

What You Need
Know About



MENOPAUSE

TABLE OF CONTENTS

A Brief History of Menopause	1
The Misconception of ‘Going Through Menopause’.	2
But Something Was Wrong...	3
Our Hormones Don’t Decline Because We Age, We Age Because Our Hormones Decline.	5
The Truth About Menopause	9
Hormone Decline Symptom List	10

A Brief History of Menopause

The 1700's - In the 1700's illness was thought to be caused by 'evil humors', or body fluids. Leeches, blood letting and herbs (that made people vomit) were used to get these 'bad fluids' out of the body.

Back then, menstruation was thought to be the body's way of cleaning out impurities. But when a woman stopped menstruating it was believed that the impurities stayed in the body. So the medical field applied leeches to the woman's genital area, and other parts of her body, to suck out her blood, thus removing the impurities. **YUCK!**

The 1800's - The word 'menopause' was coined by a French doctor in 1812 and was used to describe the time when a woman stopped having periods. By this time the medical community no longer believed that the cause of disease and illness was 'body fluids', but 'body *organs*'. The reproductive organs were targeted in females because it was thought that a woman's *very nature* came from them.

Therefore when a woman became physically ill, or their mental state was not up to par, it was thought to stem from the reproductive organs and they were removed, she was given a hysterectomy, as the believed cure of the day. The word 'hysteria' actually means 'womb'.

Women were also committed to insane asylums for displaying any of the symptoms of menopause, especially depression, anxiety, irritability, or rage. This practice was still going on well into the 1900's.

In 1890 a French scientist made an extract from the testes of animals and injected it into himself. He reported the return of his strength and virility. He speculated that an extract from animal 'ovaries' could be used to 'revitalize' women. In 1897 the first hormone (from the adrenal glands) was isolated. This led to the modern day use of hormone replacement therapy. But it would not be until the early 1960's that women would finally experience the effects from HRT.

The 1900's - In the 1900's psychiatry believed, and purported, that the depression women experienced during menopause was because they could no longer bear children.



Which is not *true*, but it's better than sucking their blood out with leeches or cutting out their organs.

In 1925 women could obtain an extract made from the urine of pregnant women (at least it was the right mammal) because pregnant women's urine contains large amounts of estrogen metabolites. The problem was that there was not enough of this extract to supply the demand. So in 1943 some bright spark decided to make the extract from 'horse urine' and mass marketed it. Thus a product called 'Premarin' ('pre' - pregnant, + 'mar' - mare's, + 'in' - urine) was born. Starting in early 1960, the Wyeth pharmaceutical company (makers of Premarin) waged a campaign promoting Premarin as a drug that would keep women young and beautiful. In no time at all women were lining up at their doctor's door to get a prescription for it. That was...until they started having heart attacks, strokes, liver damage, developing cancer and/or dying...

The Misconception of 'Going Through Menopause', or 'The Change of Life'

In 1812 the word 'menopause' came into being and its meaning was, and still is, (menopause - meno = menses [menstruation] + pause = to stop or cease). In other words, it means that a woman stops having periods...*nothing more!*

The original definition didn't say anything about 'symptoms' like; hot flashes, depression, anxiety, sleep disturbances, or any length of time it takes for the period to stop. *It just said that it stopped.*

Today, the definition still says that the period stops, but it also states that it can do so as early as 35, and as late as 55, plus a list of symptoms has been added, which the majority of women who have stopped having periods do experience.

Today's definition gives women a misconception that 'menopause' occurs over a long period of time. But it's the decline in a woman's hormones that occurs over a long period of time that causes menopause (the ceasing of the period). So we should still have the simple and truthful definition of menopause as 'the ceasing of the menses', and talk about the long term decline in hormones.



At some point it was observed that there was a 'winding down' of the menstrual flow, and that women would begin to skip periods for months at a time, a year or two before they finally stopped. During this time they would experience the same symptoms, to the same severity and frequency, as women who had already stopped having periods.

Somehow those 1-2 years before the period stopped, and the stopping of the period, were informally lumped into one event and called 'the change of life', or 'going **through** menopause'.

Some time later the word 'peri', or 'pre-menopause' was coined to separate the 1-2 years before the period stopped from menopause (when the periods stop). This definition was added to the medical dictionary but women rarely look these words up, so they don't fully understand their meaning or their '*difference*'. That's why the, 'going through menopause' or, 'the change of life' concept has continued.

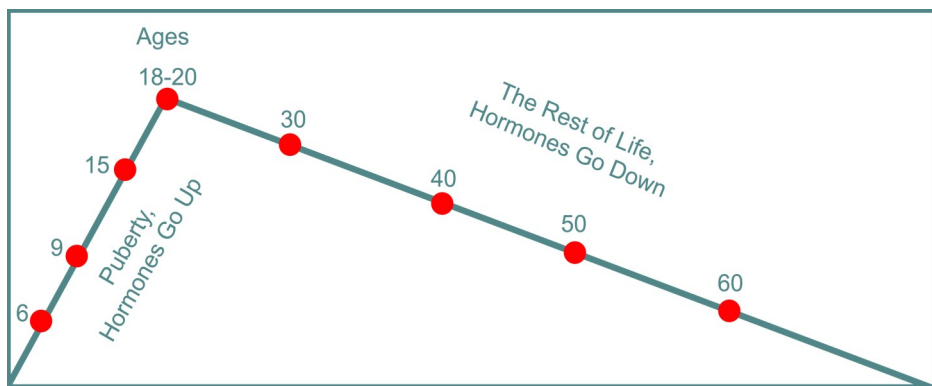
Generally women know very little about the whole process of hormone decline. Once, I went out on the street and surveyed about 30 women. I asked them all what they knew about menopause and one-for-one they said variations of 'It starts around 50, you stop having periods and you start having hot flashes and night sweats. That's it! They had no idea about the rest of the, over 100, *other* symptoms of hormone decline.

But Something Was Wrong...

I started to notice that something was wrong with the 'going through menopause' concept when women, 22-35 years of age would come into my store and complain of experiencing one or more of the symptoms from the pre-menopause/menopause list. But *these* woman were still having regular monthly periods and didn't fit into either of those definitions. I wanted to find out what was causing their symptoms so I began to study the female reproductive system and its hormones. While doing so I learned that female hormones don't start changing at 35-50 years of age, they start changing around 6. They start rising from about 6 years of age and continue to do so throughout puberty. At the end of puberty they start to decline.



I also learned that these hormones perform 100's of other functions in the body than just reproduction. Once I understood this it was clear why younger women were having some of the same symptoms as older women. As you can see on the chart on the next page, hormones only do two things, they go up and they go down...*that's it...nothing else!*



Therefore there are only two definitions that properly describe hormonal changes, 'hormone incline' (during puberty) and 'hormone decline' (starting right after puberty). Not pre-menopause and menopause. They're too late in the life cycle.

Look where they are on the chart above (35-50) and look how long hormones have been declining before then. *A long time!* And by 45 there's already significant internal and external body degeneration.

As hormones decline, internal structures of the body begin to degrade and at some point a woman will begin to feel the effects of that degradation as 'symptoms'. They start out slight and intermittent, like a bit of PMS, a little bloating, fatigue, irritability etc., a day or two before the period starts. But as time goes on, and hormones continue to decline, the PMS gets more frequent and severe until it's going on for two whole weeks before the period. As hormones continue their decline, the symptoms become more frequent, numerous and severe until the women is miserable all month long.

The fact that hormones start declining directly after puberty is not commonly known, younger women, who are just beginning to feel the effects of that decline usually have no idea that their symptoms have anything to do with hormones. Which results in them going from practitioner to practitioner, spending countless hours and thousands of dollars trying to find out what's wrong with them.

Unfortunately, this is what doctors don't know either. They have the same pre-menopause and menopause misconception as everyone else. Therefore they don't consider a woman's symptoms to be caused by hormonal changes until she's around 50. And that's why when women go to their doctor complaining of depression, anxiety, memory loss, mental confusion, fatigue, weight gain, heart palpitations,

sleeplessness, irritability, dizziness, etc., the doctor tries to find some 'physical' reason for the symptoms, and if they can't, they just determine that it's 'all in her head', and either refer her to a psychiatrist (where she is prescribed mind altering drugs, which can, and do, easily cause violence and suicide) or prescribe these drugs themselves.



After learning all this I knew the younger women were dealing with hormonal issues but *they* didn't. So when they complained of what I knew to be hormone decline symptoms, and I would mention 'hormones', they would look at me horrified and say "Oh no, I'm too young for that!" Yet, when they applied a cream containing bio-identical hormones, the symptoms almost immediately disappeared and they felt better. The same as I had when I was 34 and used bio-identical hormones for the first

time.

Our Hormones Don't Decline because We Age, We Age because Our Hormones Decline

From conception to the end of puberty the body is growing, maturing, getting bigger. By the end of puberty it's fully grown and there's no where to go but down hill. The body starts shrinking, getting smaller...aging. And 'aging' is just a polite word for *dying*.

Every living organism on the planet is genetically programmed to grow, reproduce and die. Even humans, and that genetic programming doesn't say, "learn how to use a computer", "get a college education", "learn how to drive a car", "buy a house", or anything similar. It just says "make babies!" The one and only purpose for the human body, from a genetic standpoint, is reproduction, and once the body is no longer capable of reproduction, it's not supposed to be here.

Every living organism also has a genetically built-in life span and a disposal system. All plants, animals, birds, fish, insects, bacteria, etc. Everything lives for a certain amount of time, has offspring and dies. Take salmon for instance. They're born, mature, live out at sea for about 5 years, come back to their place of birth, procreate and die within two weeks.



But what is it that initiates their death? It's hormones. Hormones control every system in the body, so as they decline those systems begin to break down (degenerate). That degradation process is what we call 'aging' and the lower the hormones go, the faster it speeds up.

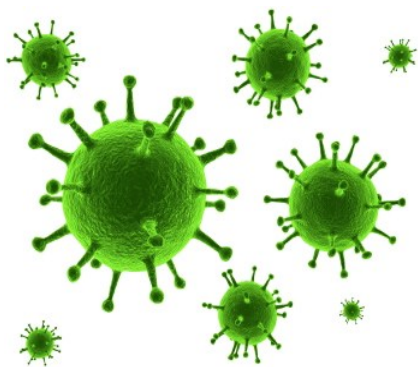
The body is programmed to die from 'natural causes'. Any death that's not man made, like accidents or being killed by another, is actually 'natural causes', like child birth, bacteria, viruses, cancers, fractures, heart disease, parasitic infestations, brain shrinkage, 'old age', etc.

Back in the 15th century, for instance, life expectancy was 30-40 years. That's because one of the things hormones control is the amount of immune cells the body makes. The lower the hormones go, the less immune cells we have. So when viruses and plagues came along, the older people dropped like flies because their immune system simply wasn't strong enough to fight them off.

But as time marched on, science invented drugs, like vaccines and antibiotics, that prolonged life. Today it's not unusual to live to 80 or 90, with some making it to 100 and over. The problem is that the 'quality' of life declines as hormone levels decline. So while we're living longer, the latter part of that life can be very unpleasant because it's often spent being ill, in pain, taking frequent trips to doctors and hospitals, being on medications, the side effects of which cause even more disease and illness, and/or being subjected to a long, lingering death. Below are just a few of the major systems that hormones control and what happens as they decline.

The immune system - as hormones decline we make less and less immune cells. This is why, as we age, the body is more susceptible to illnesses, it takes longer to get over them, and wounds take longer to heal.

The blood system - 80% of the blood vessels in the body are 'capillaries' (definition - the smallest of a body's blood vessels). Look in your eyes, the blood vessels in them are capillaries. They're hair fine. As our hormones decline, they begin to shrink back from the extremities like your head, hands, feet, eyes, skin, etc. This deprives the cells in those areas of oxygen, water and food. As the capillaries begin to shrink towards the center of the body, the hair becomes drier, the color leaves it, it begins to fall out and after a while it stops growing back.



The skin thins, becomes dry and vision begins to change. The hands and feet become colder due to lack of circulation, and the brain, and the whole body, begin to shrink.

Plus, the lower the estrogen, the more smooth muscle tissue builds on the inside of the vascular system which can lead to heart attacks and strokes.



The bones - our bones are in a constant state of 'resorption' (def: the removal and, absorbing back into the body, of old, brittle bone, and the replacement of that old bone with new.) The process should be, one bone cell out and one bone cell in. Estrogen controls the 'old bone out' part of the process and progesterone controls the 'new bone in' part. At some point after puberty, a woman begins to skip ovulation. If she doesn't ovulate, she doesn't make progesterone the second two weeks of her cycle. Estrogen is still telling the body to remove the old bone cells but no new ones are going back in. So it's one out, *none* in. *Not good!*

Estrogen also controls the 'rate' at which the old cells are removed. At first it's, one out and none in. Then it's 100 out and none in, 1,000 out and none in...you get the picture. *This* is how osteoporosis develops, it's *not* a calcium deficiency. This is why a person shrinks in size as they age and why they easily break bones. In fact, osteoporosis accounts for 300,000 hip fractures a year in the US alone. That doesn't include all the *other* bones that people break.



The brain - hormones tell the brain to manufacture 'neurotransmitters', the chemicals that transport electrical energy from one brain cell to another. Without neurotransmitters our short term memory suffers and we find ourselves trying to remember where we put our car keys, what we were just about to say, or our best friends phone number. As time goes on and hormones decline lower and lower, the brain itself actually shrinks and long term memory loss sets in as a condition known as 'Alzheimer's'.

Tissue cells - estrogen causes the production of hyaluronic acid, an abundant chemical in the fluid surrounding cells. This acid is found in brain, skin and mucus membrane cells, and in the top layer of cells of organs and cavities inside the body. It contributes to the flow of fluids in and out of these cells and the growth of new ones. In connective tissue it acts like a 'glue' sticking one cell to the next. It's one of the things that holds connective tissues cells together.



As estrogen declines, we produce less of this acid, so tissue cells 'dry out' and new cell growth slows. You can see this in the skin, it becomes thin and dry, causing blood vessels to become visible. This process is going on **inside** the body as well but you don't see it. The loss of hyaluronic acid is one of the causes of the vaginal tissue losing its moisture and becoming itchy, irritated, sore and dry. Thinning of vaginal tissue can cause bleeding during intercourse and the tissue can actually grow together, along with the vaginal lips, making urination impossible and causing the need for surgery.

The eyes - as hormones decline and the blood vessel's withdraw toward the center of the body, it cuts off nutrition and moisture to the eyes. This causes chronic 'dry eye', the cornea to change shape and soon you need glasses.

There's a tiny group of cone shaped cells at the back of the eye called the 'macula'. These cells are responsible for your central vision. As the nutrition is withdrawn by the lack of blood supply, those cells begin to die and, over time, the central vision is lost. This condition is called 'macular degeneration'.

The joints - hyaluronic acid is found in abundance in joint cartilage and fluid. This acid is a thickish 'goo' like substance that coats the cells of joint cartilage to act as a protective covering. It brings water into the joint fluid and thickens it to cushion them.

As estrogen declines, it leads to a thinning of the joint fluid surrounding them. The lack of hyaluronic acid causes the joint fluid to 'dry up' which allows bones to rub together causing inflammation and a condition called 'osteoarthritis'.



Mood stabilizers - estrogen, progesterone, and testosterone are all mood stabilizers. Low levels of these hormones cause depression, anxiety and irritability.

The depression can be anything from a bit of the 'blahs', to so bad some women just stay in bed all day crying. Depression that bad can, and does cause suicide. The World Health Organization estimates that over one million people commit suicide every year, and it's the second leading causes of death among teenagers.



You can go from a bit irritable to full blown rage. Anxiety can range from 'slight butterflies in the stomach' to *major* panic attacks. All of these can greatly effect your life when they become too intense. They can also effect your ability to work and your relationship with family and friends.

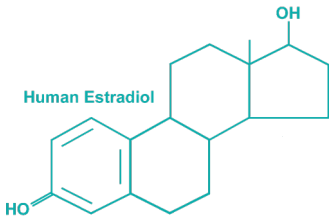
The Truth About Menopause

Like I said, menopause is not a 'time of life' or a 'thing we go through'. It's merely one of over 115 **symptoms** that tell you that your hormones are declining. One of the things that estrogen does is build the bloody lining in the uterus so that a fertilized egg can implant in it and grow. As estrogen declines the lining cannot become thick enough to sustain an embryo. If the embryo doesn't get enough food from the lining it will not develop correctly and the body will spontaneously abort the pregnancy in what's called a 'miscarriage'.

As time goes on and estrogen continues to decline, there is less and less bloody lining each month. This is what causes the periods to become lighter and lighter until there is so little estrogen that no lining can build at all, and that's when the periods stop.



Women should not be jumping for joy at menopause, they should be **freaking out!** Menopause is a 'symptom' that your estrogen is *critically* low. It's so low that you can't even build enough uterine lining to cause a little spotting, AND THAT'S WAY TOO LOW FOR OPTIMUM HEALTH!



Estrogen is the most abundant hormone in the female body. It keeps us young and being 'female'. As it declines we begin to lose our femininity. By the time a woman stops having periods, her estrogen has been declining for over 30 years and the systems it's responsible for have been deteriorating for that long as

well. By menopause there's significant internal and external tissue degeneration and a woman's body deteriorates at an accelerated rate when estrogen is too low to have a period.

I always suggest that women bring their periods back, if they have stopped them, with hormone replacement therapy (with bio-identical hormones). Most women are fine with doing so as they understand the consequences of their hormones being that low. But others think I've lost my mind, and they have no intention of ever having a period again.

At first I was baffled when women refused to bring their periods back. I couldn't understand why they would want to die faster, so I started to survey them and found that those women had had **horrendous** periods. I mean cramps so bad they were in bed for three days, migraines, hemorrhaging, nausea, etc. Then I understood, but what *they* didn't know was that their periods had been like that because they were no longer ovulating and there was no progesterone to prevent the estrogen from over-building the lining the second half of each month, which was what causes their horrendous symptoms.

First of all, the 'goal' of HRT is not to 'have periods'. The goal is to put hormones back to their ideal levels, which was at the end of puberty. Having a period is a 'consequence' of hormone levels being balanced properly. But in the end it's still up to each woman to decide whether they want to put her hormones back to the levels where they will have a period again. With at least *some* hormones, they can slow the aging (dying) process to some degree.

Other women tell me that menopause is a natural part of life and they don't want to mess with it. There again, that's their prerogative, but losing their memory, being depressed, anxious, irritable, their eyes going bad, hair falling out, skin becoming like paper, bones breaking when they roll over in bed (I actually know a woman who broke her back when she rolled over in bed and she was only in her 60's), having strokes, heart attacks, and just dying in general are all 'natural' and 'part of the life cycle', but who wants that? Not me, and not most women!

At this point you're probably wondering how to know if you need hormone replacement therapy. Check out the list of symptoms on the next two pages, if you have a bunch of them, you need HRT.

SYMPTOMS OF HORMONE DECLINE

EMOTIONAL SYMPTOMS	Scalp hair loss
Depression	Facial hair growth
Feeling close to tears	Hair growth in unwanted places
Feeling hopeless	Pimples or acne
Crying easily	Polycystic ovaries
Suicidal thoughts	Fibrocystic breasts
Anxiety or nervousness	Tender painful breast
Panic attacks	Breasts lumps or tumors
Excessive worry	Loss of vaginal moisture
Fixed attention	Vaginal infections
Mood swings	Vaginal itching or burning
Abnormal irritability	Vaginal shrinkage
PMS	Uterine prolapse
Postpartum depression	Uterine fibroids
PHYSICAL SYMPTOMS	Painful intercourse
Chronic fatigue	Bleeding after intercourse
Exhaustion	Bladder infections
Headaches	Bladder shrinkage
Migraines	Urinary frequency
Shortness of breath	Urinary leakage (incontinence)
Heart races or palpitates	Endometriosis
Dizzy spells	Water retention
Unexplained weight gain	Changes in eyesight
Pressure in eyes, neck, shoulders	Dry eyes
Feeling hotter than others	Pressure in sinuses
Heat intolerance	Sinus infections
Hot flashes	Lowered immune function
Low thyroid	Wounds taking longer to heal

SYMPTOMS OF HORMONE DECLINE

Illnesses taking longer to get over	Dementia
Shrinkage in height	Senility
Bone loss	Alzheimer
Osteopenia	MENSTRUAL SYMPTOMS
Osteoporosis	Shorter than 28 day cycles
Nervous system disorders	Periods longer than 7 days
Auto immune disorders	Heavy flow
Lupus	Flooding
Falling uterus	Clotting
Breast cancer	Spotting between periods
Cervical cancer	Breakthrough bleeding
Uterine cancer	Thickened, brownish flow
Vaginal cancer	Painful cramps
SLEEP SYMPTOMS	Miscarriages
Trouble falling asleep	Longer than 28 day cycles
Insomnia	Periods shorter than 3 days
Restless sleep	Periods getting lighter
Trouble staying asleep	Skipped periods
Waking too early	No periods
Excessive dreaming	SEXUAL SYMPTOMS
Nightmares	Decreasing sexual desire
Getting up to urinate	Decreased sexual sensitivity
MENTAL SYMPTOMS	Decreased ability to climax
Mental fog	Foreplay irritating
Mental confusion	No sexual desire
Poor concentration	Inability to climax
Forgetfulness	Painful intercourse
Short term memory loss	Orgasm headache