

## Politics and Economics

# Women's hearts vulnerable, poorly understood

by Tina Peterson

At 3:26 on a cold December morning, Wendy Holder woke up and realized she might be having a stroke. She was dizzy, nauseated, her legs were weak and she had to hold on to the walls as she made her way to the bathroom.

"I did all the things you're supposed to do," she said. She held her hands up, stuck out her tongue, smiled and tried to say clearly, "I think I'm having a stroke."

She called to her husband in the bedroom. When he came in, he asked her what was wrong. She was having difficulty enunciating words. He took her to Mount Nittany Medical Center, where doctors gave her a CAT scan and found a clot in her cerebellum. Because they didn't know precisely when the stroke had occurred in her sleep, the doctors couldn't be certain which treatment would be safest and most effective. Many treatments have specific time windows of opportunity.

The following morning, when she was

still in the hospital, she had another stroke. This one was captured by a heart monitor she was wearing and provided the doctors with an important clue. A printout of her heart's activity from that morning showed an irregularity in her heartbeat—specifically, an atrial fibrillation (AF). This confirmed what her primary physician and her cardiologist suspected: A blood clot resulting from the AF had traveled to her cerebellum, and the resulting stroke affected the right side of her body. Her doctors agreed that this was the cause of the first stroke as well.

Two months later, following courses of physical, speech and occupational therapies, Holder has regained much of her motor control and ability to speak. She hasn't changed her eating or exercising habits because they were already very healthy. At 72, Holder does more daily physical exercise than many people half her age. She

see Hearts, pg. 4



Photo by Tina Peterson

A blood pressure cuff, stethoscope, and other equipment used by health screening specialists in the Health Matters program, a service of Penn State's Office of Human Resources.

## Drug informant policies continue under new D.A.

by Zac Taylor

Fourteen months in state prison has taught Jacob Asbel, 22, two lessons: that selling marijuana is not the smartest way to make a buck and that he needs better friends.

But spending over a year with some of the most dangerous criminals in the state has left Asbel, a former and now re-enrolled Penn State student, wondering if a much criticized tough-on-drugs law enforcement system in Centre County gave him a more harsh punishment than he deserved.

In May 2009, Voices reported on then-Centre County District Attorney Michael Madeira's policy of using arrested drug dealers—in most cases Penn State students—as confidential informants who agree under the threat of mandatory prison sentences to help police set up drug buys in exchange for lighter sentences. Nine months later, Centre County has a new D.A.

in Stacy Parks Miller and has revised, but not abolished, the practice of using confidential informants to rope other drug dealers.

"I look at each proposed confidential informant, their history their credibility, and whether or not they are able to help us get drugs off the streets," Parks Miller said.

But she has drawn skepticism from others in the legal community who say that using confidential informants in any capacity is an unfair and ineffective means of fighting the drug war.

"It's using slime to pick up slime," said Jim Bryant, defense attorney for the law firm Bryant and Catorna. Bryant said that



Stacy Parks Miller

while the whole purpose of using informants is to capture drug dealers higher on the distribution ladder, Centre County has never been successful at making a high profile drug bust. Drug king pins do not exist in this county like they do in other counties, he said.

Pennsylvania law requires that anyone caught dealing drugs within 1,000 feet of a school zone—defined as not only public school property, but also day care centers, beauty schools, cooking schools and any other educational facility licensed by the state—serve a two- to four-year mandatory minimum state prison sentence. The statute also includes property owned by universities such as non-academic buildings, parking lots, and the Penn State golf course.

Chief Public Defender David Crowley said that since the mandatory minimum is not succeeding in catching the type of drug dealer that the law was written to deter—one who is selling drugs to children in inner

city school yards—there is little reason to use police resources to nail Penn State students selling a couple of ounces of marijuana to their friends.

Judges and defense attorneys heavily criticize the law because it shifts sentencing power, which would otherwise be in the hands of the judges, to the prosecutor, who has the choice of whether or not to issue the mandatory minimum if it applies to a case. Defense attorneys say a D.A. can use the threat of applying the mandatory minimum as leverage to force drug dealers to act as informants.

In October, the Pennsylvania Commission on Sentencing issued a report to the General Assembly recommending a general repeal to the school zone mandatory minimum, citing it as costly and largely ineffective.

see Informants, pg. 4

from Informants, pg. 3

When Asbel sold three and a half grams of marijuana to a fraternity brother and friend in 2008, he did not know that an undercover police officer was monitoring the buy. A few weeks later, Asbel sold 14 more grams to another friend, he said, and police arrested him immediately after. He was charged with two felony counts of drug trafficking in a school zone, one charge of conspiracy to deliver a controlled substance, one charge of possession with intent to distribute, misdemeanor possession, three counts of criminal use of a mobile communications facility, a cell phone, from his Beaver Avenue apartment, located well within the 1,000 yard radius of a Penn State-owned building.

Asbel was offered the same deal his friends were offered—a reduced sentence in exchange for work as an informant. Unable to justify passing along the blame to someone else, Asbel declined the deal, he said.

He was sentenced to one and a half to four years in state prison. After spending four months at the maximum security State Correctional Institute in Camp Hill, Pa., Asbel was accepted into a six-month long community service, physical training and prisoner reform program similar to military boot camp. Low level felony offenders can apply to the program, which allows for a dramatic reduction of a prison sentence upon completion.

State prison was no picnic, Asbel said. But when his 14 months were over, he was glad he had declined the informant deal. "As painful as it was, it was almost refreshing, in a way, to have it all over," Asbel

said.

With law enforcement spending valuable resources arresting, charging and prosecuting small-time drug dealer after small-time drug dealer, some say a change in priority is called for.

Matthew McClenahen is a State College-based defense attorney who regularly represents Penn State students charged with dealing drugs in a school zone. McClenahen said that most of his clients were either forced to become, or arrested with the help of, drug informants. He also said that he has never had a client who was arrested for dealing any more than a few grams of marijuana.

"Most of the people they nab are lateral," McClenahen said. "They rarely move up the chain."

McClenahen said small-time marijuana dealing should be made the lowest law enforcement priority—meaning that police should not bother pursuing petty marijuana dealing charges potentially in lieu of other more serious crimes like burglary, robbery and sexual assault.

"They have better things to do than enforce laws born in the era of 'reefer madness,'" he said.

But Parks Miller said drug trafficking cases receive no more attention than any other cases, and police time and energy is not overextended by the amount of drug cases versus any other type of case.

"It's a terrible fallacy to assume that just because we are chasing marijuana dealers that other crimes do not go prosecuted," she said. "We prosecute people who deal marijuana, cocaine, any and all drugs."

From 2004 to 2009, Centre County processed and prosecuted 284 cases of drug

possession with intent to deliver. In Parks Miller's first six weeks as D.A., she has seen 15 or more cases. Of those cases, she said she has approved only two of the potential offenders to work as informants.

Today Asbel is a political science major at Penn State and lives in the same apartment building he was selling marijuana to friends from before he was arrested in 2008.

from Hearts, pg. 3

taught kindergarten for 22 years before retiring, and she buzzes with energy.

Holder said that her internist and cardiologist were perplexed by her stroke, because a woman in such great health seemed so unlikely to be at risk for it.

It remains unclear to Holder exactly what caused the AF that led to her strokes. She has had tachycardia (a faster-than-normal heartbeat) for more than five years, but it has been effectively managed with medication. She said she doesn't know whether

His time in state prison has changed his life for the better, he said, having turned from a pot peddler to a "straight A" student. But he can't help but wonder if the felony on his record will permanently bar him from picking up the scattered pieces.

"I want people to learn from my mistakes because I don't want people to go through what I had to go through," Asbel said.

there is any connection between AF and tachycardia, and that her doctors did not give her a definitive explanation.

"They never really said why it happened, and I suppose I never thought to ask them. Maybe they didn't know," she said.

Holder's story is frightening because it seems that, if it happened to a woman as healthy as she is, it could happen to anyone. Her story is especially important because it sheds light on a larger issue: The fact that diseases of the heart and cardiovascular

see Hearts, pg. 7

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# International women in State College seek a new life

by Kathleen Bisset

Adjusting to life in a new country can be daunting, especially for one segment of women in Centre County. These women are the spouses of international Penn State students, some of whom move to the United States with little knowledge of the English language or Western culture.

According to the U.S. Census Bureau, 5.8 percent of Centre County consists of foreign-born individuals. This is higher than the state's percentage of 4.1. As a result, 8.6 percent of households in Centre County speak languages other than English as their primary language.

Ai-Lun Huang, who goes by Ellen, experienced first-hand the trials of being an international woman in State College. In 2003, she and her husband came to the U.S. from Taiwan so he could further his education at Penn State.

When Huang first came to the country, "everything was new, it was a culture shock," she said.

Another international resident, Azadeh Amiri, who has been in Centre County for almost 2 years, also struggled when she moved. "At first, even getting the visas was very difficult," she said. Amiri, an artist and painter, moved from Iran with her husband so he could attend Penn State.

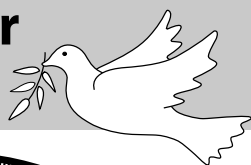
"A lot of the men who come here work for the university, and they bring their wives along," noted Ginger Espigh, a program facilitator for The Development Center for Adults in Centre County. "Some of these women have incredible careers in their own countries. They're doctors, lawyers, accountants, nurses, engineers, and so on." However, once in the United States, they must learn an entirely new language and relate to a society and customs unfamiliar from their own.



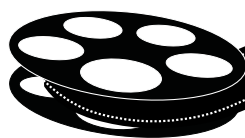
Photo by Kelsey Stratton

Azadeh Amiri, Iranian artist and painter, continues to work and exhibit in Centre County.

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Merrill David, Executive Director of Global Connections, a non-profit organization that works to promote "international cultural exchange," has been working with such women for 6 years.

"Hundreds and hundreds of women in this community are here because their husbands are here" said David. "These women are living in a pretty ambiguous situation. They are very alienated people who are stuck at home and afraid to talk, basically they have no life."

"The first few months, it was pretty difficult for me," Huang said, specifically mentioning the hours that her husband learned and she sat at home.

Although she received a Bachelor of Fine Arts in Iran, Amiri came to a country with a very basic knowledge of American language and culture. "My most important problem was speaking English," she said.

Luckily, through programs offered by both The Development Center for Adults and Global Connections, foreign women can learn to better assimilate to life in Centre County.

"As the woman, you're the one dealing with the teachers, doctors, and doing all the social things that need to be taken care of,"

Espigh said. As a result, speaking with teachers, doctors, and other daily tasks proves difficult for these foreign women. Simply overcoming the language barrier can be an arduous task.

Espigh said there are about 8 women for every 1 man enrolled in the ESL programs at the Center. The reason for such a disproportionate number of women relates to the visa statuses of the spouses, as well as the husbands' schooling.

The men who are enrolled at the university obtain an F1 visa status, for full time students. They are supported by Penn State, and are not able to take the free courses that the Center offers.

Meanwhile, the spouses obtain F2 visas, which are the "dependent of student" visas, and offer them no opportunity for work or education in the United States.

Global Connections, affiliated with both Penn State and the Centre County United Way, deals primarily with international women and offers a multitude of programs including ESL classes, International Friendship, and Women's Intercultural

see International, pg. 6

# Hoeffel speaks to Voices

by Jordan Toronto

*In mid-February, Voices had an exclusive interview with Joe Hoeffel, a Democratic candidate running for Governor of Pennsylvania. Hoeffel has served three terms in the U.S. House of Representatives, representing Pennsylvania's 13th district, and is currently vice-chair for the Montgomery County Board of Commissioners.*

Joe Hoeffel can see why voters are scared in this unstable economy, but believes that makes it all the more important for the democrats in office to step up to the challenge.

"It's understandable to me that democrats are demoralized," said Hoeffel, "but I think that's the wrong attitude for a democrat to have. We're not going to win if we're afraid of our own shadows."

"I am the socially liberal, fiscally responsible candidate," he said. "I use those terms to advocate for the progressive center."

According to Hoeffel, a government in the progressive center has values that are socially liberal and a balanced budget.

"Being fiscally responsible means paying the bills on time," said Hoeffel, "and it can mean raising the revenue before putting the programs in place."

Hoeffel believes Pennsylvania's most pressing issues are economic recovery, including a job creation program and community organization, improving public schools and extending healthcare.

"The government needs to invest in people, in their education and in their healthcare," Hoeffel said. "There is a deep responsibility for the government to provide for the most vulnerable."

*More excerpts from the interview are posted on our website, voicesweb.org*

from International, pg. 5

Book groups.

"We help the women get out and interact... to join programs and develop friendships," noted David.

Through the programs Huang took, she "expanded [her] knowledge, both of living in Central PA and the United States." She attributes this to the commonalities that Centre County international women share with one another. "More people share the same backgrounds; it was a great way to make friends."

Yet, an aspect of Western Culture that shocked Huang was the lack of sincerity she noticed in greetings. "Before coming to the U.S., I thought a greeting should be sincere," she said. "But when people ask me 'How are you?' and I try to explain my feelings or my day, when I look up the person is usually gone."

Likewise, Amiri noted that, "Here, we don't like to be impolite, but sometimes we

just don't know the rules." Hence the necessity of ESL courses and the many other programs offered.

"It takes time to learn Western Culture," said Huang.

As for the future, Amiri has been able to continue her artistic passion in Centre County. Her paintings focus on women, and have been showcased in many exhibitions throughout the area, including some on the Penn State campus.

Meanwhile, Huang has received an F1 visa, and she her husband recently relocated to Hershey, Pennsylvania, where she has begun taking classes at Penn State's Harrisburg campus. Although she enjoys the education she is receiving, despite the full course load, she misses the opportunities and friendships she had in State College.

"Here, I don't have any friends really. I work, study, and do homework. There is little opportunity to socialize and make friends," she said. "I miss State College a lot."

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- Moderator: Suzan Erem – Managing Editor, Voices of Central PA

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## from Hearts, pg. 4

system among women are major health risks that are not yet well understood.

**What it is, what it does**

According to the Mayo Clinic, the term heart disease is often used as a blanket description to refer to a number of different conditions and problems that affect the heart and blood vessels. It's often used interchangeably with the term "cardiovascular disease," which refers to blood vessels becoming narrowed or blocked. Such damage to blood vessels can result in a heart attack, angina (chest pain) or stroke. Most strokes are caused by a narrowing or blocking of the arteries that lead to the brain, which deprives brain cells of oxygen and nutrients they need to survive.

Heart disease causes 26 percent of deaths in the U.S. annually, according to data from the Centers for Disease Control and Prevention (CDC). In other words, one in four deaths is caused by one of the conditions referred to collectively as heart disease.

Although the number of deaths due to heart disease is about the same for women and men, the condition tends to be more fatal for women. Around 42 percent of women die within one year of having a heart attack, compared to 24 percent of men, according to the Women's Heart Foundation.

Awareness of heart disease among women suffers from a lack of publicity, especially compared to its celebrity cousin breast cancer. Breast cancer is highly visible thanks to the Race for the Cure and the pink ribbon that promotes awareness.

Despite the National Heart, Lung and Blood Institute's efforts to spread awareness about women's heart disease through the Red Dress campaign, a 2003 survey by the American Heart Association revealed that only 13 percent of women were aware that heart disease and stroke are the top threats to their health. Every year heart disease kills six times as many women as breast cancer, according to the Women's Heart Foundation.



Dr. Kimberly Skelding

**Different risk factors, different reactions**

The CDC lists the top risk factors for heart disease as inactivity, obesity, high blood pressure and cigarette smoking. Several additional factors, including stress and depression, affect women more than men, according to the Mayo Clinic.

Dr. Kimberly Skelding is a cardiologist at Geisinger's main campus in Danville and director of its Women's Heart and Vascular Health Program. Skelding works with women and men in her practice and observes first-hand some of the challenges women face in maintaining heart health.

Many of the symptoms women experience prior to having a heart attack are different from the chest pains that are common for men. Women often misinterpret some symptoms as indigestion, fatigue or general nausea, Skelding said, and say they feel reluctant about coming in to see a doctor

about such everyday problems.

Skelding said women in particular have a tendency to try to "explain away" their symptoms to avoid worrying or inconveniencing others. Unfortunately, this concern for others combined with the subtle nature of early symptoms can mean that many women wait too long to see a doctor, Skelding explained.

When Holder had her stroke, she described her first reaction similarly. Holder said she was reluctant to pull the emergency call cord that alerted the on-site nurse in her retirement community. At the time, she said, she and her husband didn't realize how serious the situation was. Hindsight has given her a different perspective on the experience.

"I feel very foolish now, for not even considering pulling the cord," Holder added. "I hope I've learned something. I better have."

**Gender imbalances**

Although heart disease affects both women and men, women tend not to be diagnosed and treated as effectively for it, according to the Women's Heart Foundation. A major reason for this, said Skelding, is that women are under-represented in clinical trials and other heart health studies—they usually make up only 15 to 30 percent of the total study sample. This may be because women do not have as much free time to serve as research subjects.

"Women tend not to volunteer as much [for such studies] because they have a lot of other obligations," Skelding said.

As a result, data on drugs and other treatments tend to represent men more accurately, and women's heart health remains less

understood in the medical community.

Fortunately this is starting to change, and other researchers report finding plenty of female volunteers willing to participate in studies. Dr. Donna Korzick is an associate professor of Physiology and Kinesiology at Penn State who says she sees no shortage of women participating in research on campus.

Korzick added that organizations including the American Heart Association are now drawing more public attention to women's heart health, and that institutions that fund research are requiring more balanced representation in study subjects. In every government research grant, for example, there is now a statement requiring sufficient representation of women in the subject sample, she said.

**Too much to do, too little time**

Everyday stress and being overcommitted can all impact heart health, said Monica Montag, a holistic nutritionist and founder of Be Well Associates in State College. She frequently advises patients to cut down on their excess obligations and create more space in their lives for mental health. Montag said individuals with "type A" personalities are especially prone to stress-related heart problems, partly because they tend to be in a hurry all the time.

"This business of having no unstructured time during any given day just kills our cardiovascular system," she said.

Holder said she saw a potential connection between stress and her strokes, and made several changes in her life.

"I realized I need to be less busy," she

see Hearts, pg. 8

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from Hearts, pg. 7

said. The week before she had her first stroke, Holder had a full schedule of cooking, entertaining friends, going on day-long excursions and doing volunteer work. After her strokes, she decided to take on fewer obligations and to begin regular meditation. She also gave up her morning cup of espresso, a routine she had only recently started but very much enjoyed.

Reflecting on changes she has made internally, Holder said she used to be more of a "type A" person. Now, she said she's taking it easy, not pushing herself so much, and being more relaxed about everything in general.

"I also take a nap now when I feel tired in the afternoon," she added.

**What's age got to do with it?**

Dr. Korzick's current research aims to answer the question of why older women's hearts are less resilient to heart attacks than those of younger women.

The loss of estrogen that follows menopause seems to weaken a woman's cardiovascular system, putting her at higher risk for diseases of the heart.

Compared to men, women's risk of heart disease comes later in life because of a protective effect of estrogen. But once they lose it, their risk increases quickly.

"In a very short amount of time after menopause, they are at the same amount of risk as a man," Korzick said.

Earlier studies that examined estrogen in heart health used young female rats whose ovaries were removed to mimic age-related loss of the hormone. This approach, said

Korzick, didn't accurately take into account the question of aging and its effects on the body. Her team's research uses older female rats to more closely approximate an older woman's heart, aging effects included.

"We know that fixing the problem is not as easy as giving estrogen back to women," she said. Hormone replacement therapy (HRT) has been a controversial treatment for menopausal and post-menopausal symptoms because it actually increased the risk of heart attack and stroke among some women. While Korzick said she would not personally choose HRT as a treatment, she advises every woman who is considering it to consult her doctor and make the decision for herself.

Her team's research is helping to build the knowledge base on why older women's hearts are so vulnerable, and what interventions may help bolster their resilience.

**The bright side**

The good news is that Centre County has a relatively low rate of death due to cardiovascular disease, compared with other counties in Pennsylvania. According to the state department of health's Healthy People 2010 report, the rate has been steadily decreasing since 1999. Dr. Skelding attributes this to community and cultural change in the county regarding diet and physical activity.

"A lot of it has to do with lifestyle, and the rate of obesity, and people engaging in healthy activities," she said.

The other good news is that heart disease is largely preventable. Skelding advises patients to work on their diets and lifestyles, to maintain normal body weight, and to exercise for 30 minutes every day of the

"I think we need to be more diligent and ask more questions."  
--Dr. Kimeberly Skelding

week. The standard recommendation to exercise three times a week isn't enough, she said, but it's a start.

"We set the bar lower because [many] people don't do anything, but in order to make a difference it needs to be every day," she said.

**Shifting the paradigm, closing the gap**

Dr. Skelding said that it can be a challenge to identify heart disease in women early enough to enable effective treatment. She explained that women often do not consider themselves at risk for heart disease, because many who are now past menopause came of age during a time when heart prob-

lems were thought only to affect men.

Dr. Korzick also cited this as a factor that can delay women's treatment. As recently as a decade ago, symptoms of heart disease in women were frequently misinterpreted by general practitioners, who often referred such patients to gynecologists. Once a woman's symptoms were properly diagnosed, she would be referred at last to a cardiologist. Unfortunately, the correct diagnosis often came too late to allow effective intervention.

"I think we need to be more diligent and ask more questions, and just have it on our radar screen with women, because it may not be as obvious," Skelding said.

In spite of the fact that she heads a women's heart and vascular health program, Skelding hopes to see women's heart health become a more mainstream concern rather than a topic that demands special attention.

"We'd love to put ourselves out of business," she said.

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