

Bioidentical Hormone Replacement Therapy

Bioidentical Hormones are all the hype these days. But what makes them different from the synthetic hormones that are usually prescribed by the Gynecologists? Most patients who have had a hysterectomy come to me taking ONLY synthetic estrogens, which not only increases the risks of stroke, heart attacks, and breast cancer but also wreaks havoc in women's bodies.

Estrogen and Progesterone

Estrogen: Estrogens are mainly made by the ovaries and consist of 3 types: estrone, estradiol, and estriol

Progesterone: "progestins" or "progestagens" are synthetic hormones. The word "progesterone" was also used to describe these other compounds despite their many side effects (side effects NOT found in progesterone). These synthetic progestins lack many of the other abilities of natural progesterone. This confusion still exists in the minds of many physicians and writer.

Bioidentical Hormones

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Hormone Replacement Therapy (HRT for short!)

There are 2 types of hormone replacement available on the market today:

1. the synthetic hormones like synthetic estradiol, synthetic progestins – often named “progesterone” in the research studies, but it has nothing to do with the progesterone our bodies make and synthetic testosterone replacement;
2. The bioidentical progesterone, estradiol/estriol/estrone, testosterone, and DHEA and pregnenolone would be the main ones.

What are bioidentical hormones? The chemical structure of the bioidentical hormones is the same as the hormones made by the body. They cannot be patented by any pharmaceutical company as they are a substance found in nature and made from the plants. Just like Essential Oils cannot be patented, the same way bioidentical hormones cannot be patented. The benefits of the natural bioidentical hormones are that the human body recognizes them as its' own hormones and is able to break them down to metabolites via standard ways. Metabolites are the byproducts of the hormones we make or take/apply.

On the other hand, synthetic hormones can be patented and sold to the public. They are only similar to natural (endogenous) hormones in the structure, but they also have a few chemical side chains that render their structure unique and patentable. Unfortunately, the human body does not recognize them the same way it recognizes bioidentical hormones and cannot break them down to metabolites that are easily excreted by the body. This may cause quite dangerous side effects and increase the risks of breast and ovarian cancers, blood clots, deep vein thrombosis, and stroke to name a few.

For a long time, it was considered that declining levels of estrogen cause osteoporosis (brittle bones) and heart problems in women, so a lot of women were put on synthetic estradiol patches, creams, and pills. Many women had their uterus (and a lot of times ovaries) surgically removed due to heavy periods, endometriosis (overgrowth of the endometrial uterine lining), ovarian cysts (PCOS) or fibroids.

The "standard" options for treatment after the patient has undergone such a surgery would be the following:

Intact Uterus, but Ovaries Removed:

Synthetic Estradiol (estrogen) and progestin (synthetic progesterone) replacement would be initiated. Estrogens grow the uterine endometrial lining... Without progesterone, the lining would continue growing without a limit and could cause endometriosis and/or uterine cancers.

Uterus Removed (with or without ovaries removed): ONLY synthetic estrogen is prescribed. Synthetic estrogen replacement would prevent premature menopause that patients experienced without uterus – or – uterus and ovaries.

To sum up: Uterus – Estradiol and Progestin (synthetic progesterone) replacement. No uterus – ONLY Estradiol (synthetic).

The logic is a bit lopsided and lacks logic: somehow, ONLY estrogen is needed to by the whole body to prevent premature menopause, but in reality, the ovaries produce estrogens, progesterone, and even testosterone!

Progesterone:

After one of your ovaries releases an egg, your progesterone levels should rise. Progesterone helps the uterus thicken in anticipation of receiving a fertilized egg. If it's not thick enough, the egg won't implant.

Symptoms of low progesterone:

- headaches/migraines
- mood changes
- anxiety
- depression
- Irregular cycle
- Endometriosis
- PCOS
- Fibroids
- Miscarriages in the first trimester

Low progesterone will skew the progesterone/estrogen ratio and you may experience estrogen dominance.

The common symptoms of estrogen dominance:

- weight gain
- decreased sex drive
- mood swings
- Fibroids
- gallbladder problems
- depression
- irregular menstrual cycle
- heavy bleeding
- breast tenderness
- fibrocystic breasts

4 Main Causes of Estrogen Dominance

1. Gut dysbiosis
2. Impaired detoxification of estrogens by the liver (Vitamin Bs and Magnesium deficiencies, etc.)
3. Xenoestrogens (environmental estrogens)

5. Prescription estrogens

Let's see what are the possible side effects of synthetic estrogen replacement without progestins!

- Increased risk of breast cancer
- dizziness.
- abdominal bloating.
- vaginal discharge.
- spotting or irregular vaginal bleeding.
- loss of libido.
- headache.
- and more...

Synthetic progestins are almost identical to natural progesterone in the chemical structure, nevertheless, the side effects could be significant, possibly, due to the body's inability to break down the synthetic chemical structure to separate molecules and to take them out of the body, i.e. detox them. Progestins are not progesterone, progestins may behave in a different way with progesterone receptors in the human body. The [Women's Health Initiative](#) showed:

“WHI results in 2002 found that post-menopausal women taking combination (estrogen and progestin) hormone therapy for menopause symptoms had an increased risk for breast cancer, heart disease, stroke, blood clots, and urinary incontinence. Although women using combined hormone therapy had a lower risk of fractures and colorectal cancer, these benefits did not outweigh the risks. As a result, many women stopped taking hormone therapy, reducing their risk for breast cancer. One of the most important outcomes of the WHI was the sharp decline in breast cancer in 2003 after the WHI results

were released in 2002.6 Today, the FDA urges women who take hormone therapy to take the lowest helpful dose for the shortest amount of time.”

The Women’s Health Initiative study did not study bioidentical progesterone or bioidentical estrogen.

Who may benefit from the hormone replacement?

First of all, women who have low levels of some or all above-mentioned hormones may benefit from

Low hormones signs include:

- Night sweats
- Brain fog
- Vaginal dryness
- Loss of interest in sex
- Loss of energy
- Fatigue
- Muscle wasting
- Weight gain
- Mood changes
- Forgetfulness
- Hot flashes
- Insomnia

Who is not a candidate for Bioidentical Hormone Replacement:

- breast cancer
- endometrial cancer
- liver disease
- blood clots
- Stroke

Many side effects get better as the body adjusts to the new level of hormones. Nevertheless, too much of a good thing maybe not good. It is important to do necessary lab testing to follow the levels of hormones and to increase or decrease the dose depending on the symptoms and the lab levels.

The Common Side Effects:

- Weight gain
- Blurred vision
- Bloating
- Unwanted facial and chest hair in women
- Headaches
- Breast tenderness
- Mood swings
- Acne
- Cramping
- Fatigue

Common Hormones Prescribed within the Conventional Medicine Paradigm

Conventional healthcare providers will most often than not prescribe the synthetic hormones such as Premarin, Provera, and Prempro to improve the bone health of menopause women or “to regulate heavy menses” of peri- and pre-menopause women.

Sleep medications are often “needed” too as women who are going through the rough times during peri-menopause and menopause often have insomnia and anxiety. Anti-depressants serve the double-purpose of relieving the symptoms of depression and helping to fall asleep. Unfortunately, if you decide to stop anti-depressants, you may experience severe withdrawal side effects that could be preventing you from functioning and enjoying your life. The symptoms range from mild nausea to severe debilitating headaches, etc. Never stop the anti-depressants abruptly without any healthcare supervision.

All the above-mentioned drugs are substances that are foreign to your body and the side effects can be unpredictable.

- **Premarin** is made of estrogens derived from the urine of pregnant horses (mares) – “Pre-Mar-in.” Possible side effects include, but not limited to fluid retention, gall stones, migraines, high blood pressure, impaired blood sugar regulation, and pre-diabetes, increased risk of heart attack, stroke, breast and uterine cancers, uncontrolled vaginal bleeding, etc.
- **Provera** (medroxyprogesterone) is a synthetic progestin. This type of progestins can be also found in oral contraceptive pills, but it cannot be found anywhere in nature; it is foreign to human body. The synthetic progestins increase the risk of breast cancer and blood clots, as well as add to the weight gain.
- **Prempro** is just a mix of Provera and Premarin and usually is prescribed to women who had an oophorectomy (ovaries removed), but still have an intact uterus.