



CIRWH NEWS FLASH

Center for Interdisciplinary Research in Women's Health

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From the Director's Desk



Cervical cancer occurs when abnormal cells in a woman's cervix—the lowest part of the uterus—divide and grow out of control. This disease strikes more than 10,000 U.S.

women each year, killing more than 3,700. Worldwide, it is the second most common cancer of women, with 470,000 new cases diagnosed and 240,000 deaths occurring from it annually. It is the leading cause of death from cancer among women in developing nations.

Most scientific studies have found that human papillomavirus (HPV) infection is responsible for more than 90 percent of the cases of cervical cancer. There are many types of HPV, but types 16 and 18 are the most common cause of the cancer cases. Infection with sexually transmitted HPVs is very common in adult populations worldwide.

In June 2006, the FDA made a major public health breakthrough by approving the first vaccine developed to protect women against cervical cancer. The American Cancer Society hailed the approval as "one of the most important advances in women's health in recent years." This vaccine—the first ever designed specifically to prevent a cancer—is predicted to have a dramatic effect on the health of women worldwide.

Widespread vaccination has the potential to reduce cervical cancer deaths around the world by as much as two-thirds. HPV vaccines could also reduce the psychosocial burden and health care

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Dr. Jean Freeman

Health Services Research

Think of research and images of microscopes, lab rats in cages, test tubes, and beakers with long glass pipettes come to mind. Amazingly enough, some of the most important health research is carried out not on living subjects or tissue but on what used to be impenetrable masses of information stored on paper but now entered into electronic databases. Dr. Jean L. Freeman, an epidemiologist, uses these databases to learn more about women's health.

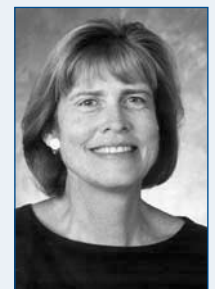
An epidemiologist studies problems such as the causes of disease; the spread and control of disease; or the distribution of health services among the well insured, the underinsured or uninsured. They do not examine individual cases, but analyze information about large groups of patients—or 'populations.' Epidemiology often helps us examine opinions that have strong emotional support—such as the connection between autism and vaccination, or between radiation treatment near the heart and a subsequent heart incident. But it can also simply ask a question: "Have a significant number of the women diagnosed with breast cancer shared past medical events which might turn out to have been predictors of the disease or its health consequences?"

Freeman has participated in more than 19 government grants and published in excess of 80 articles. She has investigated how the development of diagnosis-related groups for reimbursing hospitals may have changed the way hospitals are managed and why older men in the last stages of cancer use hospice services more than older women.

With funding from the Department of Defense and the National Cancer Institute, Freeman also has examined the use and outcomes of mammography services in older women, especially the effectiveness of screening mammography programs in women older than 75. She is interested in the extent to which older women receive appropriate care for breast cancer and how this affects their outcome.

Dr. Freeman was awarded a grant in September 2001 by the Agency for Healthcare Research and Quality on "Health Services Research in Underserved Populations" to strengthen UTMB's capacity to conduct rigorous health services research. This grant, which has been renewed each year since, has allowed her and her co-PI Gayle Weaver to build a faculty development program at UTMB. This program provides advanced training in research methods and data analysis, short courses in scientific writing, and a mentoring system to support research proposal development for NIH grant submissions.

It was because of her long record of interest in women's health that Dr. Abbey Berenson, director of CIRWH at UTMB and principal investigator on the BIRCWH



Jean Freeman, Ph.D.

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Science Update

NIDA Follows the Society's Recommendation to Further Study of Sex Differences—For details, see the announcement at <http://grants.nih.gov/grants/guide/notice-files/NOT-DA-07-006.html>

Sight-Impairing Eye Disease May Affect Women More than Men—Age-related macular degeneration (AMD) is the number one cause of vision loss in Americans 60 years of age and older. AMD robs a person of sharp, central vision and can lead to serious visual impairment in both eyes. As the name implies, it usually affects older people, and women appear to be at greater risk than men. Read the entire article at <http://www.womenshealthresearch.org/site/News2?page=NewsArticle&id=6303>

The Society for Women's Health Research

Briefing: From the Lab to the Clinic: Translating Women's Health Research into Practice—The Society for Women's Health Research, in cooperation with Representatives Brown-Waite, Solis, Moore Capito, Baldwin, and Capps, hosted a briefing on Sept. 26, 2006, entitled *From the Lab to the Clinic: Translating Women's Health Research Into Practice*, to educate congressional staff about the importance of research and the role it plays in developing and improving health care for women. Read this briefing at: http://www.womenshealthresearch.org/site/PageServer?pagina me=events_briefing_womenshealthresearch2

Gender Specific Joints: The Wave of the Future—Many of us take our knees for granted without realizing how much strain is placed on them from everyday activities. As we walk, run, bend, twist and hustle, the knee—which is the largest joint in the body—takes a regular beating. For the more than five million people who visit orthopaedic surgeons each year for knee problems, these intricate, hinge-like joints can become more than a nuisance. On Sept. 21, 2006, the Society published a news service article "Gender Specific Joints: The Wave of the Future." You may find this article at: <http://www.womenshealthresearch.org/site/News2?page=NewsArticle&id=6133>

Organization for the Study of Sex Differences, First Annual Meeting—The first annual meeting of the Organization for the Study of Sex Differences (OSSD) will take place May 9–12, 2007, in Washington D.C. The topics for the panel presentations include sex differences in each of the following areas: hormones and autoimmunity; obesity and metabolic disease; musculoskeletal disorders; behavioral disorders: depression, anxiety and schizophrenia; pain; lung cancer; and imprinting and parent-of-origin effects.

The main goal of the OSSD annual meetings is to facilitate the exchange of information across disciplines and to promote interdisciplinary collaborations that will enhance the understanding of the role of sex differences in health and disease. In order to achieve this goal, the OSSD annual meeting will cover diverse topics to attract a multidisciplinary group of basic and clinical researchers. To learn more about OSSD please visit the web site at <http://www.ossdweb.org/>

(cont. from page 1) **Dr. Freeman**

scholar program grant, approached Dr. Freeman with the request that she become the program director of the BIRCWH Program. Freeman has been very important in evaluating candidates, helping to arrange interdisciplinary support during UTMB's funding problems, facilitating scholar/mentor obligations for the BIRCWH and incorporating BIRCWH seminars into the UTMB Clinical Research Scholars seminars program.

(cont. from page 1) **Director's Desk**

costs associated with abnormal Pap and HPV tests, such as biopsies and invasive procedures.

The FDA has licensed the HPV vaccine as safe and effective. This vaccine has been tested in more than 11,000 females (ages 9–26 years) around the world. These studies have shown no serious side effects. The most common side effect is soreness at the injection site. CDC, working with the FDA, will continue to monitor the safety of the vaccine after it is in general use. There is no infectious material in this vaccine. There is no thimerosal or mercury in the HPV vaccine. It is made up of proteins from the outer coat of the virus (HPV).

Ideally, females should get the vaccine before they are sexually active. This is because the vaccine is most effective in girls and women who have not yet acquired any of the four HPV types covered by the vaccine. Females who have not been infected with any of those four HPV types will get the full benefits of the vaccine.

Females who are sexually active can also benefit from the vaccine, although they may get less benefit since they may have already acquired one or more HPV type(s). Few young women are infected with all four of these HPV types, so they would still get protection from those types they have not acquired.

One note of particular interest is that we do not yet know if the vaccine is effective in boys or men. It is possible that vaccinating males will have health benefits for them by preventing genital warts and rare cancers, such as penile and anal cancer. It is also possible that vaccinating boys and men will have indirect health benefits for girls and women. Studies are now being done to find out if the vaccine works to prevent HPV infection and disease in males. When more information is available, this vaccine may be licensed and recommended for boys and men as well.

Consider taking advantage of this important breakthrough. Tell a young woman you love to get vaccinated today.

Abbey B. Berenson, M.D.
Director

Published/Presented Abstracts

Shokar NK, Carlson CA, Weller SC. "The Prevalence of Colorectal Cancer Testing and Screening in a Diverse Patient Population." North American Primary Care Research Group annual meeting, Tuscon, Arizona, October 15-18, 2006.

Shokar NK, Shokar GS, Weller SC. "Colorectal Cancer Screening Test Preferences Among Three Racial/Ethnic Groups." North American Primary Care Research Group annual meeting, Tuscon, Arizona, October 15-18, 2006.

Chavez PC, Shokar NK. "Evaluation of the Adherence to Diagnosis and Management Guidelines for COPD in the Outpatient Setting." North American Primary Care Research Group annual meeting, Tuscon, Arizona, October 15-18, 2006.

Nguyen-Oghalai, T. "The Impact of Rheumatoid Arthritis on Lower Extremity Arthroplasty." NIH Interdisciplinary Research in Women's Health, NIH, November 15, 2006.

Eisenberg, McNearney, Hunnicutt, Sarah Toombs-Smith, Rice and Nguyen-Oghalai. "Demographic, personal and practice characteristics of rheumatologist participants stratified by job satisfaction", American College of Rheumatology meeting, Washington, D.C., Nov. 13, 2006.

Publications

Berenson AB, Wu ZH, Radecki Breitkopf C, Newman J. The relationship between source of sexual information and sexual behavior among adolescents. *Contraception* 2006;73:274-278.

Wu ZH, Holzer C, Radecki Breitkopf C, Grady J, Berenson AB. Patterns and perceptions of ecstasy use among young, low-income women. *Addictive Behaviors* 2006; 31: 676-85.

Radecki Breitkopf, C. Perceived consequences of communicating organ donation wishes: An analysis of beliefs about defending one's decision. *Psychol. Health* 21:481-497; 2006.

Cromer BA, Scholes D, Berenson AB, Cundy T, Kaunitz A. Depot medroxy-progesterone acetate and bone mineral density in adolescents: The black box warning. *J Adolesc Health*. 2006; 39:296-301.

Shokar, NK, Carlson CA, Shokar GS. Patient and physician Influences on the Rate of Colorectal Cancer Screening in a Primary Care Clinic. *J Cancer Educ*. 21: 84-88, 2006.

Radecki Breitkopf C, Primeau LA, Levine RE, Olson GL, Wu ZH, Berenson AB. Anxiety symptoms during pregnancy and postpartum. *J Psychosomatic Obstet Gynecol*. 2006; 27:157-162.

Awarded Grants

Dr. Karl E. Anderson received an R21 grant from the National Institute of Diabetes & Digestive & Kidney Diseases. "Genetic Susceptibility Factors in Porphyria Cutanea Tarda (PCT)" has been funded for the period of Aug. 1, 2006-July 31, 2008.

Speaking Engagements

BIRCWH Scholar, Tracy Nguyen-Oghalai, was invited to speak on "The Impact of Arthritis on Stroke Outcomes" at the Geriatric Rheumatology and Gerontorheumatology Group session at the American College of Rheumatology meeting in Washington, DC on Nov. 12, 2006.

Introducing UTMB's newest BIRCWH scholar



Dr. Berges

Dr. Ivonne-Marie Berges

Born and raised in Santo Domingo, Dominican Republic, Dr. Berges earned a bachelor of science degree (1980) in psychometrics and a master's degree (1984) in clinical psychology at the National University Pedro H. Ureña, Santo Domingo, Dominican Republic. She was awarded a Ph.D. degree at UTMB in the department of Preventive Medicine and Community Health, after which she completed a post-doctoral fellowship at the Sealy Center on Aging.

Dr. Berges' (pronounced Berzha) main research interest is in documenting the disparities in stroke outcomes in

underserved ethnic groups. "I am particularly interested in gender differences in functional recovery post-stroke and how these differences may vary by ethnicity," she says. Berges has focused her research on psychosocial factors: stress, social support, and social networks. Among other things Dr. Berges' investigation may cover during her tenure as BIRCWH scholar, is the relationship of home and community ties of non-Hispanic white, African American, and Hispanic women with stroke over a 12-month follow-up period and how the presence of these ties to home and community may facilitate better outcomes.

We are delighted to welcome Dr. Berges to the BIRCWH program at UTMB.

CIRWH Seminars

Noon-1 p.m. in 2.312 Children's Hospital



February

February 2: **Heather Becker, Ph.D.**, research scientist, The University of Texas at Austin School of Nursing, "Health Concerns of Menopausal Women with Functional Limitations."

March

March 2: **Constance D. Baldwin, Ph.D.**, Dept. of Pediatrics, Golisano Children's Hospital at Strong, "NIH Grant Proposals: Getting Started, Getting Funded."

April

April 6: **Susan M. Resnick, Ph.D.**, senior investigator, Cognition Section, Laboratory of Personality and Cognition, NIH, "Sex hormones as modulators of cognitive and brain function in older adults."

May

May 4: **James Rice, M.D.**, associate professor, Internal Medicine, Medical Director-Transplantation Division of Nephrology, "Update on 2006 seed grant award study."

The Sister Study: A study of the environmental and genetic risk factors for breast cancer

The Sister Study is being conducted by the National Institute of Environmental Health Sciences at NIH. The project seeks to enroll 50,000, ages 35-74. Details, including application to participate, are available at www.sisterstudy.org

Who can join the Sister Study?

We're happy to announce that you can join the Sister Study if:

- your sister, related to you by blood, had breast cancer.
- you are between the ages of 35 and 74.
- you have never had breast cancer yourself.
- you are a woman living in the U.S. or Puerto Rico.

Why is the Sister Study so important?

- The Sister Study is one of the first long-term studies to help us understand how women's genes and the things in their environment—homes, workplaces and communities—influence risk of breast cancer. It is the first to collect such extensive and detailed information about environmental exposures.
- Women from different generations and from various racial and ethnic groups and geographic regions of the U.S. and Puerto Rico will take part in the study. Sister Study results can then be used to help as many women as possible.

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