

# Menopause

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**Menopause**, which is defined as a woman's final period, is caused by a drop in the ovarian production of estrogen and progesterone. This causes ovaries to stop releasing eggs.

For background, at puberty estrogen controls sexual development and prepares girls' bones for rapid growth. In mature women, estrogen maintains the function of the reproductive and urinary organs, and protects bones from thinning. Estrogen also prevents the buildup of atherosclerotic plaque by lowering cholesterol levels.

Menopause starts with perimenopause. The first sign of perimenopause is not hot flashes but a sudden heavy flow of blood that may be dark or clotted. Your cycles can get longer or shorter, heavier or lighter.

## *Menopause: Signs and Symptoms*

- Hot flashes, night sweats
- Loss of sexual desire
- Mood swings
- Depression
- Vaginal dryness
- Osteoporosis
- Heart disease
- Urinary incontinence

- Fatigue
- Difficulty with concentration
- Memory loss
- Headaches
- Breast tenderness and cystic formation
- Genital and breast atrophy (that is loss of tissue)

## *Diagnosis*

A simple blood test can be performed which may indicate if a woman is going through menopause. These blood tests are for FSH (Follicle Stimulating Hormone) and LH (Luteinizing Hormone). Elevation of FSH and LH in the presence of low estrogen is indicative of menopause.

## *Treatment*

Studies comparing Asian and American women suggest that lifestyle contributes significantly to the way a woman's body adjusts to menopause. Japanese women, whose diet is packed with plant-derived estrogens (particularly in soybeans), have very little menopausal discomfort.

Similar findings have begun to emerge among vegans (pure vegetarians) in the United States. Vegan women often go through menopause with little or no discomfort. This may be the result of a very-

low-fat diet, as high-fat diets increase estrogen levels.

## *Natural Ways To Deal With Menopause*

- Maintain a low-fat diet (less than 20%)
- Exercise (aerobic-type, on a daily basis)
- Relax (meditation)
- Quit smoking
- Reduce caffeine intake
- Reduce alcohol intake
- Use Flaxseed oil, Vitamin E 400 mg twice per day (also found in Primrose oil), soy products, sweet potatoes
- Use of natural estrogen products
- Use Pro-Gest a yam-derived OTC progesterone cream applied to the skin to ease hot flashes and mood swings

Apply herbs, such as dong quai, chaparral, and damiana, to the skin to ease hot flashes and mood swings.

Use an herbal preparation called dong quai which originated in China contains plant sterols that have estrogen-like effects.

Obtain local relief from vaginal dryness, by using a plant-derived estriol cream. (A product called Replens, which has few side effects, can also relieve vaginal dryness and is FDA approved.)

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## **Estrogen Replacement Therapy (ERT)**

You can choose to take a prescription medication, if advised by your physician. This is known as Estrogen Replacement Therapy (ERT). (If you cannot take estrogen orally, a patch is now available.)

Women who should consider using the patch include those with liver disease, high blood pressure, gallbladder disease, or thrombophlebitis.) If the uterus is still present, a second hormone, progesterone, is added. When you take both estrogen and progesterone this is referred to as HRT (Hormone Replacement Therapy).

## **Benefits of ERT or HRT**

- Eliminates hot flashes, night sweats, and insomnia
- Improves energy, mood, and sense of well-being
- Restores sexual interest, relieves vaginal dryness, and minimizes the likelihood of painful intercourse
- Reduces risk of heart disease by lowering LDL ("bad" cholesterol)
- Minimizes the degree of osteoporosis
- Improves concentration and memory
- Improves quality of life

## **Risks & Side Effects of ERT or HRT**

- Possible increased risk of cancer of the uterus (minimized when progesterone is added)
- Unknown association with breast cancer
- Possible continued menstruation
- Breast swelling or pain
- Cramping
- Fluid retention, weight gain
- Nausea
- Depression
- Fatigue (continued)

## **Possible contraindications to taking estrogen**

- Personal or family history of uterine or breast cancer
- High blood pressure
- History of blood clots
- Liver disease
- Gallstones and gallbladder disease (continued)
- Diabetes
- Stroke
- Migraine headaches
- Uterine fibroids
- Endometriosis

- Varicose veins

Furthermore, bleeding can resume in women who have not had periods for sometime. However, changing the dosing or types of therapy can alleviate the side effects.

## **Cancer and Estrogen**

The subject of increased risk of cancer, such as cancer of the breast, has always been a controversial one.

In June of 1995 a report showed an increased risk of breast cancer among women who had taken hormones for more than five years. Shortly after, another study concluded no increased risk of breast cancer among postmenopausal women taking hormones for eight years or longer. The question of increased risk of cancer remains puzzling.

Women who have had cervical cancer need not worry because cervical cancer is not hormone-dependent. Therefore, one can take estrogen without worry. Also, there is no evidence that estrogen increases the risk of ovarian cancer.

There are two ways to counteract your cancer risk. Lower estrogen doses have proven just as effective as previously prescribed high doses or a synthetic progesterone hormone can be used.

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## ***Women, Heart Disease and the Facts***

More than 360,000 American women die of cardiovascular disease each year. By age 55, heart disease is the number one killer among women.

Your risk of developing heart disease, as you grow older far outweighs your risk of developing breast cancer. A woman's chances of dying of heart disease are twice that of dying from any type of cancer. Cardiovascular disease kills one in two women over the age of 50.

## ***Testosterone & Women***

The lack of sexual drive in women during the perimenopausal phase of the menopausal period may be due to a lack of testosterone, the male sexual hormone. Testosterone is the hormone primarily responsible for sexual motivation in both men and women. Since the ovary makes one-third of the testosterone in the body, testosterone levels decrease at menopause when the ovaries cease to function.

## ***Conclusion***

Weighing all the pros and cons, estrogen therapy will save many more lives than it will cost.

There are very few women who should not take estrogen. Women who should seek alternative treatments are those with active breast cancer or uterine cancer, those in whom estrogen causes blood pressure elevations, or those with clotting problems.

Half of all postmenopausal women die of heart disease, while only 8 percent die of breast cancer.

Women, who are at high risk for osteoporosis or heart disease, and at low risk for breast cancer, should certainly consider estrogen replacement therapy.