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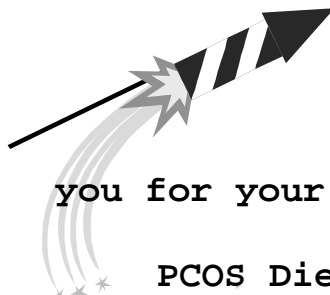
PCOS NEWS

THE EASTER BUNNY STRIKES!!

As a token of our appreciation for your participation and continued support in the study, we would like to invite you to be our guests and join us for the next "Support Group" meeting at **Al Frisco's Restaurant**, which is located at **133 John Street**. Reservations will be made under "Sheila" for 6:30pm on Wednesday April 25th. We want this to be a casual event, with an opportunity for women to mingle and have some fun. Leave your worries behind for an evening!



Please RSVP to Sheila or Vanessa, so that we can make the appropriate reservations. See you there!!



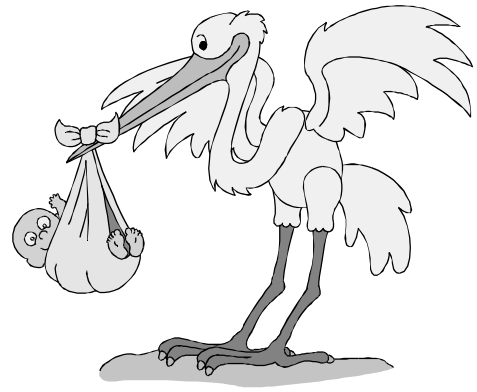
We would like to
thank all of
you for your continued participation
in the
PCOS Diet & Exercise Study.
This study will help to answer some very
important questions for women like you.

Without your continued support and
tremendous
efforts, this study just wouldn't be
possible!

THANK YOU!!!

PCOS MEDICAL FORUM

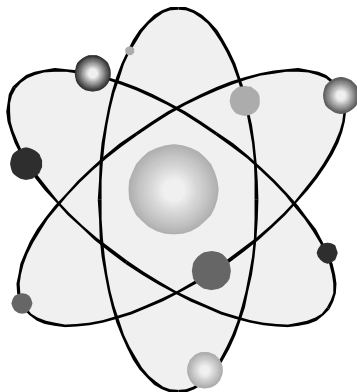
Sheila Laredo, MD



NATURE OR NUTURE???

Unfortunately, this is a question that is difficult to answer - probably, the answer is both. Here is some information in favour of each of the arguments.

What do we know about the genetics of PCOS? We know that somewhere between a third and a half of all "first-degree" relatives (mother, daughters, and sisters) of women with PCOS will have some symptoms of PCOS too. They may have some or many of the symptoms, but the severity of these symptoms may not be exactly the same as their relative's. For example, two related women may both have excessive hair growth, but only one may have irregular periods. Many studies have tried to pinpoint the exact gene that causes PCOS, but none have been completely successful. It may well be that there are a few genes that each contributes a little to the symptoms, although a combination of several of the genes is required for the complete syndrome to be "expressed". This is not entirely surprising. Type 2 diabetes mellitus, which is more common in women with PCOS, has been researched extensively. It is also known to have a very large genetic component, and despite this, the causative genes have not been identified, except in very rare subtypes of type 2 diabetes.



One interesting study demonstrated that up to half of women with PCOS might have a specific genetic change that results in the insulin receptor being "turned off" too much. Normally, when insulin is available in the blood, it binds to its receptor on the cell and causes the cell to take appropriate action (such as removing sugar from the bloodstream). With this genetic change, even in the presence of insulin outside the cell in the blood, the inside of the cell can't "see" the insulin properly, doesn't respond appropriately, and is thus insulin resistant. However, this genetic change is not seen in all women, and clearly is not responsible for PCOS in all cases.

Although we think of weight as being "environmental" rather than "genetic", this may not be entirely true either. For example, identical twins raised separately will be very likely to have similar weights, despite having grown up in different environments. Many studies in non-human models are looking at "knock-outs", in which animals are bred to be missing specific genes (the genes are "knocked out"). One recent "knock out" mouse was created to be missing an enzyme involved in energy metabolism. Despite markedly increased appetite, the animals failed to gain weight. Of course, you never get something for nothing - the affected animals had a higher temperature. The point is that genetics can clearly impact on things we consider to be "environmental". Similarly, since we know that changes in weight can impact on symptoms of PCOS (just like blood pressure and cholesterol reduction in people with strong family histories of heart disease may reduce risk of heart attack), environmental changes can affect genetic predisposition.

It is probably safe to say that most genes don't cause disease but predispose to them, just as environmental influences predispose people to certain conditions but don't guarantee that those conditions will occur.

CHRISTINE'S CORNER

Christine Mehling, MSc



Eating Out

Eating out, especially if done several times per week, can take its toll on an otherwise healthy diet. But with a little know how and the desire to make better choices, the nutrition pitfalls of eating out can be avoided. Here are some helpful tips to minimize fat and calories and maximize flavor while eating out:

- **Go** to a restaurant or take out counter where the menu is large and varied. It might be easier to find some healthy choices. If possible, look at the menu before you sit down at the restaurant. If you don't find anything you like, try a different restaurant.
- **Ask** the waiter how things are made/prepared. If it sounds high in fat, choose something else. Depending on the restaurant, the chef may be able to make the item lower in fat. For example instead of pan frying fish they may be able to broil it.
- **Choose** stir fried, barbecued, steamed, boiled, or baked foods. **Avoid** deep fried and breaded products. Deep frying a piece of chicken with the skin adds 20 grams of fat!
- **Choose** entrees that contain tomato or broth based sauces or soups. **Avoid** heavy cream, cheese and even pesto sauces. If you want the cheese taste ask for a sprinkle of Parmesan.
- **Select** whole grain breads, buns and toast - without butter or margarine. If the bread is for a sandwich, use mustard or ketchup as a spread, instead of butter or margarine.
- **If ordering** a sandwich, avoid salad type sandwiches such as tuna, salmon, and egg. A lot of fat is added to the dressing. For meat and cheese sandwiches, have a maximum of 2 oz of meat and 1 oz of cheese. Ask for extra vegetables to help moisten the sandwich.
- **Skip** the appetizer and dessert and just settle on the entrée or choose either an appetizer or dessert. Or, why not share the appetizer or dessert with your guest. If you need dessert, **select** a fresh fruit cup, sherbet or frozen yogurt.
- **Watch** the breadbasket on the table. If you are having an appetizer, minimize or avoid eating any bread. Why not have the bread as the appetizer?
- **Ordering** a salad as an entrée or appetizer is a great idea but beware of the fat hidden in the dressing. A creamy dressing (2 tbsp = 20 grams of fat) can contain more than double the fat of a vinaigrette. **Ask** for the dressing on the side so that you can control the amount. **Try** for vinaigrette, or better yet, a low fat dressing rather than a creamy salad dressing.
- **Choose** plain rice or a baked potato instead of french fries. A large order of fries contains 25 grams of fat, and 520 kilocalories. A medium-large potato, which is equivalent to the large fries, contains 0 fat and 145 kilocalories.
- **Go** for the entrees with smaller portions of meat. For example, stirfrys or pastas or soups. If the entrée is a meat item, choose the smaller portion. If there isn't a smaller size, either choose something else, or bring the rest home in a doggy bag.
- **Order** wine by the glass not by the litre or half litre.
- **Drink** water or a diet beverage instead of juice or a regular pop.
- **Don't go** famished to a restaurant. **Avoid** buffets. You may end up eating too much.
- Some restaurants identify heart healthy entrees. **Try** one of those on for size!

When eating out, choose as wisely as possible. Just remember that for every good choice you make, it will make a difference in the total fat and calories that you consume for the day.! **Take the chance to come and practice the above tips with us on April 25th at Al Frisco's Restaurant!**

Recipe Of The Month

Curried Potatoes, Chickpeas, Cauliflower and Green Peas

Taken from the Vegetarian Epicure Book

- 4 medium size potatoes
- 1 tbsp oil
- ½ head cauliflower
- 1 can chickpeas
- 1 cup of green peas
- 1 tsp ground coriander
- 1 tsp cumin
- 1 tsp ground turmeric
- ¼ tsp cayenne pepper
- 3/8 tsp cinnamon
- 3 cloves of garlic (minced or crushed)
- 1/3 tsp ground ginger
- salt to taste
- 2 tbsp lemon juice
- 1 tbsp chopped fresh cilantro (optional)
- 1 tomato

Combine spices.

Peel and cut potatoes into 1 inch cubes. Trim, wash and cut up cauliflower into small florets.

Sauté the raw potatoes and garlic in the oil until brown (approximately 10 min).

Add the cauliflower and stir-fry for another few minutes.

Add the spice mixture. Stir-fry on medium heat for 5 minutes.

Add 1-1 ½ cup or more of water to cook potatoes and cauliflower for a few minutes.

Once almost done, add the can of rinsed chickpeas, 1 cup of green peas the tomato and lemon juice.

Let simmer for 10 minutes. Add more water if it is too dry.

For a different flavour try a different type of legume like black beans, lentils or kidney beans.

Serve over rice.

MOTIVATIONAL MATTERS...

...UNDERSTANDING CHANGE

Vanessa R. Speers, M.Sc.

It is important to keep in mind that behavior change is rarely a discrete, single event. During the past decade, behavior change has come to be understood as a process of identifiable stages through which people pass. People can enhance those stages by taking specific actions. Understanding this process provides you with additional tools to help yourself when you are discouraged about the magnitude or speed of the particular change you are trying to achieve.

Also known as the transtheoretical model of change, this theory has obtained a considerable amount of research confirmation. This theory is one of the most effective approaches to lifestyle behavior change to date. It was developed for smokers and has since been applied to other health behaviors – including dietary changes and physical activity.

The theory states that individuals pass, quite systematically, through a series of “stages of readiness” to change or maintain a lifestyle behavior. The Stages of Change model shows that, for most persons, a change in behavior occurs gradually, with the person moving from being uninterested, unaware or unwilling to make a change (precontemplation), to considering a change (contemplation), to deciding and preparing to make a change. Genuine, determined action is then taken and, over time, attempts to maintain the new behavior occur. Relapses are almost inevitable and become part of the process of working toward life-long change.



Characteristics of the Five Stages of Change

Pre-contemplators

- Have no intention of changing
- Often get defensive at suggestions that they change
- Resist efforts to change
- Firmly believe that the cons against making the change outweigh the benefits or pros of making the change (pros < cons)

Contemplators

- Are generally indecisive about changing
- Lack commitment to make change
- Think about making change, but don't want to change
- Find that all arguments against making a change are equally balanced with benefits of making a change (pros = cons)
- Believe that the temptation is too great to overcome

Preparers

- Want to change but don't know how
- Believe that reasons for change outweigh reasons to not change (pros > cons)
- Lack confidence in ability to maintain the new behavior
- Still experience strong temptations to do the old behavior

Action Takers

- Have made changes in behavior in the last 6-months
- Have a plan of action
- Have goals, but goals may be unrealistic
- Are committed to new behavior
- Believe that benefits of change outweigh arguments against change (pros > cons)
- Experience the greatest risk of relapse
- Can get discouraged
- Find that confidence slowly increases

Maintainers

- Have sustained action for 6-months or more
- Recognize and enjoy benefits of change
- Are less likely to relapse
- Have adopted the new behavior as a lifestyle change
- Experience greater confidence in the new behavior that continues to get stronger
- Find that temptations are fewer and less enticing

Bottom Line: Even though you may sometimes be discouraged, keep in mind that the frustration you sometimes experience is normal. These feelings are all part of the process of changing. **Keep up the good work – you're headed in the right direction!**