

POLICY & PRACTICE

Preconception Counseling Advocated

Primary care physicians should offer risk assessment and counseling to all women of childbearing age to improve pregnancy outcomes, according to new recommendations from the Centers for Disease Control and Prevention. The 10 recommendations for improvement of preconception health care were published in the April 21 issue of the *Morbidity and Mortality Weekly Report Recommendations and Reports*. This type of routine preconception counseling should include discussion of child spacing, family planning, and prevention of unintended pregnancy. In addition, physicians should advise women about healthy diet, folic acid supplementation, immunization, and healthy weight. But not all of the burden for improving preconception care is placed on physicians and other health care providers. The CDC recommendations also call on insurers to change their payment policies to reimburse for one prepregnancy visit per pregnancy.

EC Prescribing Authority Bill Killed

A bill in Colorado that would have given limited power to licensed pharmacists to prescribe emergency contraception was recently vetoed by the state's governor. The legislation (H.B. 1212) would have extended prescribing authority to pharmacies only for emergency contraception and only until emergency contraception is available to the public without a prescription. The prescribing authority would not have included the abortifacient mifepristone. The bill would have authorized pharmacists to prescribe emergency contraception, but would not have required it. Colorado Gov. Bill Owens vetoed the bill last month, saying that the legislation "strays radically from the accepted norms of medicine." He also objected to the fact that the bill would have allowed minors to obtain emergency contraception without the involvement of a physician or a parent.

Abortion-Rights Issues Still Simmer

Some members of Congress are responding to state efforts to restrict abortion with a federal proposal to codify a woman's ability to seek an abortion. Rep. Jerrold Nadler (D-N.Y.) and Sen. Barbara Boxer (D-Calif.) recently introduced legislation (H.R. 5151/S. 2593) that would prohibit any government from interfering with a woman's ability to terminate a pregnancy before fetal viability or after viability in cases where it is necessary to protect the life or health of the woman. In the meantime, a survey released by a coalition of antiabortion groups found that 54% of those surveyed agreed with one of three traditionally antiabortion statements—that abortion should be prohibited in all circumstances, abortion should be legal only to save the life of the mother, or abortion should be legal only in cases of rape or incest or to save the mother's life. About 41% agreed with various statements saying that abortion should be legal for any reason, and 6% didn't know or refused to answer. The national telephone survey of 1,000 adults was conducted in mid-April.

Minorities Missing Mammograms?

African American women and other minority groups are less likely to be ade-

quately screened for breast cancer, according to a study published in the *Annals of Internal Medicine* (2006;144:541-53). Researchers analyzed data from the Breast Cancer Surveillance Consortium and found that African American and Hispanic women were more likely to be diagnosed with advanced-stage tumors than were white women and that African American, Hispanic, and Native American women were more likely to be diagnosed with high-grade tumors than white women were. However, when they compared women who received mammogra-

phy screening at the same intervals, African American and white women had similar rates of large, advanced-stage, and lymph node-positive tumors. And Native American and Hispanic women had lower overall breast cancer rates when compared with white women undergoing mammography at the same intervals. "Increased adherence to recommended mammography screening intervals, particularly among never-screened or infrequently screened women, may enable discovery of tumors before they have progressed to an advanced stage and may result in decreased mortality rates," the study authors wrote.

Dry Eyes Linked to Menopause

More than half of menopausal and perimenopausal women report experiencing dry eye symptoms, but very few of them understand that those symptoms are linked to menopause, according to a survey sponsored by the Society for Women's Health Research. In a telephone survey of more than 300 women aged 45-57, about 62% reported experiencing dry eye symptoms, but only 16% knew the condition was associated with menopause. In addition, less than 59% of women experiencing dry eyes had discussed it with their physician.

—Mary Ellen Schneider

THERE ARE LOTS OF
BIG REASONS YOUR PATIENTS NEED DHA,

and one small reason too.



DHA, the omega-3 fatty acid essential for optimal fetal and infant brain and eye development, is an important part of pregnant and nursing moms' diets — just like calcium, folic acid and iron.

Unfortunately, American women typically consume less than 100 mg DHA/day, far below the 300 mg/day recommended for pregnant and nursing women*. And while most prenatal vitamins contain calcium, folic acid and iron, DHA is just beginning to be recognized as an essential prenatal nutrient. Martek DHA™, the only source of DHA accepted by FDA for use in U.S. infant formula, is now available in prenatal products. Martek DHA is from algae grown outside the ocean, not from fish. Therefore, there is no risk of unwanted ocean-borne contaminants.

To help moms obtain optimal levels of DHA, recommend these prenatal products containing Martek DHA:

Expecta® Lipil®
Citracal® Prenatal + DHA

Oh Mama!™ nutrition bars
OptiNate™

To learn more about Martek DHA, please call 1-888-652-7246 or visit www.martek.com.



*Simopoulos, AP, Workshop on the essentiality of and recommended dietary intakes of omega-6 and omega-3 fatty acids. *Ann Nutra Metab*, 1999. 43 (2):127-30. ©2006 Martek Biosciences Corporation.