grams of dietary fiber (eight grams) from the total carbohydrate grams (11 grams) to get net carbohydrates grams (three grams), because according to the Code of Federal Regulations set by the Food and Drug Administration, dietary fiber is non-digestible."

According to the FDA, however, we DO need to include dietary fiber in total carbohydrate grams and must multiply total carbs by 4 calories/g. While fiber is not "digestible" it does provide calories through a fermentation process further down the digestive tract. For those of us who want to do the math, we multiply the total fat grams by 9, multiply the total carbohydrate grams by 4 and multiply the total protein grams by 4 to get the calorie total.

MORE INFORMATION IS AVAILABLE

For those of us who don't want to do the math, the UO Health Center's Registered Dietitian, Kristen Olmos, can answer questions about low carbohydrate diets and offer nutrition counseling. Appointments can be made at 346-2770. Olmos also teaches a workshop called Boiling Water 101 where students can learn skills to cook fast, nutritious and delicious veggie meals. Register by calling 346-2794.

Sound Sleep or Counting Sheep?

by Lilee Hua

How much of a role does adequate sleep play in your school performance? Do you constantly find yourself dozing off, taking power naps, or skipping class to get extra sleep during the day? By not providing yourself with sufficient rest, you may be harming yourself more than you think.



TAKE A MOMENT TO TEST YOUR SLEEP IQ WITH THESE T/F STATEMENTS.

- 1) Sleep is a time when your body and brain shut down for rest and relaxation. True/False
- 2) Regularly and unintentionally dozing off during the day may indicate a more serious medical condition than just sleep deprivation. True/False
- 3) People need less sleep as they grow older.

True/False

- 4) The body has a natural ability to adjust to different sleep schedules, such as pulling an "all-nighter." True/False

NOW LET'S SEE HOW YOU DID.

1) **False.** Although sleep is a time when your body rests and restores energy, it is also a mentally active state that affects both your physical and mental well-being. Adequate restful sleep, like diet and exercise, is critical to good health. Insufficient restful sleep can result in mental and physical health problems.

2) **True.** Still can't seem to stay awake and focused even though you slept a good 7-8 hours the night before? This could indicate other sleeping problems despite getting enough hours of sleep. According to the National Institute of Health, approximately 40 million Americans suffer from sleeping disorders. An untreated sleep disorder can reduce your daytime productivity, increase your risk for accidents, and put you at risk for illness.

- 3) **False.** Now that we're past our adolescent years, we think we don't need as much sleep. As college students, we don't always find the time for adequate sleep. This can interfere with our schoolwork and grades. Try going to bed at the same time every night and getting up at the same time every morning. Sleeping in a cool, dark, quiet place at night may improve the quality of your sleep.
- 4) **False.** The human biological clock typically programs us to feel sleepy during the nighttime hours and active during the daylight. Fighting your body's own biological clock by staying up all night to study for a midterm reduces your retention of the material. Studies show that adequate sleep will help you focus more while taking an exam.

If you find yourself feeling groggy most days, the University Health Center has medical practitioners available for consultation. A basic appointment is \$6 and can be billed to your student account. Call 346-2770 to schedule an appointment. This could shed light on brighter, more refreshing days.

America's Favorite Psychoactive Substance Is Served in a Cup

By Emma Thornburg

It's early and brisk. Herds of students scurry into the doors of cafes where they are met with the musky, familiar smell of morning. After ordering their personalized concoction, their caffeine is administered and is in full effect within a half an hour. For most individuals, caffeine's direct effect on the nervous system allows increased alertness, elevated mood, and improved short-term memory, which are the main reasons for its popularity. According to numerous health professionals, caffeine consumption is typically not harmful in moderation. In excess, however, caffeine can have adverse short term and long term effects which outweigh any direct, positive stimulation caffeine provides. The question, then, is how much is OK?

CAFFEINE BACKGROUND

Caffeine is a psychoactive drug found in many naturally occurring (e.g. coffee, cocoa, and chocolate) and manufactured (e.g. many headache, diet, and sleep suppressant pills) substances. Since each of us has a different level of sensitivity to caffeine, the point at which adverse effects kick in will vary between individuals. Less than 300 mg of caffeine (about two 5-oz. cups of coffee) per day appears to be safe for most people. Of course, not all cups of Joe are created equal. One 16-oz. Grande from Starbucks and you've already maxed out your daily dose of caffeine, taking in roughly 370 mg.

WEIGHING IN THE HEALTH FACTORS

When they do kick in, adverse symptoms of caffeine typically include restlessness, dizziness, irritability, gastrointestinal aches, chronic headaches, and trouble sleeping. Some people are more sensitive to the effects of caffeine, and less than 300 mg can trigger these symptoms.

According to Columbia University's www.goaskalice.columbia.edu, caffeine is a stimulant that can cause anxiety and the very symptoms that can lead to a panic attack in those with anxiety disorders. Individuals with hypertension should limit or eliminate caffeine from their diet since it raises their blood pressure. Since caffeine is a diuretic, it could lead to dehydration and fatigue. It also triggers calcium loss in the urine and potentially contributes to developing osteoporosis.

Although it may be tempting to use coffee late at night to help you stay awake longer and study, caffeine lingers in the body for three to four hours, and it could take you longer to fall asleep, as well as reduce the quality of your sleep. This vicious cycle restarts in the morning when you need that cup of coffee to get you going again.

In a time where the expected landmark on the block is a coffee shop, it's hard to resist the temptation of a quick cup. It is important to be aware of your serving size and how your body is reacting to the caffeine. For most people it's safe to have 300mg of caffeine or less per day.

If you are trying to cut back or eliminate caffeine from

your diet, make the transition gradually to reduce the symptoms of withdrawal, such as sleepiness and headaches. Try blending regular and decaffeinated coffee to cut back on caffeine intake.

For more information on this subject, check out the Peer Health Education Lending Library in the University Health Center for titles like [Food & Mood](#) by Elizabeth Somer, M.A., R.D.

WHAT PRODUCTS CONTAIN CAFFEINE AND HOW MUCH?

Source: U.S. Food and Drug Administration and National Soft Drink Association:

(approximate caffeine content of various foods and beverages)

Item	Milligrams of Caffeine	Average Range
Coffee (5-oz. Cup)		
Brewed, drip method	115	60-180
Brewed, percolator	80	40-170
Instant	65	30-120
Decaffeinated, brewed	3	2-5
Teas (5-oz. Cup)		
Brewed, major U.S. brands	40	20-90
Brewed, imported brands	60	25-110
Instant	30	25-50
Cocoa beverages (5-oz.)	4	2-20
Milk chocolate (1-oz.)	6	1-15
Dark chocolate, semi-sweet (1-oz.)	20	5-35

The most common age of onset of SAD occurs in those 18 to 30 years old.
SAD Association,
<http://www.sada.org.uk/symptoms.htm>

Winter depression strikes as many as 6 of every 100 people in the U.S. Another 10 to 20 percent of people experience mild cases of SAD.
American Academy of Family Physicians, <http://famphys.org/handouts/267.html>

High Blood pressure killed 44,619 Americans in 2000.
American Heart Association

Of the 50 million Americans who have high blood pressure 31.6 percent don't know they have it.
American Heart Association
<http://www.heart.org>

The number of people in the United States with substance dependence or abuse increased from 14.5 million (6.5% of the population) in 2000 to 16.6 million (7.3% of the population) in 2001.
<http://www.stopdrugaddiction.com/drug-addiction-statistics.htm>

Nearly 14 million Americans - 1 in 13 adults - abuse alcohol or are alcoholic.
<http://www.alcoholaddiction.info/alcoholism-statistics.htm>

The most common form of cancer in men aged 15-35 is testicular cancer, which can be cured in most cases.
American Cancer Society

The leading causes of death in American men under the age of 40 is car accidents, violence and AIDS.
American Cancer Society

About 25% of your night's sleep is spent in REM sleep, which is the dreaming phase.
National Sleep Foundation

More than 20% of men, women and children grind their teeth at night, a condition known as bruxism.
Better Sleep Council

Smoking a pack of cigarettes/day (calculated at \$5/pack) will cost \$18,200 of cash for a ten year period. Costs to health are even greater in the long run.

Some of the compounds found in cigarettes include carbon monoxide, ammonia, arsenic, butane, hydrogen cyanide, toluene, DDT, acetone, cadmium, and formaldehyde in addition to the addictive ingredient nicotine.
American Lung Association

The Health Center is providing free nicotine replacement (gum or patch) to smokers who want to quit.

Covering your cough & washing your hands with soap & water after coughing or sneezing helps stop the spread of germs.
Oregon Department of Human Services

health happenings

Relax and Renew:

six week meditation series

Develop and strengthen your meditation practice for relaxation and mental clarity.

Wed Jan 28-March 3, 4:45-5:45

Bowerman Building Heritage Hall • Free call 346-4456 for info or to register

Boiling Water 101:

A vegetarian Cooking Workshop

Learn to prepare quick, easy and nutritious meals. Workshop fee of \$15 includes mixing bowls, skillet, utility knife and other helpful kitchen tools. PLUS you get three weeks of hands on cooking and great meals.

Wednesdays 4:00-5:30

January 28, February 4 and 11 Health Center Cafeteria Call Kristen Olmos at 346-2794 to register.

CPR Certification Class

Two year certification from the American Heart Association.

Mondays Feb. 2 and March 1 5:00-9:00 p.m. UO Health Center Cafeteria • \$30 346-2770 to register

CHAT

Campus Health Action on Tobacco

Students and staff are invited to join a campus advisory board which will help design programs and policies to reduce tobacco use on campus.

Next meeting is TBA Contact Paula Staight for more information at pstaight@darkwing.uoregon.edu

NRT

Free Nicotine Replacement Therapy (patch and gun) is available at the Health Center for students who are trying to quit tobacco. Come to the Peer Health Education Office or the Pharmacy for information or to pick up NRT.

FPEP

The federal grant providing free contraception and family planning services for qualified students has been extended at the Health Center until October 2006.

Call 346-2770 or fill out the on line application at <http://health-center.uoregon.edu> to see if you qualify.

Herbal Supplements as complementary medicine

By Revati Patel

As the cold and flu season peaks, we become more acutely aware of our health. Many of us take over the counter medicines, or get a prescription from a practitioner. However, these are not the only ways in which people attempt to maintain health.

An enormous field of medicine called complementary medicine is gaining popularity in the U.S. Complementary medicine is a group of medical and health care systems, practices and products that are not considered to be part of conventional western, or allopathic, medicine. Complementary medicine includes Aromatherapy, Chiropractic, Ayurveda, Homeopathy, Naturopathy and Herbalism.

HERBALISM IS ONE FORM OF COMPLEMENTARY MEDICINE

Herbalism makes use of plants to produce desired effects on the body. The World Health Organization estimates that 80 percent of the world's population uses

plants for medicinal purposes. Approximately 25 percent of prescription drugs are derived from substances in plants. Aspirin, for example, has its origins in willow bark. Taxol, used in cancer chemotherapy, originates from the Pacific Yew tree. Echinacea, an herbal immune system stimulant, was discovered by Native Americans and many people use it today to treat the common cold.

It is important to realize that herbal medicines in the US are sold as dietary supplements and are not tested by the FDA to see if their health claims are accurate. The FDA simply attempts to make sure that the product is safe. Herbs contain a wide variety of chemicals whose concentrations will depend on the kind of plant, how it was grown, storage etc. Before trying an herbal supplement, learn about the supplement; determine if the product will really help you with your condition by looking up scientific literature about it through IBIDS. If you experience allergic symptoms as a result of using sup-

plements, contact your medical practitioner.

ON CAMPUS

According to the 2000 Health Center survey, 35% of UO students have used some form of herbal medicine. About 52% of those who take herbal supplements reported that they do not inform their medical practitioner about taking herbal supplements. But since the FDA does not review or approve the ingredients that go into the medicinal supplements, it is really important to consult a physician before taking any of the herbal supplements for serious illnesses. Furthermore, medical practitioners can better help prevent drug interactions if you are forth coming with using herbal supplements.

If you are considering herbal supplements, more information can be found in books in the Lending Library in the Health Center. You can also talk to physicians, nurse practitioners or pharmacists at the Health Center. We are located on 13th and Agate, right across from Oregon Hall.

Herbs Available at THE HEALTH CENTER PHARMACY

Chamomile

Used for indigestion Those allergic to ragweed and flowers in the daisy family may suffer from allergic reaction.

Echinacea

Used as an immunity booster Those allergic to sunflowers may suffer from allergic reaction

Ginger

Used for nausea Too much can inhibit clotting

Ginkgo Biloba

Used for circulation, improved memory

Ginseng

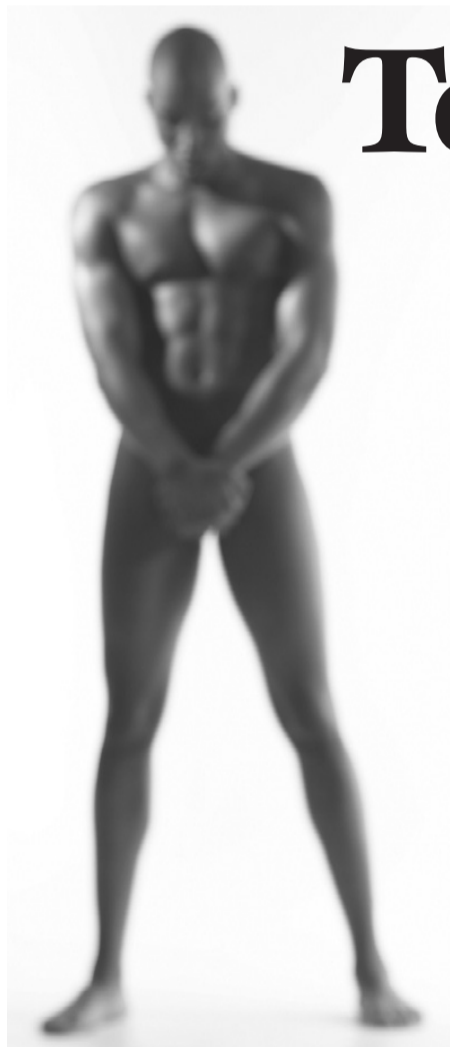
Improves circulation High doses may cause insomnia or nausea

Garlic

Used for high cholesterol High doses may prevent blood clotting

St. John's Wort

Used for mild to moderate depression



Testicular Cancer

By Jessyca Thompson

If you come to the Student Rec Center on Wednesday afternoons, you've seen us, the Peer Health Educators, staffing health information tables. Recently, our topic was breast and testicular cancer prevention. In addition to stats and tips for prevention, we had these wonderful fleshy models of a breast and testicles with small lumps inside. The idea, of course, was to feel for the lump and encourage self exam for both sexes. What I observed was that men were far less comfortable feeling the testicular model than women were in feeling the breast model. What's with that?

INVINCIBILITY SYNDROME

I asked Dave Miller, director of the UO Men's Center, what he thought of this discrepancy between men and women's willingness to learn about certain cancers. He suggested

that men are aware that testicular cancer exists but have the invincibility syndrome of, "it can't happen to me". He also commented on the social climate around touching one's own genitalia. The full answer is undoubtedly a complex social/sexual one and makes for interesting party conversation. But because of the testicular model aversion I witnessed at the Rec. Center, I realize that college age men are largely unaware of their chance of developing testicular cancer.

MOST COMMON IN YOUNG MEN

According to the American Cancer Society (ACS), testicular cancer is the most common form of cancer in men between ages 15 and 35. In fact, men are more likely to be diagnosed with testicular cancer at this age than later in life. About 7,500 men in the US are diagnosed with testicular cancer each year. ACS emphasizes the importance of

doing monthly testicular self-exams and becoming familiar with your testicle anatomy so you are aware of any changes or abnormalities.

WHAT TO FEEL FOR

If you find that one of your testicles is much larger or firmer than the other, or if you find a lump, whether painful or not, don't panic. The problem is usually not cancer, but you should see your medical practitioner to make sure. Medical staff can also go over testicular self exam technique and answer questions. You can make an appointment at the UO Health Center by calling 346-2770. While at the Health Center, check out the Health Education lending library books and literature on men's health issues. The UO Men's Center, located in the EMU, has a weekly discussion group including health topics such as testicular cancer. Contact Dave Miller at 346-2715 for more information.

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Contributing Writers and Peer Health Educators



(left to right) Missy Columbo, Ursula Evans/Heritage, Adrienne Gee, Lilee Hua, Josh Green, Akiko Gordon, June Wang, Revati Patel, Lauren Peters, Patricia Prevost, Jessyca Thompson, Emma Thornborg
photos by: Annie Dochnahl