

DR. ELVOVE AND STAFF NEWSLETTER



"Primum non nocere"



Number 10

MEET ELIZABETH A. BAKER, M.D.

Doctor Baker joined our practice in May, 2001. She graduated from the University of Chicago with honors in Biology. She then graduated from the Southern Illinois University School of Medicine in 1987. She completed her residency in Pittsburgh and is board certified in Family Medicine. Dr. Baker is married and the mother of four children whose ages range from four to ten years old. Her professional interests include childbirth, breastfeeding, nutrition, women's health, office gynecology, pediatrics, and adult medicine. The following is an interview of Dr. Baker by Dr. Elvove.



GE: What is the role of a Family Medicine specialist in providing health care?
Dr. Baker: A family doctor is in the unique position of caring for every member of a family—male or female, young or old, ill or for health maintenance. Understanding the illness and stresses in one family member help me to better understand the health needs of the other family members. This way, families receive more comprehensive care when a single physician cares for all of them. Medical care in America during the past decades has become increasingly fragmented, with patients visiting a variety of specialists. As a family doctor, I evaluate the whole person instead of focusing on a particular organ.

GE: What are some of the issues that are unique to women when they access our health care system?

Dr. Baker: Our modern culture has expected women not to question authority and to be quietly accepting. Fortunately, this pattern is changing. I see more women questioning the current medical dogma than in the past. Patients are coming to the doctor armed with knowledge and questions. For most families, it is the woman who makes the health care decisions. So she needs to be informed not only for her own health but also for the health of her family.

Another significant change is the greater choice of alternatives for women's health care—home vs. hospital birth, better support for breastfeeding, safer and more effective alternatives to synthetic hormone replacement. These are areas of interest to our entire staff.

GE: How do you see your role in providing prenatal care and birthing babies?

Dr. Baker: Like you, I have long enjoyed practicing obstetrics. The first births I attended in medical school brought me to tears. I was overwhelmed by the power of the experience. Birth is a profoundly spiritual experience, though I feel that modern American obstetrics has stripped birth of its aura and defined it instead as a risky medical 'procedure'. It is my goal to help provide a safe, joyful, powerful, and spiritual birth experience to families under my care.

GE: Do you feel that thyroid hormone deficiency is under-diagnosed?

Dr. Baker: Thyroid disease is very prevalent in the U.S. Estimates suggest that more than 20 million Americans suffer from thyroid disease. Thyroid disease is often undiagnosed because the symptoms can have a gradual onset and are non-specific. For instance, many conditions can cause fatigue or sluggish thinking. So people often attribute the symptoms of thyroid illness to other life stresses: aging, work, parenting, and so on. They do not even think to bring these vague symptoms to a doctor's attention. Another obstacle to diagnosing thyroid disease is the lab tests available and the challenge in accurately interpreting the lab results. Too often doctors give more credence to the lab values than to the patient's symptoms. I use lab values as well as signs and symptoms in deciphering whether a patient has a thyroid disorder.

GE: What is the role of nutrition in establishing optimal health?

Dr. Baker: There is no doubt that many cases of heart disease, cancer, diabetes mellitus, obesity, asthma, and learning disabilities result as a direct consequence of American's abysmal eating habits. Most people do not realize how toxic a poor diet can be, and conversely how terrific they would feel if they practiced better nutrition. I am certain that proper nutrition is the single most important factor in creating good health.

GE: What are the greatest challenges facing modern medicine today?

Dr. Baker: The greatest challenge faced by 21st Century medicine is placing the primary responsibility for health with the patient, not with the physician. I see my role as empowering, advising and educating patients so that they can

make the decisions about their health. So many Americans expect solutions to their health problems to come in the form of pills or surgery. In fact, most of the answers come in the form of lifestyle choices that each of us makes every day: Will we smoke? Use alcohol? Eat thoughtfully? Exercise? Breastfeed our babies? Seek spiritual growth? Pills and surgery do have their place in modern medicine, but should take a back seat to the choices each of us can implement in our lives every day.

GE: Thank you for your thoughtful insights. A hearty welcome to our practice! *

HEALTHY PREGNANCY

Most pregnant women can achieve a healthy and normal pregnancy with a certain amount of effort and planning. Just as any project must be well planned and properly executed in order to be successful, pregnancy is no different. Genetic and environmental factors are involved. The genetic factors were determined when you chose your partner. Hopefully you made a wise choice, because you have no further control over the baby's genes. However the environment that you create for the developing baby regulates the expression of these genes. This is where volition will make a substantial impact, not only on the health and successful outcome of the pregnancy, but also on the life and health of the child in the years ahead. We all want to give our children the best possible beginning in life, and our effort should commence prior to conception.

The six factors that we *do* control are air, water, food, exercise, sleep and mental attitude. Let's review each of these factors separately.

(1) AIR: You have little control over the air you breathe unless you are a smoker or are exposed to smokers. You should stop smoking or breathing second-hand smoke. You should avoid prolonged exposure to harsh chemical fumes, especially petroleum products, benzene, oil base paints, and cleaning fluids.

(2) WATER: Water consumption is essential during pregnancy. Blood volume increases by fifty percent during pregnancy to help nourish the growing baby. We give all of our pregnant patients drinking mugs so that fluids will be replaced on an ongoing basis. Pure water is always the best liquid to drink. You should avoid drinks that contain caffeine, excess sugar, artificial sweeteners like aspartame, and alcohol. Alcohol is toxic to the fetal brain cells during all trimesters and should be absolutely avoided, even in wine or beer. Cow's milk is rich in bovine hormones and should be limited. (There are better sources for protein and calcium; I'll

elaborate on this subject later.)

(3) FOOD: Nutrition during pregnancy is a most challenging and complex issue to manage, but offers the greatest potential for a woman to positively influence her pregnancy. Many women feel that because they are pregnant, they can eat anything they desire, without reason or planning. Nothing could be further from the truth! Proper nutrition not only provides the baby with raw materials required for optimal development, but also creates a hormonal milieu conducive to optimal transport of nutrients by the placenta and to efficient functioning of the uterine muscles during labor. Improper nutrition can result in birth defects, pre-term labor, preeclampsia, gestational diabetes, or prolonged labor.

At conception, adequate amounts of folic acid and B vitamins are required to prevent cleft palate and spina bifida and to quell the nausea and vomiting of early pregnancy. Prenatal vitamin supplements should be started as soon as the stomach tolerates them. Natural vitamins, which are extracted from food sources, are far superior to pharmaceutical vitamins, which are chemically synthesized in a laboratory. The natural vitamins are better absorbed, better utilized and better recognized by the body and cause less gastrointestinal upset. Fifteen years ago, due to our frustration about the lack of high quality food-source based prenatal vitamins, Dr. Ettner and I designed a custom formula for our pregnant patients. A nationally respected natural vitamin company compounded these vitamins to meet our specifications. Our patients comment that our vitamins make them feel much better than their previous prescription vitamins, and they do not upset their stomachs.

Every meal and snack should contain a high quality, low-fat protein source such as fish, chicken, turkey, eggs, cottage cheese, lean beef or pork, or soy products. A rough guide for the amount of protein at each meal is the size and thickness of the palm of your hand. For those women who have difficulty consuming adequate protein, I designed a "rich protein shake" recipe which utilizes soy or whey protein isolate powder, frozen fruit, nut butters, fiber, and flavorings. This shake is quite tasty and provides 25 grams of high quality protein and suffices as a complete meal or snack. Daily protein consumption should be 80-100 grams during the second and third trimesters.

Carbohydrate choices should emphasize fresh and frozen fruits and vegetables, both raw and cooked, with every meal and snack. These foods contain minerals like calcium, anti-oxidants, phytonutrients and fiber. The dense carbohydrates such as bread, pasta, rice, potatoes, cereal, sugar, chips, and juices should be used only in very small quantities. These foods contain very little else other than sugar. Even whole grain products contain predominantly carbohydrates, which can result in the oversecretion of insulin in susceptible individuals. Chronically elevated insulin levels due to overabundance of carbohydrates in the diet can lead to gestational diabetes, excessive growth of the fetus, and a prolonged labor. Starchy carbohydrates are heavily promoted by the food industry because they are inexpensive to produce, have a long shelf life, and are therefore very profitable. A useful adage is to avoid the central aisles of the grocery store where the starchy carbohydrates are lurking.

Essential fatty acids are extremely important nutrients in the diet. Fat makes food satisfying and tasty and is necessary for the synthesis of the eicosanoid hormones that control our basic physiologic functioning at the cellular level. (See previous newsletters for more information.) Fat also slows the absorption of carbohydrates into the blood and thus modulates insulin response. The low-fat protein sources contain adequate omega-6 fatty acids. Additional fat added to meals should be mostly monounsaturated fat such as olive oil, canola oil and nuts. Corn and safflower oils are polyunsaturated vegetable oils containing large amounts of the less desirable omega-6 fatty acids and should be used sparingly. A third kind of fat, which is extremely deficient in modern diets, is the long-chain omega-3 fatty acids EPA and DHA. EPA improves blood flow and oxygen transport to the fetus. It also helps to synthesize the hormone prostaglandin E1, which is responsible for optimizing the efficiency of uterine contractions during labor, resulting in a shorter labor. DHA is an integral component of the fetal neuron cell membranes and promotes healthy fetal brain and retina tissue. I recommend four to six grams of molecularly distilled, cholesterol-free fish oil per day, especially during the third trimester. Fish oil supple-

ments should continue during breastfeeding to ensure your baby's optimal brain development. Flax seed oil does not contain EPA or DHA and thus has far less potency than fish oil. The other daily supplement I recommend is Vitamin E: 400 IU of natural mixed tocopherols daily. Vitamin E is an antioxidant that neutralizes free radicals and is difficult to obtain in the diet.

One fat group that I recommend that we all *avoid*, especially during pregnancy, is the *Trans fatty acids*, which are found in the "partially hydrogenated vegetable oils" you see listed on food ingredient labels. These oils are chemically altered to prolong shelf life by preventing rancidity. Our body chemistry doesn't recognize these oils as synthetic and utilization can result in weakened cell membranes in the cardiovascular and central nervous systems. Foods that contain these oils are margarine, refined peanut butter, crackers, chips, and baked goods. Desirable living natural foods *should* spoil with time and must be used when fresh. In contrast the shelf life of a Twinkie® is seven years!

During pregnancy we request each mother to bring in a three day representative diet log so that we can work with each woman's tastes to suggest the best possible food choices for her pregnancy. Pregnancy is a time when women are highly motivated to eat well for the benefit of their developing babies. We hope that the healthy habits practiced during the pregnancy continue as the child grows outside the womb. Children learn their eating habits by imitating their parents and we all want our children to develop healthy eating habits.

(4) EXERCISE: The next environmental factor to consider in achieving a healthy pregnancy is exercise. Our bodies are designed to be active, and will not function efficiently unless we utilize them. Exercise improves cardiovascular fitness, tones muscles, removes waste products, lowers insulin levels, and improves mood. Any exercise you enjoy doing and can be accomplished near home or work is satisfactory. Walking briskly thirty minutes, five times a week would be adequate, and is something anyone can do. We consider pregnancy as if it were an athletic event, and as your coaches, we want you to be prepared: well trained, well nourished, and well conditioned when it comes time to give birth.

(5) SLEEP: Adequate sleep follows in this mode. Sleep allows the body to repair, renew, and refresh itself and reduces stress levels.

(6) ATTITUDE: Finally, emotional health is often overlooked but has a lasting effect on the outcome of pregnancy. Your outlook should remain positive and the baby should be exalted as a welcome and valuable family addition. You should sustain high hopes for the happiness and health of your baby. You should shrug off disparaging remarks made by relatives or acquaintances. Pregnancy is a time to read, study, enjoy art and music, meditate, practice your religion, and generally nourish your spirit. If you have persisting fears about the baby, childbirth, or motherhood, you should let us know so that we can suggest ways to help you to handle them. You need to develop the confidence to realize that you can cope with the difficulties of labor utilizing the power that already exists deep within you. It is helpful to remember that childbirth has been repeated over three billion times in the past, so the overwhelming probability is excellent that *your* journey will be successful! *

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