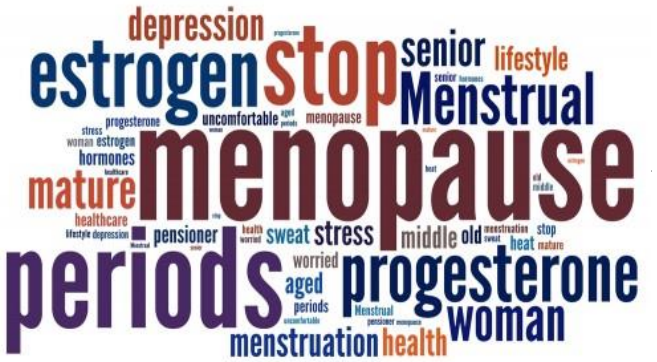
Menopause

Healthy Hormones

Menopause

- A normal time of life occurring between ages 45-55
- It refers to the time when there is one full year with no period
- “meno” refers to menses and “pause” refers to cessation
- The year previous, with menstrual irregularities occurring, is the peri-menopausal phase
- This is the best case scenario

Menopause



- Hormonal imbalances pre-dating menopause can cause havoc
- Unpleasant symptoms occur – this is not normal
- Perimenopause can start years earlier with many “menopause” symptoms
- The unpleasant symptoms of menopause can last for several years both during the peri-menopause stage, menopause and post-menopause

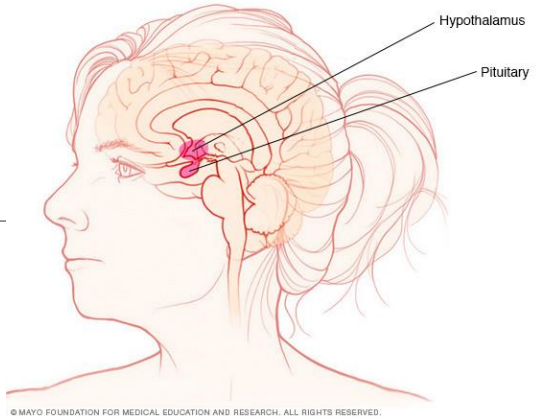
Three Stages of Menopause

- Perimenopause: Begin to notice changes in the cycle and period. Can start years before they actually go through the menopause especially if estrogen dominant
- Menopause: Marked by a drop in progesterone, followed by a drop in estrogen. Typically, the period has permanently stopped for 1 full year during menopause. Estrogen dominance and stress make it worse
- Post-menopause: Ovaries are no longer producing estrogen and progesterone, the adrenal glands must pick up the slack, producing a small amount of progesterone, estrogen, and testosterone
- Stress can mess with this process, which may be the biggest reason why women experience symptoms during this time.

Hormone Stages of Menopause

- First – Progesterone levels drops (as ovulation becomes irregular)
- Second – Estrogen levels drops
- Third – Periods stop
- Periods must stop for a full year to be “officially” in menopause
- Symptoms from peri-menopause may persist through menopause and beyond and is a sign of a pre-existing hormonal imbalance

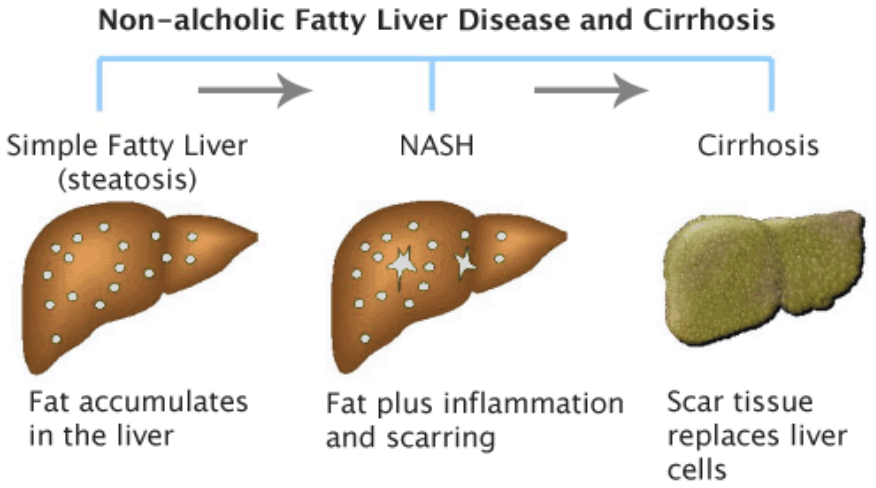
What Is Happening



- During menopause, thyroid, ovaries and adrenals all need to function well
- Ovulation is not occurring every month so period become shorter and more infrequent
- The pituitary tries to compensate by producing more FSH and LH – this is why the periods do not go off quietly into the sunset
- This put stress on both the thyroid and adrenals
- Mood swings, weight gain and sleep issues – typical menopause symptoms can actually be low thyroid symptoms, even hot flashes have a thyroid connection

What Is Happening

- Adrenals are also experiencing more stress and contribute to low energy levels, less ability to concentrate, low libido and also contribute to mood swings and hot flashes
- It is not uncommon for women during menopause to have low cortisol during the day and higher cortisol at night
- Liver is also under stress – estrogen plays a protective role for preventing scarring in the liver, NAFLD and cirrhosis



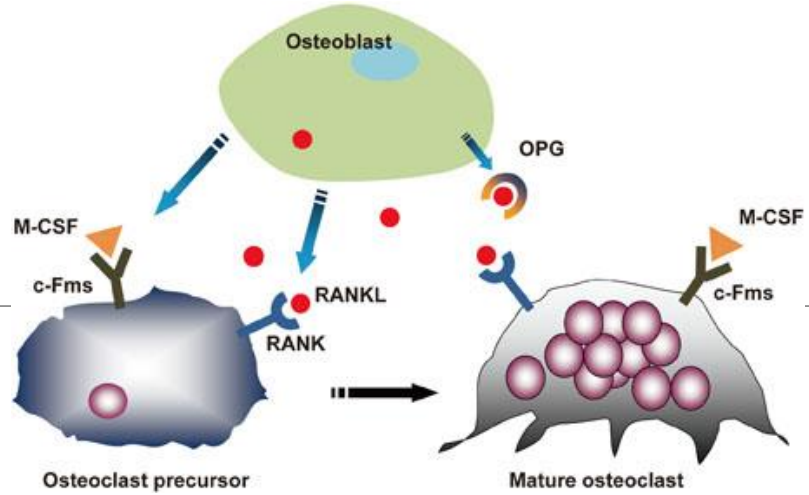
Issues of Menopause

- Increased abdominal fat around abdomen is common during menopause
- This increases woman's chance of heart disease and increases insulin resistance
- This could be linked to high cortisol
- A longitudinal study (Swan Study) found a link between insulin resistance and hot flashes and night sweats
- This could be because of dysglycemia and adrenal issues

Issues of Menopause

- Sleep Issues: Are common due to hormones fluctuations with the adrenals and the thyroid playing a key role
- Vaginal Dryness: Estrogen is needed for proper lubrication
- Mood Swings and Depression: Low hormones can affect brain function in the area that controls emotions and can make the nervous system more agitated
- Joint and Muscle Pain: Hormones help lubricates joints and muscles
- Memory Issues: There's a link between estrogen receptors in the brain and memory

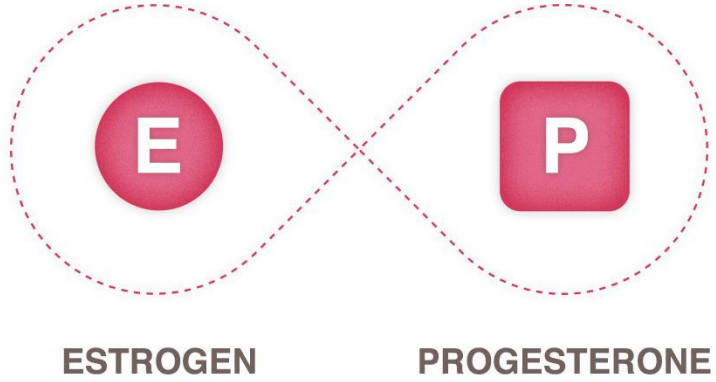
Osteoporosis



- Estrogen, progesterone and testosterone all play a role on bone health
- Estrogen interacts with immune system (Il 6, TNF-alpha and T cells) and loss of estrogen is associated with bone loss because of the way the immunes system is involved with osteoclasts
- Progesterone supports the production of osteoblasts
- Women at high risk: Small frame, lack of weight-bearing exercise, poor nutrition and chemo and radiation treatments, smoking, drinking, medications
- Low testosterone is associate with low bone density

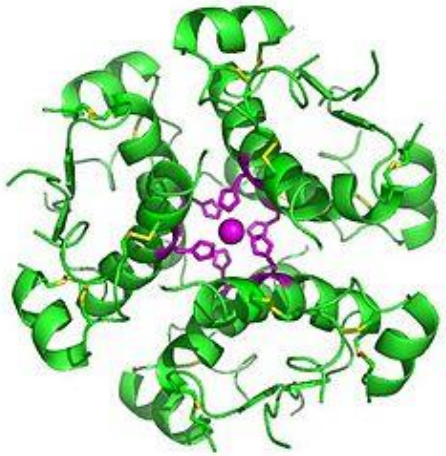
Estrogen Dominance and Menopause

- Contradictory time
- Excess estrogen exacerbates symptoms related to estrogen/progesterone imbalance in the early stage of menopause when the progesterone drops
- Other issues related to low estrogen can be not as severe in women who are estrogen dominant as long as it is estriol and not estrone or estradiol
- Estrogen also has a protective effect on the pancreas cells and lower estrogen can be a factor in insulin resistance



Estrogen Dominance and Menopause

- Estrogen and progesterone help with fat burning
- Estrogen makes cells more insulin sensitive and can help control the negative impact of cortisol
- Progesterone opposes the action of estrogen with insulin – however it and estrogen help with cortisol control
- Insulin and cortisol are a bad combo for fat loss

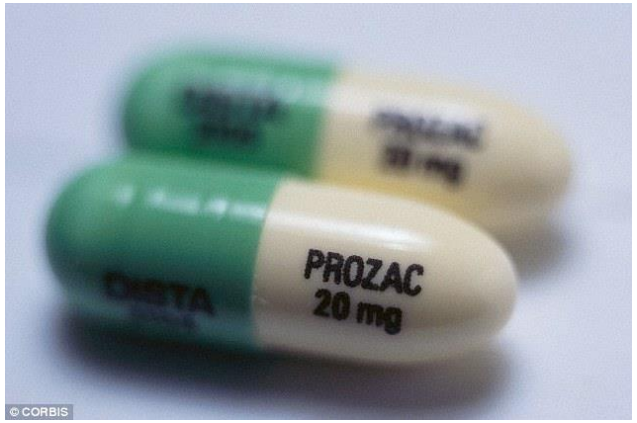


HRT

- Synthetic estrogen and progesterone is prescribed by an MD usually to reduce hot flashes and other symptoms
- Increases risk of breast cancer, heart disease, blood clots and strokes – side effects include water retention, headaches, nausea, phlebitis, breast tenderness and irritability
- Create harmful by-products when metabolized by the liver (16 and 4-hydroxestrone)
- Bio-identical hormones are an option – long term use not known and should only be considered for acute situations until hormones are balanced.

Other Drugs

- Anti-depressants are prescribe to help with hot flashes, depression, moods and anxiety – side effects include weight gain, nausea, dizziness and sexual issues
- Gabapentin – an anti-seizure med which is somewhat effective for hot flashes – side effects include drowsiness, dizziness and headaches
- Sleeping Pills – to help with sleep issues – long-term use creates dependency problems



Surgical Menopause

- Hysterectomy or oophorectomy (ovaries removed) cause an abrupt end to reproductive hormone production
- Cause for surgery is often an estrogen dominant condition such as endometriosis or fibroids
- Adrenals are not necessarily ready to fulfill their post-menopause duties
- Excess estrogen can be found in fat cells
- Same players – insulin, stress, poor detoxification still need to be addressed
- Bioidentical hormones can be helpful in short term

Solutions for Menopause

- It is important to remember that menopause and menopausal symptoms do not necessarily go together
- Many women experience a smooth transition – with little or no symptoms
- Helping clients understand this will help motivate them to make changes
- Good food, lifestyle and supplement suggestions can make a big difference

Supplements

- Adrenal adaptagens – helpful for many symptoms especially hot flashes
- Maca – especially good for vaginal dryness, libido, energy
- Schizandra – blood sugar stabilization, nervous system and liver support
- Omega 3 (Fish, flax, chia) – counters pro-inflammatory PG2 which helps with hot flashes, muscles aches, joint pains, and helps protect bones and heart

Supplements

- Vitex – still can help with balancing progesterone and estrogen
- Black Cohosh – some studies indicate that black cohosh may be helpful for hot flashes but a meta-analysis study that there is not enough evidence to support this
- Could be difference between standardized extract vs whole herb
- Vitamin C helps regulate PG2, vitamin E can help with hot flashes, mood swings, anxiety and vaginal dryness, B vitamins help with liver detoxification and removing harmful estrogens

Supplements

- Thyroid support – The thyroid can become unstable during menopause so support is helpful
- Liver support – needed to protect the liver and aid detoxification (must contain milk thistle)
- Flavanoids – Hesperdin can help with hot flashes, quercetin helps with high histamine which has also been linked to hot flashes
- Probiotics – also aids detoxification, helps with inflammation and supporting other systems

Study

A study from Lawson Health Research Institute found that good bacteria levels are reduced in the vaginal canal and may affect how vaginal tissue ages. This reduction is associated with:

- Vaginal dryness
- Pain during intercourse
- Inflammation of vaginal tissue

L. iners, *L. crispatus*, *L. gasseri*, *L. jenesenii, L. acidophilus, L. fermentum, L. plantarum, L. brevis, L. casei, L. vaginalis, L. delbrueckii, L. salivarius, L. reuteri,* and *L. rhamnosus*

Prebiotic Study

- In another study, of healthy volunteers, waking cortisol levels were lowered and focus on positive information rather than negative information increased after taking prebiotics for three weeks
- In particular it was GOS, not FOS or the placebo
- GOS is high in yogurt and kefir which will also deliver probiotics
- Probiotics have already demonstrated an ability to help with stress, depression and anxiety (which accompanies hot flashes)

Food

- Phytoestrogens – extremely helpful for balancing the effects of low estrogen, helping prevent conversion of estrogen to harmful estrogen metabolites and aid detoxification
- Food form only – not supplements
- Liver foods
- Thyroid foods
- Balance blood sugar
- Fermented foods and prebiotics foods

Foods

- To cut down on supplements – try to support system with foods as much as possible
- Maca and schizandra are foods and can be used as such
- Sea vegetables, coconut oil can support the thyroid
- Liver-friendly foods can support the liver
- Kefir-grain kefir can be used like a probiotic supplement
- Menopause supplements are not as effective as supporting systems

Lifestyle

- Stress management is critical
- Exercise – moderate intensity aerobic exercise may be helpful for depression and sleep issues in sedentary women
- Yoga can also be helpful for stress reduction and adrenal support
- Pyschospiritual work can also be helpful

Menopause

- Is a time of transition
- Some women embrace it as a time leading to new freedoms
- Some women are filled with regret for what might have been
- Some women feel a mix of both
- This is an opportunity for clients to re-examine their lives and make plans to pursue new goals and dreams
- They need to see it as a beginning and not an end

In Conclusion…

- Menopause presents women with an amazing opportunity to re-evaluate what is working in their life and what isn't
- If you can help their physical symptoms, it is easier for them to embrace their new life
- Menopause issues are set in motion before menopause but the body does respond well to support
- Be sure to help the client understand what is happening and to stay the course until symptom solutions are found