CR Consumer Reports
On Health

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NEW UPDATED EDITION

300+ Questions You've Always Wanted to Ask Your Doctor

Whether the topic is diet and nutrition, cancer, heart and lung problems, headaches, sleep, or common aches and pains, you'll find it covered here. Both a valuable reference and a browser's delight, *The Answers to Good Health* is just what the doctor ordered for your home medical library.

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CR Consumer Reports® The Answers to Good Health

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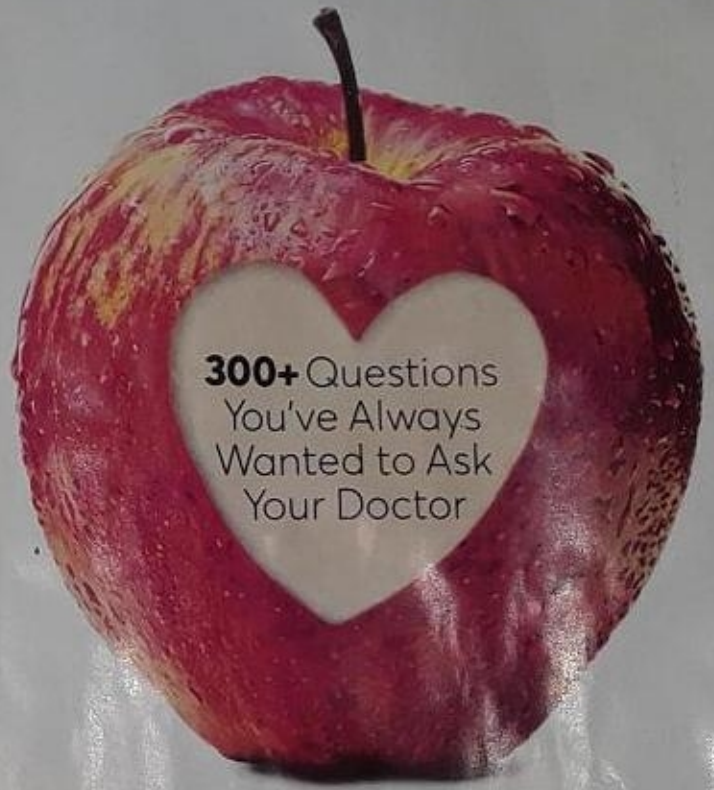
UPDATED NEW EDITION

THE ANSWERS TO GOOD HEALTH



The Editors of *Consumer Reports On Health*

How can I reduce the likelihood of side effects?

Communicating with your healthcare providers is key, Steinman says. "I encourage my patients to ask questions, speak up, and let them know about any problems," he says. And keep the following in mind:

Take fewer drugs if possible. Before starting a new one, ask about nondrug options. Some measures, such as psychological counseling for insomnia and physical therapy for back pain, can work as well as drugs—with far less risk.

Simplify your drug regimen. Making a mistake with timing or the dose can lead to serious adverse reactions. If you have trouble keeping track of what to take and when, ask your doctor or pharmacist to help you streamline your drug regimen.

Review your drugs regularly. At least once or twice a year, make an appointment with your doctor or pharmacist to go over everything you take or use, including prescription and OTC medication, ointments, ophthalmic preparations, herbal preparations, and vitamins. Ask about possible drug reactions and if there's medication you no longer need.

Avoid "prescribing cascades." That happens when doctors prescribe drugs to treat side effects of other drugs. "People should always ask the provider 'Could this problem I'm experiencing be related to a drug I'm taking?' " Rochon says.

Men's health

PROSTATE CANCER CONCERN

Q *Is watchful waiting really safe for prostate cancer?*

A For low-risk prostate cancer, it generally is. In watchful waiting, or active surveillance, instead of treatment with surgery or radiation, a man is closely monitored. That could include a digital rectal exam and prostate-specific antigen blood test every six months, and a biopsy if needed. Many experts recommend watchful waiting when a prostate cancer is small, seems slow-growing, causes no symptoms, and is confined to the prostate. In a Johns Hopkins University study of 1,298 men with low-risk prostate cancer who were carefully monitored, fewer than 1 percent died or saw their cancer spread over 15 years. After nearly 20 years of follow-up among men with localized prostate cancer, surgery was not associated with significantly lower all-cause or prostate-cancer mortality than observation (aka watchful waiting). Surgery was associated with a higher frequency of adverse events than observation but a lower frequency of treatment for disease progression, mostly for asymptomatic, local, or biochemical progression. If your cancer is high-risk or advanced, you'll probably need treatment right away.

IBD AND PROSTATE CANCER RISK

Q *I have inflammatory bowel disease (IBD). Am I at a higher risk for prostate cancer?*

A One study did find that men with inflammatory bowel disease had a rate of prostate cancer that was four times that of men without IBD. Inflammation from IBD (which includes Crohn's disease and ulcerative colitis) may trigger prostate inflammation, which may contribute to cancer development. Men with IBD may need more careful screenings for prostate cancer, but additional study is needed, the authors of the study say.

PROSTATE CANCER VIDEOS

Q *There is a lot of information online regarding prostate cancer, including interesting videos, but can I trust these?*