Enthusiasm is growing. Wine and other alcoholic beverages—when consumed in moderation—may reduce cardiac disease risk. Red wine, in particular, is thought to counteract harmful effects of dietary cholesterol and saturated fats.

The hypotheses that wine consumption could have a protective benefit grew out of surveys showing lower rates of coronary heart disease in parts of Europe where wine is routinely consumed. Known as the “French Paradox,” the theory provides an explanation for why the French—with their cream-heavy diets—don’t have higher rates of heart disease. The phenomenon, however, could also be explained by their other eating habits, which include greater intake of fresh fruit, vegetables, and fish.

An American Heart Association panel, led by Dr. Ira J. Goldberg, Professor of Medicine at Columbia University, is currently examining the possibility that wine and other alcoholic beverages counteract cardiovascular damage from dietary cholesterol and saturated fats. This follows more than 60 studies so far that have pointed to heart-healthy benefits associated with moderate wine and alcohol consumption. The encouraging news is that alcohol can increase the HDL cholesterol, the so-called “good” cholesterol. One to two alcoholic drinks daily may actually increase HDL by about 12%, an amount also seen with exercise and medications.

Epidemiological studies point to red wine as containing some beneficial antidote, but it is not certain whether alcohol or another ingredient is the source. One theory attributes the benefits of red wine to flavonoids and other antioxidants that help to mop up blood-clotting chemicals that can cause heart attacks. Most recently, biologists have found a class of chemicals they hope will make people live longer. One of these, resveratrol, is found in red wines, particularly those made in cooler climates like Burgundy and New York State. But the advisory panel warns that the proposed benefits of alcohol should be weighed against the adverse effects of alcohol consumption on the liver, intellectual performance, and overall lifestyle.

Preventing Stroke
Ischemic stroke, which accounts for more than three-quarters of stroke cases, occurs when blood flow to the brain is reduced because of a clogged blood vessel. Studies suggest that light to moderate alcohol consumption appears to be associated with a lower risk of stroke.

The amount of alcohol consumed and the mortality rate are indirectly related. The countries with the largest wine consumption have the lowest mortality rate from coronary heart disease.
Alcohol and Breast Cancer: What are the Risks?

This year, more than 200,000 new cases of invasive breast cancer are expected to strike women in the United States and almost 40,000 women are expected to die from the disease. Despite significant advances in breast cancer treatment, mortality rates for some groups—women age 55 and older, African American women, and Hispanic women—have been increasing. Although certain breast cancer risk factors, including age, genetic predisposition, hormone levels and reproductive events cannot be modified, alcohol consumption—a behavior associated with breast cancer—is a risk factor that can be changed.

More than 30 studies have shown an increased risk of breast cancer in women who drink moderate to high levels of alcohol. Although these studies indicate small variations in degree of risk, they all point to greater risk with increased alcohol consumption. According to current estimates, alcohol accounts for 2% of breast cancer cases in the US.

The amount of alcohol in a single drink varies, but on average, there are 12.8 grams of alcohol per 12-ounce serving of beer; 11 grams per 40-ounce serving of wine, and 14 grams per standard serving of spirits. Some estimates have shown that for each 10-gain increase in daily alcohol consumed there is a 9% increase in risk of breast cancer. Women who consume two or five drinks daily have a 30-40% increased risk of breast cancer. The type of alcohol consumed did not change the risk. However, the good news, according to one recent study, is that low levels (1-11 grams per day) of alcohol consumption did not increase breast cancer risk.

Few researchers have addressed the relationship of alcohol consumption to breast cancer in African American or Hispanic women, but in one study, investigators found a similar association in African American women. In a recent analysis of Hispanic women in New Mexico, the association between alcohol and breast cancer was not significant.

There are several hypotheses to explain why alcohol may increase breast cancer risk. One possibility is that increased alcohol consumption results in increased estrogen levels and subsequent stimulation of breast cell proliferation. Another theory involves one of the products of alcohol metabolism, acetaldehyde, a known carcinogenic, that may lead to breast cell damage.

Although studies to date are not without limitations, the consistency of results supports an association between alcohol and breast cancer. Like many of the decisions we are faced with, risks and benefits always have to be assessed individually. In general, people with a strong personal or family history of breast cancer would likely benefit most from alcohol abstinence. For most individuals, however, the increased risk of breast cancer is probably minimal if alcohol is limited to 2-3 drinks per week and combined with a multivitamin containing folic acid, which appears to attenuate the effect of alcohol consumption on breast cancer.

—Rebecca Press, MD, MPH, Avon Foundation Scholar in Women’s Health


Alcohol and Risk in Patients with Diabetes

Does alcohol increase the risk of type-2 diabetes? Hotly debated, the question of benefit to risk ratio of alcohol for diabetics remains under investigation. So far, research has shown that moderate amounts of wine and beer do not appear to increase the risk of diabetes and may even decrease the risk in women. However, heavy consumption, especially spirits, appears to increase the risk for type 2 diabetes. An important community study (Atherosclerosis Risk in Communities) followed more than 12,000 persons for almost 6 years. Men who consumed more than 21 drinks/week had a 50% greater chance of developing type-2 diabetes than those who drank less than or equal to 1 drink weekly (1). The increased risk was found predominantly in men who drank spirits rather than beer or wine. A recent study following more than 109,000 women showed that light to moderate alcohol consumption actually decreased the risk of type-2 diabetes (2). Again, the benefit was most apparent with beer or wine versus spirits. On the other hand, women who drank approximately 3 or more drinks/day of spirits had a 2 times greater risk of developing diabetes.

For patients who already have diabetes, diet plays a major role in disease management. Periodically studies have shown that moderate alcohol consumption at mealtime has no significant effect on blood sugar and insulin levels in either type-1 or type-2 diabetes (3). Diabetics have been advised to choose drier wines containing less carbohydrate. Measuring blood sugar after a meal, wine, or dry wine at mealtime in a group of well-controlled type-2 diabetics (4), researchers found that neither dry nor sweet wine had an impact on blood sugar control. Furthermore, it may be that wine’s anti-clotting and antioxidant properties counter increased oxidative stress that diabetics experience after a meal. Consumption of wine with meals may suppress free fatty acid levels, reduce LDL oxidation, and decrease the activation of obstructive blood clotting factors after a meal (5). Whether or not these benefits translate into improved cardiovascular outcomes in people with diabetes remains to be seen.

—Julia Cassetta, MD, New York Presbyterian Hospital Auxiliary Scholar in Women’s Health at Columbia Presbyterian.

3. *Diabetes Care.* 1993 Dec;16(12):1612-4

TOTAL QUALITY CARE
An Alcohol "Q & A"

What is excessive?
- Moderate drinking is defined as 1 or 2 drinks per day for men and 1 drink per day for women and those older than 65.
- Women and the elderly have lower levels of body water, so smaller amounts of alcohol achieve higher blood alcohol concentrations than in younger men.

What is moderate drinking? One drink is usually defined as:
- A bottle of beer = 12 ounces, or
- A glass of wine = 5 ounces, or
- 80-proof distilled spirits = 1.5 ounces.

When to abstain?
- Pregnant or considering pregnancy
- Have a medical condition that can be worsened by drinking, such as an ulcer or liver disease
- Have a personal or family history of alcoholism
- Are taking medications that may interact with alcohol
- Are planning to drive or engage in other activities that require you to be alert
- Are under the legal drinking age.

What is the downside?
- Heavy drinking increases risk of liver cirrhosis (damage to liver cells), pancreatitis (inflammation of the pancreas) and certain cancers, including cancer of the liver, mouth, throat, larynx (the voice box) and esophagus.
- Long-term health consequences of heavy drinking include loss of appetite, vitamin deficiencies, stomach ailments, digestive problems, sexual impotence, obesity, heart and central nervous system damage, memory loss, and psychological disorders.
- Heavy drinking increases risk of death from automobile crashes, injuries during recreation and work, likelihood of homicide and suicide, and may harm the fetus during pregnancy.

Generous Benefactors Support a New Breed of Scholar

When the Center for Women’s Health was established in 1994, women’s health was just beginning to emerge as a specialized area of medicine. Under Dr. Elsa Giardina’s direction, the Center created far-reaching programs to advance women’s health through comprehensive, specialized care, based on gender-specific research and training. The Fellowship and Scholar programs, developed by Dr. Giardina and her colleagues, and funded by the Center’s friends and supporters, play a vital role in making these initiatives possible. Designed to provide financial support to academic physicians—usually at the early stages of their careers—these programs open opportunities to expand knowledge and training in women’s health and to create new generations of leadership in the field. Visionary philanthropy from the donors listed below is helping to make this extraordinary progress possible.

Arlene and Joseph Taub’s outstanding support helped to launch the Scholars Program in 1996. Since then, their generous assistance has continued to provide opportunities for talented physicians to focus on research and training in women’s health. Scholarship recipients include Mindy Weiss, M.D., Assistant Professor of Medicine; Carole Cardinale, M.D., Instructor in Medicine; Julia Cassetta, M.D, Instructor in Medicine, and Eliza Chin, M.D.

As a new discipline, women’s health at an academic medical center needed the initial jump-start that would make it possible to train the next generation of women’s health physicians and to serve a growing population. In 1999, Esther and Oded Abodi made a generous gift of $25,000 to provide additional support for Dr. Mindy Weiss’s scholarly activities. That support was later augmented by Mrs. Abodi’s family and friends who contributed more than $30,000 in her memory.

In 2001, a three-year, $240,000 commitment from the Fannie E. Rippel Foundation established the Center’s first Fellowship in Women’s Health. Dr. Giardina is the recipient of the award, which is designed to provide multi-disciplinary training in gender-specific health and the opportunity to develop a research project. The fellowship has supported Drs. Cardinale and Cassetta.

In 2001, the Center also became the beneficiary of a three-year, $150,000 award by the New York Presbyterian Hospital Auxiliary. Led by Audrey Weiderlight, Ph.D., president of the NYPH Auxiliary and member of the Women’s Health Advisory Committee, the NYPH Auxiliary provided funding for young academic physicians interested in teaching and expanding educational resources for students, house staff and physicians in the discipline of women’s health. The NYPH Auxiliary scholarship has supported Dr. Elizabeth Ricanati, as well as Drs. Cardinale and Weiss. Dr. Cassetta, the award’s current recipient, is directing student clerkships in women’s health and a residency program elective in internal medicine.

The Avon Foundation, known for its staunch dedication to women’s health and, in particular, to the fight against breast cancer, made a three-year, $150,000 commitment to create an Avon Scholar in women’s health. This year’s scholar, Rebecca Press, MD, MPH, Instructor in Medicine, is studying breast cancer and other health problems in the largely Latino and African-American population of Washington Heights. With a primary focus on breast cancer prevention and early detection for underserved women, Dr. Press will develop protocols to educate women from diverse backgrounds on lifestyle changes that would reduce risk factors for breast cancer and other major killers of women.

Two yearly grants totaling $110,000 from the Norman and Rosita Winston Foundation are adding to the Center’s ability to develop and implement models of prevention for heart disease, breast cancer, stroke and other diseases. Introduced to the Center’s programs by Marylin Levitt, Ph.D., a public health advocate and member of the Center’s Advisory Committee, the Winston Foundation has made it possible for Drs. Cassetta and Dr. Press to teach about the value of healthy nutrition and exercise to women in the Washington Heights community, as well as to evaluate factors that limit behavioral change in order to understand and improve attitudes about disease prevention.
The Center for Women’s Health: Healthcare through the Lens of Gender

The Center for Women’s Health at Columbia-Presbyterian was established in 1994 to provide women of all ages with a full range of outstanding health care services in one location. The Center serves as a model program to address women’s specialized healthcare needs. Programs to advance knowledge, education and training in gender-specific medicine underscore the Center’s comprehensive approach to patient care. These programs rely on the Center’s ability to recruit and retain talented, young academic physicians, trained in women’s health, through its “Scholars in Women’s Health” program. As integral members of the Center’s expert team, Scholars provide patient care, conduct basic and clinical research, and train the next generation in gender-specific medicine.

Jean Sindab African-American Breast Cancer Project

With a generous anonymous gift to New York-Presbyterian Hospital in 1998, the Jean Sindab African-American Breast Cancer Project was established to fund research that addresses the higher mortality of African-American women with breast cancer. Jean Sindab dedicated her life to fighting for racial justice in the U.S. and internationally. Few knew her by name but many were affected by her work. She was only 50 at diagnosis and succumbed to the disease in less than two years. Although breast cancer is diagnosed in women of all races, religions and ethnic groups, African-American patients are less likely to survive breast cancer than women of other race-ethnic groups of similar age and stage at diagnosis. Sindab-funded research projects hope to identify the causes of this disparity in mortality and thus help in the prevention of this devastating disease. The Wine Auction of 2003 will help to support the research efforts of the Sindab African-American Breast Cancer Project.

Davida Deutsch, a Model for Committed Volunteerism

Davida Deutsch has worked tirelessly on behalf of programs for breast cancer including Women at Risk (WAR) and the highly successful Wine, Food and Art Auction of 2000. Davida served as Director of Support and Volunteer Services and was an active member of the Women at Risk Board. Through her volunteer efforts in WAR, she initiated one of the areas finest breast cancer programs including WAR’s weekly support group for women undergoing treatment, the development of WAR’s Resource Library, underwriting and implementing the WAR Clinical Facilitator program for Hispanic patients, and a fund for non-insured women in Washington Heights-Inwood and Harlem.

This year, Davida’s efforts have been monumental in organizing the Dinner and Wine Auction to benefit the Jean Sindab African-American Breast Cancer Project and the Center for Women’s Health. Davida is an incredible asset to the New York-Presbyterian Hospital’s programs for women and a model of committed volunteerism.

Dinner and Wine Auction-(cult’s and fantasy’s)-to Benefit the Center for Women’s Health and the Jean Sindab African-American Breast Cancer Project

Dinner & Wine Auction Dedicated to Esther Aboodi

The October 14 Dinner and Wine Auction is dedicated to the memory of Esther Aboodi, a tireless volunteer at the New York-Presbyterian Hospital, and a friend of the Center for Women’s Health. Mrs. Aboodi served on the Columbia Presbyterian Health Sciences Advisory Council, the New York-Presbyterian Hospital Environment Committee, and was a member of the Advisory Committee for the Center for Women’s Health. She co-chaired, and with her husband, Oded, was a sponsor of the Women at Risk, Wine, Food, and Art Auction in October 2000. In addition, Mr. and Mrs. Aboodi established two assistant professorships in the Herbert Irving Comprehensive Cancer Center and helped a young scholar at the Center for Women’s Health. While much of her life was devoted to the Hospital, Esther was a role model for her family and friends.

This year, her daughter Abby A. Hoffman, carries on the family tradition as a co-chair of the Auction.

Fall Lecture Series

Looking Beyond Hormone Replacement
Tuesday, October 22, 3:30-5:00 pm
ELSA-GRACE GIARDINA, MD
Professor of Clinical Medicine
Director, Center for Women’s Health

Healthy Bones for Life
Tuesday, November 11, 3:30-5:00 pm
SHONNI SILVERBERG, MD
Professor of Clinical Medicine

Alternative Choices for Traditional Problems
Tuesday, December 2, 9:30-11:00 am
FREDI KRONENBERG, PhD
Director, The Richard and Hinda Rosenthal Center for Complementary & Alternative Medicine

Lectures will take place at:
The Columbia/Princeton Club
15 West 43rd Street, between Fifth Avenue and Avenue of the Americas, New York City
Series of three lectures are $125. Individual lectures are $50. For more information, please contact Gail Koevary, 212-304-7219.

Rebecca Press, MD, MPH, Avon Scholar for 2003-2004

Dr. Rebecca Press, Instructor in Clinical Medicine and Assistant Attending Physician at New York Presbyterian Hospital is the Avon Scholar for 2003-2004. Support from the Avon Foundation to the Center for Women’s Health will allow Dr. Press to study racial and ethnic disparities in breast cancer detection and treatment. Drawing on the expertise of the Center for Women’s Health and the Avon Breast Cancer Care and Research Program at the Columbia-Presbyterian Medical Center, the Avon Scholar will develop model preventive breast cancer programs and will address key risk factors for illness in the underserved women of Northern Manhattan.

Dr. Press is a graduate of the University of Pennsylvania and Cornell University Medical College. She completed her residency training in Internal Medicine at Columbia University’s College of Physicians and Surgeons and a General Internal Medicine Research Fellowship and received a Master in Public Health degree from the Mailman School of Public Health.
The Women’s Health Advisory Committee celebrated the arrival of spring with its April 9th luncheon-symposium. Benefiting the Center for Women’s Health Scholars program, the event honored best-selling author, Barbara Taylor Bradford. Guest speaker Ira Goldberg, professor of medicine and chief of the Division of Preventive Medicine and Nutrition, discussed the affects of balanced nutrition on heart disease prevention in his presentation, “Smart Women – Healthy Choices.”

Above: Herbert Pardes, president and CEO of NewYork-Presbyterian Hospital; Elsa-Grace Giardina, professor of clinical medicine and director of the center; Arlene Taub, committee chair for the symposium; Gerald Fischbach, executive vice president for health and biomedical sciences at Columbia University and dean of the Faculty of Medicine; Barbara Taylor Bradford, novelist and guest of honor; and Maureen Cogan, committee chairwoman of the Women’s Health Advisory Committee of the Columbia-Presbyterian Health Sciences Advisory Council.

Far left: Lauri Levitt Friedland, a director of the Norman and Rosita Winston Foundation.
Near left: Marylin Levitt, Ph.D., member of the Advisory Committee to the Center for Women’s Health.

Left: Kathleen Walas, President of Avon Foundation (left) and Audrey Weiderlight, Ph.D., President of the New York Presbyterian Hospital Auxiliary (right), at the Spring Luncheon held at the University Club on behalf of the Center for Women’s Health.

Above: Ira Goldberg, M.D., Professor of Medicine and guest speaker at the Spring Luncheon.

Left: Barbara Taylor Bradford and Arlene Taub.
Consider a Gift to the Center for Women’s Health

Healthy Giving:
Consider a gift to support women’s health. Your gift to the Center for Women’s Health will help to:
- promote research in women’s health and gender-specific medicine
- provide educational programs to improve women’s health
- train new generations of women’s health care specialists
- develop new models of prevention for heart disease, cancer, stroke and other major killers of women.
We value your friendship and support for women’s health research, education and care.
Please make your check payable to: Center for Women’s Health, Columbia University

and mail to:
Center for Women’s Health, CPMC-Eastside
16 East 60th Street Suite 321, New York, NY 10022
For more information on ways of giving to the Center for Women’s Health, please call
Gail Koevary, Assistant Director of Development, at (212) 304-7200.