

Women's Health

Women's health is definitely a topic that needs to be understood. Although many women feel like "roaring" as it says in Helen Reddy's song "*I am Woman*" others are longing to be the Proverbs 31 wife – "**An excellent wife, who can find? For her worth is far above rubies.**" And in Proverbs 18:22 "**He who finds a wife finds a good thing, and obtains favor from the Lord**". These verses typically sum up the person and wife we are wanting to be today or in the future when we marry BUT there is the whole women's health issue that many times gets in our way and turns us into the monster that comes out of a cave at certain times of the month or certain years in our life. The information on this topic will help you work through these times in your life and restore a feeling of self worth and happiness.

Introduction: Understanding Hormones

When a baby girl is born she has all the eggs she will ever have, between 350,000 – 1 million. During the fertile portion of her life she will begin to ripen approximately 1,000+ eggs each month at the beginning of each menstrual cycle. This happens as a response to the follicle stimulating hormone in the pituitary gland. There is a contest to see which one will be the egg of the month, and only one wins and the rest simply atrophy. When the follicles from the ovaries, which were stimulated by the pituitary gland, grow they produce estrogen. Estrogen begins to thicken the lining of

the uterus to receive the egg. The level of estrogen is at it highest on days 13-15 of your cycle. This high level of estrogen signals the pituitary to secrete LH hormone which causes the follicle to rapidly mature and burst, releasing the egg. This is usually a day of discharge (milky mucous). The fallopian tube grasps the egg and begins to carry it to the uterus for possible fertilization.



Meanwhile back at the ovary, the remainder of the ripened follicles transform into yet another gland – corpus luteum which produces some estrogen and a lot of progesterone which is the dominate hormone in the second half of the cycle. Progesterone prepares the womb for pregnancy by thickening the endometrium to a plush nursery for the fertilized egg. If the progesterone level is too low a miscarriage can occur.

If no egg is present the corpus luteum will disintegrate and shrink, this will cause the estrogen and progesterone to decline. When this happens it causes the uterus to go into a spasm and contract to expel the lining. This is known as your period.

Endocrine System:

It requires a perfect balance of hormones to make everything happen properly! This means that you must have healthy glands in the entire endocrine system.

The endocrine system is made of: pineal gland, pituitary gland, thyroid gland, parathyroid gland, thymus gland, adrenal gland, pancreas, and ovaries. There are over 100 hormones produced: testosterone, progesterone, estrogen (estrone, estroil, and estradiol), thyroxine, cortisone, and melatonin.

Recipe for the manufacturing of hormones:

22 amino acids
Essential Fatty Acids
Vitamins
Minerals

These hormones are released in the blood stream and bind to receptor sites on the cells like a lock and key. There are receptor sites in the cells of the vagina, bladder, breasts, skin, bones, arteries, heart, liver and brain.



Cycles of Life

Puberty – begins approx. age 12 - This is when follicles in the ovaries start to ripen which will increase hormonal levels which lead to female body shape changes.

PMS – ages 12-50, this pre-menstrual syndrome should not happen in a healthy woman. The common complaints are cramps, moodiness, pelvic pain, breast tenderness, nervous tension, fluid retention, bloating, insomnia, and other symptoms. One of the main reasons for PMS may be hormonal imbalance –excessive levels of estrogen and inadequate levels of progesterone – as well as sensitivity to fluctuating hormones. Diet is a main contributor to PMS along with the body's inability to metabolize fatty acids, and a vitamin/mineral deficiency.

Nutritional Guidelines for PMS:

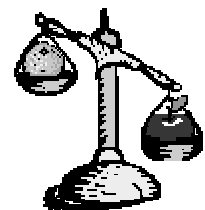
- ❖ **Calcium/ Magnesium** – Needed for insomnia, nervousness, muscle cramps, abdominal cramps and pelvic pain. Research indicates that women who have PMS may have lower levels of magnesium than women who do not have PMS. A deficiency in magnesium could account for several of the most common symptoms listed above. Many women who crave chocolate before their periods may be in fact are craving magnesium. (Authors note – doesn't it sound better to crave chocolate then magnesium – Are you going to go make some magnesium brownies?) Dietary sources of magnesium are green leafy vegetables, whole grains, legumes, cereals, nuts and seeds. Calcium and Magnesium work together. They should be taken together and in proper balance.
- ❖ **B-Complex** – Needed for the effective regulation of estrogen levels. When vitamin B supplies are insufficient, estrogen levels rise and PMS symptoms worsen. Increase in estrogen

contributes to a further decrease in the B vitamins. They are useful in easing depression, headaches, dizziness, fatigue, irritability, mood swings, food cravings and fluid retention. Dietary sources are eggs, whole grains, salmon and brewer's yeast. Cooking, canning, processing, exposure to light and lengthy storage time may contribute to the destruction of the B-Complex.

- ❖ **Alfalfa** – Natural Diuretic – reduces fluid retention. Also great with allergies which can be bothersome with a PMS sufferer.
- ❖ **Iron** – If you tend to be low in iron, this is good time to take some extra. Not ferrous sulfate, this is the least absorbable. Ferrous fumarate is a good source.
- ❖ **EPA** – An Essential Fatty Acid from cold water fish. Great for any inflammation.
- ❖ **GLA** – great for many symptoms of PMS – moodiness, cramping, breast tenderness, libido, etc. Read about GLA in this notebook.
- ❖ **Vitamin E** – Helps balance hormonal irregularities Great for cystic conditions and tumors. Improves circulation. Dietary sources include: cold pressed vegetable oils, all whole raw seeds, nuts, and soybeans, and wheat germ oil.
- ❖ **Vitamin C and Beta Carotene** – New tissue formation and antioxidant.
- ❖ **Natural Interferon** – new studies have proven that natural interferon helps with PMS symptoms.
- ❖ **Diet** – follow the diet under the Menopause section.

Perimenopause – age 35-49, This is the beginning of a gradual reduction in reproductive hormones. This cycle may occur over several years. The storage of eggs is being depleted and remaining eggs do not respond well to the command to be released. Some months you may release an egg and experience a heavy period and the next month you may have no ovulation with little or nothing of a period. Perimenopause can last 1-5 years with many of the symptoms that accompany actual menopause. Even though a women's estrogen level may be dropping during this time, many women experience estrogen dominance because her progesterone is too low.

Balance is Key



Menopause – average age 50-52, Menopause is not an event, it is a process that occurs over a period of time, as a woman “adjusts” to lower levels of estrogen. During this time a woman stops ovulating and her ovaries DECREASE the amount of hormones it produces. The average age for menopause is about 50. This process is similar to puberty in reversal.

Post menopause – A period of time ranging from 3 months to 5 years after the ability to bear children has ceased. Usually a lack of estrogen and possibility progesterone.

Symptoms of Hormonal Imbalance

Estrogen Dominance – During childbearing years, women may experience hormonal imbalance symptoms, especially after ovulation and often caused by too much estrogen and not enough progesterone. The main reasons are:

a. inadequate nutrients to manufacture hormones (see recipe on previous page)

b. inadequate progesterone production due to stress, lack of rest and interference from accumulated toxins in cellular tissue

c. elevated estrogen caused by:

-xenoestrogens or xenobiotics(chemical from the environment that mimic estrogen in the body) usually 1,000 times the strength of human estrogen *
Read about this in detail under Xenobiotics in your notebook.

- estrogen in food supply

- pharmaceutical hormones (birth control pills or HRT)

- impaired liver function (an unhealthy liver is unable to eliminate the majority of estrogen compounds from the body, so they are reabsorbed back into the bloodstream)

✓ To check the health of your liver refer to the *Function of the Liver* in the Health Topics section of this notebook.

Symptoms: Estrogen Dominance

Acceleration of aging process

Breast tenderness

Breast, uterine or ovarian cancer

Decrease sex drive

Gallbladder disease

Heavy menstrual bleeding and/or clots

Increased blood clotting

Infertility

Irritability

autoimmune disorders(strong correlation to BCP)

Foggy thinking/ memory loss

Premenopausal bone loss

Thyroid dysfunction (mimicking hypothyroidism)

epilepsy

hair loss

toxemia of

pregnancy

joint swelling

miscarriage

PMS

uterine fibroids

water retention/bloating

fatigue hypoglycemia

headaches

insomnia

allergies

depression



Low Estrogen Usually at menopause or perimenopause

Autonomic (body functions) hot flashes, night sweats, chills, heart palpitations,

itching – crawly skin

Mental/Emotional – mood swings, irritable, anxiety, restless, panic attacks, nervousness, depression, forgetfulness, mental distractions

Physical

Insomnia
Headaches or migraines more frequently
Change of time between periods
Skin and vaginal dryness
Cold hands and feet – poor circulation
Leg cramps – bone pains, joint pain
Frequent urination/ urinary incontinence
Nausea, gastric upset, bloating

Diminished sex drive
Weight gain
Hair loss
Fatigue
Food allergies
Growth of facial hair

Balance is ESSENTIAL

Estrogen is not a singular hormone.

1. Estrone – made in the liver, high levels are involved in cancer prevention
2. Estriol – made mostly in the pituitary and adrenals
3. Estradiol – made mostly in the pituitary and adrenals – high levels cause cancer (allow oxidation to take place in the cells)

Among these three estrogens, estradiol is most stimulating to the breast and estriol is the least. Estradiol is 1000 times more potent in its effects on breast tissue than estriol. Over exposure to estradiol increases one's risk of breast cancer, whereas estriol is protective.

NOTE: BCP and traditional HRT use 100% Estradiol.

Role of Natural Progesterone:

1. balances or opposes estrogen (prevents estrogen dominance)
2. protects against cysts: breast, ovarian, thyroid
3. protects against cancer
4. normalizes blood clotting
5. acts as a natural diuretic
6. acts as a natural anti-depressant and relieves anxiety
7. helps normalize blood sugar levels
8. restores proper cell oxygen levels
9. helps thyroid hormone function
10. activates bone osteoclasts to increase new bone formation (reverses osteoporosis)
11. helps use fat for energy
12. beneficial anti-inflammatory effects (arthritis, MS, lupus)
13. helps prevent hypertension
14. prevents sinus, respiratory and vaginal infections
15. increases libido
16. reduces hot flashes
17. reduces risk of glaucoma
18. reduces dryness and thinning of skin and hair loss
19. essential for limbic brain health



The Progesterone Impostor

Progestin's (Both Birth Control Pills and Hormone Replacement Therapy contain Progestin)

Side Effects (taken from the PDR 1993)

Increase risk of blood clots

Malignant mammary nodules

Sudden or partial loss of vision

May cause

Epilepsy

Asthma

Depression

Breast tenderness

Acne

Insomnia

Increased facial hair

Migraines

heart or kidney dysfunction

fluid retention

vaginal itch or infections

nausea

alopecia (loss of hair)

anaphylactic allergic reactions

*when taken with estrogens, the following have been observed:

Rise in blood pressure

Fatigue

PMS symptoms

Painful swellings of the legs

Sudden onset of fever

headaches/dizziness

decrease in thyroid function

joint pain

Cystitis

itching

Do I Need Hormone Replacement Therapy?

After menopause a woman should be able to produce all of the estrogen she needs IF the following four glands are healthy: liver, ovaries, pituitary, and adrenals.

When a woman enters menopause the ovaries do not completely stop producing estrogen, progesterone, or testosterone. Usually the amount produced by the ovaries is about 40% of what they previously produced. God did not design your body to just stop. Your adrenal glands begin to make estrogen in the form of estradiol and androgens such as testosterone, BUT only if the adrenal glands are working properly. The endocrine glands secrete hormones, the liver and the pituitary make hormones that are precursors to estrogens, but they have to be converted as you need it. This conversion process takes place in the body fat. If we are not making enough hormones, the body's survival mechanism to assist us, is to make more fat to help out. This is why many women experience the "middle-age" spread. Your body will hold on to more fat if it needs to make more hormones.



Women with these problems should avoid HRT:

1. cancer of the breast or uterus
2. blood clots in the legs or lungs
3. high blood pressure
4. active liver disease
5. gallstones or gallbladder disease
6. lupus, chrohns, rheumatoid arthritis or any auto immune disease

STEPS TO CONSIDER FOR NATURAL HORMONE BALANCING OR THERAPY
THIS INCLUDES BALANCING HORMONES FOR PMS AND PERIMENOPAUSE

Step 1 **DIET** - Whole grains – including breads, cereals, pasta, pancakes, and waffles

Vegetables and fruits – increase fiber

Nuts, seeds – **flaxseed**

Soy products

Cold water fish – salmon, tuna, haddock

Water – drink ½ your body weight in ounces of water daily

Decrease in Diet

Alcohol

Refined sugar

Caffeine

Soft drinks

Saturated fats, hydrogenate oils

Red meat

Homogenized dairy products



Step 2 **EXERCISE** - Nutrition's Twin

Exercise helps to reduce stress along with getting your endocrine glands to be healthier

Reflect on positive thoughts, bible verses, and prayers while exercising

Step 3 **NUTRITIONAL SUPPLEMENTS** Consider this before going to a prescription

1. Multi-vitamin

2. B-Complex

3. Soy Protein – much research shows evidence of soy

4. vitamin C

5. Vitamin E

6. GLA – from the borage seed – 3x more stronger than primrose oil, major anti-inflammatory, major hormone builder

7. EPA

8. Calcium Magnesium

9. Flaxseed – grind your own – more nutrition

Step 4

NATURAL HORMONE THERAPY

1. phytoestrogens – plant estrogens

2. natural progesterone cream

Natural progesterone cream – usually during perimenopause the symptoms are due to estrogen dominance, too much estrogen and not enough progesterone. Some women have had success with this type of natural hormone therapy.

WARNING: This type of therapy can be tricky and hard to control the amounts applied and absorbed by the body resulting in other problems with hormonal imbalances. Some women get messed up more with this cream.

Phytoestrogens – Mild plant estrogen in certain plants, herbs, seeds that are similar in chemical structure to estrogen and have hormone - like effects without the negative side-effects of synthetic hormones. Phytoestrogens are about 1,000th the strength of human estrogen, much weaker. Phytoestrogens respond to individual needs by stimulating estrogen production if levels are low and slowing down estrogen production if they are too high.

a. Lignin type in whole grains, vegetables, with highest concentration in oilseeds – grinding your own flaxseeds, this lignin is not present in flax oil.

b. Isoflavone type legumes with the highest concentration in protein part of soybeans. There are hundreds of studies on the soy and hot flash connection.

c. Herbs such as:

Black Cohosh – helps with hot flashes, calming effect on nervous system, helps regulate sleep patterns

Licorice – promotes adrenal function

Red Clover – helps detoxify the liver, enhances the immune system

Don Quai – helps with hot flashes, vaginal dryness

*If desiring a supplement, the product I recommend is a combination of soy, black cohosh, flaxseed, dong quai, and licorice all in one capsule.

If You've Been taking HRT and Want to Stop All Hormones:

Don't stop cold turkey. Wean yourself gradually and slowly, giving your body time to adjust. Here's a sample weaning schedule:

Week 1: Skip Sunday's pill

Week 2: Skip Sunday and Thursday

Week 3: Skip Sunday, Tuesday, and Thursday

Week 4: Skip Sunday, Tuesday, Thursday, and Saturday

Week 5: Skip Sunday, Tuesday, Thursday, Friday and Saturday

Week 6: Off hormones all together.

During and after this tapering off period you will need to support your body by making sure you are getting enough plant hormones. Eat a wide variety of fruits, veggies, freshly ground flax seed, and soy. You'll also need a good multivitamin to help your adrenals and ovaries keep your hormones balanced.

Specific Symptoms and Recommended Supplement Guide:

In addition to a good multi-vitamin and grinding your own flax seed, add the following:

Hot flashes, night sweats, chills – soy protein, vitamin E, GLA

Anxiety, tension, panic attacks – B-Complex, calcium/magnesium, valerian

Vaginal Dryness – Vitamin E, GLA

Insomnia – Calcium/ Magnesium, valerian

Depression – B- complex, GLA, EPA, Soy protein

Memory, Concentration – lecithin, Ginkgo Biloba, B-Complex

Circulation – Vitamin E, Ginkgo Biloba, Co Enzyme Q10, EPA, Garlic, Lecithin, Vita C

Stress – B-Complex, Vitamin C, Soy protein

Fibrocystic Tendencies – Vitamin E, GLA

Fluid Retention – B- Complex, Soy protein, Alfalfa

Menstrual Cramps – Calcium magnesium, valerian

Headaches – Calcium magnesium, B-Complex, GLA, EPA

Diminished Sex Drive – Vitamin E, GLA

Dry Skin – EPA, GLA, Vitamin E, Caratanoid Complex

Heavy Periods or irregular periods – B- complex, GLA, EPA, Soy Protein

Anemia – Iron plus Vitamin C

Gas, Indigestion, bloating – Probiotic, chewable calcium/magnesium, peppermint and ginger in an herbal remedy

Acne – Probiotic, Zinc, Oemga-3

Yeast & Bladder Infections – probiotic, garlic, Liver Detox, alfalfa

We can no longer afford to be weak or sick or tired or cranky or hormonally challenged. We all need to become our best selves and we need to do it soon so as not to waste another minute settling for mediocrity.

Each and every one of us is capable of feeling alive and vibrant.

Sources: The Wisdom of Menopause, by Christiane Northrup, M.D.; What Your Doctor May Not Tell you About Menopause, Dr. John Lee; Martha Wilmore, CDC, Gemma Gorham, MPH