

AMWA Connections

Women and Smoking: A Report of the Surgeon General

Women and Smoking A Report of the Surgeon General-2001

On April 11, 2001, AMWA co-hosted an historic briefing for women's groups and public health advocates on the 2001 Surgeon General's Report, the first in 20 years to focus on Women and Smoking. The briefing was a collaborative project between eight organizations including the American Cancer Society, American Heart Association, American Legacy Foundation, American Lung Association, American Medical Association, Campaign for Tobacco-Free Kids, the Robert Wood Johnson Foundation and AMWA. The event was held in Washington, DC and featured the senior editor of the Surgeon General's Report, Virginia Ernster, PhD. Renowned leaders in the field, including three distinguished AMWA members, delivered presentations on the health effects of smoking for women.

- ◆ Michelle Bloch, MD, PhD, spoke about women and smoking cessation,
- ◆ Mary Jane England, MD, discussed the link between education and advocacy
- ◆ Donna Shelley, MD, MPH, explained the importance of involving women's organizations and public health experts in advocacy.



Virginia Ernster, PhD

Women and Smoking: A Report of the Surgeon General summarizes patterns of tobacco use among women, factors associated with starting and continuing to smoke, the health consequences of smoking, tobacco marketing targeted at women, and cessation and prevention interventions. A full copy of Women and Smoking: A Report of the Surgeon General is available on the CDC's Web site at www.cdc.gov/tobacco/sgr_forwomen.htm. Copies of the Executive Summary and the report's "At A Glance" can be ordered via fax by calling 1-800-CDC-1311. ✨

Member to Member: Interview with Leslie Kahl, MD

In April, AMWA Connections sat down with Dr. Leslie Kahl, an Associate Professor of Medicine and the Associate Dean for Student Affairs at the Washington University School of Medicine. Dr. Kahl chairs the Arthritis Education Initiative's Advisory Board.

Q. You've been a member since 1995. What prompted you to join AMWA?

A. I was the women's liaison officer at Washington University (WU) for Association of American Medical Colleges and I felt that I needed to become tied in with organizations working on women's health issues. In addition, WU has a very strong and vibrant student chapter of AMWA. I was extremely impressed by their dedication.

Q. Why did you become the project leader for AMWA's Arthritis Education Initiative?

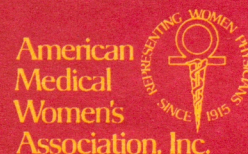
A. I have had a long-standing interest in arthritis education. As an Associate Professor of Medicine, I run the rheumatology course for second-year medical students. I've won several teaching awards for this course and I feel that that helped to bring me to the attention of the project.

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Newsletter of the
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Message from the President



Omega C. Logan Silva, MD, FACP

When AMWA was founded in 1915, as the Medical Women's National Association, the objective was "to bring medical women into association with one another for their mutual advantage, to encourage social and cooperative relations within and without the profession, and to forward constructive movements, such as conducting relief work, engaging in public health work and such other incidental purposes relating thereto, as may be properly endorsed by the medical profession." In 1997, our mis-

sion was rearticulated to read, "AMWA is an organization which functions at the local, national and international level to advance women in medicine and improve women's health; we achieve this by providing and developing leadership, advocacy, education, expertise, mentoring, and strategic alliances." At the November 2000 Board Meeting, the Board voted to concentrate on career development and leadership training. I believe that the objective of the 1915 mission, the restated 1997 mission and the 2000 vote of the Board are still

valid, compatible, and achievable through the many programs AMWA creates and executes. These programs are the vehicles through which AMWA provides opportunities for career development and leadership training that is evidenced by the many present and former AMWA students and regular members who go on to lead other organizations.

Career advancement and leadership opportunities must not be isolated and thought of in a vacuum. Let us not think in terms that are too narrow. Leadership training and career development can be accomplished in many ways, including our many programs in women health. The women in our master faculty programs have learned the art and science of making effective slides, organizing a lecture, developing curricula, speaking effectively, organizing for travel and meetings and obtaining grants to make such a program possible. In the end, the presentations and grants should be added to the participant's CV to enhance her career. AMWA's programs in women's health, its advocacy for women and health are all vehicles for career development and leadership training.

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Interview with Dr. Kahl Continued from page 1

Q. AMWA's mission statement states that "AMWA is an organization that functions at the local, national, and international level to advance women in medicine and improve women's health. We achieve this by providing and developing leadership, advocacy, education, expertise, mentoring, and strategic alliances." How do you think the Arthritis Initiative fits with that mission?

A. The structure of the Arthritis Advisory Board is an example of this mission in action. The Advisory Board was strategically developed to provide a very nice balance, including MDs and DOs, a mixture of east and west coast physicians, as well as a broad range of medical backgrounds, from medical education to family practitioners to rheumatologists. Bringing together these complementary groups has allowed us to benefit greatly from the different skills sets of each member.

Q. Do you find the Master Faculty program valuable? If so, why?

A. On an individual level, the Master Faculty has helped develop professional

skills, including public speaking skills, and by creating a cadre of credible speakers.

Since medicine is still largely male dominated, speaking engagements are often based on who knows who. The Master Faculty creates a larger community of knowledgeable women speakers. In turn, being part of the Master Faculty can assist with one's career advancement.

**"Being part of the Master Faculty
can assist with one's
career advancement."**

On a larger level, having a well-connected Master Faculty has enabled us to broaden our reach. Through the help of two of our Master Faculty members, Linda Brecher, DO, and Cheryl Lambing, MD, we have been able to license the arthritis curriculum to the Family Medicine Consortium and the American Osteopathic Association. Through this initiative, we have developed a broad base of speakers and have reached several levels of primary care providers.

Q. What lessons have you learned during your involvement with the program?

A. I have definitely increased my flexibility and organizational skills. Dealing with busy volunteers in four time zones has been challenging. I've also learned a lot more about AMWA and am impressed by its commitment to women's health. I am also pleased with AMWA's willingness to define women's health not only by addressing the physiological differences between male and female patients but also by taking on diseases that are much more prevalent among women, such as arthritis. In one national survey, women reported arthritis as the leading cause of their limitations in daily activities.

Q. Lastly, May is National Arthritis Month, is there anything you would like your fellow physicians to know or be thinking about this month?

A. We have gone far beyond saying to a patient, "You have arthritis, now you need to learn to live with it." This is an exciting time in terms of arthritis treatment and prevention. ✨

Retraining Women to Be Healthier Athletes

Jackie Nichols, MPH
National Student Coordinator

With the passage of Title IX of the Education Amendment of 1972, which allowed for equal opportunities for female athletes at the collegiate level, and the Amateur Sports Act of 1978 that required the United States Olympic Committee to operate in a nondiscriminatory manner, women have made giant leaps in the sports arena. However, our increased athleticism has come at a price. A recent article in the New York Times pointed out that women are two to eight times more likely to tear a ligament than men who play the same sport. Many of these ligament injuries are to the anterior cruciate ligament (ACL) of the knee. The majority of ACL injuries occur in basketball, soccer, skiing, and volleyball, where quick direction changes and stops are required and most happen without a collision.

Researchers have been struggling to explain the gender disparity. The problem may lie in our hormones. Estrogen and progesterone receptors have been found on the ACL. In addition, during the luteal

phase of the menstrual cycle, the hormone relaxin is secreted. Some researchers believe relaxin causes general ligament laxity and an increased propensity toward ligament injury. Several anatomical differences between men and women could explain the disparity, such as wider hips in women which leads to a different angle between the femur and tibia, a shallower intercondylar notch that may shear the tendon, or a smaller ACL. Several researchers have also focused on differences in how women land and say that women emphasize their quadriceps more than men, who tend to emphasize the hamstring muscles when landing. They also looked at landing position and determined that women tend to land more on a flat foot as opposed to on their toes.

Whatever the cause, sports injuries are a public health risk for women. Patient athletes should be informed about the possibility of ligament injuries and advised on current prevention strategies. Some suggestions are to avoid landing on a straight knee, dedicated muscle training to strengthen hamstring mus-

cles, focus on special jump training, and to try to bend at the knee more when landing and maneuvering. Functional knee braces have been shown to be ineffective at preventing injury. More and more sports programs are offering training in these areas to prevent knee injuries. Patients should be advised of the benefits of such training so that they can be healthier athletes.

For more information on prevention go to:

- ♦ The American Academy of Orthopedic Surgeons website at:
http://orthoinfo.aaos.org/fact/thr_report.cfm?Thread_ID=158&topiccategory=Knee
- ♦ The Professional Team Physicians website at: <http://www.proteamphysicians.com/article/index.asp?showarticle=yes&articleid=553&articletype=24> ★

Medical Abortion Education Project

AMWA's Reproductive Health Initiative (RHI) is pleased to report on the overwhelmingly positive response to the Medical Abortion Education Project (MAEP). MAEP is a collaborative project with Physicians for Reproductive Choice and Health and the National Abortion Federation. This project will increase awareness and knowledge about medical abortion among physicians and the larger medical community.

MAEP conducted a Master Faculty Training session on mifepristone, May 5-6, 2001, in Washington, DC. The faculty represented a diverse range of medical specialties and geographic locations and will conduct Continuing Medical Education Programs to educate medical professionals on the topic of medical abortion. The educational programs will cover a number of subjects, including

regimens, patient counseling/patient management, administrative issues, resources/additional training and service support.

Would You Like The Medical Abortion Education Project To Come To You?

AMWA's RHI is actively seeking sites for the Medical Abortion Education Project Educational Programs. If your school, hospital, medical center, private practice or other institution or organization would like to host a Continuing Medical Education program about mifepristone, please contact Mary Contreras at mcontreras@amwa-doc.org, or at 703-838-0500. ★

Advanced Curriculum on Women's Health

Back by popular demand is AMWA's Advanced Curriculum on Women's Health – Second International Conference August, 3–5, 2001 in Cleveland, Ohio. The Cleveland Clinic Foundation will co-sponsor this comprehensive course on women's health. Catherine A. Henry, MD, AMWA Past President and Diana Galindo, MD, who are both Cleveland Clinic Staff Physicians, are leading the program planning. This continuing medical education course is designed to increase the awareness of gender and cultural factors and medical management issues that affect the health and health outcomes of women.

If you or your colleagues would like to receive information about this conference, please contact Julie Dogil at the AMWA Foundation, or call 703-838-0500 or go to www.amwa-doc.org/Meetings/ACWH.htm.

International RHI News

In February, RHI Project Director, Susan Eisendrath, MPH, attended a curriculum review meeting held by the Campaign Against Unwanted Pregnancy (CAUP) in Nigeria. CAUP hosted the meeting at which more than 50 representatives from 16 of the accredited Nigerian medical schools attended. The purpose of the meeting was to review the current status of medical education on reproductive health, to provide an update on the current *International Conference on Population and Development Guiding Principles and Programme of Action on Reproductive Health*, to review a medical school reproductive health curriculum proposed by CAUP, and to finalize a reproductive health curriculum for Nigerian medical schools.

Ms. Eisendrath provided a presentation on AMWA, and the accomplishments of the RHI project. Participants also received a copy of AMWA's Reproductive Health Model Curriculum. RHI is exploring the development of both faculty and student exchange programs, to link Nigerian medical schools with U.S. medical school programs. Ms. Eisendrath also met with the medical student representatives to discuss the possibility of developing an exchange program for students.

More International News

In March, several AMWA members attended the Commonwealth Organization Medical Association Trust meeting held at the Royal College of Obstetrics and Gynecology, in London, England. Carolyn Westhoff, MD, Chair of the RHI Advisory Committee, Vanessa Cullins, MD, Chair of the RHI International Subcommittee, and Susan Eisendrath, MPH, RHI Project Director, represented RHI. ★



From left to right:
Justice Pat Mahmoud, Campaign Against Unwanted Pregnancy (CAUP) Coordinator; Prof. Wole Akande, Former Provost, College of Medicine, University of Ibadan; Ngozi Iwere, CAUP Coordinator; Dr. Boniface A. Oye-Adeniran, CAUP Coordinator; Susan Eisendrath, MPH, Director of RHI; and Prof. Isaac F. Adewole, CAUP Coordinator

Message from the President

Continued from page 2

In my last newsletter message I described the framework for an Institute for the Advancement of Women in Medical Practice and Healthcare. The Institute is one way to move forward career development and leadership training in a very specific, definable and tangible manner. While we still have much to do on this project, we have moved ahead to the extent that a grant is being written and a budget developed with the following topics included:

- ◆ Managing and influencing change
- ◆ Leadership for effective performance
- ◆ Managing conflict within organizations
- ◆ Negotiation strategies
- ◆ Financial basics of health care
- ◆ Cultural diversity issues
- ◆ Concepts and theories of power

“AMWA provides opportunities for
career development and leadership
training... Many present and former
AMWA students and regular members go
on to lead other organizations.”

- ◆ Bridges & barriers to leadership
- ◆ Impact of gender on leadership
- ◆ Mentoring relationships
- ◆ Communicating with confidence
- ◆ Time management
- ◆ Creative conflict management
- ◆ Decision making/Risk taking
- ◆ Ethical and professional responsibilities of leadership

- ◆ Financial basics of management of a division, department or organization

Furthermore, one of our Hall of Fame inductees, Dr. Patricia Bath, is very interested in tele-medicine and has offered to help us. Perhaps, the Institute can be formulated as a distance-learning program with ‘virtual’ capabilities as well.

This is an update on our efforts to create a specific venue for career development and leadership, the Institute. But, remember you can dissect every AMWA program and find an aspect of career development and leadership training within that program, because they are there!

Although we have much work to complete this Institute, I feel certain that by our January 2002 Annual Meeting in San Antonio, we will be able to report significant progress. ★

Looking Back:

Fifty Years as a Woman Doctor

Renate G. Justin, MD, AMWA member since 1975

The following article is an excerpt of Dr. Renate Justin's reflections on being a women doctor in the early part of the twentieth century. Dr. Justin, a retired family practice physician from Colorado, shares her experiences as a female physician in the first of a four-part series.

How did I dare dream of entering the medical profession when I was of 'the wrong sex, the wrong religion and penniless'? Friends and teachers pointed out repeatedly that this dream was completely unrealistic. There were few spots for women in medical school, even fewer for Jews restricted by quotas and no scholarships for Jewish females in the late forties, after the Second World War.

My idea to become a physician was born in Holland in the classroom of a gifted biology teacher, who was able to inspire and excite the refugee children who were her students, in spite of the violence and death that surrounded them in 1938. She demanded consistently high performance and as our reward we were allowed to watch silk worms spin in their cocoons. When our boarding school was struck by a polio epidemic she challenged us to develop a vaccine to conquer polio. She was confident that some day I would be a physician; the Nazis killed her long before I reached that goal.

I left Holland at the age of thirteen, firmly resolved, if I survived, to study medicine. I emigrated to the United States in 1939 and attended a Quaker boarding school. After graduation I was awarded a wartime scholarship in philosophy which made it possible, along with numerous jobs, to attend college.

My first day on campus took me to the college library. I felt like singing with joy when I entered the imposing building, which housed many books, with knowledge stored in every volume. There were no computers, card indices only, but this did not inhibit learning, exploring and studying. I sang my thanks (quietly!) to the scholarship committee for giving me the opportunity to wander around the stacks. My determination to enter medical school led me to chemistry and philosophy majors. In the second year of college I took a course in comparative anatomy and uncovered, by an awe inspiring dissection, an aortic valve. The beauty and the marvelous engineering of this part of the heart brought tears to my eyes and made me impatient for medical school.

I had the opportunity to interview at the Women's Medical College of Pennsylvania, whose admission's committee, like many other medical schools during the war, was willing to consider applicants who had only completed three years of college and the required premedical course. I was running out of money and could not afford to pay for the forth year of college at that time. Therefore I enrolled in a summer course on nuclear physics to fulfill the only premedical requirement which I was missing. I knew nothing about this subject when I began and little more after I completed the course. Fortunately the final was a take home essay and with many

hours of research in the library I was able to wax learnedly on genetics and radioactivity. I passed the course. Now the time of waiting arrived, familiar to all who have ever applied to medical school.

To this moment I remember the anxiety that escalated daily until the mailman came, and let me down, if no letters from the medical schools' admissions committees arrived. The day the nervously anticipated missive was finally in my hands, I trembled, and was apprehensive about opening the envelope and unfolding the letter. "Congratulations" was the first word that met my eyes. What else did I need to read? Did I need financial assistance? Scholarship applications? Well, yes, but who cared, I had just been accepted. I was jubilant. ✨

This series will be continued in the June/July issue of AMWA Connections, as Dr. Justin relates her experiences in medical school.

AMWA Partners With Cyberounds

Members Receive 5 Free CME Credits

AMWA has partnered with Cyberounds®, an interactive grand rounds designed exclusively for physicians and medical students, to give 5 free CME credits to AMWA members who register through the AMWA website.

Distinguished academicians moderate each Cyberounds® conference. Every month, the conference moderators' post new presentations and members have the opportunity to pose questions and comments directly to the moderators. Previous conferences are archived and available for review. To take advantage of the free CME credits, register for Cyberounds® through the members only section of the AMWA website (www.amwa-doc/members.htm).

Calendar

May 31, 2001

Janet M. Glasgow Essay Award Application Deadline (mentorship essay)

June 24–July 1, 2001

President's Trip to Cuba

June 30, 2001

Carroll L. Birch Award Application Deadline (research paper)

August 3-5, 2001

Advanced Curriculum on Women's Health, Cleveland, OH

August 31, 2001

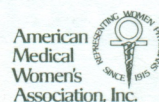
Resolutions Due

September 30, 2001

Community Service Award Nomination Due

January 31 – February 3, 2002

AMWA 87th Annual Meeting, San Antonio, TX



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AMWA Connections

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