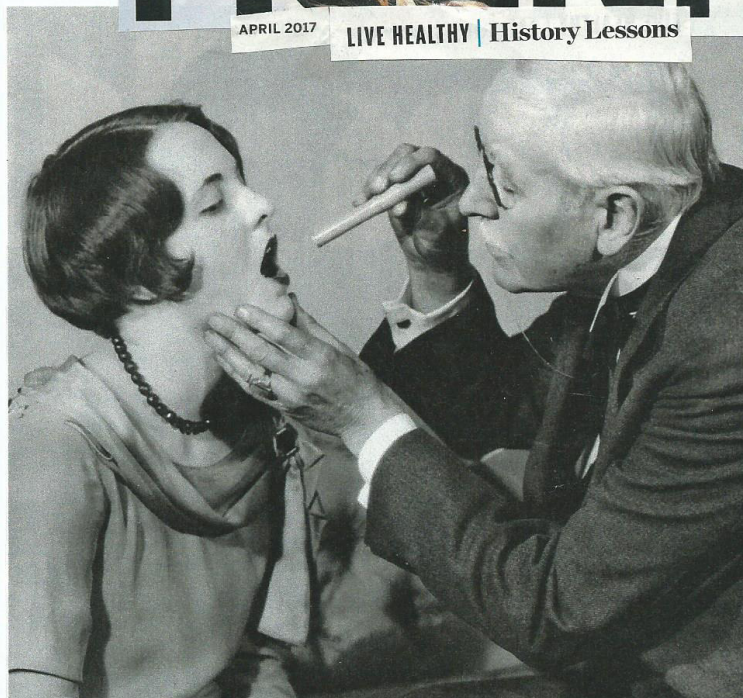


# New From Health

APRIL 2017

LIVE HEALTHY | History Lessons



## WHAT DOCTORS LOOK FOR

→When they chat you up about the health of your relatives, they're seeking clues about how they should treat you today—and in the future. We asked six MDs what perks up their ears—and what you can do if you discover you have a family history of any of the diseases below.

### The ob-gyn:

**DEBORAH LINDNER, MD**

#### MUST-KNOW FAMILY HISTORY

Breast, ovarian, and uterine cancer. Colon, pancreatic, and prostate cancer can also be genetically linked to breast and some gynecologic cancers. While the average woman has a 12 percent risk of developing breast cancer in her lifetime, that risk may be more than 20 percent if you have a first-degree relative who had it (see "The Family Tree," opposite page). A strong family history might also indicate that you could be carrying an inherited genetic mutation, such as a mutation of a BRCA gene, which by some estimates might increase your lifetime risk of breast cancer to 65 percent and your risk of ovarian cancer to 39 percent.

**WHAT YOU CAN DO** Start getting screening mammograms 10 years earlier than the youngest age at which a

relative was diagnosed. Talk to a genetic counselor about whether you should consider genetic testing. Studies show that both exercise and limiting alcohol intake can lower your likelihood of breast cancer.

### The bone doc:

**ALAN MALABANAN, MD**, osteoporosis specialist at Beth Israel Deaconess Medical Center in Boston

#### MUST-KNOW FAMILY HISTORY

Osteoporosis and hip fractures. If Mom or Dad had a hip fracture, your risk of having a broken bone increases by up to 50 percent, and your risk of having a hip fracture doubles. Bone density is largely genetic, so if your family has "weak" bones, you may, too.

**WHAT YOU CAN DO** Make sure you're consuming enough calcium and vitamin D. Maintain a strength-training regimen, which bolsters bones and helps you avoid

falls later. All women age 65 or older should have a bone density screening, but go earlier (at menopause) if you're in a high-risk family.

### The GI doc:

**ROBYNNE CHUTKAN, MD**, founder of the Digestive Center for Wellness in Chevy Chase, Maryland

#### MUST-KNOW FAMILY HISTORY

Inflammatory bowel diseases, like Crohn's and ulcerative colitis, as well as colon polyps and cancer. Up to 20 percent of people diagnosed with colon cancer have a family history.

**WHAT YOU CAN DO** Take digestive symptoms seriously and bring them up with your doctor. For example, if you notice blood in your stool, it's likely hemorrhoids, but you'll be evaluated more closely if you have relatives with colon cancer. Beyond that, keep your gut healthy by eating more plants, boosting your fiber intake, and limiting red meat, and get your exercise.

### The family doc:

**JEREMY FINE, MD**, internist in Los Angeles

**MUST-KNOW FAMILY HISTORY** A host of diseases (including thyroid disorders, cancer, and heart disease), as well as type 2 diabetes. If you have a parent

or sibling with diabetes, your odds of having the condition are about four times as high.

**WHAT YOU CAN DO** Get your blood glucose levels tested once or twice a year; if you have additional risk factors, such as being overweight, ask your doc if you should be tested more frequently. Regardless of your weight or blood sugar levels, make an extra effort to exercise and eat healthy, which may mean following a low-carb diet.

### The heart doc:

**KAROL WATSON, MD**, cardiologist at UCLA

#### MUST-KNOW FAMILY HISTORY

Strokes or heart attacks, particularly if a relative died prematurely of heart disease (before age 65 for women and before 55 for men). Also, know exactly what the condition was—there's a difference between a heart attack and sudden cardiac death, for example. High blood pressure and high cholesterol, both heart disease risk factors, also run in families.

**WHAT YOU CAN DO** Keep tabs on your cholesterol and blood pressure. Lifestyle factors greatly influence heart health, so skip sugary soda, follow a Mediterranean-type diet, keep moving throughout the day, avoid all cigarette smoke, and if you drink alcohol, do so in moderation.

### The skin doc:

**JESSIE CHEUNG, MD**, Chicago-area dermatologist

#### MUST-KNOW FAMILY HISTORY

Whether relatives had any type of skin cancer. If you have a first-degree relative with melanoma, your risk of that cancer is 50 percent greater than if you had no family history. And a family history of any skin cancer increases your risk of basal cell carcinoma.

**WHAT YOU CAN DO** Have a skin exam every six months to a year. Be vigilant about sun safety; wear SPF 30 zinc oxide sunscreen daily.