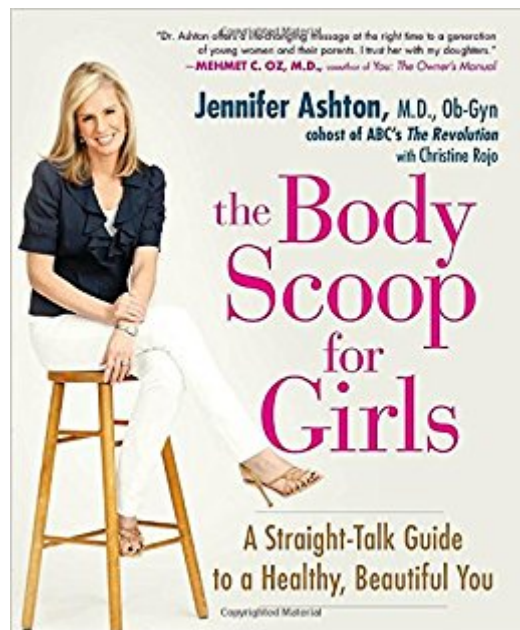




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The Body Scoop For Girls: A Straight-Talk Guide To A Healthy, Beautiful You



Synopsis

An authoritative yet girlfriend-friendly health book for teen and tween girls written by CBS News Medical Correspondent Dr. Jennifer Ashton. As an ob-gyn specializing in adolescent care, Dr. Jennifer Ashton understands better than anyone that being a teenage girl these days is fraught with a special kind of angst. But in her practice she talks openly and nonjudgementally to her young patients like a good friend, answering each of their questions respectfully and with candor. Now she shares this advice in a no-holds-barred guidebook, based on her passion to cut through the embarrassment that girls often feel about their changing bodies and to arm them with the knowledge they need to make smart choices. A comprehensive guide from head to toe, *The Body Scoop for Girls* covers the basics of puberty and beyond, including:

- Breast development and nipple bumps
- The decision to wait to have sex, and the benefits of waiting
- Birth control
- The lowdown on STIs
- Eating Disorders
- Depression and hormone imbalances
- Grooming, from hair removal to hygiene products
- Body piercings

Writing in a funny and fresh, girl-to-girl voice, Dr. Ashton has created a totally up-to-date health book that speaks directly to young women and the unique pressures they face today. From a doctor who "gets it," *The Body Scoop for Girls* makes the road to womanhood an empowering one.

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Customer Reviews

Jennifer Ashton, M.D., Ob-Gyn is a board-certified ob-gyn who specializes in adolescent gynecology. As CBS News Medical Correspondent, she regularly contributes to [The Early](#)

Show — and — CBS Evening News with Katie Couric. She has also been featured on such broadcast venues as XM Radio's — Oprah and Friends.

WHAT TO EXPECT WHEN YOU'RE AN ADOLESCENT NOT YOUR

MOTHER'S GYN ECOLOGIST You're a New Kind of Girl — • You Deserve a New Kind

of — Medicine Casey, 15, a slender redhead with a sprinkle of freckles on her nose, was sitting next to my desk, twisting a strand of long, straight hair when I walked into my office. I could tell she was — nervous. "Hi, I'm Dr. Ashton," I said, sitting down at my desk. Since this was Casey's first visit, we were meeting in my cheerful office, not in an exam room. (After all, do you want to meet your doctor for the very first time in an exam room with your clothes off? I wouldn't either. So my patients meet me in their clothes, at my desk.) Casey looked startled when I introduced myself. "Really? No way," she burst out. Then she blushed. "Sorry, it's just — ; you don't look like a doctor." I laughed. I hear this all the time. Is it my blond hair? My leopard-print skirt and Tory Burch boots? Lucky for me, I didn't have to check my fashion sense at the door when they were handing out degrees at Columbia Med School. Or my sense of humor, — either. And it's a good thing, too. Without a sincere appreciation for a witty comment or the latest color in Uggs, my job wouldn't be nearly so much fun. I love the humor, the sass, the street sense, and the totally exhilarating energy of my teenage patients. Although I do treat adult women, too (often the mothers of my teen patients), I spend most of my time everyday talking with, laughing with, and treating girls from their early teens to early twenties. That's what Casey and I did — • talk and laugh. After a good chuckle over her confusion, we found ourselves talking about pretty much everything — • why she'd come (bad cramps), her overall health (pretty good), and her life in general (crazy busy, with dance team practice, SAT prep courses, college visits, and a long-time boyfriend). The more we talked about her incredibly full life, the more Casey reminded me of something — • the single most important thing I've learned from my patients. It's — this: It is much, much harder to be a teenage girl now than ever — before. Yeah, I know, the lonely-zitty-anxious-harassed teen years have never exactly been an all-expense-paid vacation to Hawaii. But it's tougher today than ever. Even tougher than when I was a teen (and that wasn't so long ago — • really!). And also tougher, at least in some ways, than when your parents were teens. Sure, you've got your iPod, your cell phone, your computer. You can text your best friend about tomorrow's math test and check your new crush's Facebook page at the same time with one hand tied behind your back. You're smarter, more sophisticated, and way more connected than your parents were (or are). But you're also under phenomenal pressure — • academic, social, physical, and — sexual. "You're supposed to get

perfect grades, but even straight A's aren't enough to get you into a good college," Casey told me. "You're supposed to volunteer, play sports, and be a genius at something, like violin or math." Don't forget being pretty, popular, and fun. And talk about social pressure—â€”who knows what your so-called friends might be texting about you at any given moment? Sure, social pressure's been around forever. But today it's nonstop, always-on, 24-7. I asked Casey if she was sexually active. "No," she said. "But at school there's definitely pressure to dress sexy and act like you're having sex." Where does all this extra sexual pressure come from? Everywhere. One study showed that teens today may be exposed to twice as much sexual content on TV as they were even ten years ago. Another shows that the more sexy shows a teen watches, the more likely she is at risk of getting pregnant. Then there's music, movies, videos, and social networking sites—â€”not to mention the fact that it just takes one click of the mouse for someone to e-mail a naked picture of you to a thousand of your closest—â€”friends. On top of all that social pressure, there's this physical fact of life. Not only are girls dressing older and acting older but their bodies actually are older, in some ways, than they used to be. Just a decade or so ago doctors wouldn't have expected your breasts to start developing until age ten. Now we know that your breasts might start budding as early as age seven or eight.² Meanwhile, if you're white, you're likely to get your first period about three months earlier than girls did forty years ago, and if you're black, it will come a good five to six months earlier than it did in the late 1960s. And two centuries ago girls hit puberty a good four or more years later than they do—â€”now. We don't really understand all the reasons for the shift, but we do know that better nutrition and general health play a big—â€”role. So with all this added pressure on you, are you getting lots of new information and new resources to help you deal with it all? Or a new level of respect for handling stress that previous generations just didn't—â€”face? Yeah, right. In your dreams. That's why I wrote the book. A new kind of teen—â€”—that's you—â€”—needs a new kind of doctor. That's—â€”—me. R-E-S-P-E-C-T. The way health, sex, and physical information is handled by schools, teachers, doctors, and even some parents, you'd think today's girls were living in a time warp. Sex ed is still taught exactly the way it was thirty years ago (often it's all-abstinence-all-the-time). Most parents still have a tough time talking with their daughters about their bodies: Many parents don't even know the right words for the female anatomy. (Not that I blame them—â€”—their parents never talked to them about their bodies.) Even doctors don't seem to want to talk straight with girls. Old-school doctors always seem to fall into two groups: the "Just-Say-No" group (as in "Can we talk about safe sex?" "No.") and the "Free Love" group ("Whatever you do is beautiful. Just use—â€”—condoms."). Come on, people! This is the information—â€”—age! If you ask me, both these approaches are disrespectful to girls. I believe in

giving you all the information you need, at the right age, so you can make smart choices for your body and your emotional health. That doesn't mean I'd tell you it's OK to have sex at a young age: In fact, I'll tell you all the medical reasons why that's not a good idea. But I'll also expect you to use your own best judgment and I'll treat you accordingly, with respect for the choices you'll make. To make those choices, you need the very latest research and information presented in a straight-up way. That's why I wrote this book. I'm not going to take sides or preach one school of thought over another. You're smart. You know how to get information and you know how to think. I'm going to give you the right information at the right time and let you make the choices that are right for you.

LESSONS FROM THE RUNWAY

If there's one thing Project Runway has taught us, it's that one size or style does not fit all. I trust you. And I know you can make the decisions that fit you—your physical and emotional development. To help you do that, I'm giving you all the facts, in a straight-as-an-arrow way, about pretty much everything your body will encounter through your teens and early twenties. In Section One you'll read about what to expect from your body in puberty—how to deal with period problems, infections, injuries, and hormonal issues. You'll also learn how to care for your breasts and bones for the rest of your life. In Section Two I'll give you the latest research and thinking on sex—what it means medically for your body, brain, and emotional health when you decide to hook up or have sex at early and later ages. I'll also explain the very strong medical evidence suggesting you should wait until at least eighteen for sex. Meanwhile, I'll tell you exactly how to protect and take care of yourself whenever you make your decision about becoming sexually active. Finally, in Section Three, I'll tell you how to build a body that will last for the rest of your life—through healthy eating, risk control, exercise, and learning to handle mood problems. To sum it all up, I'm basically offering you a free virtual visit to my office. I can't meet you and show you around like my actual patients. But I do want to welcome you to your new body and teach you everything you need to know to take care of it, love it, and enjoy it. I want you to own your body, because only you can care for it.

WANT A LATTE?

"Care for a chai? Some herbal tea? A latte?" my receptionist asks new patients when they arrive. They find her sitting at her glass desk in front of a curved wooden wall in the reception area of my office. The beverage menu and the reception area are usually a surprise for new patients like Casey. "It looks like a spa," Casey told me. There's no big white counter or glass window to check in at. No ugly institutional gray carpet. Everything's done in cream, chocolate, and pale blue, with splashy red end tables and softly glowing wall sconces instead of the usual harsh office lights. If you were a new patient, my receptionist would serve you your beverage of choice and snap a digital photo for your record—I like to "see" my patients when I'm reviewing their records or talking to them on the

phone. Then, beverage in hand, you and, if you wanted, your parents would be escorted to my office, where you'd find fresh flowers on my desk. Later, if you needed an exam, you could slip into a comfy spa robe (not one of those flimsy paper or polyester gowns) in the exam room and watch TV on a plasma screen, check your e-mail on a Mac, or make calls while waiting for me. And by the way, did I mention that everything's eco-friendly? I want to respect the planet, too. The robes and the TV may all sound a bit much. It's not that I'm all New-Agey or that I'm trying to be some kind of Beverly Hills doctor to the stars. The truth is, it was just really fun dreaming up an office my patients would like. I mean, nobody rolls out the red carpet for teen girls, treating them like young women who deserve to be pampered and cared for. Only later, after we'd designed the new office and opened for business, did I realize just how much all the little details would mean to my patients. The details practically shout "I care about you. I want you to have a nice experience here. I want everything you see, hear, and touch while you're here to be respectful, soothing, caring." After all, you have enough stress in your life. I should be helping ease it, not making it worse.

DOCTORS ARE A GIRL'S BEST FRIEND OK, so not every doctor's office is going to offer you a latte. I'm not telling you to pick your doctor based on her taste in end tables. But I do want you to find a doctor who makes you feel respected, well cared for, and, yes, maybe even a little pampered. That's especially important these days, now that girls are seeing gynecologists at a younger age. The American College of Obstetricians and Gynecologists—the huge national association that looks at data and makes recommendations for doctors like me—says that you should start seeing a gynecologist in your early teens, specifically between ages thirteen and fifteen. That's a surprise to most parents—especially moms, who probably didn't see a gynecologist until their senior year of high school or later. If you're between thirteen and fifteen and haven't seen a gynecologist, you should (see the box on pages 13–15 on how to talk your parents into it). At the very least you need to see a gynecologist before you start having sex, so you understand all the medical consequences of your choices. For a lot of medical reasons I'll explain later, I think it's a really good idea for you to wait until you're at least eighteen to have sex. But if you decide to become active before that, it's my job to help you handle it in a smart way.

PRIVATE PRACTICE:

MORE THAN JUST A VAGINA Before they meet me, most of my patients think they're coming to see a "vagina doctor." But actually, "gynecologist" means the study of women—in my case, young women in particular. It's my job to be familiar with every health issue that might affect you as a member of the female sex. Sure, I can tell you if that funny bump or itch down there is something to worry about. (And, by the way, I don't want you ever to be embarrassed to bring stuff like that up. I have the same parts as you, and I do this all day long. To me examining a vagina is like examining

an ear or nose—no big deal.) But I can also help you learn how to take care of your breasts, your bones, your weight, and your mental state—not to mention treating period problems and hormonal imbalances. My job as a gynecologist specializing in young women is to take care of the whole package and help you understand this new body you got when you reached puberty. Isn't that cool? I love my job. It makes me sad that many girls never get to see a gynecologist until they're leaving for college—that's like studying for the SATs after you've taken the test. It's so much better to learn everything you need to know in your early teens, before you start running into the challenges you'll face later. Plus, a gynecologist like me probably will be the one doctor you see more of than any other medical profession later in life. The sooner you find someone you trust and can confide in, the better.

DR. ASHTON'S PLAYLISTS

Over the years I've found myself repeating the same things over and over; and over and over; and over and over; to all my patients. These are things I really want them to remember, so I say them again and again. Sort of my personal playlist of advice. I've gathered up these lists and put them in boxes throughout the book, stressing the things I really want you to remember. Forgive me if I repeat information you've already heard, but these really are my greatest hits. Here are a few I share with my new patients:

A new kind of teen needs a new kind of doctor. I respect my patients and care about their experiences—both in their lives and in my office. I don't take sides: I give my patients all the information so they (and their parents) can make good decisions. It's not my job to make choices for you.

TRUE OR FALSE? You should go see a gynecologist for the first time when you're between ages thirteen and fifteen. **TRUE.** You need both a pediatrician and a gynecologist when you're in junior high and high school. **TRUE.** You always need a pelvic exam when you go to the gynecologist. **FALSE.** You don't usually need a pelvic exam unless you're sexually active.

HOW TO TALK TO YOUR DOCTOR

Jessica and her mother first came to see me about a year ago. Jessica was thirteen, a flute player with a friendly face and short, glossy dark hair. Later I learned she had a radiant smile, too; but she definitely wasn't smiling when I walked into my office. She and her mother were sitting rigidly in front of my desk, waiting to talk to me about Jessica's painful cramps. They both looked like they'd rather be having their teeth drilled by a student dentist with a jackhammer. I didn't take it personally. I'm used to being the only person in the room who isn't nervous on a first visit. Typically new patients like Jessica worry they'll have to put their feet up in the stirrups for a pelvic exam. Their parents worry that they're giving their daughter a green light for sex just by mentioning the word "gynecologist"—let alone taking her for a visit. "So what's going on?" I asked. I listened to Jessica describe her cramps, with her mom adding a few details now and then. "OK," I said. "I think I can help. And don't worry—"

don't need to do a pelvic exam." "Really?" asked Jessica. I could almost see her white knuckles unclench. "You don't have to use that metal thing?" She meant the speculum, the instrument used in pelvic exams to gently open the vagina. "Nope," I said. "We won't need that until you're twenty-one, or until you're sexually active—which I hope won't be until you're at least eighteen." I explained that very strong medical evidence suggests that it's much healthier to postpone sex as long as possible. From the corner of my eye I could see her mother relax. A few minutes later we were all laughing and chatting. BFFs! Not bad, I thought. Five minutes into the visit, they both feel better. And we haven't even stepped in the exam room yet! I just love my job. Here are a few more things I tell all my new patients to help them feel a little better about the process. Understanding what to expect from your first visit can make your job and your gynecologist's job a lot easier.

1. You shouldn't be embarrassed. All I do, every day, is take care of girls and women. We've all got the same parts. I've given birth, I've delivered babies, and I look at female anatomy all day long. To me looking at a vagina is so not a big deal. In fact, I'd rather look at a vagina than a foot (sometimes vaginas are much cleaner than feet!). If you take away just one thing from this book, remember this: Please don't ever feel embarrassed or ashamed of your body. Go ahead. Ask your doctor anything. She (or he) wants to help you but can't unless you say what's on your mind.
2. Anything you tell me is confidential. By law I'm not allowed to tell your parents if you're sexually active or not. They can pound on my door and beg and plead, stalk me with phone calls or spam me online, and I'm still not going to tell them whether or not you're having sex. There are only two conditions where I do have to break patient confidentiality: If I feel your safety or someone else's safety is at risk, I need to tell your parents and I might need to report my concerns to the appropriate agency or authority. If you have chlamydia or gonorrhea, the lab that processes the tests will automatically report it to the state health department. Your name will go on file as someone who has that particular STD, so the department of health can keep track of who gets what and make sure that everyone who needs treatment gets it. (Most of my patients find this rather alarming—and one more good reason to wait until at least eighteen before becoming sexually active.)
3. I trust you—but I'm not a psychic. I expect that you'll be honest with me about what you're doing or not doing so I can treat you appropriately. If you tell me you're a virgin, I'm going to believe you . . . and I won't give you the same treatment as a girl who's sexually active. And if you don't tell me about problems you're having—itching, burning, discharge, whatever—I won't be able to help you. Bottom line: If you're not honest with me, you won't receive the right medical treatment, and I won't be able to help you stay healthy. So don't be shy: Tell me what you're up to.
4. I don't need to do Pap

smears or pelvic exams until you're sexually active. That's a huge relief for most of my patients. But once you've had vaginal intercourse, you need to let me know—then it's time for what my patient Jessica called "that metal thing" (the speculum). As long as you're a virgin, I probably won't need you to put your feet in the stirrups. Most of my patients find this another very good reason to hang on to their virginity as long as possible.

5. Exams won't hurt. One last thing to keep in mind. When you do finally need the stirrups and the speculum during your exam, please trust me that if the exam is done correctly, it really shouldn't hurt.

AN M.D. OF YOUR OWN Many parents and girls don't realize that teens need both a pediatrician and a gynecologist. The pediatrician helps with health issues affecting kids of both genders. The gynecologist advises on issues specific to girls' growing bodies. Of course, good pediatricians know all about girls' issues, too, and can even perform pelvic exams. But—and of course I'm biased!—I think gynecologists like me, with specialized experience, offer girls special expertise and knowledge that only come from seeing patients like you all day, every day. Unfortunately, many parents don't take their daughters to the gynecologist until the girls are about to leave for college. By then their daughters have missed the chance to learn about their bodies from an early age and to get important information and advice when they need it—like what you can do in your early teens to protect your breasts and bones for the rest of your life and how to make great decisions about sex. I don't blame parents: Many just don't want to think about the fact that your body is maturing, so it doesn't occur to them that you now also need a doctor who treats grown-ups, not just a pediatrician. If you don't have a gynecologist of your own by the time you're in your mid-teens, talk to your parents about finding one. This might be a little awkward, especially if you think they'll think you're asking because you're sexually active (BTW, if you are, it's even more important to find a gynecologist soon). Here are three strategies to persuade your mother or father to help you find a great gynecologist when you're in your mid-teens; and hopefully long before you need one.

STRATEGY 1. Show your parents this book. Say "Mom (or Dad), the doctor who wrote this thinks it's a great idea to wait as long as possible for sex." (Your parents will really like that.) Then add, "I'd love to see a doctor like her. Can we find one?" You might also mention that adolescent gynos are not just "vagina" docs: We're the physicians who know the most about breast problems, bone health, period problems, and hormonal issues. What more could your parents ask for?

STRATEGY 2. Blame the cramps. If you have menstrual cramps, this is a great—and not too embarrassing—reason for seeing a gynecologist. This is the twenty-first century, after all, and suffering is out. Say "Mom (or Dad), these cramps are really bad and my friend So-and-So saw a gynecologist for hers, and it really helped. Can I do that?"

This book is written in a format that my daughter can easily relate to. It is written as if you are speaking directly with an informed friend. My teenage daughter and I sat down and read the book together (a nice bonding experience), and every page was enlightening. The book is great for a reference, but I really enjoyed the discussions that were inspired by the topics in the book. I would suggest this book for daughters, moms, and grandmoms. Having your sons and their dads read it wouldn't be a bad idea either, maybe they would understand the female sex better.

This is a great book that EVERY mother and young girl should read. I am a nurse and have always tried to be open and honest with my daughter about her body and sexuality. This book helps me make sure that everything I may have missed telling myself will not be completely missed. Dr. Ashton is open and honest in a light humor kind of way. I purchased this book myself to make sure that it was appropriate for my young daughter and her cousin to read and give it a "five star thumbs up" review. Even with me being a nurse, it is still hard to talk with my daughter about some of the personal issues. Thanks to Dr. Ashton for writing this helpful book for our girls.

I read Dr. Ashton's book and I had my 16 year old daughter read it too. It's chock full of important and useful information, written in a style that is inviting, warm, chatty and funny. I loved the shaded blocks with bulleted key points that are worth reinforcing. It's amazing how much both my daughter and I learned and how many misconceptions Dr. Ashton uncovers and resolves in this book. Teenage girls are a different breed. With all of the pressures of today, it sure is nice to have a reliable resource directed to a complicated time in life. A MUST read !!!!!

Our daughters cannot make sound decisions if they don't have all the facts. This book is full of facts! I believe all women/girls will benefit from the information provided. Don't think that your daughters are not talking/thinking about these issues - they are! It is a different time-and-day and a more difficult time for young women than ever before in our society. At least, after reading this book they will not have ignorance as a reason for making poor decisions.

Exactly what we needed, and wish we would have bought it sooner.

The Body Scoop for Girls is written in an easy to understand format for early teen age girls. I gave this as a gift to my 16 year old grand-daughter and she will pass it on to her cousin who at present is

only 7. Their mothers enjoy reading it with their daughters and are there for any questions. A great bonding tool.

This is a WONDERFUL BOOK!!! Very detailed and all inclusive. Great guide for parents and/or very good for teens to read privately.!!

Great guide for my daughter's questions

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