



# YOUR HEALTH & FITNESS GUIDE



## Hormone replacement therapy can prevent heart disease

Heart attacks are traditionally believed to be the illnesses of men, and it is true that until menopause, women are less likely than men to develop heart or blood vessel

disease. However, following menopause, cardiovascular disease is the major cause of death in women.

Twenty-five per cent of women will have a heart attack or stroke between the ages of 70 and 80. The good news is that hormone replacement therapy, or HRT, can positively regulate blood cholesterol levels and help prevent heart disease.

Research findings point to a significant positive relationship between estrogen use and a reduction in heart disease. Studies today suggest that estrogen offers some protection against the blockages that can develop in the blood vessels and cause heart at-

tacks or strokes. Data demonstrates that estrogen increases the "good" cholesterol and decreases the "bad" cholesterol in the blood. This allows the blood smoother passage through blood vessels, clearing out the build-up of cholesterol that can block its way.

HRT also keeps blood vessels dilated and more pliable. This allows blood to flow more easily and nourish all the vital areas of the body such as the heart, brain and all other organs which have a blood supply.

Postmenopausal women who take estrogen generally have lower rates of cardiovascular disease than women

of a similar age who do not. In addition, if a woman already has heart disease, hormone therapy lowers her risk of having or dying from a heart attack or stroke.

The majority of scientific studies agree that hormone therapy protects against cardiovascular disease. Studies have shown that long-term use of HRT can reduce death from heart disease by 50 per cent. This reduction is even more important for women who already have heart disease or heart disease risk factors. These include high blood pressure, high cholesterol, smoking, obesity, sedentary lifestyle, diabetes or a family history of heart disease.



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## Physical activity promotes two sleep phases' cycle

Most adults sleep between seven and eight hours a night. In a typical night, they go back and forth between two sleep phases. In the rapid eye movement phase (REM), the brain is highly active, the eyes move rapidly back and forth, and dreams occur frequently. In the non-REM phase (NREM), there is less brain activity and no eye movement. The deepest sleep, which occurs during the NREM period, is called slow-wave sleep.

This delicate cycle is unfortunately subject to disturbances. About one in 10 people suffer from insomnia - defined as having trouble falling asleep, staying asleep, or waking up too early. Sleep disturbances are strongly related to mental illness. In a large American study, 40 per cent of insomniacs also reported a psychiatric disorder, mainly anxiety and depression. Because exercise has been linked again and again with emo-

tional benefits, it is possible that mental health gains associated with exercise may also improve sleep.

A few studies suggest that physical activity may be useful in preventing and treating sleep problems.

What type of exercise do we need to sleep better? Although there is no definite answer to this question at the present time, it appears that high-intensity exercise has the greatest effect on slow-wave sleep. However, sleep researchers are unsure about how changes in slow-wave sleep related to changes in sleep quality.

Until they come up with a precise answer, the best approach is to participate in aerobic activity, regularly.

## Smokers puff closer to disease

It's now the fifth leading cause of death in Canada and the only one that's increasing in prevalence in North America, yet its name is almost unknown to the general public. It strikes as young as age 45, and usually targets long-term smokers. It's not lung cancer, but rather an illness called chronic obstructive pulmonary disease or COPD.

COPD is a term that refers to a group of long-term lung disorders that include, for the most part,

chronic bronchitis and emphysema. Asthma may also be present, but is usually seen by doctors as a separate problem. COPD results in a chronic blockage of air flow to and from the lungs causing shortness of breath and often coughing, wheezing and bouts of bronchitis.

The disease develops slowly over many years with symptoms 'creeping up' after 20 to 30 years of smoking. Eventually, the disease can become totally debilitating.



## Natural Health News

### SUMMER'S COMING IT'S TIME FOR BIRKENSTOCKS!

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