

## MENOPAUSE (article)

There is a conspiracy against women underway in America today. The motive is (as always) profit. The perpetrators are those drug companies creating a mega-million dollar myth which they sell both to physicians and patients, the myth of menopause as a disease.

If you're a physician (remember the profession remains male-dominated) and you're reading one of the drug company magazines "Menopause Management," you might actually be convinced that medical 'rescue' is needed for a dire illness that seems to fast forward a decline into decrepitude and early death. Just replace those hormones. It seems so easy. Two little prescriptions, one for estrogen, the other progesterone, taken for a mere twenty-five years, and 50% of the population is 'saved' from the ravages of time.

It just seems too good to be true. Life doesn't operate along such simple patterns. So before you fill the Premarin prescription, before you view your doctor's videotape "Understanding Menopause," (coincidentally produced by the Premarin people), consider the following:

1. Menopause is a time of process, a time of change, but certainly not a time of decline. Hormones don't "stop," but rather there is a shift, with progesterone present throughout the cycle as estrogen is lowered. Psychologically, many women experience a shift in thought processes, becoming more intuitive, more right brained, entering into the "wise-woman" modality. With the menopausal female being the most rapidly growing segment of the population, the benefits to society are enormous.
2. Estrogen decline is not responsible for the bone loss leading to osteoporosis, but rather progesterone, available as a cream extracted from the wild yam, absorbable through skin and actually capable of reversing osteoporosis. It is estimated that half the bone loss leading to osteoporosis has occurred before menopause and largely due to a combination of insufficient exercise, smoking, and dietary misinformation. Excessive protein and fat in the diet actually promote osteoporosis. Premenopausal women who eat right, exercise, take vitamin and calcium supplementation and use progesterone cream are capable of avoiding the pre-menopausal bone loss.
3. The so-called "cardio-protective" effect of estrogen seems to be little more than an marginal improvement in a lab test. There has never been any proof from any medical center that taking hormone replacement is a superior protection than healthful diet, regular exercise and abandonment of smoking. In fact, the recent medical article "proving" that estrogen replacement protected against heart disease actually had coronary deaths in the estrogen group and none in the control group.
4. The risk of breast cancer, a leading cause of death, is not inconsequential. Many breast cancers are hormone dependent, that is, they grow more under the influence of estrogen. The success rate in curing metastatic breast cancer with chemotherapy is abysmal. The drug company's recommendation to check annual mammograms and withhold prescriptions in women with a positive family history of breast cancer simply isn't sufficient to avoid the potential danger of hormone therapy.

One argument from conventional medicine just doesn't hold water at all. That the risk of breast cancer is offset by the hormone's protection offered to the heart. Sorry, I disagree. Just ask any woman what she'd rather have: breast cancer or a heart attack. Anyway, the "save" rate of heart disease is much higher than breast cancer.

The actual symptoms of menopause, so widely touted in both medical journals and women's magazines, actually occur in relatively few women and can be treated with safer and less expensive means than a quarter century of hormone replacement. Hot flashes, which the more philosophic regard as 'power surges', are indeed troubling if they interfere with sleep. Very low dose natural estrogen, or estrogen-like herbs, combined with low dose natural progesterone (as the skin cream) are very helpful. Vaginal dryness is easily treated with a small amount of estrogen cream. Neither hot flashes nor dryness is particularly long-lived problem and do not require a lifetime commitment to therapy.

It's reasonable to ask if I ever prescribe hormonal replacement therapy. Sure. Such treatment is necessary for a surgically induced menopause. Sudden loss of the uterus and ovaries is too great a shock to the system to try it without hormonal help. Otherwise, I trust the intuition of my patient's themselves. If they plan no lifestyle changes, are troubled with symptoms, and have concerns about osteoporosis and heart disease, and basically ask for the prescriptions, I'm very big on empowerment.

Many women these days are trusting themselves, their bodies, and their feminine wisdom much more than the economically driven male-dominated pharmaceutical companies and gynecological societies. To these women I offer some dietary advice (heavy into high quality veggies, use meat only as a flavoring, drop the dairy altogether...get the calcium as the cow did, by eating vegetables), encourage exercise, return to the days when they had utter and complete confidence in themselves.