

HEALTH

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“Women don’t have to give birth lying on their backs. There are so many different positions that encourage the baby to get into a position that can ease the mother’s childbirth.”

— Pam Hetrick, certified nurse midwife at University Hospitals



JOSHUA GUNTER | THE PLAIN DEALER

Julia Anisimova of Mayfield Heights uses a scarf to stretch during a Dancing for Birth class at Hillcrest Hospital that combines belly dancing and Latin, African and Caribbean dance moves to help strengthen muscles used in labor.

Dancing readies moms for labor

Classes encourage a positive — even enjoyable — natural-birth experience

CASEY CAPACHI | Plain Dealer Reporter

On a warm June evening at Hillcrest Hospital, four visibly pregnant women wearing belly-dancing scarves tied below their bulging bellies stand fanning themselves with their hands and shifting their weight from side to side as a Middle Eastern beat fills the air. ¶ “Let’s shake that baby down!” calls out class instructor Barbara Montague, and the women obediently start to gently swivel their hips, laughing, as the gold coins on their scarves jingle.

The class, called Dancing for Birth, combines elements of belly dancing and African, Latin and Caribbean dances. The moves help pregnant women strengthen the pelvic muscles they will use in labor. Another goal of the class: to get the mothers in the mind-set that “they can handle their labor and that they can do this,” says Montague, who has worked for four decades as a licensed practical nurse in labor and delivery.

Continuing their warm-up routine, the women sit squarely on top of large exercise balls, alternately stretching their backs by holding colorful scarves taut above their heads and moving their hips in circles as their pregnant

bellies slowly orbit around the balls.

Montague transitions them to a standing position, and leads the women through steps with names such as “Dilation Gyration,” “Birth Goddess” and “Rock the Baby.” The women execute the moves so smoothly that Montague winks and says, “This is what got them into trouble.”

Encouraging a positive natural-childbirth experience is at the core of Dancing for Birth, says founder Stephanie Larson, who first started teaching the class she created in 2001 in New Jersey. The program is now headquartered in St. Louis.

Larson loves to dance and she literally danced during her labor. It

“seemed like the most natural thing in the world to me and I assumed it was a common practice,” says Larson, a doula (a woman who provides emotional and physical support to a mother during labor) and childbirth educator.

“But I realized from sharing my birth story with other new moms that my birth experience was unusual. Many women feared birth or thought of birth as something they could expect to endure at best, but certainly not enjoy.”

The participants in Larson’s classes reported having such great natural births that she began receiving invitations to present her work at conferences in 2005, attracting attention of midwives, doulas and birth professionals locally and, eventually, internationally.

Since 2007, Larson has trained all 400 Dancing for Birth instructors — a mix of birth professionals, dance and fitness teachers, and “active birth proponents” — who span four continents. She is currently on a teaching tour across Europe.

In September, Dancing for Birth will offer the first trainer training in California, so others will be qualified to certify Dancing for Birth instructors.

Pam Hetrick, a certified nurse mid-

wife and Dancing for Birth instructor at University Hospitals, was trained by Larson when she visited Cleveland last year.

Hetrick says UH originally offered the Dancing for Birth class as part of MacDonald Women’s Hospital’s Centering Pregnancy program for low-income women. It is now also taught at UH’s Chagrin Highlands Health Center and St. John Medical Center in Westlake.

“Women are typically nervous during pregnancy, but in class we always explain why we do the moves,” says Hetrick.

“In general, exercise is very good for pregnant women — we used to be so afraid of it,” says Dr. Elliot Philipson, chairman of obstetrics and gynecology at Hillcrest. “We know now that many women feel better when they’re moving their bodies.”

Philipson says Dancing for Birth is a “good support structure,” and he’s happy to see his patients enjoying it. But he cautions that it may be inappropriate for some people, such as women who have short cervixes or hypertension or who have gone into preterm labor previously.

SEE DANCING | E5

Grant helps four programs link more providers to poor

ELLEN JAN KLEINERMAN
Plain Dealer Reporter

Cleveland-area health providers will use a \$6.4 million federal grant to attract, hire, train and hopefully retain doctors, nurses, psychiatrists, social workers, dentists and others dedicated to caring for urban families on Medicaid.

Officials said the money is needed to address the shortage of medical professionals dedicated to serving recipients of Medicaid — the government’s health insurance for the poor — on a long-term basis.

Case Western Reserve University School of Medicine secured the federal Medicaid funds filtered through the state and will be working with University Hospitals and the MetroHealth System to educate a wide range of health providers and to come up with better ways to help people get well and stay well.

“Wrapping up a standard 15-minute appointment is difficult for any doctor, especially if their patients face challenges such as no money for prescriptions or limited

access to fresh food,” said Dr. Christine A. Alexander, interim chairwoman of MetroHealth’s department of family medicine. “We hope to develop a system that provides high-quality care and proves to be self-sustaining and cost-effective.”

The award to CWRU medical school is part of the \$10 million Ohio Medicaid Technical Assistance and Policy Program Healthcare Access Initiative that went to 15 programs statewide.

In one of the four Cleveland-area programs, UH’s Department of Family Medicine and MetroHealth will focus on training doctors, nurses, social workers and others to work together as teams to serve people from disadvantaged neighborhoods. MetroHealth’s patient-centered medical home system will be the basis for the program that will be started at UH, Alexander said.

“We’ll be teaching a whole system of providers how to use the model while we find ways to build on it and create a system to better meet the needs of our patients,” Alexander said.

SEE GRANT | E5

STRETCHING OUT

Being fit means nothing in fight with jujitsu master

I hope never to get in a fight. If I do, though, I pray it’s not with someone trained in jujitsu.

For in that scenario, I wouldn’t stand a chance. Whatever advantages I might have had in terms of height, weight or fitness would vanish in an instant, and I’d quickly find myself sprawled out on the ground, immobile.

But get this: The ability to reduce people far larger and stronger to tears isn’t the only, or even the primary, benefit of jujitsu.

Better yet may be the exercise it offers: some of the finest, most thorough imaginable.

There was a moment, wrestling with Jose Dias at Rio Pro Brazilian Jiu Jitsu in Westlake (rioprobbj.com), when I thought I might actually free myself from the grip of a black belt.

I’d wiggled my way out from un-



ZACHARY LEWIS

der him and felt tantalizingly close to wrapping one leg over his torso, the key to gaining dominance. Then he took me to school.

Next thing I knew, Professor “Ze,” a native of Brazil and a student of a living descendant of the man who founded Brazilian jujitsu, was sitting on my chest, his knees pinning my arms to the mat.

Had we been fighting, it would have been lights out for me. How Dias got me to that point, I’m not exactly sure.

That, in fact, is the beauty of jujitsu, a martial art born in India, refined in Japan and imported to the United States through Brazil: Transitions of power happen in the blink of an eye, and solely by means of mechanics. Not by strength or size.

SEE STRETCH | E5

Reproductive Wellness

ANGELA TOWNSEND



Rapid HIV tests for home, pharmacy

An estimated 240,000 people in the United States are infected with the HIV virus and don’t even know it. Each year, 50,000 more people are diagnosed with the disease.

Early detection means a chance not only to treat HIV before the virus turns into full-blown AIDS, but also to lessen the spread of the disease.

Two recent developments should make it easier for people to get tested for HIV more quickly and conveniently.

On July 3, the Food and Drug Administration approved an in-home rapid HIV test that can indicate in about 20 minutes whether or not someone is HIV-positive.

Late last month, the Centers for Disease Control and Prevention announced that it had launched a pilot program to train pharmacists and others how to give confidential, rapid HIV testing — and test results — to as many as 300 customers per site over the next two years.

Seven of the 24 urban and rural sites selected for the CDC pilot program already have been chosen, with the remaining ones added by the end of the summer. There’s no word yet whether any pharmacies in Northeast Ohio will be among them.

“By bringing HIV testing into pharmacies, we believe we can reach more people by making testing more accessible and also reduce the stigma associated with HIV,” Dr. Kevin Fenton, director of the CDC’s National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention, said in a news release.

The pilot program is using an existing rapid HIV test made by Pennsylvania-based OraSure Technologies Inc. that costs under \$20, said OraSure spokesman Ron Ticho. Hospitals, health clinics and other testing sites have used it for the past 10 years.

The company’s OraQuick In-Home HIV Test, which won the FDA approval, is identical to the older, rapid HIV test. In June, Ticho said it was too soon to discuss how much the in-home test would cost consumers. Last week, company officials said it would be less than \$60.

OraSure’s new test will be the first of its kind available to the general public for purchase over-the-counter — and potentially the one thing that could get people who have never checked their HIV status to finally take that step.

The driving force for OraSure is making available a product to people who haven’t been tested, for one reason or another.

“As a company, we are committed to getting this out as quickly as possible,” Ticho said. “We recognize the urgent need.”

There are other at-home tests on the market, but results aren’t instant — the tests require that a blood sample be mailed to a lab for testing.

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YOUR HEALTH: SAVING MONEY

Free cancer screenings for women offered

Women who don’t have health insurance and don’t earn much money may be eligible for free testing for breast and cervical cancer through the Breast and Cervical Cancer Project.

The program also pays for biopsies and other tests as long as appointments are made through the project staff. In Northeast Ohio — Ashtabula, Cuyahoga, Geauga, Lake, Lorain, Medina and Trumbull counties — the care is organized by the Cuyahoga County Board of Health. To be eligible for the free tests, you must earn less than 200 percent of the federal poverty level. That’s \$22,340 for one person, \$30,260 for a couple and \$46,100 for a family of four. In general, the free cervical cancer tests or Pap smears are available to women 40 and older; the free mammograms are provided to women 50 and older.

To enroll in the program, find out more or schedule an appointment, call 1-800-443-2168 or go to ccbh.net/breast-cervical-project.

— Diane Suchetka

We welcome your ideas. If you know of free or low-cost care, send an email to savingmoney@plaind.com or mail a note to *Saving Money*, The Plain Dealer, 1801 Superior Ave., Cleveland, OH 44114.

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INSIDE

Regis replacement?

Guest hosts try out to replace Regis Philbin as co-host on “Live! With Kelly.” **E2**

Oz on TV: Dr. Mehmet Oz is featured in a new documentary series beginning tonight. **E2**

Bad music: We asked readers what the worst years were in rock music, and the responses rolled in. **E2**

Lessons learned: Five things we have learned from the summer movie season. **E6**