

## The Menopause Bible, The Complete Practical Guide to Managing Your Menopause

Edited by Robin N. Phillips, MD; Buffalo, NY: Firefly Books, 2005; ISBN 1-55407-067-8; 256 pages; \$27.95

Coffee table books are always in demand. A medically correct, easy-to-read, well-illustrated coffee table book such as *The Menopause Bible* may be hard to keep a hold of. In keeping with other Firefly Books' publications, excellent usage is made of pastel color-coding, interactive boxes, nuggets of information—in this case, entitled “Wise Woman” inserts—and a wealth of easy-to-understand annotated illustrations.

The physiologic changes of the menopause are simply but clearly explained. The far-reaching impact of estrogen on women's cardiovascular health is addressed. Symptoms of perimenopause—abnormal bleeding, hot flashes, night sweats, vaginal dryness and itching, urinary and skin changes—are discussed, and legitimate “natural” and complementary medicinal remedies given, including calcium, evening primrose oil, acupuncture, face, scalp and sole massage. I particularly like the table of nail problems and simple vitamin/mineral remedies.

Bone health appropriately has a chapter to itself. Just as important, the authors did not shy away from addressing the negative impact of carbonated beverages on bone mass and quality by depletion of the body's calcium stores to neutralize carbon dioxide or balance phosphorus.

Sex and sexuality are openly addressed. The more bashful reader may be taken aback by the ample photographic illustrations of means to enhance and vary sexual intercourse. Yet, as with all things, if a topic cannot be discussed, the under-



lying situation cannot be improved. Safe sex for both STD protection and contraception is a worthy section, given that perimenopausal women have their fair share of unplanned pregnancies.

“A New Look at Nutrition”—with sections on phytoestrogens; “menopause superfoods,” such as spirulina and maca; cardioprotective diets; and the glycemic index—is a benefit resulting from the authors keeping current with the literature. Hormone therapy and alternatives thereof will continue to be controversial, especially given new information that transdermal delivery systems may result in higher serum levels of estrogen than previously thought, with an increased risk of thrombosis as seen in Ortho Evra®. Especially thoughtful is the inclusion of contraindications to usage of herbal remedies from black cohosh to vervain.

*The Menopause Bible* closes with two chapters of general care for women's bodies—the first of which features daily and weekly cleansing routines, the second is further understanding of the anatomic and pathologic changes that women may encounter. Complex medical issues are elegantly described in keeping with the rest of the book. *The Menopause Bible* is an easy, satisfying, enlightening read from which even specialists can learn.

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## The New Politics of Old Age Policy

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*The New Politics of Old Age Policy* offers a detailed examination of the ethical and political issues that can sustain economic progress in the face of a growing elderly population and escalating healthcare costs. In a collection of essays, the authors collectively argue that Social Security, Medicare and associated services geared towards the elderly are not put into place as part of a government strategy to appease a group of influential “greedy geezers.” Rather, they argue that the aforementioned social services rendered to the elderly should, and must, continue to evolve in such a way as to address their increasing needs.

Although the current administration has gone to great lengths to signal support for policies that benefit America's seniors, the research compiled in this meticulous study demonstrates the failures of current policies that have yielded a situation where “over 16% of the elderly live below the poverty line.” Sadly, little is being done to address this trend. In the essay, “A Normative Defense of Age-Based Public Policy,” Martha B. Holstein laments current age-based policies that lack relevancy in the lives of America's elderly population and instead seem driven by a desire to maintain the status quo. Rather than implement redistributive provisions that would gen-

erate “improved intergenerational justice and equity,” the government seems to have adopted strategies of “preserving” existing policies that have traditionally failed to address the basic needs of the elderly. As the authors demonstrate, this has had catastrophic effects on the elderly population of this country. Such effects are well illustrated by Colleen M. Grogan in “The Politics of Aging within Medicaid,” in which she demonstrates that America’s failed age-based policies have forced a substantial number of elderly Americans to contend with a gross lack of “decent housing,” primarily since “Medicare only pays 38% of their housing costs.”

Despite elucidating endemic deficiencies in America’s services to the elderly, the authors in the anthology do not see eradication of age-based programs as a solution to the problem. As Judith G. Gonyea cogently demonstrates in her essay “The Oldest Old: Challenges for Public Policy,” policymakers should not attempt to reinvent the wheel in their quest to solve the problems facing elderly initiatives, such as Social Security and Medicare. To do so would be to “ignore the significant gains in the older population’s well-being that have directly resulted from federal expenditures.” Given that Social Security has been “central to a threefold drop” in poverty amongst the elderly in the last 30 years, it stands to reason that policies favoring modification rather than a complete overhaul of the existing system would bear more fruit. Continued failures to adopt broad measures that address the myriad inadequacies in the aforementioned federal programs bode ill for future generations of Americans—particularly the baby boomer generation, which is entering old age. Whether these failures stem from a lack of will or way is debatable.

One author seems to think that an institutional will for widespread reformation exists; however, the “way” in which this will is being imple-



mented is flawed. For example, in “Old Age: Implications for Health, Work, and Retirement,” Angela M. O’Rand suggests that current government proposals in response to past policy failures follow an inadequate policy logic that is myopically fixated on “individualized solutions for institutional risks” (page 116). O’Rand’s research emphasizes the need for redistributive provisions in dealing with old-age policy. She argues that only policies which breed aggregate improvements on a national level can undo the damage that the traditionally accepted “individualized” solutions have created for millions of elderly Americans. She argues that such broad policy initiatives could be instrumental in minimizing the adverse effects on economic growth and high tax burdens that are often attributed to hastily approved policies dealing with elderly care.

As the authors

demonstrate, the current government approach to age-related policies is at once incomprehensible and consequential: incomprehensible because contemporary policies addressing issues pertinent to the elderly population have consistently failed to address the growing diversity of healthcare, social and economic concerns; consequential because a failure to address Social Security and Medicare reform on local, state and national levels bodes ill not only for current elderly persons but also for the future prospects of our nation.

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