

Bryce is right

With two highly anticipated movies and baby No. 2 on the way, **Bryce Dallas Howard** claims her place in the A-list spotlight

Bryce Dallas Howard may be starring as the villain in two current films, but she's merely acting the part. Off-screen she comes across as the friendly, easygoing mom you might meet at the playground, coffee in hand. With a 4-year-old named Theo at home and another baby on the way, this isn't much of a stretch.

But when it comes to her health, Howard is no stranger to taking a darkly dramatic turn. During her first pregnancy she gained 80 pounds (double her recommended amount), then battled a prolonged postnatal depression so severe she "felt like I was in a deep pit, and I couldn't get out of it." She credits her family with recognizing her stark emotional withdrawal during this painful period, then pushing her to seek professional help.

By Lauren Paige Kennedy, WebMD Contributing Writer

Reviewed by
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WebMD MEDICAL EDITOR



The rising star is, and always has been, tight with her parents. Her dad is the legendary Ron Howard, who was once known the world over as “Opie” and “Richie Cunningham” for his TV sitcom roles and went on to achieve Oscar greatness as the producer/director of such films as *A Beautiful Mind* and *Apollo 13*. Young Bryce grew up in Greenwich, Conn., far removed from Tinseltown’s trappings. She was aware of her father’s fame, she says, but was never snared in its spotlight.

Instead, she paid her dues on Broadway and for years shined in quieter films such as M. Night Shyamalan’s spooky *Lady in the Water* and Clint Eastwood’s reflective *Hereafter*. (Supporting roles in *Spider-Man 3* and *Eclipse*, the third installment in the *Twilight* saga, are mega-budget exceptions.) Her early work is impressive, if a bit low-key, much like Howard herself. But get ready, because the flame-haired actress, 30, is about to cause a stir.

Bryce’s Starring Roles

In addition to being named Kate Spade’s latest muse for the designer’s chic advertising campaign—now in the pages of fashion magazines everywhere—Howard’s peaches-and-cream visage is also ubiquitous at the nation’s cineplexes. First out is *The Help*, one of this summer’s most anticipated movies. Based on Kathryn Stockett’s best-selling novel about racial tensions in the South, it opens in August. Come September, Howard supports the bittersweet comedic stylings of A-listers Seth Rogen, Joseph Gordon-Levitt, Anna Kendrick, and Anjelica Huston in *50/50*.

Howard plays the bad guy in both movies. Or should we say, bad girl. “Honestly, for an actor it’s fun,” she tells WebMD of taking on polarizing characters. “I was initially hesitant to do *The Help*, because while it’s a wonderful book, it’s also rooted in a lot of painful truths...but I had the greatest time ever working with these women [co-stars Emma Stone and Viola Davis] and playing this character, even if she is a despicable human being.”

The “despicable human being” is nasty Hilly Holbrook, the meanest creature of fiction to appear since race-baiting Bob Ewell ruined lives in *To Kill a Mockingbird*. Sweet-as-a-snake Hilly is a society princess



Bryce Dallas Howard with her dad, director/actor Ron Howard.

and stalwart segregationist in 1960s Jackson, Miss. For her, the issue of civil rights isn’t to be debated or advanced; it’s to be halted altogether. And she’s more than willing to do her part.

It’s Howard’s other new film, *50/50*, that wrestles with 21st-century issues—examining how dizzying it can be to navigate our at-times unwieldy health care system.

Powerful and authentic, the film is based on the memoir and script by screenwriter Will Reiser—poignantly portrayed by Gordon-Levitt—who was diagnosed with a rare spinal cancer six years ago at age 25 and was given a 50/50 chance of surviving. Rogen goes for laughs and gets them as the best friend who’s enraged by Howard’s character, the girlfriend who’s rather lukewarm about becoming the caretaker of a chemotherapy patient.

Asked what drew her to the part, Howard says: “First and foremost, I wanted to work with those boys [Rogen’s team]. And I wanted the experience of being part of this incredible story.”

The film explores how falling into the rabbit hole of illness redefines not just life

expectancy, but relationships. Tough questions drive the plot: *Who takes you to and from treatments when you’re in no shape to do it yourself? Pushes for the best treatment? And is unquestionably there for you when the going gets tough?*

“I don’t respect her choices, but I can empathize with her,” says Howard of her character, who cheats on Reiser’s alter ego, eventually dumping him to face his fate alone. “Can you imagine being in a relationship, dating casually, and suddenly something like this happens? It encapsulates how life-and-death circumstances leave a person so very vulnerable, not only to the illness, but also to the people all around him.”

In real life, newly diagnosed patients need a team of supporters, says Karen Mercereau, RN, founder and executive director of RN Patient Advocates in Tucson, Ariz. This team should include family members, a social network, and top doctors—and if possible an independent advocate who understands how hospitals work and where to find the most relevant information regarding insurance, support groups, and leading-edge research.

“When a person is first diagnosed, he hears very little,” explains Mercereau, a scene played out in *50/50* when Gordon-Levitt’s character suddenly turns oblivious to all around him as his doctor’s voice drones into gibberish the moment he utters the word *cancer*. “The patient is having his own internal dialogue and is fighting fear. That’s why it’s so important to have someone who can explain procedures not just once, but six times if necessary. New patients don’t have that kind of head space to take it all in.”

Postpartum Struggle

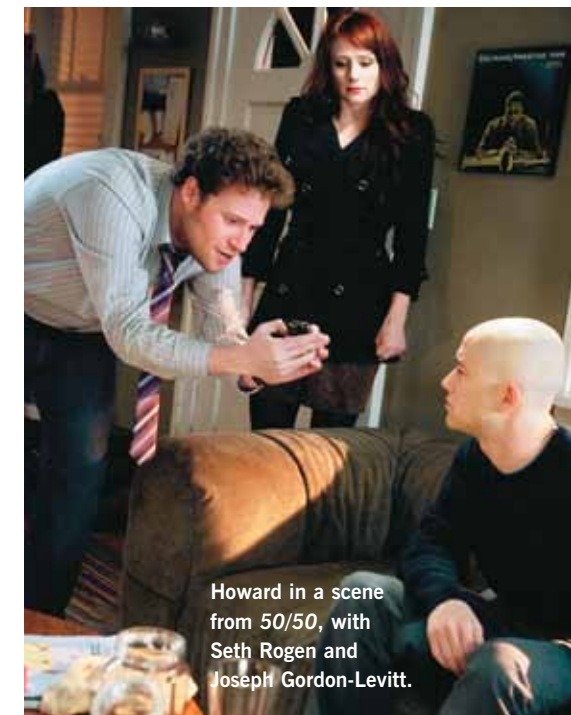
Thankfully Howard has never faced such a diagnosis, although she has “lost two grandparents to cancer, and I’ve definitely had many people in my life who’ve dealt with it, including a close friend who’s fighting a rare form of it now.”

Instead, her greatest personal health challenge was her crippling bout with

postpartum depression after her son was born in 2007. It lasted 18 long, distressing months.

“I was 25 years old, and I had this idea of the kind of mother I wanted to be,” Howard tells WebMD. “I held onto that vision and completely stopped checking in with myself. My feelings were the complete opposite of what I wanted or expected to feel, and that was so overwhelming. Circumstances around the birth were challenging...my husband [actor Seth Gabel] had to return to work just five days after Theo was born. I felt awful. But I didn’t know to say: ‘I have postpartum depression.’ I didn’t recognize I was in it. I just felt like I was a bad person or that I wasn’t dealing well with everything.”

“Postpartum depression is defined as a major depression that can develop after giving birth,” says Dorothy Sit, MD, assistant professor of psychiatry at Women’s Behavioral HealthCare of Western



Howard in a scene from *50/50*, with Seth Rogen and Joseph Gordon-Levitt.

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Howard in *The Help*, this summer’s highly anticipated movie.

Psychiatric Institute and Clinic in Pittsburgh. “Generally it’s identified within 12 weeks of delivery and is accompanied by two or more consecutive weeks of low mood, loss of interest in daily activities, change in appetite and sleep patterns, weight loss or gain, a feeling of worthlessness, plus guilt over not being a ‘good mom,’ and sometimes hopelessness and suicidal thoughts.”

“I was incredibly sleep-deprived for months,” Howard continues. “My milk wasn’t coming in, and Theo was jaundiced, and I was trying to feed constantly and not use formula...when he slept I pumped. It felt like the most insane kind of torture. ...Now that I’m pregnant again, I’m going to do my best to anticipate those kinds of needs—to reach out to friends and family and allow myself to fully recover [from labor].”

Research shows a connection between extended sleep deprivation and postpartum depression, says Sit. She also lists “other environmental factors, such as poor social support and financial stressors”—conditions Howard did not face—as possible catalysts. PPD “may also be related to hormonal shifts, when a woman loses a lot of estrogen after giving birth. In addition, having past episodes of depression before the pregnancy predicts an increased risk for experiencing it after.”

Howard says she found her sense of alienation from her son most distressing.

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Carcinogenesis, Mutagenesis, and Impairment of Fertility

Systemic carcinogenicity studies were carried out in male and female mice and rats. In the 78-week oral (diet) mouse study, at doses of 1, 4, and 16 mg/kg/day, evidence of a statistically significant trend was found for lymphocytic lymphomas in females, and the incidence of hepatocellular carcinomas in mid-dose males significantly exceeded the control value.

In the 24-month oral (diet) rat study, conducted at 0.5, 2, and 8 mg/kg/day, pancreatic islet cell adenomas significantly exceeded the control rate in the low dose level. The hepatocellular carcinomas and pancreatic islet cell adenomas were not dose related. The low doses in mice and rats are approximately 1000 and 500 times greater, respectively, than the daily human dose of one drop (28 µL) of 0.05% RESTASIS® BID into each eye of a 60 kg person (0.001 mg/kg/day), assuming that the entire dose is absorbed.

Cyclosporine has not been found mutagenic/genotoxic in the Ames Test, the V79-HGPRT Test, the micronucleus test in mice and Chinese hamsters, the chromosome-aberration tests in Chinese hamster bone-marrow, the mouse dominant lethal assay, and the DNA-repair test in sperm from treated mice. A study analyzing sister chromatid exchange (SCE) induction by cyclosporine using human lymphocytes *in vitro* gave indication of a positive effect (i.e., induction of SCE).

No impairment in fertility was demonstrated in studies in male and female rats receiving oral doses of cyclosporine up to 15 mg/kg/day (approximately 15,000 times the human daily dose of 0.001 mg/kg/day) for 9 weeks (male) and 2 weeks (female) prior to mating.

Pregnancy-Teratogenic Effects

Pregnancy category C.

Teratogenic Effects: No evidence of teratogenicity was observed in rats or rabbits receiving oral doses of cyclosporine up to 300 mg/kg/day during organogenesis. These doses in rats and rabbits are approximately 300,000 times greater than the daily human dose of one drop (28 µL) 0.05% RESTASIS® BID into each eye of a 60 kg person (0.001 mg/kg/day), assuming that the entire dose is absorbed.

Non-Teratogenic Effects: Adverse effects were seen in reproduction studies in rats and rabbits only at dose levels toxic to dams. At toxic doses (rats at 30 mg/kg/day and rabbits at 100 mg/kg/day), cyclosporine oral solution, USP, was embryo- and fetotoxic as indicated by increased pre- and postnatal mortality and reduced fetal weight together with related skeletal retardations. These doses are 30,000 and 100,000 times greater, respectively than the daily human dose of one-drop (28 µL) of 0.05% RESTASIS® BID into each eye of a 60 kg person (0.001 mg/kg/day), assuming that the entire dose is absorbed. No evidence of embryofetal toxicity was observed in rats or rabbits receiving cyclosporine at oral doses up to 17 mg/kg/day or 30 mg/kg/day, respectively, during organogenesis. These doses in rats and rabbits are approximately 17,000 and 30,000 times greater, respectively, than the daily human dose.

Offspring of rats receiving a 45 mg/kg/day oral dose of cyclosporine from Day 15 of pregnancy until Day 21 post partum, a maternally toxic level, exhibited an increase in postnatal mortality; this dose is 45,000 times greater than the daily human topical dose, 0.001 mg/kg/day, assuming that the entire dose is absorbed. No adverse events were observed at oral doses up to 15 mg/kg/day (15,000 times greater than the daily human dose).

There are no adequate and well-controlled studies of RESTASIS® in pregnant women. RESTASIS® should be administered to a pregnant woman only if clearly needed.

Nursing Mothers

Cyclosporine is known to be excreted in human milk following systemic administration but excretion in human milk after topical treatment has not been investigated. Although blood concentrations are undetectable after topical administration of RESTASIS® ophthalmic emulsion, caution should be exercised when RESTASIS® is administered to a nursing woman.

Pediatric Use

The safety and efficacy of RESTASIS® ophthalmic emulsion have not been established in pediatric patients below the age of 16.

Geriatric Use

No overall difference in safety or effectiveness has been observed between elderly and younger patients.

ADVERSE REACTIONS

The most common adverse event following the use of RESTASIS® was ocular burning (17%).

Other events reported in 1% to 5% of patients included conjunctival hyperemia, discharge, epiphora, eye pain, foreign body sensation, pruritus, stinging, and visual disturbance (most often blurring).

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“We’re doing great now,” she says of Theo, whom she reportedly called “it” during her darkest days. “It’s become the most miraculously balanced relationship in my life—the total opposite of how it was in the beginning,” she adds. “And I’m so grateful for that.”

While she declines to elaborate on what specific combination of medications and/or therapy worked for her, she says: “It’s so important to find the right doctor and have the right relationship with that person...I do feel like [my postpartum depression] was a chemical imbalance. Because when I did seek help, [my symptoms] just stopped. It was like night and day.”

Balancing Act

Bryce Dallas Howard juggles motherhood, professional life, and body image much like any American woman: “I take it day by day. And I’m always questioning if what I’m doing is right, being a working mom,” the busy actor admits. Below, what works for this rising star:

Expect the unexpected.

Howard admits to a preconceived notion of what motherhood would bring. Instead she had a rough delivery, refused all pain medications after it, had difficulty breastfeeding, and stayed silent when she needed help—a recipe for a health crisis. Now, she says: “I know I’ll be the first one to ask my family or friends if I need a hand.”

Don’t forget you.

Going back to work was part of her return to health. “I stopped checking in with myself,” she tells WebMD, referring to her own needs and wants. “I am so fortunate to have really great child care now,” she adds, so she can take on the occasional juicy role.

Be kind to your body.

“I will never wear a bikini again,” Howard says. “But I say that with a twinkle in the eye, because I feel really proud! My body expanded to that degree to carry a life. And, you know, bikini or no bikini, I feel pretty good about it.”—L.P.K.

Body After Baby

Despite her battle with depression, Howard refused to get down about her excessive weight gain during her first pregnancy or her inability to squeeze into tiny sample sizes within months—or even a year—after Theo’s birth.

After finally losing that stubborn 80 pounds, is Howard daunted by the prospect of having to shed unwanted baby weight all over again? Howard is blithe about it: “I will never again be depressed about being 5, 10, or 15 pounds overweight,” she insists. “Gaining the amount of weight I did during [my first] pregnancy—and I got up to 210 pounds—you just learn to relax about it. It took me so long to lose the baby weight, I got adjusted [to being heavier], and I said: ‘I refuse to associate who I am with the shape of my body.’ I was able to be generous with myself. I had a baby. I’m not some reckless human being...and when I finally lost it all I felt like I had really achieved something.”

Howard is making sleep, nutrition, and prenatal exercise a priority: “I was in much better condition overall when I got pregnant this time around. When the morning sickness started and all I could stomach was bagels, I felt a little bummed since I’d been so mindful about my nutrition previously. But I’m promising myself that the moment I can tolerate healthier foods I’ll shift gears back to a well-rounded nutrition plan.”

While *The Help* and *50/50* may already be causing advance box-office buzz, Theo’s new sibling (due later this year) is the production Howard is most excited about.

She’s also more disciplined about getting the rest she needs and maintains her exercise routine from before she was pregnant. (However, women should talk to their doctor about exercise; some women should not exercise the same way or at the same level when they are pregnant.)

“It feels wonderful to get outside as often as possible, especially with my family. Ultimately I hope these efforts will add up to make for a strong labor and healthy recovery.”

So make that three major projects in the works for Howard. And while *The Help* and *50/50* may already be causing advance box-office buzz, Theo’s new sibling (who’s due later this year) is the production Howard is most excited about. And the only reviews she cares about come from her firstborn:

“He’s been an incredible help and very understanding!” she says of his reaction to her pregnancy. Will his positive attitude carry on after the birth? “I’m crossing my fingers!” she says, laughing. ●



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