

According to the Women's Brain Health Initiative, a Canadian charitable organization dedicated to combatting women's brain health disorders, women are twice as likely as men to develop dementia. Despite the fact that almost 70% of Alzheimer's sufferers are women, research has traditionally focused on men.

When considering protecting your brain health, there are non-modifiable risk factors such as family history, genetics, gender and age, however there are also significant modifiable risk factors. Here's what you can do now to reduce your long-term risk:

Get restful sleep.

Numerous studies have shown that structural and physiological changes that occur in the brain during sleep positively affect your capacity for learning new things and impact the strength of memories you create during the day. Getting adequate sleep also boosts your problem solving capacity and creativity. Aim for 7-9 hours of sleep a night by establishing a regular sleep schedule, and remember that you can't "catch up" on missed sleep during the weekend. *Click here* to download our free ultimate sleep guide.

Limit your alcohol consumption.

Excessive long-term drinking can result in neurological damage and impaired mental processing. Women shouldn't exceed 7-9 standard drinks per week or 1-2 drinks on any particular day. Simple tips to limit your consumption include alternating alcoholic drinks with non-alcoholic ones, using a small glass vs. a large one or opting for a diluted white wine spritzer vs. white wine, for example.

Quit smoking.

The brain cortex naturally thins with age but smoking can accelerate this process. As a result, smoking damages memory, learning and reasoning, as well as a million other harmful things! Do you have questions about quitting smoking? Get instant answers from medical professionals using the Medisys On-Demand virtual healthcare app. *Click here* to learn more.

Reduce your levels of stress.

Stress has become a huge issue for women in particular and can affect brain health and inhibit healthy aging. Stress and anxiety are also associated with memory disorders, so managing both is crucial. We can do this through exercise, meditation, yoga and other relaxation techniques, which can actually decrease the rate of cellular aging and therefore your risk of developing Alzheimer's and dementia. Feeling overly stressed or anxious is a good reason to *consult a virtual doctor* for private, confidential and convenient mental health support anytime you need it.

Maintain a healthy diet.

More and more research shows that being overweight in midlife increases risk factors for cognitive decline. To maintain a healthy diet, avoid trans and saturated fats, get plenty of omega-3 fatty acids and enjoy a rainbow of fruits and vegetables. Studies show that women who eat more vegetables experience less risk of cognitive decline. Folic acid, vitamin B12, vitamin D, magnesium and fish oil are also believed to preserve and improve brain health.

Get regular exercise.

Cardiovascular exercise is vital to brain health. According to a Harvard Health report, the brain health benefits of physical exercise come directly from its ability to reduce insulin resistance, reduce inflammation, and stimulate the release of growth factors — chemicals in the brain that promote the growth of new blood vessels and the survival of new cells. Aim for 30 minutes, four times per week. Recent studies also show that those who work out are less likely to develop Alzheimer's and dementia, and have a reduced risk of stroke. Additionally, exercise increases brain volume in older adults and decreases the likelihood of experiencing even mild cognitive decline.

Keep your brain active.

Learn something new, practice memorization and enjoy strategy games, puzzles and riddles. The more frequent and complex your cognitive activity, the less likely you are to develop Alzheimer's.

Maintain an active social life.

Friends and meaningful social engagements can decrease stress, reduce the rate of cognitive aging, increase resilience to injury and increase overall quality of life. Social connectedness is a major key to healthy aging.

While we all want to be wonderful and supportive partners, daughters, friends, colleagues, employees, bosses, sisters and mothers, we need to start to make our own health a priority. One way to ensure better continuity of care for ourselves is to make healthcare more convenient to access by removing barriers like travel and wait times – this is easy to achieve with 24/7 on-demand virtual healthcare.

Want to improve your brain health? Get advice on proactive lifestyle changes that can help prevent cognitive decline during a Medisys Preventive Health Assessment. *Click here* to learn more or to book an appointment in one of our clinics across Canada.



It's no surprise that women have different nutritional needs than men. Hormonal changes that occur with menstruation, pregnancy, breastfeeding and menopause alter a woman's daily need for nutrients such as calcium, iron and folate.

The fact that women are at unique risk for osteoporosis, breast cancer and weight-related problems also influences what foods we should eat – and when – for optimum health. Tailoring food intake to keep up with a woman's changing body can prevent vitamin deficiencies, unwanted weight gain and help guard against chronic diseases. Do you have questions about these or other dietary health issues? *Click here* to consult with a Registered Dietician.

The following strategies will help you eat healthfully across the decades:

IN YOUR 20'S

Women in their twenties are still building bone density and should focus on establishing a strong nutrition foundation for the future – starting with calcium, folate and iron. By age 30, peak bone mass (the maximum amount of bone a woman will have) is achieved.

Meeting daily calcium requirements (1000 milligrams) helps strengthen bones and lower the risk of osteoporosis, and research suggests that a high calcium diet might also ease symptoms of PMS (premenstrual syndrome) including mood swings, fluid retention, food cravings and cramps!

To meet these calcium needs, consume two or three daily servings of milk or fortified milk alternatives (one serving equals 250 ml of milk or unsweetened soy beverage, 175 ml of yogurt or 45 grams cheese). Other foods that add a fair

amount of calcium to your diet – along with plenty of nutrients and disease-fighting phytochemicals – include canned salmon (with bones), calcium-set tofu, legumes, nuts and leafy green vegetables such as spinach, collard greens, rapini and bok choy. To keep bones healthy, women aged 19 to 50 should get 400 to 1000 IU of vitamin D3 daily too. Since there are very few food sources of vitamin D, a supplement is recommended year-round.

At this stage it's also important to ensure you achieve the recommended amount of folate (a B vitamin), especially if planning a pregnancy. Consuming 400 micrograms of folate each day from leafy greens, lentils, asparagus, fortified grains and a multivitamin helps prevent neural tube defects and birth defects, which affect a developing baby's brain and spinal cord.

Menstruating women need 18 milligrams of iron per day to help sustain energy, concentration and mood. (Vegetarians need an extra 14 milligrams to account for reduced iron absorption from plant foods). Good sources of iron include red meat, enriched breakfast cereals, whole grain breads, dried fruit, legumes, tofu and nuts. A daily multivitamin with minerals will also help women meet their daily iron needs.

Are you considering taking vitamin or mineral supplements?

Get instant advice and recommendations with Medisys On-Demand. *Click here* to learn more about our virtual care services.

IN YOUR 30'S

A woman's metabolism starts to slow down in her thirties due to age-related muscle loss. To help keep weight steady, women need to eat less and exercise more.

For every year after 30, women require seven fewer calories per day. In other words, by the age of 40 women should be eating 70 fewer calories each day than she did at 30.

Trim unnecessary calories from sweets, sugary drinks and refined (white) starchy foods while still emphasizing foods rich in folate, calcium and iron. Continue to take a multivitamin and vitamin D supplement.

Magnesium requirements increase in the early 30's to help the body maintain enough of the mineral. Women need 320 milligrams daily to help maintain strong bones, healthy blood pressure and guard against heart disease.

Magnesium-rich foods include whole grains, wheat bran, nuts, seeds, legumes, dried fruit, spinach and green peas.

IN YOUR 40'S

During this decade, women begin the transition into perimenopause, the five to ten year period before the onset of menopause.

While vitamin and mineral requirements remain unchanged, women in their 40's should concentrate on choosing nutritious foods to minimize perimenopausal symptoms such as hot flashes and insomnia, and to maintain good health. A Medisys Preventive Health Assessment is a great way to get a total picture of your current health and optimize your healthcare plan for the next stage of life. *Click here* to make an appointment.

Your 40s is also an ideal time to fine-tune your diet to reduce saturated (animal) fat, refined sugars and sodium. Consume no more than seven alcoholic beverages per week. Limit caffeine to 400 milligrams per day or less if you suffer from sleep disturbances. (An 8-ounce cup of coffee contains 100 to 175 milligrams of caffeine). Incorporate more whole grains, oily fish, legumes, fruits and vegetables.

Adding foods rich in phyto (plant) estrogens such as tofu, soy beverages and soy nuts may help some women ease hot flashes too.

More than 80% of Canadians are not getting enough vitamins, trace minerals, and other major micronutrients in their diet.

Ready to make a change? Join the four week micronutrient challenge today.

IN YOUR 50'S AND BEYOND

Most women reach menopause around the age of 50 and then enter post menopause, the phase of life when osteoporosis, heart disease and breast cancer risks increase. (Menopause occurs when 12 months have passed since a woman's last menstrual period). At the age of 50, calcium requirements increase to 1200 milligrams daily, and in some cases, women may need to rely on a calcium supplement to ensure they meet daily needs. *Speak to your dietitian about supplementing safely* as research suggests that too much calcium through supplements is associated with increased cardiovascular disease risk.

After 50, women should be getting 800 to 2000 IU of vitamin D3 each day too.

Aging affects vitamin B12 status, a nutrient needed for healthy nerves and blood cells and the production of DNA. Studies suggest that up to 43 percent of people over 50 don't produce enough stomach acid to absorb B12 properly from foods. To meet the recommended daily intake of 2.4 micrograms, adults over 50 are encouraged to take a multivitamin supplement, or eat fortified foods such as soy beverages.

While you can't prevent aging, eating right and staying active can help women feel energetic, prevent weight gain and maintain good health throughout a lifetime. Looking for nutrition advice adapted to your needs and lifestyle? *Click here* to learn more about our nutrition services.



Technological innovation is transforming most Canadian industries, and a recent study on behalf of the Canadian Medical Association (CMA) revealed that Canadians are ready to embrace such a revolution when it comes to healthcare. In fact, 75% believe that technology can provide solutions to problems within our traditional healthcare system, *like convenient access to care* and chronic disease management.¹

But the reality is that less than 1 in 10 Canadians have actually experienced a virtual doctor visit 2 for themselves, unlike in the UK and US where telemedicine is more widely adopted.

Low adoption, however, does not mean lack of interest: 7 in 10 Canadians say they would like to take advantage of virtual healthcare today.³

ARE YOU IN THAT MAJORITY?

LET'S LOOK AT FOUR REASONS TO CONSULT A VIRTUAL DOCTOR

1) Save time and money

As the saying goes, time is money – and the notoriously long travel and wait times associated with seeking non-urgent medical care in Canada can be a drain on both.

From taking time off work (we know that Canadians without children typically take up to six days off for doctors' visits, while those with kids take up to 12) ⁴, to travel and parking costs, in-person medical appointments not only create stress surrounding lost time, but can pose a financial burden too.

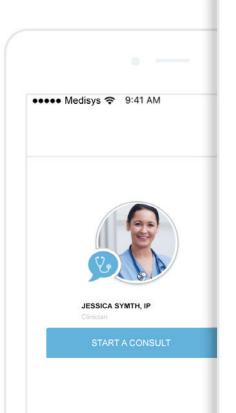
Virtual doctor visits, however, are available on-demand and can address a breadth of health and wellness, injury, illness and ongoing disease management issues through instant messaging and video chat – without leaving home or work ⁵. Imagine saving a trip to your physician's office every time you need to renew a contraceptive pill, or getting instant advice about common personal health issues like vaginal yeast infections instead of having to book an in-person appointment. Virtual healthcare makes immediate, hassle-free healthcare a reality 24 hours a day, 365 days a year, from anywhere in the world.

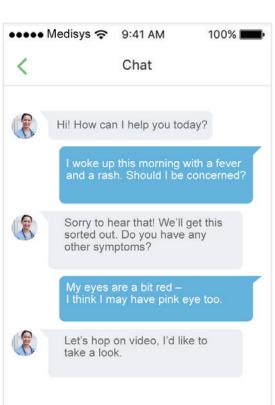


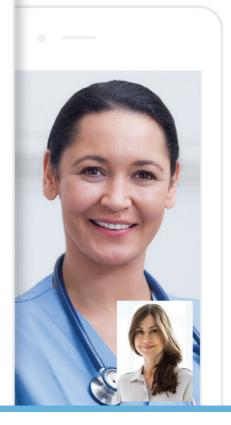
Time Saving Tip

In a recent survey conducted by IPSOS, 68% of Canadians surveyed reported having avoided seeing a doctor when they were sick because of long wait times, the inability to book appointments outside of normal work hours, and other barriers. Want to save time?

Renew prescriptions, obtain specialist referrals, and text or video chat with healthcare professionals instantly any time you need - through a secure mobile app.







2) Avoid crowded clinics and emergency rooms

Millions of Canadians do not have family doctors, but 20% of those that do report waiting seven days or more for an appointment ⁶. As a result, many of us turn to walk-in clinics or emergency rooms as a substitute, or worse – avoid seeking medical attention altogether. Consider these statistics:

- More than 600,000 Canadians use ERs for non-emergent reasons on a regular basis ⁷
- More than half of total visits to ERs in Canada are for nonurgent conditions
- Canadians living in rural areas are more likely to use ERs for non-urgent conditions 9

From respiratory issues to dermatology concerns to cuts and burns and more, virtual doctor visits via telemedicine platforms like <u>Medisys On-Demand</u> can eliminate the need for most non-urgent clinic and emergency room visits.

3) Improve the continuity of your healthcare

As a new report by Accenture echoes, virtual healthcare also makes it easier for people to become actively involved in their own care: "Consumers get the convenience of around-the-clock care delivered on their terms, and a wider range of services when they are healthy, temporarily ill or injured, or managing an ongoing condition. ¹⁰"

The Canadian Medical Association's (CMA) recent study reinforces this view: seven in 10 Canadians agree that incorporating more technology into their healthcare management will enable them to prevent illnesses because they will be diagnosed and treated earlier. ¹¹

Women in particular can benefit from being more proactive about their health and symptoms they experience: heart disease and stroke are the leading causes of death for Canadian women, according to the Heart & Stroke Foundation of Canada.

"Women go to the hospital later than men do with symptoms of a heart attack," Dr. Vivien Brown, vice president of medical affairs for Medisys Toronto, recently told Best Health Magazine ¹². "They don't do as well after a heart attack, there's all this cardiac data on women being misdiagnosed, and just thinking they are tired or anxious, and they don't get diagnosed as early on in the process the way men do," she says.

According to the Public Health Agency of Canada, the signs and symptoms of a heart attack are different in women than in men and are often ignored. Women can experience nausea, fatigue, difficulty breathing and anxiety in addition to chest pain as warning signs of a heart attack.

With <u>Medisys On-Demand</u>, patients also benefit from automatic follow-up care via text message from the nurse practitioner or physician they consulted with, without actually having to make a follow-up appointment.

We must also recognize the provision of virtual doctor visits to extend the reach of high quality care to underserved populations and remote communities where access to medical attention can be limited to begin with.

4) Get private mental health support

Scheduling challenges, lack of time and poor flexibility continue to make it difficult for Canadians to prioritize mental and emotional health ¹³, but new research suggests that 90% of behavioural and mental health services can be delivered virtually. ¹⁴

Unfortunately, many Canadians also still feel insecure about the perceived stigma of seeking mental health support – and study after study has reported higher levels of depression among women ¹⁵ – but virtual mental healthcare services can alleviate that fear completely with convenient and confidential mental health consultations – carried out anytime, anywhere, as soon as support is needed.

Mental healthcare at our fingertips is a modern-day solution for a difficult modern-day reality: 60% of North American workers are facing more mental health and substance abuse issues than they were two years ago. ¹⁶

Would you supplement your traditional healthcare routine with virtual doctors' visits? *Click here* to check your eligibility for Medisys On-Demand or to learn more about telemedicine and virtual healthcare.

Sources:

- 1. https://www.ipsos.com/en-ca/news-polls/future-of-health
- 2. https://www.ipsos.com/en-ca/news-polls/future-of-health
- 3. https://www.ipsos.com/en-ca/news-polls/future-of-health
- 4. Murphy, R. (2018), Majority of Canadians have taken time off work for medical appointments: survey.
- 5. https://www.accenture.com/t20170628T011740Z_w_/us-en/_acnmedia/PDF-54/Accenture-Strategy-DD-Virtual-Care-POV.pdf
- 6. Canadian Institute for Health Information survey (2016), How Canada
- 7. Compares: Results From The Commonwealth Fund's 2016 International Health Policy Survey of Adults in 11 Countries -Accessible Report, retrieved from www.cihi.ca
- $8.\ https://www150.statcan.gc.ca/n1/pub/82-625-x/2015001/article/14177-eng.htm$
- 9. https://www.theglobeandmail.com/news/national/most-canadian-er-visits-not-emergencies/article1123866/10. https://www.theglobeandmail.com/news/national/most-canadian-er-visits-not emergencies/article1123866/
- 11. https://www.accenture.com/t20170628T011740Z_w_/us-en/_acnmedia/PDF-54/Accenture-Strategy-DD-Virtual-Care-POV.pdf
- 12. https://www.ipsos.com/en-ca/news-polls/future-of-health 1
- 3. https://www.besthealthmag.ca/best-you/health/common-health-problems-canada/ PwC Healthcare, Making Care Mobile, retrieved from www.pwc.com/ca/en/industries/healthcare.html
- 14. https://www.accenture.com/t20170628T011740Z_w_/us-en/_acnmedia/PDF-54/Accenture-Strategy-DD-Virtual-Care-POV.pdf
- $15. \ https://www.canada.ca/en/health-canada/corporate/about-health-canada/reports-publications/women-health-strategy.html \#strategy html \#$
- $16. \ Benefits\ Canada\ (2019)\ Mental\ health\ and\ substance\ abuse\ issues\ on\ the\ rise:\ survey,\ retrieved\ from:\ www.\ www.benefits\ canada.com$



Self-esteem plays a significant role in how men and women may view themselves in the workplace, and one's perceptions regarding his or her abilities, skills, and motivation can trigger varied approaches on the job. But what are these differences and why do they exist? Perhaps we need to look further than job titles.

WHAT IS SELF-ESTEEM?

Morris Rosenberg, an expert in the field, describes self-esteem as "either a favourable or unfavourable attitude toward the self". More specifically, self-esteem refers to "a person's overall sense of his or her value or worth. It can be considered a sort of measure of how much a person values, approves or appreciates, prizes, or likes him or herself."²

Self-esteem differs from self-confidence, which is rather "the trust in yourself and your ability to deal with challenges, solve problems, and engage successfully with the world", but they are closely linked. While self-confidence relies on external measures of success and value, self-esteem focuses on internal contributions. One can be highly confident in one area or skillset and still suffer from low self-esteem. If low self-esteem is impeding success, it may be the subconscious that is engaging in behaviours that are undermining one's achievements.

For all genders, self-esteem challenges can manifest in many ways, including:

- · Feeling sensitive and easily angered or irritated
- Feeling concerned about pleasing others
- Feeling that your opinion isn't important or valued
- Doubting your decisions
- Experiencing anxiety, sadness and worthlessness
- Experiencing difficulty with relationships
- Avoiding taking risks or trying new things
- Engaging in addictive or avoidance behaviours
- Experiencing difficulty with establishing boundaries
- · Holding a pessimistic outlook on life

SAME WORKFORCE, DIFFERENT LENS

While more women now work in traditionally male-dominant environments, research shows that differences persist in the way that women and men feel about their roles. For instance, studies show that women more frequently express feeling like they don't deserve their job or merit their title. They tend to worry more about being disliked, and about not being as smart as others within their fields. Although men doubt themselves too, they are less likely to allow their doubts to interfere with their goals.⁴

DIVIDED SINCE CHILDHOOD

Findings after many years of research on the differences between how young boys and girls are nurtured prove that the developmental years greatly affect the way today's workplace perceptions are formed. Based on boys' propensity to participate in team sports, they later tend to see the world as a hierarchy where value is placed on authority and following orders. Men typically function well in environments where rules and orders are clearly stipulated and the ultimate goal and driving force is to acquire "more".⁵

On the other hand, young girls are typically encouraged to engage in what the research refers to as "process play" or "relationship play". These activities include, for example, playing house, nurse and teacher, where there is no winner or loser and no final score. What is learned from relationship play significantly differs from that of team play – learning how to share, treat others nicely, avoid conflict, build and maintain relationships, cooperate, avoid risks and ensure everyone is happy and has a part, outweighs who will win at the end. Later in life, it remains important for the majority of women to be part of an equal playing field where everyone works together and gets along.

STRONGER TOGETHER

It's important to note that the result of men and women's different behaviours and beliefs in the workplace present a diverse set of skills to draw from in any industry. Including both men and women in senior-level discussions, decision-making and problem solving processes will allow the most creative and effective approaches to emerge. All strengths and styles should be encouraged and diverse opinions embraced in order to capitalize on the gender differences that exist in most workplaces. This will help to create a healthier and stronger work environment for both men and women.

Feeling anxious or depressed? <u>Click here</u> to book an appointment or learn more about our psychology services, or <u>click here</u> to communicate instantly with healthcare professionals with Medisys On-Demand.

Sources:

- 1. https://positivepsychologyprogram.com/self-esteem/
- 2. https://positivepsychologyprogram.com/self-esteem/
- https://www.psychologytoday.com/us/blog/hide-and-seek/201205/buildingconfidenceand-self-esteem
- 4. http://www.paulineroseclance.com/impostor phenomenon.html
- 5. https://careers.redventures.com/blog/2015/11/18/5-major-
- differences-between-menand-women-at-work/
- 6. https://careers.redventures.com/blog/2015/11/18/5-major-
- differences-between-menand-women-at-work/
- 7. https://careers.redventures.com/blog/2015/11/18/5-major-differences-

between-menand-women-at-work/



Within a few years of menopause, up to 50% of women develop symptoms related to vaginal atrophy (VA), also called the genitourinary syndrome of menopause (GSM), a common but treatable condition. VA is where the vaginal walls become thin, fragile and inflamed due to the reduction of estrogen that naturally occurs during menopause. GSM includes the vaginal symptoms of atrophy (burning, itching, dryness, irritation and painful intercourse), but also includes bladder issues and issues of sexual function.

According to a recent study, not only is GSM causing physical discomfort, but it's also causing emotional distance between couples. The stigma surrounding GSM, a highly personal condition, is still present and many women are embarrassed to talk about it with their partner or even their healthcare professional.

Virtual healthcare – which provides on-demand consultations with medical professionals via text or video chat from the comfort of home – poses an ideal solution for women who may be avoiding an in-person consultation with their physician to discuss vaginal or urinary symptoms. *Click here* for more information about virtual healthcare with Medisys On-Demand.

The Clarifying Vaginal Atrophy's Impact on Sex and Relationships (CLOSER) study, which surveyed more than 1,000 North American post-menopausal women and male partners of post-menopausal women, aimed to determine the impact of vaginal discomfort and local estrogen therapy on intimacy, relationships, and women's self-esteem.

Below are some shocking results from the survey:

- 66% of post-menopausal women avoid sexual intimacy fearing it is too painful
- 63% of women avoid sexual intimacy due to a general loss of libido
- Canadian women are among the most likely to agree that due to VA, sex is less satisfying
- One fifth of women feel VA has made them emotionally distant from their partner
- 44% of women say VA makes them feel old
- 68% of men surveyed say they have sex less often because of VA
- 30% of men say sex is less satisfying for them personally because of VA
- 26% of Canadian men say they have stopped having sex altogether because of VA

Fortunately, there are treatment options.

TREATING THE SYMPTOMS

Many women self-treat using over-the-counter lubricants and moisturizers, which may provide temporary relief of symptoms but do not treat VA. Effective treatment options are available, with local estrogen therapy (LET) being a standard of care. As a result of LET, one third of North American women surveyed in the CLOSER Study agreed that their sex lives had improved and that they felt more optimistic about the future of their sex lives.

LET comes in several forms:

- An estrogen-releasing ring can remain in the vagina for a maximum of 3 months, and release hormones to address the changes
- A topical estrogen cream can be applied locally to relieve symptoms quickly and used about twice per week
- Oral medications containing estrogen can be prescribed, though risks and benefits need to be reviewed as each patient is different
- An easy-to-use, low-dose vaginal tablet can be inserted twice per week

Health Canada recently approved the use of two laser machines for treating VA, used to safely create micro-damage to the tissue within vaginal walls and stimulate regrowth of collagen and thicker tissue as it heals. Laser treatment includes a series of three treatments six weeks apart. While it is exciting in medicine to have new options, laser treatment at this time is being evaluated carefully for its risks and benefits. For those patients who are not good candidates for local estrogen, this may prove to be very helpful, but it is a bit early to decide at this time.

It is important to remember that intimacy does not need to be sacrificed as a result of VA. To determine which treatment is right for you, talk to your doctor. Don't have the time to visit yours? Simply use our Medisys On-Demand application to communicate instantly with a healthcare professional, from the comfort of your home. *Click here* to learn more about virtual care services.

Sources:

Clarifying vaginal atrophy's impact On SEX and Relationships (CLOSER). European Menopause and Andropause Society (EMAS) Annual Congress, March 2012. Mayo Clinic: Vaginal Atrophy Definition.



MAKE YOUR HEALTH A PRIORITY.

1 in 2 Canadians are expected to develop cancer during their lifetime — and 45% of those will be women.

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