




The Female Frontier



Hormone Heresy: What Women Must Know about Their Hormones

by Sherrill Sellman



Synthetic hormones in the form of estrogen or Progestin are quite high profile these days. For some they represent the Golden Fleece that excites so many medical practitioners, pharmaceutical companies and writers in search of miraculous properties. For others, estrogen and Progestin are rather perilous hormones, fraught with many unknown dangers. Most women are lost in the dark and bottomless abyss, somewhere between truth and fiction. All too often they are desperately confused about whether to trust their instincts or medical science. Nothing less than their physical, emotional and mental health and long term well-being hang in the balance.

Hormones are very powerful substances. Begin tampering with nature's finely tuned messengers of life's processes, and you are asking for trouble. This is especially true for women. A woman's psyche is intimately connected to her monthly flow of hormones. Besides creating a myriad of health problems and diseases, hormonal imbalance can undermine self-esteem, creativity, mental acuity and a healthy sex drive.

The history of HRT

Perhaps there is no topic of greater confusion than the highly publicized introduction of Hormone Replacement Therapy (HRT) for the menopausal woman. It is touted as the best thing for liberating women since the discovery of oral contraceptives (even though the statistics now show that wide use of the Pill has given rise to health hazards such as breast cancer, high blood pressure and cardiovascular disease on a scale previously unknown in medicine).

Menopause didn't really come into vogue as a topic of concern for the medical profession until the 1960s. In 1966 a New York gynecologist, Dr. Robert Wilson, wrote a best-seller called *Feminine Forever*, extolling the virtues of estrogen replacement to save women from the "tragedy of menopause which often destroys her character as well as her health." Feeding upon women's greatest fears, Wilson energetically promoted menopause as a condition of "living decay." According to him, estrogen replacement was a kind of long sought after youth pill that would save poor, fading women from the horrors of age. He popularized the erroneous belief that menopause was a deficiency disease.

Women's magazines eagerly seized upon his ideas and extensively promoted his concepts. The pharmaceutical industry generously contributed over \$1.3 million dollars to his foundation. Pharmaceutical companies jumped on the bandwagon with aggressive promotions and advertising campaigns.

Wilson pioneered the use of "unopposed estrogen"—synthetic estrogen prescribed on its own. How-

ever, there had been no formal assessment of the safety of estrogen therapy or its long-term effects. Unopposed estrogen went out of vogue when it became very apparent that it shortened the lifespan of its users. In 1975, the *New England Journal of Medicine* examined the rates of endometrial cancer for estrogen consumers, concluding that the risk was 7 1/2 times greater for estrogen users. Women who had used estrogen for seven years or longer were 14 times more likely to develop cancer.

As the popularity of unopposed estrogen therapy waned, new approaches were sought. The focus was directed away from the false claims of preserving feminine beauty and youthfulness to more urgent health matters. The pharmaceutical industry resurrected Estrogen Replacement Therapy in the form of the new "safe" Hormone Replacement Therapy (HRT), a combination of synthetic progesterone and estrogen. HRT would supposedly protect menopausal women not only from cardiovascular disease, but also the ravages of osteoporosis.

The myths of synthetic hormones

It is now 36 years since the first introduction of oral contraception and there are presently about 60 million women worldwide who are, in effect, "trialing" the Pill. Its safety and long-term effects have still not been conclusively established. It is interesting to note, however, that the Pill has produced a wide assortment of adverse effects, and significant links have been established to breast cancer, high blood pressure and, in particular, cardiovascular disease, the major cause of female deaths in Australia. In 1992, 27,833 women died from heart disease and strokes, compared to 2,438 from breast cancer. Is this merely a coincidence or do these statistics indicate, perhaps, the harmful side effects of interfering with hormones?

The trend these days is to strongly recommend hormone replacement therapy, featuring synthetic estrogen and Progestin, to all menopausal women. Unfortunately, this enthusiasm for drugs is not backed up by the facts. Estrogen deficiency is loudly proclaimed by medical practitioners, pharmaceutical advertising and many lay publications as the primary cause of all the symptoms attributed to menopause and post menopause such as mood swings, depression, hot flashes, vaginal dryness, loss of sex drive and accelerating osteoporosis.

Whatever the mechanism triggering menopause, as fewer egg follicles are stimulated, the amount of estrogen and progesterone being produced by the ovaries decline, although other hormones continue to be produced. Estrogen levels drop only 40 to 60 percent at menopause, only low enough so that follicles do not mature, thus making pregnancy impossible. The ovaries do not shrivel up and cease functioning, as is popularly believed.

However, other body sites such as the adrenal glands, skin, muscle, brain, pineal gland, hair follicles and body fat are capable of making estrogen and progesterone, enabling the female body to make healthy adjustments in hormonal balance after menopause provided a woman has taken good care of herself during the pre-menopausal years with proper lifestyle, diet and mental and emotional health.

The last thing a woman's body needs is more estrogen either in the form of contraceptives or HRT. And when estrogen dominance symptoms appear, guess what is prescribed? More estrogen! The delicate natural estrogen/progesterone bal-

ance is radically altered due to too much estrogen. Progesterone deficiency is then exacerbated.

The myth of estrogen deficiency

Estrogen dominance is a term that was first used by John Lee, M.D., a retired medical practitioner from California. Dr. Lee has spent the better part of the last two decades exploring the basis for the proliferation of such female problems as PMS, endometriosis, ovarian cysts, fibroids, breast cancer, infertility, osteoporosis and menopausal problems. From his clinical experience in the field of female health, and from his published research, Dr. Lee believes that many women are suffering from the effects of **too much estrogen**. He finds that stress, nutritional deficiencies, estrogenic substances from our environment and taking synthetic estrogen, combined with an ensuing deficiency of progesterone, are the likely contributing factors to the creation of estrogen dominance.

Contemporary medicine is still largely unaware that progesterone stimulates osteoblast-mediated new bone formation. What that means is that progesterone actually stimulates the growth of new bone tissue, and therefore osteoporosis can be reversed at any age. Lack of progesterone means that new osteoblasts are not created, potentially giving rise to osteoporosis.

Natural progesterone

The present day prospects for a woman's health would indeed be gloomy if there were no other alternatives available. Fortunately, this is not the case. There exists a huge range of effective options. But to discover them, it is vital to look elsewhere than the traditional allopathic medical model. There is a long history of very successful treatments based upon a more natural approach to addressing the underlying symptoms. These include naturopathy, homeopathy, Traditional Chinese Medicine, herbalism and many more.

One of the most significant treatments presently available that safely and effectively addresses women's hormonal imbalances and related health problems is natural progesterone. By 1939, it was discovered that an ingredient called *diosgenin* in the Mexican wild yam, *Dioscorea villosa*, (not to be

confused with the average supermarket yam) could be converted very easily and inexpensively into a molecule which is identical to the progesterone the body makes, now known as natural progesterone.

Supplementation with natural progesterone corrects the real problem—progesterone deficiency. It is not known to have any side effects nor have any toxic levels been found to date. Natural progesterone increases libido, protects against fibrocystic breast disease, helps protect against breast and uterine cancer, maintains the lining of the uterus, hydrates and oxygenates the skin, reverses facial hair growth and thinning of the hair, acts as a natural diuretic, helps to eliminate depression, increases a sense of well-being, encourages fat burning and the use of stored energy, normalizes blood clotting, and is a precursor to other important stress and sex hormones. Even the two most prevalent menopausal symptoms, hot flashes and vaginal dryness, quickly disappear with applications of natural progesterone.

The awakening

The re-emergence of the feminine now stirring within the hearts of women is the call to reclaim all that has been kept hidden from them.

Menopausal women have the opportunity to enter this phase of life empowered in their wisdom and creativity as never before. They have access to profound inner knowing. The renowned sociologist, Margaret Mead, said, "There is nothing more powerful than a menopausal woman with zest!" In many cultures around the world, menopause is a transition and initiation into the fulfillment of a woman's power—totally symptom-free. She is held in the highest regard in her community as a wise, respected elder.

Unfortunately, this natural transition of hormonal production, designed by nature to be a gradual and non-dramatic transition, has been seriously altered for many women throughout the industrialized world. ❀

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