Nutrition for the Maturing woman

Well-balanced diet can help in alleviating menopausal symptoms.

Sexuality at Menopause

EXERCISE prescription for fitness

Regular exercise may decrease the incidence and severity of hot flashes, which occur in 75% of menopausal women.
From the Editor’s Desk

The Indian Menopause Society is a non-profit organization of doctors and non-doctors that was formed in 1995 to look after the health needs of the aging women. As we ‘matured’ we realized that there was a need to spread this message to many more and what better method than a magazine dedicated to the maturing women?

Independent India is now the home of several generations of 35+ women. Each generation has experienced youth differently with the changing kaleidoscope of the country. The maturing woman of this country has gone through the trials and tribulations of her family with always a smile on her face, love and affection in her heart and kindness in her being. She has never had time to explore herself, look deep into her inner mind to understand her desires. As doctors who have also matured like the others in the changing environment of this great nation, we have seen the needs, wants, desires and maybe aspirations of our patients change over the years. Today, we find a palpable change in the patient who meets us in our consultation chambers. She is alert, aware and well read. Our consultations would run into hours if we counseled her to satisfy her insatiable desire to learn more about the process of aging and how to stay fit as she grew older. We all felt there was a great need to bring out a journal through which we could express ourselves and understand each other better. Lots of material regarding menopause and the health needs of women can be found in different dailies and magazines but there was nothing solely dedicated to this segment of society. We at the IMS make a humble beginning this month to commemorate the International Women’s Day by bringing out this inaugural issue of Club 35+.

This issue includes four articles on health aspects of the 35+, an interview with our founder president Dr. Rama Vaidya, tips on healthy eating by cookery queen Bapsi Nariman, exquisite pieces of jewellery from ART KARAT and most importantly ‘ME TIME’ – telling you how some of you spend some time with yourself.

Do take some time to go through the journal, send us your feedback and if you like us, recommend us to friends!!

Happy reading!!

(Dr. Sonia Malik)

March 2009

Chief Editor: Dr. Sonia Malik
Executive Editor: Linda Brady-Hawke
Copy Editor: Prachi Guron
Layout & Design: Atul Kumar

Published by:
Indian Menopause Society
Flat No. 2, C-1 Market, Vasant Kunj, Delhi
Tel: 91-11-26899573, 26153635
Email: sm_doc@rediffmail.com

Produced by:
L.B. Associates (Pvt) Ltd
H-108, Sector 63, Noida, Delhi NCR, UP
Tel: 91-120-2401280 • Fax: 91-120-2401108
Email: info@lbassociates.com
www.lbassociates.com

DISCLAIMER: The views and opinions expressed in Club 35 Plus are solely those of the authors and do not necessarily reflect those of the editors or publisher. Although all efforts have been made to ensure the complete accuracy of text, neither the editors nor publisher can accept responsibility for consequences arising from errors or omissions or any opinions or advice given.
From the President’s Desk…

A Message to Mature Women on International Women’s Day...

Stay Healthy After ‘40’!

Since the life expectancy has increased significantly, physical well being has come to the forefront. With increased longevity of woman and her role as a wage earner, she is not willing to take a back seat as far as health and quality of life are concerned. Entering menopause is the time to consider prevention and to take positive healthy steps. People over 40 are still young and still have a long way to go. Menopause was generally reported to be a stressful life event or ‘stormy transition’. Time and concepts have changed; it is the signal of the end of first adulthood and expressed as beginning of second adulthood with freedom!

The Last few years have thrown lot of light on the health over 40. Medicines have always been of utility in a state of illness, but now they are being used increasingly for preventing illnesses and disabilities. Menopause was associated with a myriad of problems which led to lowered productivity and was considered as a serious setback in life. In today’s times, effective and well understood theories have been propounded which defeat the assumption that menopause is not an illness. It is a natural change and may produce problems such as hot flashes, lack of sleep, irritability, vaginal dryness and headache. Each woman’s experience will be different. Declining levels of female hormones have profound effect on bones, heart and vessels, brain, breast, eyes and blood. These deleterious effects start almost immediately. Medicines in general have given longevity of life. Hormone replacement therapy (HRT) or phytoestrogens, has ushered in an altogether new scenario. HRT can be used effectively and conveniently in ultra short dosages, in various forms and combinations, which can be tailored with close supervision. Thus, all women can get it right!

Physical exercise was meant for young only. Now, it also applies to the middle aged and aged.

Of course, the exercise has to be tailored to the individual. The ultimate objective is to keep the physical state in a toned up condition. The key word in physical exercise is its regularity. Brisk walking, light aerobics, yoga etc. have brought in a sea change in the outlook beyond 40. Physical stress reductions also bring about positive results. System wise exercise like deep breathing, back discipline, weight bearing joints abdominal regimens also contribute positively. Careful watch on weight leads to long term beneficial result.

Dietary requirements of the body change after 40. Start an ‘Anti-aging diet’ with fortification, (soya Isoflavones in all forms), supplementation, and amplification. Optimization is thus of great importance. Calcium, vitamin A,C,D & E, salt and water, fiber, addictions and habits are of particular importance. Say no to sweets, and aerated and caffeinated drinks (bone robbers).

The value of regular medical checkups cannot be undermined in years beyond 40. Watch for disease of heart, bones, blood lipids, blood pressure, urogenital tract and cancers. Regularity generally means once a year medical checkup and whenever the need arises or doubt appears. The saying ‘Prevention is better than cure’ justifies its message, best after 40. The technical term applied used for these purpose is ‘Well Women Screening’. Menopause women require a range of medical personnel – mostly for advise. They would view doctors in a new light.

Open up with your Menopause specialist. Treat menopause as a chance to begin again. Throw away old habits and have positive thinking in respect to self image and self esteem. Good self confidence is predictor of successful coping. It is easier to change the attitude towards aging than fighting with age!

This is a very humble effort for bringing out awareness in the mature women population with a message to remain....

Young forever,

Fit forever &

Feminine forever

Happy reading!

Dr. Sunila Khandelwal
President, Indian Menopause Society
Email: sunila.khandelwal@gmail.com
Exercise Prescription for Fitness

In this mechanised world the only muscles we are using are our fingers for various controls. The only weight we are carrying is our own body weight. In all, a sedentary lifestyle accounts for some 250,000 premature deaths annually.

By Dr. Maninder Ahuja

At any age of life exercise makes an integral part of physical as well as emotional and psychological fitness. But exercise has to be integrated into our daily life just as we brush our teeth daily.

THE BENEFITS OF EXERCISE IN A NUTSHELL

- Even in the elderly woman, exercise can attenuate certain effects of aging and sedentary lifestyles.
- Regular exercise may decrease the incidence and severity of hot flashes, which occur in 75% of menopausal women. Menopausal women typically benefit most from exercise in combination with estrogen replacement therapy.
- Weight-bearing exercise, resistance training and high-intensity fitness regimens can reduce a woman’s risk of fractures and help retard sarcopenia.
- Cardiovascular effects of exercise are also dramatic, as studies have shown that perimenopausal women who are more physically active and gain less weight have lower elevations of LDL, total cholesterol and triglycerides than their heavier, less active counterparts.

Components of fitness are:

- Cardiorespiratory fitness,
- Weight control and fat distribution and body composition,
- Muscular strength,
- Endurance,
- Flexibility.

Various types of exercises are:

- Stretching exercises,
- Toning exercises,
- Range of movement exercises,
- Strength building exercises and resistance exercises to increase BMD and decrease sarcopenia,
- Meditation or relaxing exercises.

Some precautions while doing exercises are:

1. Warm up is must,
2. Take plenty of water,
3. Room temp should not be very hot,
4. Switch on the music to enjoy your exercise,
5. Vary your exercises so that you are not bored,
6. Make a group and enjoy your exercise and be cheerful,
7. First learn the proper way of doing exercise and then slowly you can add weights,
8. DON’T GIVE UP! RESULT WILL COME SLOWLY BUT WILL COME DEFINITELY.
9. Intensity of exercise can be measured by various means:
   - Talk test,
   - Heart rate test,
   - Borg rating of perceived exertion (RPE) scale,
   - MET Test.

Heart rate test is easy to use and is calculated from MHR
MHR (maximum heart rate) is 220-age in years and targeted heart rate for moderate exercise should be 60-80% of your MHR and for severe intensity of exercise it can be 85-90% of MHR

10. Whenever you start exercising the first thing is to do is to warm up and this can be done either by cycling or treadmill walking or just by stretching the group of muscles you are going to exercise.
11. Take lots of water in between,
12. Learn proper technique of doing these exercises and exercise whole body, but in one day you can do one or two groups of exercises.

In this session we would tell about leg exercises which can be done at home.

Warm up

If you are doing it with a tread mill see to it that the surface is not inclined. Warm up can be by simple walking even, or by stationary cycling for 5-10 minutes.

If you have to lose weight then these exercises can be for a longer period like 15-20 min. but for toning up and strength building warm up 5-10 minutes is ok.

Walking as an exercise

Walking to be effective has to be at a brisk pace. Slow walking does not give any benefits of weight losing or even for cardioprotection. You should do at a pace that you are barely able to take.
Footwear should be proper and ideally it should not be on hard surface.

Stretching is a vital component of any exercise program. A brief stretch after any workout is a nice way to relax – and it helps to prevent injury and maintain flexibility. Furthermore, stretching helps reduce back pain from osteoporosis, as well as other aches and pains.

**Leg Exercises**

Leg exercises should be done to strengthen all your leg muscles and give them full range of motion and some of these exercises are following which can be done at home.

**Hamstring Stretch:** Sitting on the ground, with one leg straight and the other one comfortably bent in front of your body, bend at the waist and lean forward, keeping your back as straight as possible and don’t arch it. Reach with your arms towards the foot until a stretch is felt under your thigh. Hold each stretch for a minimum of 30 seconds, any less than 15 seconds and the muscle will not conform to the new increase in length. Do 3 reps, 3-6 times a day. Any pain you feel with this exercise should only be a local stretching sensation to the back of your thigh area, without aggravating your condition.

**Calf Stretch:** Start with stretching the right Gastrocnemius portion of the right calf area. While standing, place your right leg in front of you and your left foot directly behind you. Place the toes of your right forefoot up against a door or other flat wall surface, keeping your heel down to the floor. Lean against a wall or other stationary object, both palms against the object. The leg you want to stretch is back, several feet from the wall, your heel firmly positioned on the floor. Your other leg is flexed about halfway between your back leg and the wall. Start with your back straight and gradually lunge forward until you feel the stretch in your calf. ‘It is important to keep your back foot straight and angled 90 degrees from the wall.’ Hold each stretch for a minimum of 30 seconds. Any less than 15 seconds and the muscle will not conform to the new increase in length. Do 3 reps, 3-6 times a day. Any pain you feel with this exercise should only be a local stretching sensation to the calf area of the leg, without aggravating your condition.

**Quadriceps Stretch:** Start with stretching the left Quadriceps muscle. While standing hold a solid surface for support and bend back your left leg. Grab your left ankle and pull that foot to your left buttocks while simultaneously pulling your left thigh backwards while keeping your back straight. Pulling your thigh backwards is a very important part of this stretch, as it will place the stretch in the mid-thigh instead of overloading the pressure on the knee. Do the exact opposite to achieve a stretch of the right Psoas portion of your front upper thigh area. Hold each stretch for a minimum of 30 seconds. Any less than 15 seconds and the muscle will not conform to the new increase in length. Do 3 reps, 3-6 times a day. Any pain you feel with this exercise should only be a local stretching sensation to the Quadriceps muscle area of the upper thigh, without aggravating your condition.

**Gluteus Stretch:** Lying down on your back, bend your right knee, and place your left leg over the right leg, resting the outside of the left ankle slightly above the right knee. Place your right hand around the outside of your right thigh and place the left hand around the inside of your right thigh. Lock the two hands together. Now pull forward towards your chest to achieve a stretch in the left gluteus portion of your buttocks. Do the exact opposite to achieve a stretch of the right glutueus portion of the buttocks. Hold each stretch for a minimum of 30 seconds, any less than 15 seconds and the muscle will not conform to the new increase in length. Do 3 reps, 3-6 times a day. Any pain you feel with this exercise should only be a local stretching sensation to the back of your thigh and buttocks area, without aggravating your condition.

**Inner side of thigh muscles stretch or adductor stretch:** Our muscles do not work alone when we perform certain exercises. Our adductor muscles are working simultaneously with others while doing squats, leg presses, or lunges. Make
sure that your adductor muscles are in their good condition every time you perform stretching activities.

To stretch the groin simply place the feet together pull in toward yourself grab onto your ankles and apply force with your elbows down on your legs. If your doing this stretch correctly you’ll feel a pulling on your upper inner thigh.

Front Lunge: The lunge is a dynamic exercise that targets the muscles of the thighs, back, and buttocks, strengthening the bones in the hip and spine. The wide leg squat addresses the same muscles, but the lunge includes balance and coordination as well.

Starting position: Stand next to table or counter with your feet hip-width apart, knees slightly bent. Lightly hold on to the counter with one hand.

1-2-3-Forward: Take a large step forward with your right leg. Land on the heel of your right foot, and then roll your foot forward until it is flat on the floor. Keeping your body erect, bent both knees so that your hips drop straight down. Your front thigh should be almost parallel to the floor, and the knee of your back leg should approach the floor. The knee of your forward leg should be over your ankle, not past your toes. The heel of your back leg will come off the floor. Your weight will be equally distributed between your front foot and the ball of your back foot.

This exercise can be done with holding free weights in your hands, and as your strength goes on increasing you can increase weights or you can do with weights attached to a barbell and barbell is held at the upper part of your back.

Pause for a Breath: Return: Push back forcefully with the front leg to return to the starting position. Pause for a breath, and then repeat the move.

Reps and Sets: Alternate legs as you step forward until you have done 8 reps with each leg – this is 1 set. Rest for a minute or two and do a second set. This exercise can be done without weights or slowly you can add weights.

Wide Leg Squat: It strengthens the muscles of your front, back, and inner thigh as well as your buttocks and the hipbones, i.e. hamstrings, quadriceps and gluteus muscles.

Stand about 6 inches in front of the chair with your feet a little wider than shoulder-width apart. Take a deep breath and flex your knees and then aim your buttocks back and slowly lower yourself into the chair. Your knees should remain above your ankles; your knees should never go beyond your toes.

Pause, and slowly stand. Then repeat the move 8–10 times and three sets of same repetitions.

Dr. Maninder Ahuja
Ahuja Hospital & Maternity Home, 526, Sector 17, Faridabad
Email: ahuja.maninder@gamil.com
Middle and old age can be one of the highest experiences of a human being’s life. As women approach midlife they are likely to experience physiological changes associated with menopause along with changes in family relationships, body image, role and purpose in life. Menopause is a natural physiological stage of middle age which signifies changes in levels of reproductive hormones and is most noticeable in women between the age of 40-50, although the timings may vary individually.

Menopause is not a disease. It is a natural process in a woman’s life. How a woman views this time of her life can have a lot to do with how frequent and severe her symptoms are. If menopause is viewed as the end of youth and sexuality, this time will be much more difficult than if it is viewed as the next, natural phase of life, a time of greater freedom, liberation from the restrictions of youth.

Menopause is caused by the natural declining function of the ovaries, which gradually produce lower and lower levels of the hormones estrogen, progesterone, and testosterone. This causes the total serum levels of these hormones to also decline in the woman’s body. Decreasing levels of estrogen cause many of the long-term health problems, such as osteoporosis and heart disease that can occur after menopause.

Menopausal Symptoms
Although some women have very few noticeable symptoms of menopause besides the cessation of her menstrual periods, most women will have some degree of other symptoms. Symptoms may come and go, and more may develop, over the course of the menopausal years. They include:

- Hot flashes
- Night sweats
- Vaginal dryness
- Poor concentration/memory loss
- Depression, anxiety
- Sleep disturbances
- Changes in sexual desire
- Heart palpitations
- Joint and/or muscle pain
- Urinary changes (urinary frequency)

Many women report an increase in many of these symptoms following surgical menopause (hysterectomy or oophorectomy), and in these women the symptoms tend to be more severe.

Menopause and Chronic Diseases
During menopause women get more prone to chronic diseases because of hormonal fluctuation.

Menopause and Heart
Lower levels of estrogen cause changes in blood cholesterol putting women at increased risk of heart disease.

Life Style and Weight
During menopause, there is tendency to put on weight.

- High caloric intake: Probably, because of too much fat and sugar. The point is as age advances calorie requirement decreases, 10% with every decade after 30.
- Reduced physical activity; this further widens the gap between the energy intake and expenditure.
- Low BMR - low thyroid activity - increases weight.
Osteoporosis
As we get older, our bones gradually lose calcium. Bone loss speeds up in women as estrogen levels taper off. Optimal intake of calcium, vitamin D, vitamin C, phosphorus, and magnesium can help to prevent osteoporosis.

Nutrition and Menopause
While nutritional problems of women in the reproductive age group have attracted considerable attention, the subject of nutrition in menopause has apparently evoked little interest. While menopausal symptoms may not be life-threatening, they could cause considerable distress and sometimes even alarm. There is enough evidence in literature to indicate that a well-balanced diet can help in alleviating menopausal symptoms. Balanced diet containing essential micronutrients and macronutrients including beta-carotene, isoflavonoids, phytonutrients, high fiber, and sufficient water is recommended.

Energy Level: Should vary between 1000-1500 kcal/day (60% calories from carbohydrates, 20% from protein, 20% from fat), depending on the body weight.

Protein: Moderate because activity level decreases, body building is not there, 0.8 gm/kg body weight taking normal values for height.

Carbohydrate: Complex carbohydrates which include fibre, natural forms of sugar like whole cereals, brans, kidney beans, pulses, barley, etc.

Fat: 20-25 gram/day. It is important to use a combination of fats everyday for a good supply of essential fatty acids. Food high in fat, especially saturated fat and cholesterol, could be avoided and such as whole grain breads and cereals, fruits and vegetables could be preferred. Foods low in fat but high in fiber content will also help to keep weight under control.

Micronutrients
Calcium intake in Indian women is generally low. Moreover, lower levels of estrogen during menopause lead to the loss of calcium, which results in osteoporosis. It may therefore, be necessary to ensure adequate intake of calcium and vitamin D. Good food sources include milk, cheese and other milk products. Intake of salt should be reduced, as it increases the urinary excretion of calcium. Avoid caffeine, carbonated soft drink, food high in phytates, oxalates and tannic acid. Magnesium intake helps in relieving symptoms such as heart palpitations, hot flushes, insomnia and anxiety. Women who experience heavy menstrual bleeding should include iron rich foods organ meats, whole grains and green leafy vegetables in diet.

Boron is believed to be an estrogen enhancer, usually found in grapes, apples, pears, peaches, almonds, honey, peas, lentils, beans and peanuts. Tryptophan rich foods banana, pineapple, plum, nuts, milk etc, help to reduce depression and insomnia associated with hormonal fluctuation. Indoles have a protective effect against breast cancers, colon and other types of cancer. Indoles are found in cabbage and other cruciferous vegetables. Bioflavonoids can be found in oranges and grapes. It gives relief from leg cramps. Adequate intake of Vit A and beta carotene are helpful in reducing the symptoms of vaginal dryness. It can be found in carrots and yellow and orange fruits and vegetables. Foods rich in vitamin B such as unmilled cereals, pulses and nuts are important for memory function. Vitamin C is very important for absorption of iron, calcium and also helps to relief from hot flushes. Vitamin rich foods are citrus fruits, tomatoes, broccoli, berries, banana, green leafy vegetables. Vitamin E is effective in relieving menopausal symptoms such as hot flushes, vaginal dryness and breast tenderness. Food sources of Vit E include broccoli, nuts and tomatoes.

Phytoestrogens: Substances with chemical structure similar to estrogen, but occurring in plants called phytoestrogens. These compounds have some estrogen-like effects. They help in alleviating some of the symptoms of menopause such as hot flushes and vaginitis. Phytoestrogen rich foods have been shown to have a beneficial effect on the vaginal tissue and to have a positive effect on the libido. They enhance the estrogen level in the body and help to reduce the symptoms of menopause. The richest source of phytoestrogen is soya bean, the other good sources are Carrot, Beets, Pumpkins, Potato, Red beans, Peas, Garlic, egg plant, Cucumber, Tomato, Soya beans, Apple, Plum, Papaya, Pomegranate, Dates, Cherries, Par boiled rice, Oats, Barley, Wheat, Yam and Sauf. Plant estogens are weaker than natural estrogen, but they circulate in the blood at levels several times higher than natural estrogen.

Foods To Be Avoided: Fatty meat, fried food, sugar and refined carbohydrate, spicy food like pickles, coffee, tea, chocolate, alcohol and tobacco.

Exercise: A sedentary lifestyle is an established risk factor in many common conditions including: obesity, diabetes, hypertension, heart disease, insomnia, low back pain, and certain forms of cancer (including breast). Exercise need not be a complicated or time consuming affair; it can be in the form of brisk walking, jogging, bicycling, aerobics, dancing, tennis, weight-training, rollerblading, ice-skating, or even gardening. Any activity which raises the heart rate and/or works against gravity can help maintain a healthy heart, skeleton, muscle tone, immune system, and body weight.

Adequate exercise is also a potent modifier of many menopausal symptoms. Exercise can promote more restful sleep, reduce depressive thoughts, retard osteoporosis, ameliorate hot flashes in some women, and improve cognitive function.

Although menopause is one of the important physical milestones in a woman’s life, many women lack concrete information about what is taking place and what are their options. With a proper diet, nutritional supplements, and exercise and simple lifestyle changes, most of the unpleasant side effects of menopause can be minimized to a great extent and with this knowledge and preparation you can step forward with grace and embrace it!

Dr. Ved Prakash
Southend Fertility & IVF Centre, 1st Floor, Holy Angels Hospital, Community Center, Basant Lok, Vasant Vihar, New Delhi-110057
Email: vdpkrakash@rediffmail.com
Balanced diet containing essential micronutrients and macronutrients including beta-carotene, isoflavonoids, phytonutrients, high fibre, and sufficient water is recommended.

Frequency of eating: Four or more smaller meals rather than three large ones

MENOPAUSE AND HEART
- Lower levels of estrogen cause changes in blood cholesterol putting women at increased risk of heart disease.
- NECP recommends 100 IU of vitamin E.
- Low-fat, high-fibre, antioxidant-rich diet is recommended.

LIFESTYLE AND WEIGHT
During menopause, there is tendency to put on weight.
- High caloric intake: Probably, because of too much fat and sugar. The point is as age advances calorie requirement decreases, 10% with every decade after 30.
- Reduced physical activity; this further widens the gap between the energy intake and expenditure.
- Physical and mental disruption, for example, quitting smoking or anxiety and depression results in snacking habit which leads to excessive energy consumption.
- Low BMR - low thyroid activity - increases weight.

OSTEOPOROSIS
As we get older, our bones gradually lose calcium. Bone loss speeds up in women as estrogen levels taper off. Optimal intake of calcium, vitamin D, vitamin C, phosphorus, and magnesium can help to prevent osteoporosis.

FOOD SOURCES
Fish, drumstick leaves, almond, dark green leafy vegetables, broccoli, sardines, and dairy products are excellent sources of calcium.

Note:
- Milk is an important source of calcium, best deposited in bones if taken at bedtime provided the diet is balanced in other nutrients.
- Curd is advised in case of lactose intolerance.
- It is ideal to eat calcium-rich foods in a diet that contain calcium as well as phosphorus in the ratio of 2:1 to ensure best absorption.

CUT DOWN ON TEA AND COFFEE
These promote excretion of calcium.

CANCER
Breast cancer is most common in perimenopausal and postmenopausal women. In order to make a smooth trip into menopause, nourish yourself with vibrational foods such as brown rice, foods rich in fibre, phytonutrients, micronutrients, and antioxidants. Eat low-fat and whole-cereal diet.

NUTRITION AND MENOPAUSE
There is enough evidence in literature to indicate that a well-balanced diet can help in alleviating menopausal symptoms.

Dietary Prescriptions
Energy Level: Should be decided according to the individual’s body weight and height. Distribution of calories: 60% calories from carbohydrates; 20% from protein and 20% from fat.

Protein: Moderate because activity level decreases, bodybuilding is not there, 0.8 gm/kg body weight taking normal values for height

Carbohydrate: Complex carbohydrates which include fibre, natural forms of sugar like whole cereals, brans, kidney beans, pulses, barley, etc.

Fat: 20-25 gram/day. It is important to use combination of fats everyday for a good supply of essential fatty acids.

Micronutrients
Calcium: 1000–1500 mg of calcium daily as recommended by Osteoporosis Society of Canada.
- Micronutrients should be from 2-3 servings of fruits and vegetables.
- Milk and milk products for calcium.
- Dark green leafy vegetables to be included at least once a day to ensure required amount of folic acid, zinc, calcium, and iron.
- Fat soluble vitamins A, D, E, and K.
- Boron is believed to be an estrogen enhancer, usually found in grapes.

Phytoestrogens
(Substances with chemical structure similar to estrogen, but occurring in plants) These compounds have some estrogen-like effects. Following list of foods may be used for including
in the diet since they enhance the estrogen level in the body and help to reduce the symptoms of menopause.

**Estrogen Containing Foods**

These include: Carrot, Beets, Pumpkin, Potato, Red beans, Peas, Garlic, Eggplant, Cucumber, Tomato, Soya beans, Apple, Plum, Papaya, Pomegranate, Dates, Cherries, Parboiled rice, Oats, Barley, Wheat, Yam and Sauf.

**Fermented Foods**

These include: Idli and Dhokla. Enhance the nutrient content of diets, esp. those which contain a cereal-pulses mix.

**Foods to be Avoided**

These include: Fatty meat, Fried food, Sugar and refined carbohydrate, Spicy food like pickles, Coffee, Tea, Chocolate, Alcohol and Tobacco.

---

**Me TIME**

It can be best described as the time when I cease to think of anything else but enjoyment or involvement in my favourite pastime. Thus, relaxing and overcoming day-to-day pressures.

**Lets share the ‘me time’ of some ladies!**

I love aerobics and like dancing to relax.

- *Mrs Jaya Mehta*  
  (VP Monnet Intl)

Watching movies and taking the children to park.

- *Mrs Subashini Vasanth*  
  (classical dancer)

Travelling and shopping are my favourite stress-busters.

- *Mrs Pardeep Kaur*  
  (Director, Jiten foods and flavours)

Music and reading books are relaxing to me.

- *Mrs Mira Mistri*  
  (Homemaker)

I love playing bridge and watching news to relax.

- *Mrs Bapsi Nariman*  
  (Author, Writer)

Gardening and listening to old Hindi movie songs are my companions.

- *Mrs Jaisingh*  
  (w/o Vice Chancellor-Amity University)

Shopping and playing with pets are so relaxing.

- *Mrs Jyoti Dobhal*  
  (Homemaker)

---

**CLINICAL PARAMETERS TO WATCH**

2. Controlling or bringing down the symptoms.
3. Controlling of associated risk factors like lipid profile, blood pressure, obesity, osteoporosis, etc.

In addition to monitoring the above parameters, it is important to counsel the individual about the lifestyle modifications, diet, and exercise pattern which one has to follow under professional diet counselling which is of utmost importance to help tide over this problematic phase of life.

**DIET ALONE CANNOT HELP TO ALLEVIATE THE SYMPTOMS OF MENOPAUSE UNLESS ACCOMPANIED BY REGULAR EXERCISE, SOCIAL INTERACTION, AND MENTAL OCCUPATION.**
Many a times, you have looked at a beautiful woman and wondered what her age was? What is aging?

The process of gradual decay of cells and tissues of the body leading to death of cells is called aging. There are three kinds of aging: Chronological, Biological and Psychological.

**Chronological Aging** – This is fixed and cannot be altered. It is determined by your date of birth.

**Biological Aging** – It tells you how time has affected your organs and tissues in relation to that of another person and this is what can be altered. It is also this type of aging which makes two people of the same age seem different!

**Psychological Aging** – What do you think is your most personal possession? Is it most flexible because no two persons feel exactly the same way in life. This can be altered. Psychological aging can be a reflection of biological aging.

Science is increasingly showing that certain health choices can slow and perhaps even reverse the rate of aging. Even choices made late in life make a difference. For example, people who exercise early in life, but quit, may show no longevity benefit. In contrast, people who start exercising in their 50s and 60s, or even later, show considerable benefit.

Your real age is no doubt influenced by your genes and your chronological age but can to a large extent also be influenced by your environment, diet and lifestyle.

Man was perhaps destined to live not longer than 40-45 years in the agricultural era. The Industrial Revolution provided the economic base for the rise of the professions, improvement in living standards, population expansion and longevity of the human race!

Hence the last few centuries have seen an exponential rise in the number of older people in the world. The average age of women in India is now 71 years according to the 2007 population report of the CIA and that of men is 68 years. We have therefore added 30–35 years to our chronological age. But, what about biological age?

Paradoxically, we seem to be aging faster biologically. Most tissues in our bodies seem to be showing signs of decay and death making us feel older than we actually are. Let us take a look at menopause. How does this affect our bodies?

When the ovaries pack up, they stop producing eggs making the woman sterile but there is more to it. Along with this, there is also the stoppage in the production of hormones that are known to have many functions in the body of the woman. What are hormones?

**Hormones and Body Functions:**

Hormones are juices or secretions of glands that are circulated throughout the body in the blood. These hormones have different effects on different systems of the body. The reproductive hormones produced by the ovaries also perform various functions in our bodies e.g. prevention of osteoporosis, prevention of wrinkles on the skin. Hence when these are withdrawn from the body, many such protective effects are gone making the woman biologically older. Fluctuations in hormone levels may begin much earlier than the periods actually stop (true menopause) and this state is said to begin 13 years prior to the actual cessation of periods. So if the average age of menopause in India is 47 years, perimenopause will start at 34-35 years for most women! Unfortunately this is also the age where most of the urban girls are considering starting their families! Premature ovarian failure is therefore a cause for worry for the woman of this generation since she has to live a biologically inadequate long (chronological) age!! The cause of this early menopause is not known but life can be modified by taking the right diet and keeping up activity by doing the right type of exercises. Both the body and the mind must be harnessed in order to stay young and have an ‘ageless body and timeless mind’. How do we do this?

**Assuring:**

Physical and mental well being
Good nutrition
Spiritual Vitality
Positive attitude
Healthy relationships

**Key questions:**

Do you feel older than you are?
Do you know what your real age is?
Are you aware of the factors that increase your biological age?
Are you in the perimenopausal or menopausal age group?

---

Dr. Sonia Malik DGO, MD, MICOG
Past President Indian Menopause Society Director,
Southend Fertility & IVF Centre, 1st Floor, Holy Angels Hospital,
Community Center, Basant Lok, Vasant Vihar, New Delhi-110057
Email: sm_doc@rediffmail.com
Not very long ago, the concept of semi-precious designer jewellery was unheard of in India. Gold was the only metal considered worthy of wearing, more for its social interpretation of status than anything else. While the weight of one's jewellery mattered, beauty and intricacy were not given much importance.

The Art Karat Collection changed all that with its breathtakingly beautiful pieces, created on a silver base and gold vermeil, studded with precious and semi-precious authentic gemstones. At Art Karat, each piece is handcrafted by some of India's finest craftsmen, many of whom have won awards for their talent.

Our collection boasts of a wide variety of both, classic and contemporary designs, to adorn a woman from head to toe. We strive to create jewellery for every occasion as the collection derives inspiration from many sources, including the temples of Khajuraho, the kingdoms of Rajasthan, the Mughal Era as well as the everlasting charisma of Indian cinema.

Worn by some of India's most famous celebrities and the world's most respected Royals, the Art Karat collection is possessed and cherished by thousands of admirers around the globe. It has also been used in more than 10 Bollywood blockbusters including Devdas, Monsoon Wedding, Kamasutra, Zubeida and the recent Yatra, featuring Rekha.

**Art Karat at a Glance**

- Art Karat was founded by Asha & Kamal Modi in 1988 with a vision to create an alternate line of jewellery with a silver base and studded with only precious and semi-precious authentic gemstones. This jewellery was always meant to command the same respect as gold jewellery.
- The philosophy behind this vision was to create masterpieces that are brilliantly crafted, exceptionally designed and valued as art and invested in like heirlooms that are passed from generation to generation.
- Asha Kamal Modi is the chief designer for Art Karat. A gemologist by profession, she has won numerous accolades for design from the GJEPC. Recently, she was recognized by the FICCI Ladies Organization as one of...
India’s 20 most influential women who have significantly contributed to the economic reform of the country.

- Art Karat employs more than 500 craftsmen around the country making it the largest production facility in its category.
- The jewellery is sold out of 150 self-organized exhibitions held at 70 cities, across 5 continents and 15 exclusive Art Karat Boutiques around India.
- The Art Karat Brand is immensely popular amongst the upper middle income group of women who come from the south Asian decent settled around the World. Every year, more than 25,000 people buy Art Karat from the companies’ various outlets.
- The primary customer perception of Art Karat is that it synomizes Extraordinary Designs.
- Our lifetime policy for maintenance and repair provides most of our customers a sense of security and gives the brand more leverage against other jewellers.
- The future for Art Karat seems bright and exciting. The company will open 25 new stores by the end of 2009. The group will expand its operations to Canada and Dubai by mid-2009.

ASHA KAMAL MODI
Jewellery Designer

To envision the breathtaking view of a woman from head to toe in one’s own creations, to do away with the conventional and passe styles and emerge with a distinct line of jewellery that reflects a woman’s inner most desire — This has always been the vision of Asha Kamal Modi, designer par excellence and the driving force behind Art Karat, the enchanting jewellery line.

Asha Kamal Modi launched her line in 1988, at a time when the concept of designer jewellery was unheard of in India. In face of acute cynicism, she carved a niche for herself as one of the most recognized jewellery designers of India. She draws her inspirations from the basic elements of nature, along with the rich Indian heritage. She has always been fascinated to study the changing traditions of our Heritage. Each of her designs is unique and different in style, mood and craftsmanship, made to perfection by some of India’s finest artisans.

Asha’s creations cater to a wide canvas of both traditional and western tastes, blending majestically with whatever a woman wears. Asha has designed jewellery for more than 10 Bollywood blockbusters include movies like Devdas, Monsoon Wedding and Kamasutra. It is her deep-rooted sensitivity and her exceptional creativity that have made her a household name among the lovers of jewellery.

A trained gemologist, Asha has been felicitated for her talent with the President’s award for design, the FICCI 2005 Award and the prestigious Best Designer Accolade by the Gem & Jewellery Export Promotion Council. Asha and her husband Kamal Modi reside in New Delhi with their two children Saket and Shivani who are also a part of the business. Saket manages Art Karat in the United States and Shivani designs for Gold Karat, the gold and diamond division of the group.
Sexuality at Menopause

By Dr. Saroj Srivastava

In human beings most of the systems age in accordance to chronological aging, however, some of the endocrine systems may not follow this law. Out of all endocrine systems female gonads have shortest functional life. Its functional life lies between menarche to menopause. Ovaries fail to function after menopause; rather menopause is the outcome of failing ovaries. Since sex-hormones are linked to sexuality; it is natural to believe that menarche initiates sexuality while menopause concludes it. The formation of egg is responsible for reproduction as well as production of the hormones estrogen, testosterone and progesterone. Postmenopausal ovaries are devoid of their eggs (which have either degenerated or spent as a result of ovulation) which causes cessation of estrogen and progesterone formation, however ovaries keep secreting testosterone for a few more years after menopause.

There is no doubt that women’s child bearing capacity disappears after the final menstrual period. But it does not denote the end of sexuality. Though the relevance of sexual activity declines with age, the sexual feelings continue to stay much beyond menopause. It is observed that sexual feelings and activities are a natural part of living. Many women remain sexually active throughout their postmenopausal years. In general sexual desire (sex drive) decreases with age in both sexes, but each individual is different. Some experience significant decline in sex desire, a few have increased interest and others notice no change at all.

These observation raise following questions:

- Does sexual desire have direct nexus with sex steroids?
- Is aging responsible for diminished sexual desire?
- Are there factors, other than sex hormones, which may be responsible for sex desire?
- Is lack of sex steroids alone, or added other health issues, responsible for sexual dysfunction?

WHAT IS SEXUALITY?

According to Oxford dictionary sexuality is the capacity for sexual feelings. It also increases a person’s sexual performance. Losing sexuality means losing that part of emotion which is either the cause or the result of sexual drive. Though the relevance of sexual activity declines with age, sexual feelings continue to stay much beyond menopause. However, sexual desire may get marred due to factors related to physical, emotional and social well-being. It is unfair to link menopause with sexual retirement because many women feel that losing sexuality and losing femininity are the same thing.

Sexuality is an important phenomenon and Sexual life is linked to ‘Quality of Life’ (QOL) concept. It is imperative that the QOL should not be compromised due to physiological changes occurring during or after menopause. With increasing life expectancy there is a growing number of post menopausal women; therefore it becomes necessary that our goal should be focused towards optimizing healthy life.
It has been suggested that an active sex life can also increase longevity amongst the elderly.

**Traditional Human Sex Response Cycle:** Masters, Johnson & Kaplan indicated that women necessarily begin a sexual experience with an awareness of a sexual desire, which is followed by arousal and by orgasm and resolution. This is now recognized as a limited and often inaccurate portrayal of women’s experience.

According to Dr. Rosemary Basson (One of the pioneers in this field), “an appreciation of how matters of the mind can influence the physical responses of the body in many other areas of medicine, allows us to discard the former concept that sexual difficulties are either biologic or organic or psychological.”

A recent study of 987 American women concluded that the best predictors of sexual distress were a woman’s general cum emotional well-being and her feelings of emotional closeness to her partner during their sexual experience. A woman’s arousal is something more complex than one component — the increased lubrication with sexual stimulation.

Van Lunsen and Laan in their review article emphasized that the phenomenon of increased lubrication can occur in a satisfactory manner despite estrogen depletion provided there is sufficient stimulation and subjective sexual arousal. Current re-conceptualization of women’s sexual response acknowledges that women have many reasons or incentives for engaging in sex over and beyond sexual desire. A woman’s arousal is something more complex than one component — the increased lubrication with sexual stimulation.

Menopause & Sexual Desire: Research shows that sexual problems are common for both women and men of all ages. However, with women it is more likely to be 2-3 times higher than their male counterparts. The factors affecting sexual desire in post-menopausal women are as follow:

- Reduced ovarian production of sex hormones at menopause are responsible for hot flashes and night sweats which rob a woman’s restful sleep and thus cause reduction of such desire. Estrogen deficiency also causes vaginal dryness which in turn causes dysparunia or painful sex. Apprehension of pain causes reduced sex desire. Declining testosterone levels is a contributory factor towards diminished libido.

- Other factors which affect desire are like social changes, children leaving home; need to care for ageing or ill parents, and fatigue and stress of demanding life dampens sexual desire. Change in body image and subsequent lowered self esteem may also be responsible for diminished sex desire. Some times, it could be illness or death of the partner or separation from him which may be responsible for decline in sexual interest. This age group is more vulnerable to medical/metabolic problems like diabetes, hypertension, cardiac ailments, osteoporosis and osteoarthritis etc. which may also cause stress, body ache, fatigue, anxiety, depression, etc. which may be directly or indirectly responsible for reduced sexual desire. Even the medications, which are used for the above medical disorders, may be responsible for reduced libido.

Total abdominal hysterectomy, where though the ovaries are conserved, may still suffer from deficiency of ovarian steroids due to interfered circulation to gonads.

**MANAGEMENT**

Understanding these factors and making adjustments can alleviate anxiety. Therefore, it is necessary to identify the problems and treat them accordingly. Making life style changes, improving communication between partners and providing sexual counseling, a couple can be helped. Above all, a caring relationship is needed between partners.

Knowledge about drug therapy in order to improve sexual function is still in infancy. However, vaginal lubrication may still be helpful. Estrogen therapy should be considered if lack of estrogen is responsible for diminished sexual desire. Sildenafil is not as effective for the correction of diminished libidos as in males. Addition of Androgens to ET is especially helpful where hysterectomy has been performed at relatively younger age or premature ovarian failure has occurred.

**CONCLUSION**

Sexuality, sexual desire and sexual performance are closely related to each other. It is women’s subjective feeling which gets modulated by emotions and cognitions. An awareness of sexual desire is not the most frequent reason women accept or initiate sexual activity. Sexuality is closely related to her thoughts and emotions; the reasons of acceptance of sex is to express love or because the partner wanted it. The couple rather than the woman alone should be focused for assessing and treating the dysfunction related to sexuality.

Post menopause estrogen deficiency alone is not responsible for diminished sexuality. There are several factors which modify sexual behavior and sexuality out of which emotional bondage between partners is most important.

A word of caution is essential for the protection of these women from STD, AIDS, etc as women are twice as likely as men to catch these infections, perhaps because of vaginal atrophy.

**KEY QUESTIONS**

1. What are your sexual problems?
2. What is their duration? Are the problems situational?
3. What is the reaction of your partner?
4. Have you consulted your physician about your problem?
5. Have you taken any treatment for this?

Dr. Saroj Srivastava  
Credentialled NAMS Menopause Practitioner  
Consultant ob gynecologist, Lucknow Chapter  
Email: sarojnh@sancharnet.in
<table>
<thead>
<tr>
<th>NAME</th>
<th>ADDRESSES</th>
<th>TELEPHONE / E-MAIL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr. Sunila Khandelwal</td>
<td>19, Usha Colony, Calgiri Main Road, Near Malviya Circle, Jaipur - 302 017 (Rajasthan)</td>
<td><a href="mailto:sunila.khandelwal@gmail.com">sunila.khandelwal@gmail.com</a> 09829662470 (M) 0141-2750604, 0141-2771777 ext. 232</td>
</tr>
<tr>
<td>Dr. Meeta Singh</td>
<td>Plot No.100, Phase-I, Kamalapur Colony, Hyderabad - 500 073</td>
<td><a href="mailto:dmeeets919@gmail.com">dmeeets919@gmail.com</a> 0986655597</td>
</tr>
<tr>
<td>Dr. Ranu Patni</td>
<td>13-14, Pradhani Marg, Gem Enclave, Malviya Nagar, Jaipur - 302 017 (Rajasthan)</td>
<td><a href="mailto:rajeevranu@hotmail.com">rajeevranu@hotmail.com</a> <a href="mailto:prayaas40@hotmail.com">prayaas40@hotmail.com</a> 09828218090</td>
</tr>
<tr>
<td>Dr. Poonam Goel</td>
<td>H.No.79, Sector 24A, Chandigarh</td>
<td><a href="mailto:poonam1302@yahoo.com">poonam1302@yahoo.com</a> 09876521578, 0172-2727219, 2727220</td>
</tr>
<tr>
<td>Dr. Preeti Galvankar</td>
<td>13-14, Padmini, Junu-Versova Link Road, Andheri (W), Mumbai - 400 053</td>
<td><a href="mailto:dpreeetig@hotmail.com">dpreeetig@hotmail.com</a> 09821054906, 022-26371847</td>
</tr>
<tr>
<td>Dr. Atul Munshi</td>
<td>51, Pratim Nagar, Ellisbridge, Ahmedabad - 380 066</td>
<td><a href="mailto:munshiap@gmail.com">munshiap@gmail.com</a></td>
</tr>
<tr>
<td>Dr. Duru Shah</td>
<td>Gynecoworld, Kwality House, Kemp’s Corner, Mumbai - 400 026</td>
<td><a href="mailto:durushah@gmail.com">durushah@gmail.com</a> 09820074875, 022-23802584 (W) 022-23805963 (H), 022-23804839 (Fax)</td>
</tr>
<tr>
<td>Dr. Ratnabali Chakravorty</td>
<td>AE 768, Salt Lake, Kolkata - 700 064</td>
<td><a href="mailto:ims.ratnabali@yahoo.com">ims.ratnabali@yahoo.com</a> 09830033958</td>
</tr>
<tr>
<td>Past Presidents</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dr. Rama Vaidya</td>
<td>“Suvas” 7/75, Nutan Luxmi Housing Society, 9th Road, JVPD Juhu, Mumbai - 400 049</td>
<td><a href="mailto:avaidya@bom5.vsnl.net.in">avaidya@bom5.vsnl.net.in</a> 09820239947 022-26703562</td>
</tr>
<tr>
<td>Dr. Urvashi Jha</td>
<td>E-24, Defence Colony, King’s Road, New Delhi - 110 024</td>
<td><a href="mailto:urvashijha@gmail.com">urvashijha@gmail.com</a> 09811029310, 011-24335890</td>
</tr>
<tr>
<td>Dr. Asha Kapadia</td>
<td>104, Oyster Shell, Juhu Beach, Mumbai - 400 049</td>
<td><a href="mailto:drshakapadia@gmail.com">drshakapadia@gmail.com</a> 09821086995, 022-26149220</td>
</tr>
<tr>
<td>Dr. Behram Aniklesaria</td>
<td>Dr. Aniklesaria Hospital, Opp. Electricity House, Laldarwaja, Ahmedabad</td>
<td><a href="mailto:behram.aniklesaria@yahoo.co.in">behram.aniklesaria@yahoo.co.in</a> 09825011000, 079-23351303</td>
</tr>
<tr>
<td>Dr. Sonia Malik</td>
<td>1259/C - Vasant Kunj, New Delhi - 110 070</td>
<td><a href="mailto:sm.doc@rediffmail.com">sm.doc@rediffmail.com</a> / <a href="mailto:sm_doc@hotmail.com">sm_doc@hotmail.com</a> 09810122337</td>
</tr>
<tr>
<td>Chapter Secretaries</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Agra</td>
<td>Dr. Jaideep Malhotra 84, M.G. Road, Agra - 282 010</td>
<td><a href="mailto:mmnabagra10@rediffmail.com">mmnabagra10@rediffmail.com</a> 0989703335, 0562-2260275 0562-2265194 (Fax)</td>
</tr>
<tr>
<td>Ahmedabad</td>
<td>Dr. Vineet V. Mishra, 401, GHB Complex, Opp. ICICI Bank, Ankur Cross Road, Narayanpura, Ahmedabad - 380 013</td>
<td><a href="mailto:vvmisha@yahoo.com">vvmisha@yahoo.com</a> 09426078333 079-27455699</td>
</tr>
<tr>
<td>Bangalore</td>
<td>Dr. Mohini N. Prasad, Dr. P.R. Desai Hospital No.6, Kumara Krupa Road, Bangalore - 560 001</td>
<td>09845014248 Fax - 22350021 <a href="mailto:monshi.prasad@rediffmail.com">monshi.prasad@rediffmail.com</a></td>
</tr>
<tr>
<td>Bharuch</td>
<td>Dr. Pawan Dhir, Siddharth Nursing Home Buddhdev Market, Panch Batti, Bharuch - 392 001</td>
<td><a href="mailto:pavandhir@yahoo.co.in">pavandhir@yahoo.co.in</a> 09913070600 02642-242817, 242670</td>
</tr>
<tr>
<td>Chandigarh</td>
<td>Dr. Neelam Agarwal 78, Sector 16-A, Chandigarh - 160 015</td>
<td><a href="mailto:chdollahys@rediffmail.com">chdollahys@rediffmail.com</a> 09914209344</td>
</tr>
<tr>
<td>Cuttack</td>
<td>Dr. H.P. Pattanaik, Plot No.939-40, Mahanadi Vihar, Cuttack - 753 004 (Orissa)</td>
<td>09437029020 (M) <a href="mailto:harapattanaik@hotmail.com">harapattanaik@hotmail.com</a></td>
</tr>
<tr>
<td>Chennai</td>
<td>Dr. Sumana Manohar Aakriti, No.23, 1st Cross Street, Sterling Road, Off Kothari Road, Chennai - 34</td>
<td><a href="mailto:sumanamano@gmail.com">sumanamano@gmail.com</a> 09840048789</td>
</tr>
</tbody>
</table>

**Contact Information for Indian Menopause Society**

**GOVERNING COUNCIL MEMBERS (2009-2010)**

**EXECUTIVE COUNCIL**

**PAST PRESIDENTS**

**CHAPTER SECRETARIES**
<table>
<thead>
<tr>
<th>Location</th>
<th>Name</th>
<th>Address/Office Details</th>
<th>Contact Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>DELHI</td>
<td>Dr. Indrani Ganguli</td>
<td>Gynae Office, Sir Ganga Ram Hospital, Rajinder Nagar, New Delhi - 110 060</td>
<td><a href="mailto:sgrhrgynae@yahoo.co.in">sgrhrgynae@yahoo.co.in</a>, <a href="mailto:ganguli@vsnl.com">ganguli@vsnl.com</a>, 09811035592, 011-42251763, 42251780</td>
</tr>
<tr>
<td>FARIDABAD</td>
<td>Dr. Maninder Ahuja</td>
<td>Ahuja Hospital &amp; Maternity Home, Faridabad - 121 102</td>
<td><a href="mailto:drmaninder_ahuja@yahoo.co.in">drmaninder_ahuja@yahoo.co.in</a>, <a href="mailto:ahujamaninder@gmail.com">ahujamaninder@gmail.com</a>, 09810881048, 0129-2285857</td>
</tr>
<tr>
<td>GURGAON</td>
<td>Dr. Ragini Agarwal</td>
<td>Housing Board Colony, Jharsa Road, Gurgaon - 122 001</td>
<td><a href="mailto:drraginiagarwal@gmail.com">drraginiagarwal@gmail.com</a>, 09311117762</td>
</tr>
<tr>
<td>HYDERABAD</td>
<td>Dr. Churanur Ambuja</td>
<td>House No. 85, LIC Colony Near Indira Park, Hyderabad</td>
<td><a href="mailto:drambuja@gmail.com">drambuja@gmail.com</a>, 09440776294</td>
</tr>
<tr>
<td>INDORE</td>
<td>Dr. Neerja Paurani</td>
<td>4, Residency Club Road, Indore, MP</td>
<td><a href="mailto:neerja11@gmail.com">neerja11@gmail.com</a></td>
</tr>
<tr>
<td>JALANDHAR</td>
<td>Dr. Sushma Chawla</td>
<td>Chawla Nursing Home &amp; Maternity Hospital, 9, Lajpat Nagar, Jalandhar</td>
<td><a href="mailto:secretary@chawlanursinghom.com">secretary@chawlanursinghom.com</a>, <a href="mailto:chawlanursinghom@yahoo.com">chawlanursinghom@yahoo.com</a>, 0181-2224374</td>
</tr>
<tr>
<td>JABALPUR</td>
<td>Dr. Rooplekha Chauhan</td>
<td>Vibhhor, 99/B, Nayagaon Hills, Jabalpur - 482 008</td>
<td><a href="mailto:dr_r_chauhan@rediffmail.com">dr_r_chauhan@rediffmail.com</a>, 09425159991</td>
</tr>
<tr>
<td>JAIPUR</td>
<td>Dr. Seema Sharma</td>
<td>House No.D-243, “Sankalp”, Anand Vihar, Railway Colony, Jagtapur, Jaipur - 302 004</td>
<td><a href="mailto:dseemasharma@gmail.com">dseemasharma@gmail.com</a>, 09829163290, 0141-2751677</td>
</tr>
<tr>
<td>JAMMU</td>
<td>Dr. Sudha Sharma</td>
<td>F-4, Shiv Bhawan, Near Hari Market, Jammu - 180 001 (J&amp;K)</td>
<td><a href="mailto:annil_mahajan@rediffmail.com">annil_mahajan@rediffmail.com</a>, 09419194181</td>
</tr>
<tr>
<td>KOLKATA</td>
<td>Dr. K.D. Bakshi</td>
<td>6, Sariatvulla Lane, Kolkata</td>
<td><a href="mailto:kdbakshi@yahoo.com">kdbakshi@yahoo.com</a>, 09830017864</td>
</tr>
<tr>
<td>LUCKNOW</td>
<td>Dr. Yashodhara Pradeep</td>
<td>Nirala Nagar Chowk, Yashdeep, Lucknow</td>
<td><a href="mailto:yashdeep@sanchamet.in">yashdeep@sanchamet.in</a>, <a href="mailto:pks_yash@yahoo.co.in">pks_yash@yahoo.co.in</a>, 09475002736</td>
</tr>
<tr>
<td>MUMBAI</td>
<td>Dr. Suvama Khadilkar</td>
<td>61-62, New Clement Court, Gokhale Road North, Opp.Amar Hind Mandal, Shivaji Park, Dadar, Mumbai - 400 028</td>
<td><a href="mailto:suvaisnakhadilkar@yahoo.com">suvaisnakhadilkar@yahoo.com</a>, 09820078703, 022-2432460</td>
</tr>
<tr>
<td>NAGPUR</td>
<td>Dr. Nirmala Vaze</td>
<td>Sankalp Hospital, Khare Town, Dharam Peth, Nagpur - 10</td>
<td><a href="mailto:vaze.nirmala@gmail.com">vaze.nirmala@gmail.com</a>, 09423102903</td>
</tr>
<tr>
<td>NAVI MUMBAI</td>
<td>Dr. Mandakini Parthi</td>
<td>Mandakini IVF Centre, Mangal Anand Hospital 48, Swastik Park, Chembur, Mumbai - 71</td>
<td><a href="mailto:mandakiniparthi@gmail.com">mandakiniparthi@gmail.com</a>, 09869008854</td>
</tr>
<tr>
<td>PUNE</td>
<td>Dr. Mukta Umarji</td>
<td>B-3, Shukrawar Peth, Anand Apartments, Pune - 411 002</td>
<td><a href="mailto:mumarji@gmail.com">mumarji@gmail.com</a>, 09881515289, Fax 020-24465308</td>
</tr>
<tr>
<td>RAIPUR</td>
<td>Dr. Abha Singh</td>
<td>E-8, Shankar Nagar, Raipur</td>
<td><a href="mailto:ajab_2k@yahoo.com">ajab_2k@yahoo.com</a>, 09827155315, 0771-2331014</td>
</tr>
<tr>
<td>RAJKOT</td>
<td>Dr. Jyoti Shah</td>
<td>Mamta Hospital, 1, Sharda Nagar, Mangala Road, Rajkot - 360 002</td>
<td><a href="mailto:drjyotishah@dataone.in">drjyotishah@dataone.in</a>, 09426936240, 0281-2461926</td>
</tr>
<tr>
<td>SURAT</td>
<td>Dr. Anita Shah</td>
<td>1, Vaishali Bungalows, Opp.Raj Tilak apartments, Beside Panas Health Centre, City Light, Surat</td>
<td><a href="mailto:anitasajesh@rediffmail.com">anitasajesh@rediffmail.com</a>, 09374717194, 0261-2260770, 2263107</td>
</tr>
<tr>
<td>VARANASI</td>
<td>Dr. Anuradha Khanna</td>
<td>AK1, 8/180, AK1 Rajendra Vihar, Nivada, Sunderpur, Varanasi - 221 005</td>
<td><a href="mailto:dr_anuradhakhanna@yahoo.co.in">dr_anuradhakhanna@yahoo.co.in</a>, 09415343904</td>
</tr>
</tbody>
</table>

**CHAPTER TO BE INAUGURATED**

- Dr. Vandana Bansal: Jeevan Jyoti Hospital162, Bhai-ka-Bagh, Lowther Road Allahabad-211 003, 0532-2417258/48/52
- Dr. Roza Oylai: Gwalior, rozaolai@gmail.com
- Dr. Renu Makwana: Renu Makwana, Vasundhara Hospital and Fertility Research Centre, 716E Road, Behind Durgabadi, Sardarpura, Jodhpur, drmakwana.jodhpur@gmail.com, 09829226402
- Dr. Iqbal: Ludhiana, driqbalhuj@gmail.com
- Dr. Manjit Kaur Mohi: Patiala, manjitmohi@yahoo.co.in

---

17
Managing Menopause
The Red Clover Way

Are your monthly periods irregular? Are you experiencing sudden rise in body temperature? Do you get night sweating or suffer with frequent mood changes? Or are you not able to concentrate on work? And is your age above 40 years. Nothing to worry about!

Welcome to the club of transition stage of women’s life - Menopause

Menopause is a natural progression of life that occurs in every woman above 45 years. Menopause is associated with short term symptoms like hot flushes (sudden rise in body temperature), night sweating, etc. In the long term menopause may also lead to osteoporosis, cardiovascular disease, dryness of skin, breast cancer.

Natural supplements like isoflavones currently are the safe and better option for the management of menopause. Soy isoflavones and Red clover aglycones are now the latest treatment options in the management of menopause.

Red clover aglycones are derived from the plant *Trifolium pratense* (Red Clover) is a species of clover, commonly grown in Europe, Western Asia and Northwest Africa.

Unlike Soy isoflavones, Red clover aglycones are the active form and need not be converted. Red clover aglycones are hence better absorbed and are available to the body in higher amount. Red clover aglycones are Genistein, Daidzein, Biochanin-A and Formononetin that help in reducing hot flushes, mood swings, anxiety and irritability.

Red clover aglycones are proving to have protective action in decreasing the various symptoms in menopausal women. Due to the various research findings on short term menopausal symptoms and cardiovascular function, bone density, and safety, red clover aglycone supplementation offers a useful alternative for women seeking relief from symptoms of menopause.

Menopause is a natural stage of woman’s life. Knowing what to do and how to deal with the help of your doctor will help in making a smooth transition. Thanks to the understanding doctors and innovation in medicine and public health, women are now able to live twice as long as 1000 years ago. It is therefore seen; women take pride in achieving and discovering new zest of life during menopause.

This is available in the market in the form of tablet called ‘Menoflav’ manufactured by Zydus Nutriva.

Whey to a Healthy Life

Protein is the 2nd most important nutrient next to water needed by everyone on a daily basis. It is made up of essential and non-essential amino acids, which are the ‘building blocks’ for healthy bodies. Protein helps in repair body cells, build and repair muscles and bones, provide a source of energy, and control many of the important processes in the body related to metabolism.

The average amount of protein required by a normal adult 1g/kg body weight and in normal child below 12 years is 30-41gms. A still higher protein level is required in pregnancy, athletes, and body builders and recovering from surgery or ailments. Since Indian diet is predominantly of carbohydrates and fats, protein takes a second position in the diet. Hence the diet does not satisfy the daily protein requirement.

Currently, there are many protein supplements marketed and recommended by doctors and dieticians to fulfill the gap.

But, not all protein supplements can benefit to the optimum. There are some parameters that identify the ideal protein like, digestibility (How better it is digested?), amino acid content.

Whey protein a co-product of cheese production is easily digested and contains an amino acid profile that meets or exceeds all the essential amino acid requirements set by the FAO/WHO.

Whey protein is rich with branch chain amino acids that help in faster tissue growth. Whey protein helps in building and strengthening the body immune system. Whey protein is neutral in taste hence there is no bitter taste.

Whey protein also helps in reducing the fat content of the body by increasing the fat metabolism rate and increases the lean muscles in the body.

Milk and whey components are multifunctional. Especially whey, possess a natural ‘cluster’ of nutrients that protect health and enhance the immune system. The wide range of essential and non-essential amino acids, minerals, in whey provides extensive application in our routine diet.

A balance composition of Whey protein is available under the name GRD powder which can be added to milk or water.
Dr. Rama Ashok Vaidya, one of the country’s most well-known and respected reproductive endocrinologist, has been working ceaselessly with a passion and motivation for science. Dr. Vaidya, Founder President of the Indian Menopause Society (IMS) and former President of the All India Association for Advancing Research in Obesity (AIAARO), currently holds the chair of Research Director in Reproductive Medicine at BSES M.G. Hospital (BK) Mumbai and Dean, Kasturba Health Society’s Medical & Research Centre.

Dr. Vaidya obtained her MD degree in Obstetrics and Gynecology and her Ph.D. degree in applied biology from Seth G.S. Medical College and K.E.M. Hospital, Mumbai. Dr. Vaidya was awarded Ford Foundation Fellowship for two years in Reproductive Medicine at Yale University School of Medicine where subsequently she served on Faculty of the Ob-Gyn department. She worked with Dr. Nathan Kase, Dr. Robert Glass and Prof. John McLean Morris in U.S.A.

On her return, she joined the Institute for Research in Reproduction, ICMR and initiated the division of clinical Endocrinology and Infertility. Her pioneering work on pituitary-prolactinoma regression by Dopamine-agonist drugs has stood the test of time.

Dr. Vaidya has research background in Reproductive Pharmacology and Reproductive Endocrinology. She is deeply interested in clinical services for patients with reproductive endocrine disorders like Disorders of Growth and pubertal development, Hyperinsulinemia and Hyperandrogenism, Menopausal Health issues etc.

Currently, she is engaged in Medicinal Plant Research with Dr. Ashok Vaidya and other colleagues in ICMR’s Advanced Centre of Reverse Pharmacology (Mumbai), where focus is on chronic diseases and age-related degenerative disorders. Through Maitreyi Projects, Dr. Vaidya with other colleagues, is offering comprehensive-multidisciplinary care to women above 40 years. She is principal investigator for the ICMR project on Phytoestrogens in Menopausal Health. She has collaborated with Dr. Vidita Vaidya of TIFR for the effect of Thyroid Hormone on hippocampal neurogenesis in adult rat brain. Recently, Dr. Vaidya has guided and coordinated a multi centric study of thyroid functions and anti thyroid antibodies in early pregnancy in Indian Women.
विश्व महिला दिवस पर विषयों:
राष्ट्रीय अध्यक्ष एवं अध्यक्षीय मंत्री ने उपलब्धि की ओर से — संदेश...

40 के बाद: स्वतंत्र एवं चुनौती बने रहें

मंत्रीपत्र कोई रंग नहीं है। यह तो एक अवसर है जिससे 40 वर्ष के बाद हम भाषा को गुजरात होता है। इस दौरान व्यवहार कानूनी एवं शारीरिक कई बदलाव आए हैं। यदि महिलाओं को इसकी पूरी जानकारी हो तो वे इस अवसर को सामान्य मानते हुए उद्देश्य और कार्यक्रम के रूप में सक्षम हैं। मंत्रीपत्र की जानकारी दे रही है—

- डॉ. सुनिता साहेबनाथ
अध्याय 35 प्रमुख सारांश प्रशासनी

- मानसिक धमनि बदना
- मानसिक धमनि में अपनाई किया जाता है
- घबराहट व स्पष्ट अनार्थ
- नामी के बाद अस्तर
- रात को पसीने में नामांग
- होगा धीरा का संदर्भ जो होता है
- शक्ति व कार्यक्षेत्र में कमी

- घबराहट व स्पष्ट अनार्थ
- अलन्तुम बड़ते हुए नामांग
- दर पुनर्जागरण के साथ होता है
- मानसिक असत्य व निमित्त
- स्पष्ट शक्ति में कमी
- धार्म न गलांगा
- सारदर्द
- मूंग़ कम अन्न/जलदी जगन्ना
- मूंग़ कम लगना
- मूंग़ हलता न होता
- वहन बढ़ाना

- अपने समस्या? हो? नहीं अन्य हो तो बताएं—
- समस्याओं के समाधान हेतु अन्य तक अपना काम उपभोक्ता ले रही है? अन्तर्जोड़ा करें।
- हार्मोन रेजिडेंट
  (ईच्यू साउंड ट्रैक)
- होमोथेयी
- विद्यमान व कृतिलिंग
- आयाम में परिवर्तन
- आपवृद्धि के अधिकार
- वायुमय विषय
- अन्योग

मानसिक धमनि बदना अनुपलब्ध है। वायुमय एवं योगान्वयन तनाव दूर कर प्रतिक्रिया को जीत लेता है। विद्वानों एवं कवियों में बताया: अपने को जल्दी एवं दुर्लभ बनाए रखने के लिए अपने के लिए अपना समय अच्छी गर्जाना चाहिए। सकारात्मक सोच का सही तरीका अनगार। वैदिक कार्यकलापों में ऐसी परिवर्तन नहीं अते देनी चाहिए, जिससे श्रम का ज्ञान हो। कृषि स्वास्थ्य एवं दर्द रोग के सूची योग दर्द या खुशी का पाना दर्द को ताजगी दिखाना करता है। कुछ नए शैक्षणिक अनुशासन जैसे बागवानी, धार्मिक एवं स्वास्थ्य सत्संग किसी भी पर्याय के में अग्रदौला आदि। इसके अपने शरीर ही नहीं तर्क दिखाने के लिए ही शिक्षा एवं तर्कतला रखने का प्रयास करें।

धाम: अन्तःकरण विध्वस्त (अधिकारों का पुनःसृर) के परिप्रेक्ष्य घटना है। बाह्य विषय नहीं हैं। विद्वानों में रजानिष्ठताका पूर्वांक दी जा रही है। अन्तःकरण विध्वस्त अवस्था है। इसमें पता चलता है कि प्राप्त या प्राप्तिहो जाए, बाह्य के सन्तोष अपनाने अत्यधिक होते हैं। अतः इसके उस में अनुभव की तरह अन्य दे रहे हैं, पूर्ण विद्यमान एवं एक्टिव प्लेन आवश्यक है। इस के लिए ही लगातार है। यह योग हॉटिल्स के नियम के अनुसार योग का प्रयास करें।

पूर्ण स्थायित्व विशेषता विभिन्न पदवियों पर स्वीकार का बहुत कम अन्तर होता है।

वायुपरीक्षा भुजा से बजार में आई अंबार बदलने का खेल नया नाम है। मात्र बदलने के सन्दर्भ में पूर्ण अनुभव एवं अपना अनुभव हो सकता है। सिरव कुछ सीमा तक अंदाज में कैबिनेट के खतरे से बचना जा सकता है।

बाह्य योग करने पर ध्यान में डिक्सन से योगमय एवं पौरोहित्य आहार से शरीर की सत्यि एवं आयुर्विज्ञान काम करें। प्राकृतिक एवं जीवनशैली के प्रमाण से अनुभव एवं जीवन के जल्दी बनाए रखना नहीं जा सकता है। जीवन के इस कारण जीवन के जल्दी विमोचन के साथ मुख्य गर्म हो गई तब जीवन को सुसंगत करने के कारण यह जीवन की भविष्य की तरह हो जाएगा।

इस परिवर्तन का जुड़ा उद्देश्य है ग्रीष्महालयों को सही दिशा चिना देखी प्रारंभिक प्रक्रिया करना। जीवन में इस शारीरिक बदलाव को चक्र लेकर अन्य योगों एवं नर्सिंग का नया एक सुयुक्त वैशधिक जीवन बनाने का प्रयास करें।

Email: sunila.khandelwal@gmail.com
Her alluring aura and invincible charm make it impossible for anyone to judge her age. Bapsi Nariman, the celebrated social worker and writer/author of cookbooks is in her late 70s, but you wouldn’t be able to take a wild guess at that, seeing her high levels of energy and never-say-die spirit.

Born to Parsi parents in Mumbai, Bapsi got married to the renowned jurist and lawyer Fali S Nariman in 1955. Her upbringing instilled in her the great skill of communication and the ability to reach out to people. She was meant to become famous in her social circle as she took active interest in social welfare and worked for various women welfare organizations. Bapsi particularly cherishes her work experience with Mother Teresa.

Even today, she likes to visit the Blind School regularly and spend some quality time there.

According to Bapsi, her biggest strength is her family’s support. “Everyone in the family, my husband, son and daughter have always encouraged me to work for the welfare of the society. It’s their support that keeps me going even today,” she says with a smile.

“My husband’s encouragement has been tremendous,” she says with an added emphasis.

Besides her social work, Bapsi manages to take out time to write books on cookery and housekeeping. She loves party cooking and used to give lectures on good housekeeping, table etiquettes etc. Her stress busters? “Playing bridge, playing piano, watching news on TV and going to Delhi Gymkhana Club,” she tells us, adding, “Before marriage, I loved singing western music and scan painting.”

She attributes her unrelenting energy to her act of balancing her work and family life. “I always plan my schedule keeping my family’s interest in mind,” she says. Her mantra, she says, has always been flexible working. “I have always had time for everyone,” she says.

Bapsi keeps herself fit by following a healthy diet, low on spices and calories and going for regular walks. She loves eating grilled food. “Be happy and relaxed, always. Eat good food and drink lots of liquids. I suggest everyone should go for morning and evening walks,” she signs off.

GOSHT NA FRILLY CUTLESS
(Minced Mutton Frill Cutlets)

This is a famous and delicious Parsi dish and looks very tempting when served.

**Ingredients**

- 500 gms minced mutton
- 2 large slices of bread soaked in water
- 1/2 piece ginger
- 6 cloves garlic ground to a paste
- 1/2 tsp cummin seed
- 1 small onion
- 2 green chillies finely chopped
- 1 tbsp coriander leaves
- 6 mint leaves
- 1 chopped and fried onion
- 1/4 tsp turmeric powder
- 1 tbsp Worcestershire sauce
- 1 tsp lime juice
- Salt
- Dry breadcrumbs
- 6 beaten eggs
- Oil or ghee for deep frying
- Serve with Tomato gravy

**Method:**

Squeeze out the water from the slices of bread and mix them together with all the above ingredients except the breadcrumbs and eggs. Make flund or oblong cutlets. Make flund or oblong cutlets. Press in breadcrumbs. Mix 2 tbsp of water with the eggs and dip each cutlet in the egg mixture and deep fry in hot oil (to form frills) whilst each cutlet is frying, sprinkle some egg on top of the cutlet, turn over and sprinkle egg again and further cook for a minute or two. Serve immediately with tomato gravy.

**Note:** Ingredients to makes 8 cutlets.
ALL IN ONE Nutrition for the entire Family

GRD
Growth, Revitality & Development

Whey Protein Rich

All in one nutrition supplement

The taste of good times

Fortified with 15 essential Nutrients

Delicious Elaichi flavor

Zydus nutriva
Women above 40 years experiencing...

- Irregular monthly periods
- Sudden rise in body temperature (hot flushes)
- Night Sweating
- Mood Swings
- Anxiety

The symptoms can be treated,
Consult your doctor to know more about the “Transition stage of life”

Menőflav
Red clover aglycones 40 mg
Power of red clover, preferred world over