

HealthBrief

Give yourself a break and get a bone scan

It's an easy, safe test for osteoporosis.

HEALTH-MINDED people know their numbers: cholesterol, blood pressure, T-score.

Wait, what was that last one?

T-score is a measure of your bone density, which helps predict how likely you are to break a bone in a situation of minimal trauma, such as slipping on ice or tripping over a rug. Bones that are too thin are fragile, creating the silent — but treatable — condition known as osteoporosis.

The gold-standard test for bone density is the DXA scan (short for dual X-ray absorptiometry; pronounced *DEX-ah*). "About one-third of people with osteoporosis have had the test, which means two-thirds of people haven't and don't know they are at risk," says J. Edward Puzas, Ph.D., who is a professor of orthopedics at the University of Rochester School of Medicine and Dentistry.

A DXA test is painless and quick, uses very low levels of radiation and can be done while you're completely clothed. **EW**

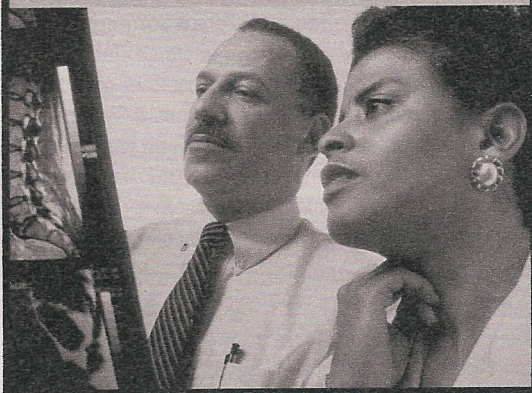
SHOULD YOU GET THE TEST?

People at highest risk of osteoporosis are small-boned, post-menopausal women of European or Asian ancestry. But the disease is complicated, affecting men, too. The more risk factors you have, the greater your chances of developing it.

Risk factors include:

- Having broken a bone as an adult
- Having a close relative with a history of fractures
- Smoking cigarettes
- Having a life-long low intake of calcium
- Taking corticosteroids for a period of more than three months
- Being estrogen-deficient before age 45
- Being inactive
- Having more than two alcoholic drinks a day

— Susan T. Lennon



Important news for mothers-to-be

Strong evidence on diabetes

IF YOUR blood sugar is high during pregnancy but you've never been diagnosed with diabetes, you have what's called "gestational diabetes." This affects 135,000 women yearly, reports the American Diabetes Association.

Now, a seven-year international study of 23,000 pregnant women finds that even slightly elevated blood sugar levels can pose problems.

As blood sugar rises, Mom and Baby both are at risk for complications. The newborn might be overly large, with breathing problems and shoulder injuries at birth; the mother has a greater chance of needing a first-time cesarean section. And the chances for diabetes later in life go up for both.

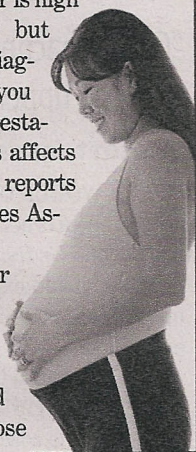
Advice for different stages:

● **Pregnant?** Be sure your ob/gyn knows about the study's new findings. Because women who get gestational diabetes tend to be older and overweight and to have high blood pressure, experts have argued that these factors are to blame for pregnancy complications. Wrong, says researcher Boyd E. Metzger, M.D., professor at Northwestern University Feinberg School of Medicine. "It's the relationship to glucose — and not the coexisting factors — that cause the problems." As a result, "what was considered the upper range of 'normal' probably will be lowered."

● **Plan to get pregnant?** Cut risks by losing weight and improving physical activity, Metzger advises.

● **Had the baby?** Gestational diabetes often precedes type 2 diabetes, so be sure your blood sugar stays normal. **W**

— Susan T. Lennon



High blood sugar during pregnancy is dangerous for Mom and Baby.