

## **Introduction:**

**In 2009, physicians and scientists combined their efforts to thoroughly review 196 studies that were published in medical journals to determine whether or not bio-identical hormone therapy was safe and whether or not it could offer benefits that many of the conventional hormones lacked. Their findings stated that bio-identical hormones do produce some distinctly different and often opposite effects as those produced by the synthetic hormones.**

**“With respect to the risk for breast cancer, heart disease, heart attack, and stroke, substantial scientific and medical evidence demonstrates that bio-identical hormones are safer and more efficacious forms of HRT than commonly used synthetic versions.” Certainly, more studies are needed to further clarify the differences between the bio-identical and synthetic hormones. (Holtorf. The Bioidentical Hormone Debate. Postgraduate Medicine: Volume 121:No1.)**

Over the past years 30 years, I have been privileged to serve thousands of women as they transition through the perimenopausal years to the menopausal state. The questions they ask deserve to be answered; their concerns need to be addressed. Sally is not a patient. Rather her questions reflect the questions that menopausal women frequently ask.

**Sally: What is happening to me?**

**Arlene: Your body is no longer producing the hormones it once did.**

Throughout our life we undergo changes. Some of the most profound changes that occur in our bodies are caused by the fluctuation of our hormones. Think back to when you began your menstrual cycles and the tremendous changes that occurred in your body at that time. As we age, we expect the ovaries to eventually stop functioning. Once we have not experienced a menstrual flow for 12 months, we are menopausal. A period of mood swings, hot flashes, sleep disturbances and lack of clarity of thought known as perimenopause occur before menopause and may last for several years. It is common for these symptoms to continue well into the menopausal years.

**Sally: What do I do about it?**

**Arlene: Either do nothing and endure it or replace the hormones your body no**

**longer produces.**

There are multiple options for today's woman. Certainly, some women do not need hormones to manage these symptoms; others are afraid to take them. Some prefer non-prescription herbal products that may ease the symptoms. Others will use conventional hormone replacement therapy. Then there are those who will choose prescription compounded (bio-identical therapy) also known as "natural therapy".

**Sally: Should I take these hormones?**

**Arlene: You must learn about menopause and make the decision that will work for you.**

Many women in perimenopause and even well into the menopausal years find the symptoms so disturbing that they want help. Others want to maintain their best quality of life and believe that hormones will help them to achieve that goal. More and more studies are being published that support the theory that, started early in menopause, hormone therapy can help a woman to preserve healthy hormonal function, including sexual function and pleasure.

**Sally: What about the "Women's Health Initiative Study" that was published in 2002? It said hormones were bad for you and even caused cancer. Is that true?**

**Arlene: I know of that study. When it first came out it had us as concerned as you are. But in fact, now that it has been looked at more closely, it seems that the findings did not apply to younger women who take hormones, or who start them at a younger age. Many of the women in the study already had the disease that were blamed on taking the hormones. Newer studies are showing us that the benefits of taking hormones can outweigh the risks.**

The "Women's Health Initiative Study" was a very large study. Evaluation of those findings are ongoing. We do know that the women who were studied experienced increased strokes, heart attacks, and blood clots. They also experienced an increase in breast cancer. These increases were reflective of a statistically small number of women. The study also found that there was a decreased incidence of colon cancer and bone fractures. There was no difference in the overall death rate between women who did take and those who did not take hormone replacement therapy. This study has been criticized because it did not look at the possibility of hormone supplements being disease preventive. The average age of the women who participated in this study was 63 years. Many already had cardiovascular disease and over half of the women were current or former tobacco users. Many of the patients were obese. These factors increased their risk for the disease states indicated in this study. Current studies suggest that when women begin hormone therapy earlier in menopause or even in perimenopause, there may well be protection from heart attack, stroke, Alzheimer's disease, blindness associated with macular degeneration, improved urinary bladder function and much less difficulty with sexual intercourse because the vagina is well lubricated and moist. Often libido (sex drive) improves.

**Sally: What is the difference between conventional and bio-identical hormone therapy?**

**Arlene: Conventional hormones may or may not be anything like what your body**

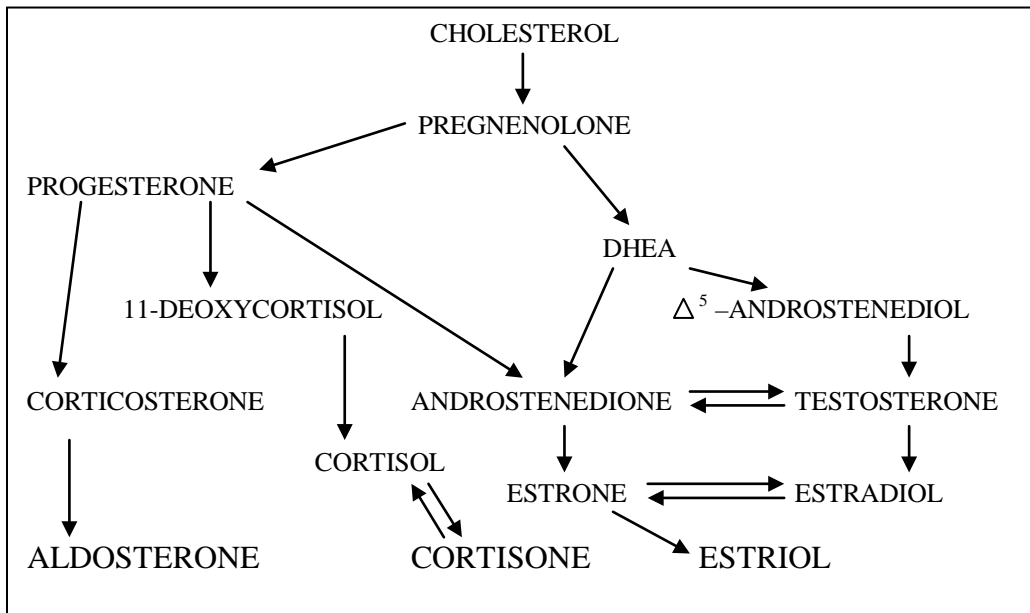
**created. Bio-identical hormones are just what they sound like, identical to the ones your body used to make.**

Conventional hormone therapy is comprised of medications that, by in large, have been developed and patented by pharmaceutical companies. Many of these hormones do not naturally occur in a woman's body. They are "foreign substances". There is the issue of how these hormones will then interact with the body on the cellular level. Bio-identical therapy is comprised of hormones that perfectly match the molecular configuration and function of those your body used to make.

**Sally: Why is this important?**

**Arlene: Hormones that do not match your own affect your body differently and do not do the same job that your hormones were able to do.**

Our bodies make all of our sex hormones from cholesterol. Many physiology books contain a diagram of the hormonal cascade. This diagram reflects how your body can change one hormone into another.



In other words, your body is the architect using raw materials to create what your body needs. If we give you hormones that the body cannot recognize it makes this task impossible. Additionally, some of the hormones used in conventional therapy attach to your cells more vigorously than do the hormones that your own body manufactures. Long term effects of these higher dose and more potent estrogens and progestogens are still being studied with special concern focusing on breast tissue and on the cardiovascular system.

**Sally: My girl friend refuses to take any conventional hormones and I have taken many of them and have not done well. Would we be candidates for the "natural" or bio-identical therapy?**

**Arlene: Yes, as long as you are carefully monitored.**

Each woman must be individually assessed to best determine her needs. Most women, I believe, should be offered a choice of menopausal support. If a woman feels

significantly better physically and emotionally with one form of treatment as compared to another and is carefully monitored, the quality of her life becomes the issue, not the form of support.

**Sally: Where do I get these hormones?**

**Arlene: You need to find a provider who knows how to prescribe bio-identical hormones.**

Ask your physician or health care provider if they are familiar with bio-identical hormones. If they are not, they may refer you to someone who has expertise. As the medical community becomes more familiar with the principles of bio-identical therapy, there has been an ever-growing acceptance and support of your right to make a choice regarding your therapy. There are several courses available for physicians and other prescribers designed to familiarize them with the principles of prescribing the therapy.

**Sally: Do I take my prescription to any pharmacy?**

**Arlene: No. You need to find a good compounding pharmacy that actually custom mixes the therapy for you.**

Unlike most prescription drugs, bio-identical hormones are highly personalized. A compounding pharmacy, with special training and equipment, can create custom formulas for your therapy based on the prescription written by your provider. The only place you will find a full regimen of bio-identical hormones is at a compounding pharmacy. Compounding pharmacists have been specially trained to use the raw materials; combining them in such a way that they will be compatible with your body and in compliance with what has been prescribed. But be careful, not all pharmacies are the same. Some compounding pharmacies adhere to extremely strict protocols and others do not. This is one of the greatest criticisms of compounded bio-identical hormones. You should look for a compounding pharmacy that maintains strict quality controls and regularly tests their compounds for accuracy and potency with an independent laboratory. Your therapy will only be as good as the compounding pharmacy you choose.

**Sally: How long do I take the therapy?**

**Arlene: As long as you need them.**

Whether you are taking conventional or compounded therapy, the answer is the same. Your needs should be assessed on an individual basis. If all is going well, we generally do this assessment on an annual basis. As a woman ages, the doses of her hormones may be decreased.

**Sally: How do you know that it will work for me?**

**Arlene: Every woman is different.**

Most of the women who try the bio-identical therapy are very happy with the results. You must remember that you are not making a long term commitment. If it works for you, you will know it. Many providers are becoming more enthusiastic regarding bio-identical therapy as they see the benefits that their patients are reaping.