President’s Remarks

The Society for Menstrual Cycle Research is pleased to have a full new Board in place for 2008. We welcome four newly elected members to the Board: Maria Marvan, Giovanna Chesler and Heather Dillaway plus Judith Berg who was re-elected at the end of her past term. Thank you all for your being willing to support SMCR with your knowledge and leadership.

We want to thank Alice Dan and Susan Cohen (past president) who are now leaving the Board for their good service to SMCR. Mary Anna Friederich is ready to retire from her valiant work as Secretary/Treasurer. Thanks again for your long and dedicated service for SMCR, Mary Anna! Maria Clara Whitaker from Brazil was a board member, however, she has not attended board meetings or conferences since elected—as per the bylaws she is therefore no longer on the board. Her term will be completed (until 2009) by Marianne McPherson, the non-elected person with the most votes in the recent ballot.

The full board is now:

To serve until 2009: Elizabeth Kissling, Phyllis Mansfield, Diana Taylor, Marianne McPherson (completing Maria Clara Whitaker’s term).
To serve until 2011: Joan Chrisler, Christine Hitchcock, Ingrid Johnston-Robledo, Margaret (Peggy) Stubbs
To serve until 2013: Maria Marvan, Giovanna Chesler, Judith Berg, Heather Dillaway

Ex Officio on the board because of their various roles are:
President: Jerilynn Prior (to serve until 2009, then as past president until 2011)
Secretary/Treasurer: Peggy Moloney
Activist Liaison: Chris Bobel
Newsletter: Paula Derry

As your new president I am very pleased with the interesting, competent and diverse group we in SMCR are. I am also proud of the working groups that have accomplished Board-approved position statements on Extended Hormonal Contraception and on Menopausal Hormone Therapy (take a look at them on the website). Thanks to all for work on those and to Liz Kissling for posting them on the SMCR website (www.menstruationresearch.org).
In a world in which cyclic vaginal bleeding and women's differences in hormones and life cycles from men still produce a fair amount of Yuk, we as a society are important just because we keep saying that these things are normal, need research, and are positive birthrights for women.

I'm looking forward to working with all of you in the New Year and seeing you in Spokane in June of 2009. I hope you had a peaceful holiday season with those you love.

Jerilynn Prior
President, SMCR

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2009 SMCR Conference
By Liz Kissling,
Conference Coordinator

The next biennial meeting of the Society for Menstrual Cycle Research will be held June 4-6, 2009, at the Red Lion Hotel in Spokane, Washington. I think you all will enjoy Spokane; it's located in the Inland Northwest, easy to reach by plane, train, or car; temperatures in early June are usually quite pleasant; and there are lots of things to do and see, should you wish to extend your stay. Spokane has plenty of outdoor activities, plus big-city amenities with small city comfort and prices.

For more about the Red Lion, see: http://redlion.rdln.com/HotelLocator/HotelOverview.aspx?metaID=18

Keep watching the listserv and the newsletter for more details about conference theme, keynote speaker(s), and call for proposals.

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Members' News

Dear SMCR Members, I would like to thank you very much for honoring my work with the Esther Rome Award for Student Research. It meant a great deal for me to receive this honor from a group whose work I admire very much. Having received my EdD, I am continuing my research and moving it into the patient population this Spring. Thanks again! –Joan Moon

I'm pleased to announce that Capitalizing on the Curse: The Business of Menstruation (2006, Lynne Rienner Publishers) has just entered its second printing. Thanks to all of you who have encouraged me, and special thanks to those of you who have bought or reviewed the book.

–Liz Kissling

The University of Rochester, School of Nursing, in Rochester NY, celebrated the graduation of the 100th person from their PhD program in 2007. I was honored to be asked to attend to receive their Distinguished Alum of the Year Award in the fall of 2007 at their Alumni Weekend. Interestingly, when I was a master's student at the U of R in 1977-8, I served on the School's Graduate Program Committee that was investigating and planning a PhD program. In 1983, I returned to pursue my PhD, completing it in 1987. Having made a conscious decision in my graduate studies to focus on women "because they had not been studied well", my master's, PhD and subsequent research has been focused on explaining and promoting women's health-related behaviors.
–Diane Ruth Lauver

David Linton, Professor of Communication Arts at Marymount
Manhattan College in New York City, recently gave two presentations at the University of Manitoba in Winnipeg based on his research on the social construction of menstruation. "What's with the 'Men' in Menstruation?," based on a paper he had previously presented at an SMCR conference, was presented to The Histories of the Body Research Cluster, an interdisciplinary seminar sponsored jointly by the Institute for the Humanities, University College, Faculty of Graduate Studies and the Manitoba History of Medicine Society. The paper concerns the way men have been depicted in the history of product advertising. The second talk, hosted by the University of Manitoba Medical School's Grand Rounds for doctors and students in the OB/GYN and Nursing programs, focused on the ways doctors, nurses and scientists have been depicted in menstrual product advertising over the past 80 years. There were several opportunities to direct the audience to the SMCR statement on the issue of menstrual suppression drugs during the following discussion.

Peggy Moloney was awarded a Women's Health Research Award to recognize her outstanding contributions from the National Association of Nurse Practitioners in Women's Health (NPWH). The award, presented at NPWH's Annual Conference in Philadelphia, Pennsylvania, was for her winning abstract entry, "Migraines and Hysterectomy," which outlines her study of middle-aged women who received hysterectomies without consideration for their migraines, which is a common practice. Her research indicated that hysterectomy may actually cause the worsening of migraines, and called for clinicians to consider a woman's migraines when recommending hysterectomy and to abandon the practice of recommending hysterectomy as a treatment.


Dr. Jerilynn Prior, Professor of Endocrinology and scientific head of the Centre for Menstrual Cycle and Ovulation Research (CeMCOR), along with co-investigators Drs. Millan Patel (genetics), Sheila Pride (gynecology-reproductive endocrinology), and Shirin Kalyan (CeMCOR post-doctoral fellow), have been awarded the University of British Columbia Sharon Stewart Aniridia Grant to probe the possibility that there is more than meets the eye to anovulatory androgen excess (AAE) - also commonly referred to as “polycystic ovary syndrome” (PCOS). They are examining whether there is a genetic link between PCOS and the cause of a rare eye disorder called Aniridia. This interdisciplinary research will be further assisted with the close collaboration of ophthalmologists Fredrick Mickelberg, Sueda Akkor, and Roy Cline. Aniridia is an inherited problem involving the anterior chamber (front part) of the eye. The majority of aniridia cases are caused by a mutation in a gene called PAX6. PAX6 is highly expressed in the pancreas and intestine where it regulates the production of a number of hormone-producing cells. People born with severe PAX6 mutations have developmental eye problems such as glaucoma (high pressure inside the eyeball) and vision problems. Interestingly, it was recently discovered that minor alterations in PAX6 gene expression also influence the proper regulation of the hormone, glucagon,
which, along with insulin, is responsible for the control of blood glucose and energy metabolism. This leads many people with a dysregulation in PAX6 expression to develop early onset Type 2 diabetes and insulin resistance (which is often coupled with abdominal adiposity). Anovulatory Androgen Excess (AAE) is a condition that affects about five to ten percent of all women and is characterized by anovulation (i.e. lack of egg release during the menstrual cycle); sometimes having far apart or absent periods (oligomenorrhea); and signs of excess androgens (such as male pattern hair growth and problematic acne). Women with AAE also frequently have an increased waist circumference (especially in relation to the hips), which puts them at an increased risk of early onset Type 2 diabetes. AAE often clusters in families, which suggests it is an inherited disorder; however, the genetic cause of this syndrome is still unknown. It is currently thought that there are probably a number of affected genes that contribute to AAE. In their research, Dr. Prior and co-investigators hope to add a piece to the genetic puzzle of both aniridia and AAE. They will be enrolling women with AAE to determine whether they have any alterations in the front part of their eyes and to see if specific variations of PAX6 gene expression are present in women with AAE.

Update on SMCR Publications
By Phyllis Mansfield and Peggy Stubbs, Co-Editors

Peggy Stubbs and Phyllis Mansfield are working on a special issue for Health Care for Women International that they are co-editing, with papers that are based on presentations at the 2007 SMCR conference in Vancouver. They are currently beginning the second draft revisions of papers for the special issue, to be published Spring, 2008.

Peggy and Phyllis also co-edited a special issue on the menstrual cycle for Women and Health (vol. 46, 2007), that has recently been published, which contains articles based on papers presented at the 16th biennial conference of SMCR in Boulder, CO in June 2005. Please take a look – urge your library to subscribe if they don't carry the journal. Congratulations to all the authors.

The Table of Contents for the Women and Health special issue is:
2. Reproductive Shame: Self-objectification and Young Women's Attitudes Toward Their Reproductive Functioning. Ingrid Johnston-Robledo, Kristin Sheffield, Jacqueline Voigt, and Jennifer Wilcox-Constantine.
SMCR Menopausal Hormone Therapy Statement Is Updated
By Paula Derry

The SMCR Board of Directors decided last spring to review the Society’s 2003 position statement on The Women’s Health Initiative’s randomized clinical trials of estrogen/estrogen progestin therapy for prevention of chronic illness after menopause. Drafts of the update were written and reviewed by a committee of interested members and the Board of Directors, and the updated statement has been adopted by the Board. The statement is posted on the society’s website. The 2007 update re-affirms the conclusions of the original position statement, that menopause is not a disease and that postmenopausal hormone therapy should be used only for symptom-relief and not for disease prevention. However, this updated statement adds a critique of an increasingly heard criticism, the estrogen “timing hypothesis,” which asserts that the WHI research results are limited to older postmenopausal women and that younger women would derive positive benefits from hormone use. This hypothesis has little experimental confirmation and should not be the basis for professional decision-making.

The Menstrual Cycle and Adolescent Health Conference
By Peggy Stubbs

In mid October, 2007, the Menstrual Cycle and Adolescent Health conference was held in Potomac, Maryland. Sponsoring groups included The National Institute of Child Health and Development, the American Society for Reproductive Medicine, the NIH Office of Research on Women’s Health, The NIH Office of Rare Diseases, the US Food and Drug Administration Office of Women’s Health, the Department of Health and Human Services Office of Women, and Rachel’s Well, Inc. A major goal of the meeting was to build a community of investigators, clinicians, patient advocates and government agencies committed to the long term goal of focusing attention on the menstrual cycle as a marker of health of adolescent girls. Invited participants were asked to draw from their areas of expertise to define the scientific basis of the public health message that the menstrual cycle is a marker of general health in adolescent growth and to develop a related research agenda for the 21st century.

The meeting began with a discussion of the process of research today. The bench-to-bedside-to-bench model of research was explored, with some dismay about the lack of funding for “bedside” research in favor of “bench” research. The observation was made that “bench” research seems to lead to more “bench” research, and is thus distanced from the bedside. IRB issues were also discussed, in particular the institution’s efforts to protect itself in addition to research participants. Of particular interest to those studying adolescents was the discussion of what constitutes minimal risk, which can very defined very subjectively by IRB board members and is often an obstacle to conducting research with young people.

Following, were individual presentations about: normal processes associated with the adolescent menstrual cycle;
associated disease processes (e.g., Congenital Adrenal Hyperplasia, Polycystic Ovarian Syndrome, developmental issues (e.g., the menstrual experiences of disabled adolescent girls, relationship between body image, amenorrhea, eating disorders and the menstrual cycle) to name only a few. SMCR members Susannah Barsom and Peggy Stubbs contributed. Susannah reported on the Insights from the Tremin Trust data and Peggy spoke about cultural perceptions and practices around menarche and adolescent menstruation in the United States. Both presentations referred to the work of many SMCR researchers. While the majority of participants were physical health care professionals, Susannah and Peggy along with a few other social scientists helped to underscore the importance of psychosocial issues in any discussion of adolescent menstrual health.

The meeting concluded with an attempt to articulate a research agenda for the future that will help promote the notion of the menstrual cycle as a marker of health in adolescents. This will not be an easy task in a culture that still denigrates the cycle and in which new contraceptives are being marketed as ways to eliminate the cycle. How can the cycle be used as a marker of health, if it is essentially eliminated? One interesting suggestion for future research was that the NIH should fund a prescriptive study of health risks and benefits of long term use of extended cycling contraceptives, in order to avoid finding out about adverse affects after the fact. The entire proceedings, including more specific research recommendations, will be forthcoming in a special issue of the Annals of the New York Academy of Science.

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**Red Web Foundation Educational Day**

The Red Web Foundation Educational Day, *In the Flow: Embracing the Cycles of Womanhood*, was a great success. Over 70 women and girls participated in the cross-cultural, intergenerational, and holistic gathering of maidens, mothers and crones, as we came together Sept. 29 at the Jewish Community Center of San Francisco, California. The keynote talk “When Black Jewel Girl Comes Running -- Mother-Lines of Spirit and Flesh” was by Carol Lee Flinders (www.tworock.org). She started us on the journey with a remembering of indigenous peoples’ rites of passage for girls, particularly drawing on the Navajo (Dine) culture kinaalda ceremony and the Beauty Way.

Excerpt: “In this talk I’ve singled out the kinaalda ceremony of the Navajo (Dine) people for the striking way in which its various elements seem to counteract in very specific terms the anxieties and insecurities that can undercut our young girls at the very moment when, by all that is right, they should be radiant. Rituals like kinaalda and the Karuks’ Flower Ceremony take on still more meaning when we consider them in the light of newly emergent information on female hormones and the marked changes they exhibit over the course of a woman’s life.”

The CD of Carol’s talk includes • Navaho Girl Story • Tend & Befriend Response • Black Jewel Girl Story • Kinaalda Ritual • Lessons of Kinaalda • What Rituals Can We Create? • Being a Mentor to a Young Girl • Mother-Lines Influence • The New News. This is available for $16 including shipping and tax from a.yang@redwebfoundation.org.
The workshop presenters deepened pathways in self-exploration and ceremony, as well as our connections to nature and the cycles of our bodies. The six workshop tracks included: Mother/Daughter, Observing Cycles—Yours and Nature’s, Menopause, Taking Care of Yourself, Cultural Experiences, and Celebrate Your Body. We left the gathering full in mind, heart and spirit, with so many of us yearning for similar spaces in which we could gather more regularly. With this desire in mind RWF member Rachael Hertzog set up The Virtual Moon Lodge! http://moonlodge.proboards45.com.

More information about the educational day is available at: http://www.redwebfoundation.org/32.html?&clear=1

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U.S. Health Care Reform and Women
Catherine DeLorey
Director, Women’s Universal Health Initiative

Health care reform is of great interest to SMCR members because the very issues we are concerned with are the issues that garner the most attention for women. In addition, they are the very aspects of our lives that have been medicalized and which have been regulated by the medical and legal systems. Women need to be involved at the grass roots level to ensure that our needs are attended to in a reformed health system. The Women’s Universal Health Initiative focuses on how women can work for health care reform to create a fair and just health system, aims to inform and educate diverse communities of women to work for health care reform, and provides resources and encourages all women to become advocates within and for our own respective communities. The goal is to create a health care system that addresses women’s unique needs and is: universal, providing equitable access for everyone; comprehensive, including a full range of services to promote and maintain health; high quality; affordable; and publicly accountable. If you would like to be kept up to date, go to the web site of the Women’s Universal Health Initiative: www.wuhi.org. If you would like to receive the newsletter — many SMCR members already do — send an email to info@wuhi.org. If you have any information, notices, etc. relating to women and health care reform that you would like to share, send it to Catherine@wuhi.org. WUHI exists on the donations of its members and members, and a tax deductible donation of any amount would be appreciated.

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2008 Dues Now Due

Please note that SMCR member dues are due in January of each year. If you have already sent in your dues, or if you have paid in advance for future years, thank you! If not, please send your check for $50 for one year, or $125 for 3 years, made out to SMCR, to Peggy Moloney, 2351 Doreen Ct., N.E., Atlanta, GA 30345. Please also send me any changes in your snail mail or e-mail address. Thanks.
Peggy Moloney
Secretary/Treasurer
nurmim@langate.gsu.edu
From the Editor

The electronic version of the newsletter is posted on the SMCR website. Everyone on the SMCR listserv receives an e-mail notice when the newsletter is posted. In addition, everyone is getting a paper copy except those who have opted out. If you want to receive only the electronic copy and not the print version, please contact me at my e-mail address. If you didn’t receive an e-mail notice, contact Peggy Moloney at nurmim@langate.gsu.edu.

Submissions to the newsletter are always welcome. Please send news about your publications, presentations, activities, news of other members, commentaries on topics of interest, book reviews, announcements of upcoming conferences, queries about whether to write an article. Please send material in the body of an e-mail or in a Word attachment. Thanks.

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