Controversy Surrounding Estrogen Therapy

There are alternatives to alleviate menopausal symptoms.

by Ilona Abraham, M.D.

Estrogen replacement therapy (ERT), once thought to be the "magic" treatment for menopausal symptoms, has become controversial because there are serious side effects that no woman should ignore: breast cancer, endometrial or uterine cancer, blood clots, and nausea. Rightfully so, women are confused about whether to take ERT or not. As a physician, I was confused as well. However, after repeatedly examining the data, I arrived at the same conclusion: the only option that made sense was a natural one. Studies have shown that certain plant estrogens are being used successfully and without adverse side effects.

Thousands of women in this country begin menopause each year. As more baby boomers move into their early 50s, how to address menopausal symptoms has become an issue of great concern. Approximately 20% of women in the U.S. go through menopause without significant problems. Others experience one or more of the following: hot flashes, flushing, night sweats, vaginal dryness, lack of sex drive, mood swings, depression, and susceptibility to osteoporosis and heart disease.

In fact, Sarah, a 50-year-old woman, visited my office a few months ago; she had entered menopause and was experiencing all the characteristic symptoms. She had read literature regarding the benefits and risks of estrogen replacement therapy, but she was still undecided. She wanted to be free of the unpleasant menopausal symptoms, but she did not want to risk the possible side effects of blood clotting or cancer.

Serious Side Effects of Estrogen Replacement Therapy

It appears that in the pursuit of profits, studies have been ignored by the medical/pharmaceutical industries regarding the serious effects of estrogen use and cardiovascular disease. Many studies indicate that estrogen has been a significant factor in heart disease, and that deaths from strokes were 50% higher among women who took estrogen (Lee 1996a). Studies reveal that high doses of estrogen can result in blood clotting. Reports show that certain high-dose estrogens can cause hypercoagulability, where the blood has a tendency to clot, increasing the risk of heart attack and stroke. For women who smoke or who...
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already have clogged arteries, even moderate doses of estrogen may increase the risk of blood clotting (Beckham 1995). Dietary and stress factors also play crucial roles in coronary disease, and these should not be overlooked (Sellman 1996).

Furthermore, there is growing evidence connecting high estrogen levels with breast, uterine, and ovarian cancers. Dr. Graham Colditz, Harvard University, stated that unopposed estrogen (estrogen levels that are not balanced with progesterone) is responsible for 30-35% of breast cancer cases. Some experts think this percentage is even higher. It is generally believed that the only known cause of endometrial cancer is unopposed estrogen (Lee 1996a). Synthetic hormones are also linked to cervical cancer. In addition, because hormones control skin pigmentation, women taking estrogen have a higher risk of developing melamomas (Neil 1994). Dr. Lee warns: "We will soon regard making estrogen the key ingredient in breast cancer growth replacement as a major medical mistake" (Lee 1996b).

Sarah, my patient, had heard about Remifemin. I told her that although Remifemin has become popular as an alternative to hormone replacement therapy, but only if they are eaten in conjunction with other all-natural formulas containing additional ingredients that are more comprehensive in addressing menopause.

Another source lists the use of Angelica for menopausal symptoms. Premenstrual syndrome, allergies, and smooth muscle spasm. Predominantly regarded as a female" remedy. Angelica has been used to alleviate dysmenorrhea (painful menstruation), amenorrhea (absence of menstruation), metrorrhagia (abnormal menstruation), menopausal symptoms (especially hot flashes), and to assist in a healthy pregnancy. It also has been used to address abdominal discomfort, anemia, injuries, arthritis, migraine headache, and many other conditions (Duke 1985; Zhu 1987).

Plant estrogenic substances (phytoestrogens) are components of herbs historically used for restoring a woman’s hormonal balance. Angelica is used to address conditions with either high or low estrogen levels. "When estrogen levels are low, phytoestrogens exert some estrogenic activity; when estrogen levels are high, phytoestrogens reduce overall estrogenic activity. This alternative action of angelica phytoestrogens is probably the basis of much of the plant’s use in amenorrhea and menopause" (Murray 1995). Chinese angelica (Angelica sinensis or Polyborpa) and Japanese angelica (Angelica acutilobu) seem to be most useful in alleviating the discomforts of menstruation, menopause (particularly hot flashes), and uterine cramps (Murray 1995).

Cimicifuga racemosa (Black cohosh). Studies conducted on older women using this plant extract showed that it helped alleviate depression and hot flashes commonly associated with menopause. Clinical findings indicate that this extract promotes and/or restores healthy menstrual activity: soothes irritation and congestion of the uterus, cervix, and vagina; relieves discomfort associated with pregnancy; and contributes to easy deliveries (Castleman 1991). One study indicates that black cohosh is homeopathically recommended for stimulating the female system, including menopausal difficulties, such as muscle-joint inflammation (Duke 1985).

In Germany, where the use of herbs is more mainstream than in the U.S., black cohosh is a primary ingredient in three drugs prescribed for menopausal discomfort. "According to the German text Herbal Medicine, ‘the drugs appear to be effective. We can, in many cases, manage without hormones, though . . . success is not instant. The drug has to be given over some time . . . . These drugs are not available in the U.S. but the herb itself is" (Castleman 1991).

In yet another study, the authors state, "Remifemin is an ethanolic extract of the rhizome of Cimicifuga racemosa and is known to affect climacteric symptoms, particularly depression and hot flushes" (Duker 1991). The study tested the effects of this preparation on LH and FSH secretion of menopausal women for eight weeks. The authors concluded that this extract was "able to suppress LH secretion in menopausal women . . . since LH secretion and the occurrence of hot flushes are closely related, the measurement of LH levels is a suitable parameter to study the potency of plant extracts in regard to the reduction of hot flushes" (Duker 1991).

According to the FDA, black cohosh has no known toxicity (Mowrey 1993). However, overdoses can cause side effects, and the use of this extract should be under the supervision of your physician.

Dioscorea spinosa. Most species of yams contain large amounts of plant steroids, primarily diosgenin. Japanese and Central American varieties of wild yam (Dioscorea) contain diosgenin, a saponin precursor in the synthesis of progesterone (Weiss 1988).

Some pharmaceutical firms use diosgenin to manufacture progesterone and cortisone (Mirkin 1991). According to Dr. Mirkin, "Yams can be used for estrogen replacement, but only if they are eaten in large quantities and are not cooked." However, diosgenin is most known for providing progesterone and is used to balance the use of estrogenic plant extracts.

Glycyrrhiza glabra. This plant’s phytosterols (plant steroid chemicals) are responsible for estrogenic activity, as suggested by a number of studies reported in the Journal of the American Pharmaceutical Association and the Journal of Pharmacy and Pharmacology. Also known as licorice, when used orally, this plant extract helps the conditions of viral infections, inflammation, and menstrual/menopausal disorders. The primary component of licorice root is glycyrrhizin. "Licorice is believed to exert an alternative action on estrogen metabolism-when estrogen levels are too high, it will inhibit (continued on page 45)
action when used in greater amounts” (Murray 1995).

For women who are in menopause or approaching it, it is reassuring to know that you have more choices than you thought. Thanks to the resurgence of phytoestrogens as a positive alternative, you no longer have to suffer the discomforts of menopause, endure the side effects of estrogen replacement therapy, or increase your risk of cancer and cardiovascular problems. In addition, you are not limited to just one plant extract (black cohosh) as in the drug Remifemin. There are superior plant products available that are more comprehensive in easing women through menopause. Consult your physician regarding the use of phytoestrogens as a viable alternative, and look forward to those golden years.

References