

THE STATE OF AMERICA'S HEALTH IN 2009

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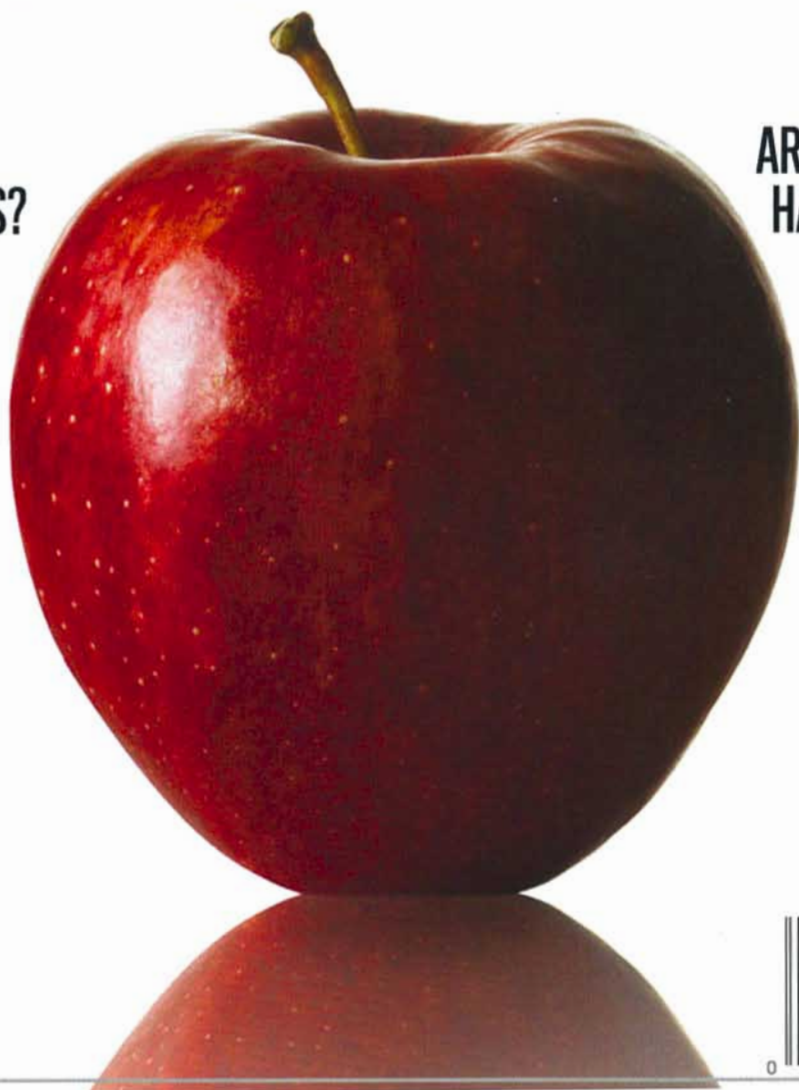
A COMPLETE GUIDE TO

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may be unaware that they can be silently losing vision.”

The best defense: a comprehensive eye exam that screens for glaucoma, macular degeneration, diabetic retinopathy, and cataracts. (And no, passing your driver's license retest doesn't count.)

Cataracts are the most common age-related eye disease, with more than 17 percent of Americans age 40 and over affected. The main cause, aside from plain old aging, is exposure to ultraviolet B radiation in sunlight. Wearing sunglasses and brimmed hats while outside can reduce exposure and delay the need for surgery to remove a clouded lens. The good news is that cataract surgery has been refined so that the supersmall incisions are self-sealing; new artificial lenses can be folded or rolled and slipped into place.

Glaucoma and macular degeneration are more insidious conditions; by the time you know you're a victim, vision has



often been lost forever. In glaucoma, the optic nerve becomes damaged, and vision loss usually starts at the side. Most people with glaucoma have increased pressure inside the eyeball, and although it's unclear how that pressure affects the optic nerve, medications that lower the pressure are effective at slowing damage.

With age-related macular degeneration, the macula, a spot in the center of the retina that provides clear central vision, is damaged by abnormal blood vessel growth or slow loss of light-sensitive cells. High doses of supplements, including vitamins C and E and beta carotene and the mineral zinc, have been found to slow the progression of AMD in several trials. But because some studies have linked high doses of beta carotene and vitamin E to cardiovascular risks, ophthalmologists advise against taking supplements as a preventive measure unless they're doctor-prescribed. It's impossible to get that quantity of antioxidants and zinc in food alone, but some studies have found that people who eat a lot of dark-green leafy vegetables have a lower risk of AMD. Smoking increases the risk of macular degeneration, so there's one more reason to quit.

People with diabetes have added reason to worry: Diabetic retinopathy affects some 40 percent of people with the disease, with 8 percent of all diabetics facing significant vision loss. Keeping your blood sugar levels under control reduces the risk of harm. —N.S.



Wrinkles

One cream that really works: good sunscreen

While birthday cakes may gain a candle every year, the appearance of dreaded crow's feet and creases, luckily, isn't so inexorable. To some extent, simple steps can prevent wrinkles from forming. And even when those time-wrought lines start to appear, it's in our power to contain the damage.

By far, the most fundamental component of wrinkle prevention is sun protection, since sun exposure, compounded by other environmental insults, accounts for the vast majority of wrinkles. The rest are caused by uncontrollable factors such as genes and years of repetitive muscle movements, says David J. Leffell, a professor of dermatology and surgery at the Yale School of Medicine and author of *Total Skin*.

Damage and repair. While prevention of sun damage ideally begins in childhood, it's never too late to start safeguarding skin, to retard further harm, he says. With time, rays break down collagen and elastin tissue, which keep skin supple and pliant. While the body can replenish some of what's lost, its repair mechanisms do falter over time. "By the late teens, early 20s, if you aren't careful, you're going to have damage outstripping any repair that the body can do," says Leffell.

Sun care is simple: Use sunscreen or a sun-protective moisturizer year-round—even in winter, he says. A minimum of SPF 30 is ideal, as is a product that contains zinc oxide or Parsol 1789, which protect against UVA radiation. (SPF reflects only UVB protection.)

Other dermatologists also recommend topical antioxidants, like vitamins C and E, thought to neutralize damage to DNA triggered by the UVA rays. Studies of such skin products have won over Arielle Kauvar, a New York-based dermatologist, though she cautions that certain agents, like vitamin C, have to be formulated in a very specific way—i.e., sealed in a light-tight container—to work. Leffell, however, isn't convinced that the evidence supports antioxidant topicals.

Evidence does support another kind of topical—prescription creams containing retinoic acid, more commonly called tretinoin, which can actually rejuvenate skin, as University of Michigan researchers reported in the *Archives of Dermatology* last May. Retinoic acid works by gradually stimulating fresh collagen production, which helps stave off or reverse fine lines, says Leffell. "There's no point at which you lose a benefit from starting [its] application," says Kauvar, who frequently prescribes retinoic acid to patients in their 50s and 60s, just as she pre-emptively does for the younger set. Just one potential wrinkle: If used during pregnancy, it may cause birth defects. —L.L.