Preparing for the next phase:

An informational and experiential workshop on physical, emotional and spiritual aspects of menopause.

Presented by:

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We have all been taught through social conditioning that only the medical experts know about good health care. In fact, health information has been passed from one generation of women to the next for centuries, and we believe we all have valuable information to share through our experiences and research.

—Women's Health Collective brochure

Some Implications for the Workplace

- What would happen to our workplaces and our economy if female workers all quit coffee?
- There is unspoken pressure on working women to "take a pill" to get rid of symptoms that might interfere with functioning at work. For instance, what could you do if you weren't getting enough sleep because of night sweats: could you come in later? Take it easy at work?
- ► There is unspoken pressure on low income and poor women to "take a pill." Alternative practitioners are not covered by the medical plan; organic foods, herbs and supplements are very expensive.
- How well does your workplace accommodate women's organic needs (e.g. PMS, childrearing, menopause)?
- How would you like to change your worksites so that women could go through our natural cycles and still have a job? (Wish list)

Physical Aspects of Menopause: Informational Outline

Complaints (Symptoms)

- ► The only complaints associated with menopause that are directly related to hormones, and which can be alleviated by hormone replacement therapy (HRT) are hot flashes and vaginal dryness.
- Many of the other associated complaints (depression, emotional instability, sleeplessness, aches and pains, etc.) are exaggerations of conditions that already exist, and can usually be dealt with by alternative methods (diet, supplements, lifestyle, herbs, etc.).
- ► The complaints associated with menopause, including hot flashes, eventually cease all by themselves. (Some complaints are actually associated with aging in general, not specifically with menopause.)
- Doctors can be well meaning individuals but are not trained in alternative treatments. On the other hand, pharmaceutical companies spend millions of dollars marketing to them. Doctors are being taught that menopause is an estrogen deficiency disease which can be "cured" by prescribing. So effective is this marketing strategy that doctors are now prescribing hormones to non-symptomatic pre-menopausal women.
- Osteoporosis is a process that starts long before menopause, but the decrease in estrogen levels of menopause triggers increased rate of bone demineralization. Osteoporosis is only found in civilized countries. It is entirely preventable by diet and exercise.
- Eight to ten pounds of weight gain is normal and actually beneficial, as fat tissue continues to produce estrogen.
- Our society has a lot of problems about middle aged women. Many of us have been led to believe that we as individuals have the problem, rather than society. The huge numbers of women now reaching their mid-40s will change society's perception and treatment of older women.

What is Menopause

- rechnically, menopause is the cessation of menstruation. However, in common usage we use the word menopause to describe the whole period of time that usually begins with menstrual changes and ends after menstruation has ceased for one year.
- ► The average age that periods stop is 51.
- ▶ Under 40 is considered premature menopause, and is usually genetically determined but can also be the result of disease or stress.

- Surgical menopause is the result of hysterectomy and is usually accompanied by severe physical and emotional symptoms.
- ► The four hormones associated with the menstrual cycle are: estrogen, progesterone, follicle stimulating hormone (FSH) and luteinizing hormone (LH).
 - Day 1: estrogen is low, which stimulates FSH production.
 - Day 5: FSH released into bloodstream stimulates estrogen production.
 - Rising estrogen levels cause an egg to ripen, FSH levels to drop, and LH to be produced.
 - Mid-cycle: high LH levels cause ovulation
 - The egg moving into the Fallopian tubes stimulates progesterone production.
 - Progesterone causes the uterus to prepare for conception.
- ▶ If conception doesn't takes place, estrogen and progesterone levels drop, and the uterine lining is shed (menstruation).
- In menopause, although there is still a certain amount of reproductive-type estrogen being produced, levels become too low to stimulate an egg to ripen. Therefore, FSH levels in the blood remain high. High levels of blood FSH indicate that a woman is beginning menopause.
- ► Cessation of menstruation can be abrupt, gradual (periods get lighter and lighter), or irregular (fluctuations).
- Abnormal conditions which indicate a need for professional advice include hemorrhage, lengthy staining outside of the menstrual period, very frequent periods (every other week or every 2 weeks), bleeding after heterosexual sex, bleeding after menstruation has stopped for a year.

Hormone Replacement Therapy (HRT)

- There are three types of estrogen: estradiol (the estrogen produced in the ovaries and involved in the reproductive cycle; the type used in HRT); estrone (postmenopausal estrogen, produced in the ovaries, adrenals and fat tissues and unable to support reproduction); and estriol, a weak form not associated with cancer and the type usually prescribed by naturopaths.
- ► Unopposed estrogen is now mostly used with hysterectomized women. Sequential estrogen/progestin maintains bleeding. Continuous combined estrogen/progestin: new, still being tested (on us).
- Estrogen
 - Can produce a wide range of "side effects" ranging from mild discomfort to cancer.

- Is now indisputably recognized to increase the risk of getting endometrial cancer. Risk increases by 6 times; after taking for 5 years, risk increases by 15 times. Endometrial cancer is not detectable by PAP smear; a biopsy must be performed. Early detection: can be "cured" (i.e. hysterectomy, a "routine procedure").
- Might reduce the risk of heart disease. However, the studies indicating this are being challenged.
- Studies relating estrogen to breast cancer are still inconclusive, but so far indications are that it might increase risk by 2½ times.
- Osteoporosis: not a symptom of menopause. There are indications estrogen can slow bone loss, but if estrogen is stopped, bone loss returns at a more rapid rate than if it had never been taken. Therefore, taking estrogen to prevent osteoporosis is a lifelong commitment.

• Environmental considerations:

- Premarin (synthetic estrogen) is obtained from the urine of pregnant mares. These horses are kept continually pregnant, locked up in stalls, mistreated; their foals are taken away (turned into pet food) so that they can be impregnated again. They are not considered to be living beings but simply a urine factory.
- Synthetic estrogen taken by mouth, the most common form (used in both birth control and HRT) is coated so that it won't break down. A woman on estrogen excretes lots of estrogen in her urine. What is the implication of all this estrogen being dumped into the water system? David Suzuki and others are connecting it to cancers and reproductive inabilities in vast numbers of marine life.

Progestin

- Synthetic progestin is similar enough to natural progesterone that it fools the body's receptor cells. These become filled up with the progestin, which can only fulfil a few of progesterone's functions. Therefore, taking progestin actually creates a progesterone deficiency.
- Adding progestin to estrogen reduces the risk of endometrial cancer. However, it takes away any protection against heart disease that estrogen might provide. In addition, it causes menstruation to continue. Considering that menstruation uses a great deal of the body's energy resources, what are the implications of a woman continuing to menstruate into her 60s?
- The long term risks of synthetic estrogen/progestin are not known.

► If the benefits of HRT outweigh the risks

 HRT should not be taken merely to promote general well being but only to relieve specific hormone-related problems, such as severe hot flashes or hyperplasia.

- The lowest possible dose.
- Regular D&Cs
- Find out what else is in the pill (vitamins, tranquillizers, testosterone?)
- Discuss oral (high dosages needed; might affect liver), transdermal (possible allergic reaction), vaginal cream (can be transmitted to male sexual partner), or patch.

Alternatives to HRT

There's lots of info available, but you have to look for it, and you have to be willing to make a commitment of time, effort, and sometimes money in order follow an alternative regimen.

Diet

- Caffeine, sugar, alcohol, hot drinks, spices, MSG, smoking, all increase hot flashes.
- Caffeine, sugar, salt and high protein consumption cause calcium to be excreted, increasing the risks of osteoporosis.
- The current consensus is that the optimum diet is high in whole grains, fruit and vegetables, moderate in protein, low in whole flour products and fat, and avoids caffeine, refined sugar and flour, and junk food.
- A high calcium diet is often recommended to prevent osteoporosis. However, dairy products are also high in protein, which causes calcium excretion. A variety of sources, including leafy greens and tofu, is preferred.
- Many foods are high in non-cancer-related plant estrogens, particularly tofu and other soy products, vegetables in the broccoli/cauliflower/cabbage family, and grains such as corn, oats, barley, wheat and rye.

Vitamin and mineral supplements

- Calcium/magnesium citrate, gluconate, or chelate
- Vitamin B complex for nervous tension
- Flax oil (1-2 tsp per day), vitamin E (800 IU) and evening primrose oil are effective against hot flashes and vaginal drying. Avoid synthetic vitamin E, as it has a different molecular structure and doesn't work as well as vitamin E from natural sources.

Herbs and other treatments

- A variety of herbs can help with menopausal complaints. Consult a good book (such as Susan Weed's) or an herbalist.
- There is a new natural non-synthetic plant-derived progesterone cream prescribed by naturopathic doctors. They can also prescribe natural non-

synthetic estriol. These are claimed to deal with menopausal complaints such as hot flashes in a gentle, natural way. So far, these are claimed to have no known side effects. Long term effects are not known.

- The best preventive against vaginal drying is regular orgasm, with or without a partner. When having heterosexual sex, take lots of time to allow lubricant to be secreted, and/or use lubricant such as K-Y (do not use vaseline; it is drying). There is a new wild yam extract vaginal creme available in health food stores.
- Hormone balancing herbs
 - Chaste berry: works on pituitary gland, nourishes ovaries, reduces hot flashes
 - Dong quai: yin tonic. Yin gets used up in women's life roles of giving, caring for
 - False unicorn root: ovarian tonic
 - Licorice
 - Squaw vine
- Estrogenics (supply raw materials for estrogen making)
 - Acidophilus: needed for estrogenic process.
 - Red clover
 - . Sage: cools hot flashes, dries up sweats
 - Hops
 - Black cohosh: good for hot flashes
 - Alfalfa
 - Licorice

Progesteronics

- Wild yam (strongest source)
- Chaste berry (second strongest source)
- Sarsaparilla
- Yarrow
- (Licorice)

Nervines

- Skullcap
- St. John's wort: good for depression and irritability
- Motherwort
- Hawthorne: prevents palpitations and heart disease
- Hops
- Black cohosh

Make a mixture of 1-2 hormone balancers, 1-2 estrogenics and 1-2 progesteronics (plus 1-2 nervines if needed). Make tea from this mixture: steep 1 tsp per cup of boiling water, and drink during the day and evening.

Exercise

- Weight bearing exercise can not only prevent osteoporosis but reverse bone loss in women of any age.
- The younger you start, the better.
- Weight bearing exercise includes walking, running, weight training. Housework can be weight bearing exercise.
- All forms of exercise contribute to maintaining optimum health and reducing stress
- Aerobics might contribute to hot flashes. More relaxing types of exercise might be more appropriate.

Stress reduction

• Relaxation tapes, breathwork, yoga, meditation, counselling: all help a woman go through this profound change.

Support

- Read, share, talk.
- Join a support group. This is a big help in dealing with the psychological aspects of aging and menopause, as well as trading information. The Women's Health Collective has a support group, and there are various others around Vancouver. The Women's Health Centre at Women's Hospital might be a resource (but their groups are medical-model based).

Three Recipes

& Essence oils for hot flashes

Sessence oils for sweats

Oil	Drops	Oil	Drops	
Clary sage	10	Grapefruit	10	
Geranium	11	Lime	10	
Lemon	7	Sage	5	
Sage	2	Thyme	5	
Add essence oils to 2T vegetable oil.		Add essence oi vegetable oil.	Add essence oils to 2T vegetable oil.	

- Add 5 or more drops of hot flashes or sweats essence oils/vegetable oil blend to a lukewarm bath. Soak for 20 minutes
- Massage yourself with up to ¼ cup of the blend. Oil should soak right in.

Mineral Herb Vinegar

Necessary herbs	Optional herbs	Optional flavourings
horsetail comfrey	chickweed dulse	garlic [†] ginger (warming) basil
kelp nettles dandelion root & leaf	hijiki oatstraw plantain	oregano rosemary (warming)
	^	dill

- Use unfiltered apple cider vinegar.
- Add a good handful of each herb (less of kelp and dandelion) to a 4 litre jar. Fill with apple cider vinegar.
- Let sit for 4 weeks, shaking jar from time to time.
- Use in salads or take a teaspoonful before meals.

This Is Menopause!

Kundalini Meditation

Sit or lie down in a private, safe space.

Bring all your attention to your breath. As you breathe out, imagine waves flowing out of you with your breath. Breathe out waves of water. of energy, of color, of sound. Allow these waves to flow out of you. Notice where you are tensing, pushing, trying to make the waves happen. And let go, let the waves flow out easily with your breath. Feel the gentle pulsations of the waves deep inside yourself. Feel every cell of your being pulsing peacefully and joyfully with these waves.

When you are ready, begin to draw red vibrations in with your inhalation. Envision yourself filling up with glowing, sparkling, swirling, hot, steaming red. Feel fast spirals of red boiling inside; feel slow vortices of red churning inside. Then breathe out and feel the red flowing out of you in waves. Dissolve into the waves as you breathe out.

With each inhalation, increase the intensity, sharpen the sensation of red: let it be hotter, richer, deeper, more vivid, more consuming. Inhale sun-ripened tomato flesh, sweet cherry juice dribbling down your chin, a sudden gush of menstrual blood blossoming on your clothes. Inhale the seething red sun as it sets into a heaving red sea. Inhale the essence of red roses. Inhale the color of strawberries, the scent of raspberries, the sensation of red satin. Inhale red.

Then breathe it all out. Pause. Feel the emptiness.

Inhale red. Say, out loud or silently: "Sometimes I get upset inside." Blow out any remaining air as though you were blowing out a candle. Pause in the emptiness. Breathe in red and say it again: "Sometimes I get upset inside." Blow. Pause. Inhale. "Sometimes I get upset inside."

Blow, pause, inhale, and say, in big red letters: "Sometimes I get angry." Blow. Pause. Inhale. "Sometimes I get angry." Blow. Pause. Inhale. "Sometimes I get angry."

Exhale forcibly. Pause in the emptiness. Inhale red. Say, with passion: "Sometimes | feel furious." Again: blow, pause, inhale, and say: "Sometimes I feel furious." Out, quiet, in, with intensity, say: "Sometimes I feel furious."

Exhale strongly, pause, inhale bright red, yell: "Sometimes I am enraged." (Three times.)

Blow hard, rest, inhale fully, and say: "Sometimes I want to scream, and kick and beat my fists." (Three times.)

Exhale, wait, inhale red. As you inhale, say, out loud or silently: "Sometimes I have very sexual thoughts." Breathe out, pause in the emptiness; breathe in red and say it again: "Sometimes I have very

sexual thoughts." Exhale, pause, inhale, and say it again: "Sometimes I have very sexual thoughts."

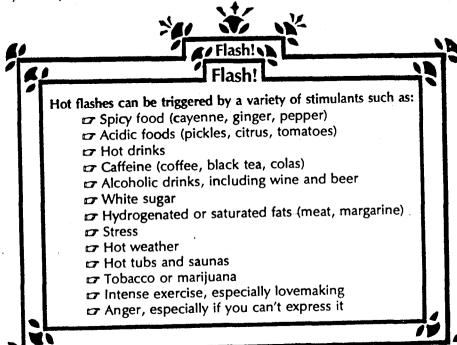
Blow, rest, inhale velvet red, and acknowledge: "Sometimes I only want to think about my pleasure." Breathe out and pause. Inhale satin red and say: "Sometimes I only want to think about my pleasure." Empty your lungs and wait a moment before you inhale lipstick red and say, once more: "Sometimes I only want to think about my pleasure."

Breathe out. Rest. As you inhale blood red say: "Sometimes my entire being is nothing but waves of sensation." Blow, pause, breathe in tropical sunset red and say, "Sometimes my entire being is nothing but unbounded waves of sensation." Empty, wait, inhale the fresh red petals of a rose and say: "Sometimes my entire being is nothing but waves of sensation."

Exhale, sighing deeply. Pause.

Breathe slowly in and out for three breaths. Let the air you breathe be crystalline: clear, sharp, compelling. Let your third inhalation be deeply nourishing, your third exhalation completely freeing. Pay special attention to the energy in your root chakra (lower pelvis or sitting area).

When you are ready, open your eyes. Get up. Stretch. Record your impressions in words or colors.



Finding the Calcium in Vegetarian Foods

Popumo foods Popu	Finding the Calcium in Vegetarian Foods						
Tofu, firm (made with calcium)	Food sources	amount	1		your score		
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FOOD SOURCES OF CALCIUM (continued)

FOOD	AMOUNT	CALCIUM (APPROX.)
Nonfat dry milk powder	3 tbsp (45 ml)	280 mg
Nonfat yogurt (plain)	1 cup (235 ml)	450 mg
Low-fat yogurt (plain)	1 cup (235 ml)	415 mg
Low-fat cottage cheese (2% fat)	1 cup (235 ml)	155 mg
Part-skim ricotta cheese	1/2 cup (120 ml)	335 mg
Part-skim mozzarella	2 oz (56 g)	365 mg
Full-fat milk products		
Whole milk (3.5% fat)	1 cup (235 ml)	290 mg
Whole-milk yogurt (plain)	1 cup (235 ml)	275 mg
Swiss cheese	1 oz (28 g)	270 mg
Processed Swiss cheese	1 oz (28 g)	220 mg
Cheddar cheese	1 oz (28 g)	205 mg
Processed American cheese	1 oz (28 g)	125 mg
Ice milk (hard, not soft-serve)	1 cup (235 ml)	175 mg
Ice cream (regular, 10% fat)	1 cup (235 ml)	175 mg
Ice cream (rich, 16% fat)	1 cup (235 ml)	150 mg
Other calcium-rich foods		
Almonds	1 oz (28 g)	75 mg
Broccoli (boiled)	l cup (235 ml)	180 mg
Corn tortilla	1	40 mg
Great northern beans (boiled)	1 cup (235 ml)	120 mg
Kale (boiled)	1 cup (235 ml)	95 mg
Navy beans (boiled)	1 cup (235 ml)	130 mg
Pinto beans (boiled)	1 cup (235 ml)	80 mg
Tofu (soybean curd)	¹ / ₂ cup (120 ml)	130 mg
Canned jack mackerel		
(including bones)	1/2 cup (120 ml)	. 230 mg
Canned salmon (including bones)	3 oz (84 g)	190 mg
Canned sardines (including bones)	1 oz (28 g)	85 mg

For most people, low-fat and nonfat dairy products are better choices than full-fat products. See Chapter 14.