chds
Child Health and Development Studies

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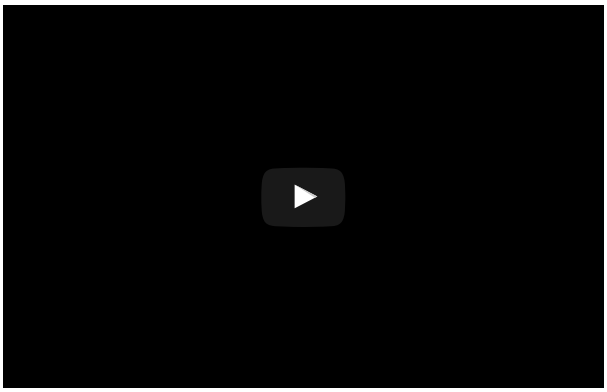
Welcome from the Director, Dr. Barbara Cohn



Thank you to everyone who participated in the MyCHDSReport Study!

You may recall that this was a study designed to inform participants about the levels of environmental chemicals found in their blood (also see video from CHDS Director, Barbara Cohn above). CHDS daughters who had their blood drawn in one of two recent follow-up studies were randomly selected to be in the study. Because of their participation the study successfully met its targeted number of participants; about half were African American, as intended. Based on participants' feedback, CHDS will be able to evaluate whether study participants who received their individual chemical levels increased their knowledge or were motivated to take action to reduce chemical exposures. Offering study results to participants is groundbreaking as researchers try to work more closely with study participants in order to develop mutual trust and respect. Findings from this study have the potential to build momentum for this new practice of sharing study results with participants. For an example of whatFor an example of what an individual report looks like please visit the CHDS' website at http://chdstudies.org/3gs/mychdsreport/index.php

The Many Hats of Research in the MyCHDSReport Study

The MyCHDSReport is the cohort's first official launch into the field of Research as a full partner with scientists from the Child Health and Development Studies and Silent Springs Institute. You are the cohort and this study demonstrates how influential you are.

My individual involvement in the MyCHDSReport study is multidimensional. I'm a cohort member, a Participatory Advisory Council member, an elected Community Partner co- Investigator, and I was randomly selected to participate in this study. This became an incredible opportunity to witness research from many perspectives.

As the Co-PI in this study, I assisted the researchers and staff in all aspects of the study design. In the formative phases of the study I helped create the questionnaire and make the graphs presented in the online WebTool understandable to the participants. To help engage study participants I handwrote invitations to participants encouraging them to schedule either their initial interview and/or their follow-up, second interview. Additionally, I contributed when needed regarding data management, journal article authorship, etc.

Finally, and perhaps most interesting for myself, I was selected to be a study participant. This gave me the opportunity to experience the study from a researcher perspective, and as a participant who received data about their own blood samples. The fact that I was educated about the study before I participated made my interview experience different from others because I had a bias. However, my training made it possible to give feedback to the research team about my interview experience, how the website tool worked for me, how it felt to receive my own blood results, etc. This input allowed the team to consider the data in other ways.

In this study I was randomly selected to be in the late report back group. This means that initially I received the group results, the national averages, but not my individual results. I made assumptions about what environmental chemicals I may have been exposed to and decided to make changes at home based on these assumptions. When I received my personal results one month later I found my assumptions were inaccurate. In fact, I was surprised by my results. While the changes I made initially were good ones and I continue to implement them, I added new and significant ones based on my actual results.

My experience receiving my personal results weren't observed by my research team because there wasn't a third interview in this study. Why wasn't there another interview? This is easy to answer based on my training as a PAC member … submission for funding is rigorous and competitive, and research is expensive. In this case, there weren't enough funds to hire the interview team, to collect and analyze the data, and to write the articles. This shortage of research funding can explain why there aren't more answers to the expanding list of questions.

To learn more about the MyCHDSReport study and to see a sample of a participant's results select the link below.
http://chdstudies.org/3gs/mychdsreport/index.php

Does Microwave Popcorn Cause Cancer?

We don't yet know if microwave popcorn causes cancer but there is a chemical used in the non-stick coating on the inside of the popcorn bags that decomposes, producing a compound called Perfluorooctanoic Acid (PFOA). PFOA is linked to thyroid issues, high cholesterol and increased risk of certain cancers, including liver, prostate cancer and bladder cancer. Dr. Kyle Steenland and colleagues reported in a 2012 article in the "American Journal of Epidemiology" that plant workers exposed to the chemical had increased cancer mortality. You can't do much about your exposure to PFOA if you use "pop in bag" microwave popcorn.

The good news is, you won't be exposed to the chemical if you choose to use free-kernel corn in a microwave popping apparatus like the one pictured below

You can also use one of a multitude of products which use air or oil or stovetop or campfire (see below).

Chances are the end result could be somewhat healthier for you as well. So the next time you decide to purchase microwave popcorn, please read the label or better yet, choose a different way to pop! Please visit http://www.silentspring.org/what-you-eat-and-drink, to learn more about ways to avoid exposure to chemicals in what you eat and drink.

New CHDS Results on Ovarian Cancer

In a recently published CHDS study we found that irregular menstrual periods predict higher risk of ovarian cancer. These findings received news coverage, including the article below by NBC News:

CHDS Study Finds Irregular Periods May Raise Ovarian Cancer Risk

CHDS researchers were trying to show that irregular periods might protect women against ovarian cancer, but found just the opposite: Women who had unpredictable cycles in their 20s were more likely to develop ovarian cancer decades later.

The study of 15,000 CHDS cohort members doesn't mean that every woman who has irregular periods is doomed to develop ovarian cancer. Out of all those women, over the next 50 years, only 116 developed ovarian cancer, the researchers report in the International Journal of Cancer.

What the findings can do is offer new avenues for research into what causes ovarian cancer ... Read the rest of this NBC article about CHDS research and read the CHDS research article abstract.

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