

## CERTIFIED WOMEN'S HEALTH COUNSELOR ONLINE COURSE: SESSION 8

- **Menopause: Hot Flashes, Sweat Flashes, etc. Herbal Programs vs. Medical Intervention**

### Menopause

Menopause is a stage in a woman's life where her body begins to change, and can trigger a whole host of physical and emotional effects. It's important for women to realize that menopause is a natural biological process, just as puberty is. It is not a disease or condition to be cured, but rather a change in the body, which is why it has been referred to as the "change of life."



### Definition

Menopause is defined as a natural event in a woman's life where she no longer menstruates and can no longer bear children. Typically a woman is considered to be in menopause one year after her last period, although in the case of women who have had their reproductive organs removed (hysterectomy), they will be considered to be in menopause at once since they physically no longer have the ability to have periods. The average age at which a woman goes through menopause in the United States is 51.

### Symptoms

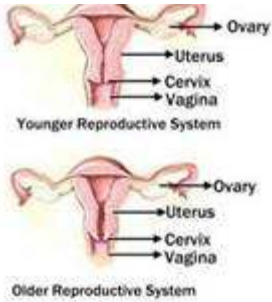
There are many common symptoms associated with menopause. These symptoms usually occur in the year after a woman's final period, but before a woman is officially in menopause:

- Irregular periods (they could come closer together, though they will usually be further apart)
- Decreased fertility
- Vaginal dryness
- Hot flashes
- Sleep disturbances
- Mood swings
- Increased abdominal fat
- Hair loss
- Loss of breast fullness
- Racing heartbeat
- Bone and joint aches
- Headaches
- Bladder control problems
- Night sweats
- Emotional changes such as depression or anxiety
- Concentration or memory problems

A woman should see her doctor if she suspects that there is a problem with her normal monthly cycle. A doctor can rule out any actual medical problems that may be the cause, and offer treatment options to ease some of the symptoms she is experiencing.

## Causes and Long Term Effects

Menopause is caused by the natural decline in hormone production that a woman experiences over time. Beginning in her late 30s or early 40s, a woman's ovaries begin to produce less and less estrogen, and she begins to experience something called "perimenopause." She will experience perimenopause for 8 to 10 years before menopause. This whole process is called natural menopause.



There are other causes for menopause as well. Chemotherapy and radiation can cause damage to the ovaries and bring about menopause. Surgical intervention, such as a hysterectomy, where all reproductive organs are removed will also bring about menopause.

Another cause of menopause, though it is very rare, is called premature ovarian insufficiency, or POI. This occurs when the ovaries stop producing hormones and releasing eggs prior to the age of 40. Anytime menopause occurs before the age of 45, it is considered premature menopause.

Over time women who have gone through menopause have an increased risk for a number of health problems. These include:

- Osteoporosis (bones become brittle leading to fractures)
- Heart disease
- Poor bladder and bowel function
- Poor skin elasticity
- Poor muscle tone or loss of muscle tone
- Deterioration in vision

Because of the risks of developing these conditions, women may be advised to take some additional supplements or medications to prevent or reduce the risk of these problems.

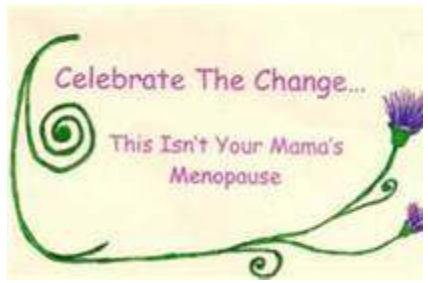
## Treatment

Treatment for menopause often includes hormone therapy (HT), especially if a woman is experiencing premature menopause. Hormone therapy is basically a supplement of estrogen or progesterone, or both, and it can be administered by pill, transdermal patch or injection. HT does reduce a woman's risk of developing osteoporosis and a number of other problems associated with menopause, and while HT is a godsend to some, it does come with risks. The risks most associated with HT include the development of breast cancer, blood clots and stroke.

There are several natural therapies that have been effective in relieving some of the symptoms of menopause. These include soy supplements, as soy contains plant estrogens, vitamin and mineral supplements, and creams, all of which are readily available at most health food stores and pharmacies.

There are also herbal supplements that have been used by natural medical professionals for centuries to treat menopause. These include blue and black cohosh, evening primrose oil and flax.

Many women approach menopause with a heavy heart and a sense of trepidation. The end of a woman's child bearing years can bring a profound sense of loss, especially if she wanted to have more children and wasn't able to. For this reason, women may also find it helpful to seek out a mental health professional to help them deal with the feelings of loss and depression that are not uncommon during menopause.



Menopause doesn't have to be a miserable experience. With proper treatment, women can find symptom relief and ensure that they reduce their risk of developing any problems, allowing them to enjoy their golden years in comfort and good health.

## **Menopause and Hormone Replacement Therapy**

Menopausal hormone therapy was once a regularly prescribed treatment for the uncomfortable symptoms that tend to be associated with menopause. However, recent studies have shown that the risks of this type of therapy may outweigh the benefits. Learn more about what menopausal hormone therapy can do and when it should be used.

### **Benefits of Hormone Therapy**

There are two main types of menopausal hormone therapy, each of which offers its own unique benefits. These types of therapy include:

1. **Systemic hormone therapy:** This treatment involves taking systemic estrogen in pill, gel, cream, spray or skin patch form. It is effective in relieving hot flashes and night sweats, which are two of the most common symptoms of menopause. It can also relieve vaginal symptoms of menopause, including dryness, burning, itching or discomfort during intercourse. It also helps to prevent **osteoporosis**.
2. **Low-dose vaginal estrogen products:** These estrogen-containing products come in cream, tablet or ring form and help treat the vaginal symptoms of menopause listed above. In addition, they help with urinary symptoms like **incontinence**. Though these products don't treat hot flashes or night sweats, or prevent osteoporosis, they reduce the amount of estrogen absorbed into the body when compared to systemic hormone therapy.

### **Risks of Hormone Therapy**

The early studies on hormone therapy for women going through menopause were promising. However, some of this research lacked sufficient evidence to tie hormone therapy to the benefits it was believed to cause. In July 2002, new findings arose from clinical trials which suggested that the long-term use of hormone therapy increases the risk of certain health conditions, including:

- Blood clots
- Heart disease
- Stroke
- **Breast cancer**
- Gall bladder disease

When prescribed, hormone therapy often involves a combination estrogen-progestin pill. However, in some cases estrogen alone has been prescribed. The specific health risks posed by hormone therapy may depend on whether estrogen is taken alone or in combination with progestin and in what dosage. Other potential risks of hormone therapy may be affected by an individual's age or their existing health risks for conditions like cardiovascular disease or cancer.

In addition to the long-term health risks, menopausal hormone therapy may also cause some immediate side effects, such as nausea, mood swings, headaches, vaginal bleeding, bloating and breast tenderness or swelling.

### **Who Should Get Hormone Therapy?**

Though the information about the health risks of hormone therapy are more widely known at this point, systemic estrogen is still considered the most effective treatment for menopause symptoms and is still prescribed for certain individuals. Healthy, menopausal women who meet one of the following criteria are sometimes considered for hormone therapy:

- Have severe hot flashes, night sweats or other menopause symptoms
- Have lost significant bone mass and haven't found success with other treatments
- Experienced premature menopause (stopped having periods before the age of 40) or premature ovarian insufficiency (the ovaries stopped functioning normally before age 40)

Premature menopause can be especially dangerous for women who don't use estrogen therapy because it can increase the risk of several serious health conditions, including dementia, osteoporosis, coronary heart disease and depression. The reason that menopausal hormone therapy is safer for women with premature menopause is because the earlier onset of menopause also decreases the risk for breast and **ovarian cancer**.

### **Reducing Risks**

There are a few ways you can reduce the health risks associated with hormone therapy. Discuss the following strategies with your doctor before taking hormone therapy:

1. **Take the lowest dose possible for the shortest amount of time needed.** Hormone therapy should be used only as a short-term treatment unless you experience menopause at a younger age.
2. **Use a product that reduces your body's exposure to estrogen if possible.** If you only experience vaginal symptoms related to menopause, then taking a low-dose vaginal estrogen product is preferable to taking systemic estrogen.
3. **See your doctor regularly.** If you do use hormone therapy, seek follow-up care with your doctor to make sure the benefits are outweighing the risks. You should also schedule pelvic exams, mammograms and other health screenings regularly.
4. **Take steps to improve your overall health.** Being healthy will decrease your risks for other health conditions. Exercise, maintain a healthy weight, eat right, don't smoke, limit alcohol and manage stress for better overall health.

## Alternatives to Hormone Therapy

Some women are able to manage their menopause symptoms by using the following techniques:

- Avoid spicy foods, alcohol, hot weather and hot beverages to ward off hot flashes
- Use vaginal lubricants or moisturizers to ease vaginal discomfort
- Practice **Kegel exercises** to reduce urinary incontinence
- Stay healthy by eating well, exercising regularly and not smoking
- Use relaxation techniques or yoga to help with hot flashes

Menopause can be a difficult time for many women, so it's understandable that they may want to use hormone therapy to relieve their symptoms. However, it's best to try alternative techniques first to see if those are effective. If you find that alternative methods don't relieve your menopause symptoms, or if you're experiencing menopause early, talk to your doctor about the possible benefits of using hormone therapy and how it can be done safely.

## **Sex and Menopause**

Women generally experience menopause in their late 40s or early 50s. This is a normal part of aging, but one that can present some unique challenges for women, including some which involve sex. In this article, we'll explain those challenges and their treatment options while also highlighting some of the benefits of post-menopausal sex.

### Potential Challenges

Once a woman has experienced menopause, her sexual functioning may be affected. Some of the following challenges a woman may face after menopause occurs include:

- **Vaginal dryness:** The decrease in estrogen levels that occurs after menopause has occurred can lead to a decrease in the blood supply to the vagina. This often results in drier and thinner vaginal tissues.
- **Painful sex:** When vaginal dryness is an issue, this problem may appear during vaginal intercourse. Another issue that contributes to painful sex is the fact that the lower third of the vagina may shrink after menopause.
- **Decreased libido:** Lower estrogen levels can also lead to a decreased interest in sex. Women may find that, after menopause, they are not as easily aroused and may be less sensitive to stroking or touching.
- **Disturbed sleep:** Some women experience night sweats with menopause, which may make her too tired for sex.
- **Emotional changes:** Women go through a host of emotional changes during menopause. Some even experience depression or anxiety. In some cases, this can lead to stress that reduces their interest in sex.
- **Bladder control problems:** Some women have some incontinence issues after menopause, which can make them feel less comfortable or confident when having sex.

- **Health concerns:** Women who have experienced menopause may also be dealing with other health issues or are taking medications which affect their interest in sex.

Women who have gone through menopause may face some, none or all of these challenges. Each woman is affected differently.

### **Potential Benefits**

It may seem as though there is a focus on the negative ways in which menopause affects a woman's sex life. However, many women experience several benefits of sexual intercourse after menopause has occurred. These benefits may include:

- **No pregnancy worries:** After menopause has occurred (when a woman hasn't had her period for at least one year), she no longer has to worry about getting pregnant. This can lead to a more spontaneous and relaxed sex life, and it eliminates the worry of birth control.
- **Fewer responsibilities:** Once they reach menopause, most women have children who are old enough to largely take care of themselves. In addition, they tend to have more stable careers and financial freedom. All of these factors lead to an increase ability to relax and enjoy intimacy with their partners.
- **More confidence:** Many women are most sexually confident around the time they reach menopause because they are aware of what kind of sexual experience they want and are more comfortable with who they are, leading to an improved sex life.
- **Increased libido:** Though many women do experience decreased interest in sex after menopause, some experience just the opposite. In some cases, this may be tied to birth control pills that inhibit sex drive – once a woman no longer needs those pills, her libido may resurge.

### **Ways to Improve Post-Menopausal Sex**

For women that do experience challenges with sex after menopause, there are lots of great options to help. The following are some of the most popular treatment options for sexual issues which may develop after menopause:

- **Vaginal dryness or painful sex:** Water-based lubricants and vaginal moisturizers can be purchased over the counter to relieve vaginal dryness and make sex less painful. In addition, doctors can prescribe estrogen creams, tablets or rings which may increase the moisture and sensation in the vagina.
- **Decreased libido:** There are estrogen products available for increasing libido, but no conclusive information has been found regarding their effectiveness. Instead, talk to your doctor to find out whether you need to talk to a health professional who specializes in sexual dysfunction. You can also seek counseling with or without your partner.

In addition to these treatments, some women seek out menopausal hormone therapy (MHT). This involves taking the hormones estrogen and progesterone in order to treat vaginal dryness and discomfort along with other symptoms associated with menopause, such as night sweats and hot flashes. This may help certain women, but MHT can also increase the risk of blood clots, heart attack, breast cancer, stroke and gall bladder disease. For this reason, MHT is only recommended on the lowest dose and shortest amount of time possible.

Talk to your doctor if you are experiencing any of the sexual challenges associated with menopause. In many cases, these issues can be relieved with treatments or counseling.

## **Painful Sex after Menopause**

Whenever the topic of menopause comes up, the main complaints from women include aggravating symptoms like night sweats and hot flashes. However, some women shy away from the topic of sex after menopause because of the many issues it can bring up. Painful sex is one challenge that many post-menopausal women face. In this article, we'll explore why painful sex occurs after menopause and how it can be treated.

### **Why It Happens**

There are several factors that may cause sex to become painful or uncomfortable after a woman experiences menopause. The main reason for this issue is vulvovagina atrophy, also known as **vaginal atrophy**. After menopause, the vagina does not have the same level of moisture and natural lubrication that it had before menopause set in. This occurs because the decreased levels of estrogen that occur after menopause lead to a decrease in the blood supply to the vagina. The result is a vagina that has drier and thinner tissues. At the same time, vaginal tissues can also become less elastic and flexible after menopause. Vulvovaginal atrophy also makes the vagina less acidic, similar to how it was before puberty.

While vulvovaginal atrophy is the main factor contributing to painful sex after menopause, the change in the size of the vagina is another reason for this issue. When a woman doesn't have vaginal intercourse or other vaginal sexual activity regularly after menopause, her vagina can become shorter and narrower. The lower third of the vagina can begin to shrink, making it more painful when she does have sex.

Atrophic vaginitis may also cause sex to become painful after menopause. This condition, which is characterized by redness and inflammation of the vagina, occurs as a result of the lower estrogen levels a woman has after menopause.

The combination of these factors can lead to painful sex, sometimes even when a lubricant is used. The vaginal tissues may even become so fragile that they are prone to injury, tearing or bleeding when the vagina is penetrated.

### **Treatment Options**

Painful sex is perhaps one of the most difficult post-menopausal issues that women face. In fact, The North American Menopause Society reports that between 17 percent and 45 percent of postmenopausal women find sex painful. Fortunately, there are several treatment options for this situation, including:

- **Menopausal hormone therapy (MHT):** Women can take estrogen and progesterone in order to combat vaginal dryness and discomfort. However, there are some health risks associated with MHT, including an increased risk of breast cancer, blood clots and heart attack. For this reason, low-dose topical estrogen is often prescribed for painful sex after menopause (it's safer than oral estrogen). However, this may not be a permanent solution since some doctors advise against using MHT for more than a short amount of time.

- **Pelvic floor physical therapy:** More research is needed to confirm this therapy's effects, but massage and gentle pressure from a physical therapy may be able to relax and stretch tightened tissue in the pelvic area. Certain exercises can also be completed to strength pelvic floor muscles.
- **Surgery:** A new procedure called laser augmentation of the vaginal area (LAVA) may be able to loosen and reshape the outer layer of the vagina. This makes vaginal penetration easier and less painful. Not all doctors agree with the procedure, which is only offered in certain states, and few women are good candidates. Surgery should be considered a "last resort" for serious cases.

In addition to these treatments, women can also try some lifestyle changes that may decrease vaginal dryness or discomfort. One of the ways women can ease these symptoms is to treat vulvar skin very gently. This means washing only with mild soaps or plain water (don't use perfumed products, take bubble baths or use douches). Wearing cotton underwear and avoiding tight-fitting clothing can also relieve vaginal discomfort.

A counselor may be helpful for certain women who are experiencing issues like poor communication with their partner or anxiety, both of which may exacerbate the problem of painful sex. Finally, women should consider trying to have sex regularly before and after menopause occurs. Regular vaginal sexual activity helps keep vaginal tissues thick and moist. It also helps maintain the vagina's length and width.

Remember that menopause-related vulvovaginal symptoms may not appear right after menopause occurs. In some cases, sex doesn't become painful until several years of lower estrogen levels (or they don't experience it at all). If you are experiencing painful sex after menopause, talk to your doctor. There are other possible causes of painful sex which may not be related to menopause and require different treatments. In any case, your doctor is the best resource for deciding how to best deal with this issue and get back to enjoying your sex life as you did before menopause.

## **Vaginal Atrophy**

Vaginal atrophy, also known as atrophic vaginitis, is a condition that most women experience much later in life. It is a medical condition typically occurs during menopause and is caused by a decrease in estrogen levels. However, it can also develop during breast-feeding or whenever the body decreases its production of estrogen.

### **What Is It?**

Vaginal atrophy is an inflammation of the vagina due to the thinning of the vaginal walls caused by lower estrogen levels, which typically occur during menopause. Estrogen is responsible for maintaining the health of tissues within the vagina, keeping them well lubricated to minimize irritation and also to make sexual intercourse more pleasurable. As the vaginal walls become dry and thin, irritation and inflammation become an issue.

For many women, low estrogen levels occur as part of natural physical processes, especially when they are breastfeeding and going through menopause. When estrogen levels become low, the symptoms of vaginal atrophy will become more pronounced. Vaginal atrophy can cause varying levels of discomfort and can affect a woman's ability to enjoy sex. Regardless of whether sexual intercourse is uncomfortable, a woman's sex drive will gradually decrease as her estrogen levels diminish.



## **Causes and Risk Factors**

Aside from menopause and breast-feeding, there are other factors that can cause decrease a woman's estrogen levels, resulting in vaginal atrophy. These factors include:

- Stress
- Depression
- Strenuous exercise
- Removal of the ovaries
- Medical treatments that can affect a woman's estrogen levels through the administration of certain medications or hormones. Radiation and chemotherapy treatments to the pelvic area can also result in lower estrogen levels

Vaginal atrophy cases may vary, where some women may experience the condition during their years leading up to menopause, while others may experience it several years after menopause. There is even a chance that a woman will not develop vaginal atrophy at all after having experienced menopause.

Risk factors that may lead to vaginal atrophy include:

- **Smoking:** Smoking limits blood circulation, which can affect the amount of oxygen that travels to the vagina. It can also have an effect on the estrogens in the body.
- **Never giving vaginal birth:** Studies have shown that women who have never given vaginal birth are at a higher risk for developing vaginal atrophy.

## **Symptoms**

Aside from dryness and irritation of the vagina, there are several symptoms to watch out for when dealing with vaginal atrophy:

- Burning sensation, especially when urinating
- Hurried urination
- High susceptibility to urinary tract infections
- Urinary incontinence
- Bleeding after intercourse
- Vaginal discharge
- Pain during sexual intercourse, causing a decrease in a woman's desire to have sex
- Vaginal itching

## **When to Seek Medical Attention**

According to Mayo Clinic, roughly half of postmenopausal women experience vaginal atrophy, but very few seek treatment. This can be out of embarrassment or sheer acceptance of physical changes due to age. However, there are treatments available that can alleviate symptoms of vaginal atrophy. Simply ignoring this medical condition can also lead to further health complications. Women who begin to experience pain during intercourse that cannot be remedied with lubricant or moisturizer, unusual bleeding or discharge from the vagina

and burning or soreness from the vagina should seek medical attention.

## **Complications**

While vaginal atrophy can lead to several complications involving urination and sexual intercourse, the primary cause for concern is an increase in vaginal infections. Since vaginal atrophy has a direct effect on the acidic environment of the vagina, there is a higher risk of infection, or vaginitis. These infections may be caused by bacteria, yeast and/or other organisms. Vaginal atrophy can also cause sores, cracks and other abrasions around the vaginal wall due to dryness and sensitivity.

## **Treatments**

Due to the varying degrees of vaginal atrophy, there are different levels of treatment that are effective at relieving symptoms and discomfort. For mild symptoms, over-the-counter medication in the form of vaginal lubricants and moisturizers can be applied for relief. Lubricants can also be applied before intercourse for pain relief. Be sure to use the water-soluble variety of lubricants, as the ingredients in the other types of lubricants can possibly damage condoms or diaphragms.

In more severe cases of vaginal atrophy, hormone replacement therapy may be introduced in the form of topical or oral estrogen. These prescribed medications allow estrogen to directly enter vaginal tissues, or be absorbed through the bloodstream. Topical estrogen can come in the form of a cream, estrogen ring or tablet, all of which are inserted into the vagina. Oral estrogen can come in the form of a pill, patch or gel, and can enter the bloodstream directly.

## **Prevention**

The main form of prevention for vaginal atrophy is maintaining regular, sexual activity. This can be done with or without a partner and can help increase blood flow to a woman's vagina. The increased blood flow can be used as a countermeasure to the lack of lubrication affecting vaginal tissues. The application of lubricant can help alleviate any discomfort caused by vaginal atrophy during sexual activity.

## **Kegel Exercises for Women**

Having a baby can change your body in ways you may not initially think of. Of course, you'll gain weight and your belly will stretch, but the muscles of your pelvic floor can also weaken, which can lead to serious problems if you don't strengthen them again. Kegel exercises are a great way to do just that.



## **What Are Kegel Exercises?**

Kegel exercises strengthen your pelvic floor muscles, which can weaken from childbirth and pregnancy or even from being overweight or aging. Over time, if your pelvic floor muscles become too weak, they can collapse and eventually bulge into your vagina. This is called pelvic floor prolapse, which can lead to urine leakage and pelvic discomfort. Kegel exercises can prevent the development of pelvic floor prolapse. Kegel exercises are also good for:

- People suffering from fecal incontinence
- Women suffering from urinary stress incontinence
- Women who have consistent problems reaching orgasm

Since Kegel exercises can be discreet, they can be done anywhere: in the car, at work or at home. They can also be done while you're pregnant, which is good if you want to keep your pelvic muscles strong for childbirth.

### **How to Do Kegel Exercises**

The pelvic floor muscles are a set of muscles that are underneath the bladder, uterus and large intestine. All of these muscles move simultaneously when you relax and contract them, so by exercising one muscle, you exercise all muscles. If you're unsure of which muscles you're exercising, follow these tips:

- When urinating, start to go and then stop. If you feel the muscles tighten and move up, you've essentially done a Kegel exercise.
- If you still are not sure of which muscles are your pelvic floor muscles, insert a finger into your vagina and contract your muscles as if you are stopping urination. If you feel the muscles tighten and move up and down, you've found the pelvic floor muscles.

Now that you know which muscles you're exercising, it's time to actually start exercising them. To do a proper Kegel exercise, follow these steps:

1. Lie down on the floor, or sit, if you prefer.
2. Contract your pelvic floor muscles and hold it for five seconds.
3. Now relax for another five seconds.
4. Repeat this exercise four or five times in a row, three to four times a day.

Eventually, you want to be able to do this exercise for 10 seconds instead of five. After doing Kegel exercises regularly every day, you should expect to see results in eight to 12 weeks.

### **Tips**

As with any exercise, there are always tips and tricks you should be aware of before you begin. Here are some tips to help you do Kegel exercises properly:

- **Do not do Kegel exercises on a full bladder or while urinating.** It's OK to try them while urinating if you're trying to figure out which muscles are your pelvic floor muscles, but not at any other time. If you make this a habit, it could lead to weakened pelvic floor muscles, urine leakage or incomplete emptying of the bladder, which leads to an increased risk of a urinary tract infection.
- **When doing Kegel exercises, make sure that you don't hold your breath.** Keep relaxed and breathe freely.

- **There are certain muscles that you don't want to contract while doing Kegel exercises.** Your abdomen, thighs and buttocks should be relaxed. If they aren't, they may feel uncomfortable when doing these exercises and you may not be working the muscles you want.
- **Don't over-exercise.** It will not lead to quicker results. As with any type of exercise, if you do too much, it can wear you out. In this case, it can wear out, or weaken, the pelvic floor muscles, causing urine leakage and muscle fatigue.

### **If Kegel Exercises Aren't Working**

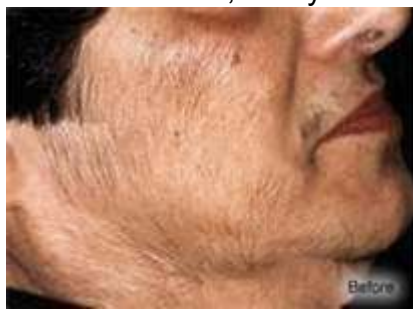
If you're having problems doing Kegel exercises or if you're not sure whether the exercises are working, don't be embarrassed to consult a doctor. He or she can give you advice on what to do or what you're doing wrong. In some cases, biofeedback techniques may need to be administered so you know what muscles you're working and how to properly exercise them. Here are the techniques that may be used:

- Electrodes may be placed along the abdomen and on the outside of the vagina. A sensor will be inserted into the vagina to sense the muscles that are being contracted. A monitor will show which muscles are contracting and which are relaxing, so you know exactly which muscles need to be exercised.
- An electrical current may also be applied to your pelvic floor muscles, which will make them contract. Knowing what this feels like, you should be able to replicate these contractions on your own.

Like any other muscle in your body, the pelvic floor muscles need to be exercised and kept in shape. By doing Kegel exercises often, you'll can prevent many problems and even stop some in their tracks.

### **Causes of Facial Hair on Women**

Believe it or not, every woman has facial hair – it's just that most women have facial hair that isn't very noticeable. This type of facial hair is called vellus hair, also known as downy hair or "peach fuzz." Vellus hair can be found all over the body on adults and babies, men and women. The reason it isn't noticeable is because it doesn't have any color and is very fine.



But there is a second type of facial hair called terminal hair. This is the course, pigmented hair that many women fear seeing on their face. If you're a woman who has this type of facial hair, you aren't alone. As reported on CNN.com, research by health-product manufacturer Bristol-Myers indicates about 20 million American women get their facial hair removed at least once a week. Below is a list of possible causes of facial hair on women.

## Hormone Issues That Can Lead To Facial Hair in Women

One of the main causes of facial hair on women is hormones, particularly male hormones. Since these male hormones surge during puberty and **menopause**, these are the times when terminal hair growth can take on a life of its own. During puberty, for instance, the amount of vellus hair can increase and in some cases, it can turn into terminal hair. And during menopause, when the level of the male hormone androgen falls out of balance with the female hormone estrogen, the amount of terminal hair can once again increase.

### Heredity

If hormones aren't to blame for your facial hair, your parents may be. If the women in your family tend to have terminal facial hair, or even if the men in your family have thick facial hair, there is a chance that you might have the same facial hair, as well. But genetics isn't the only environmental factor that can cause facial hair; here are some others:

- **Ethnicity** – Certain ethnic groups are more prone to developing facial hair than others.
- **Aging** – As you age, your facial hair may become thicker or increase in quantity. This is just a normal part of aging, unrelated to menopause and hormones.

### Health Disorders

Sometimes facial hair can be caused by something more serious, such as a health disorder. The most common one is hirsutism, which is when thick, coarse hair grows not only on the face, but on the chest, back and abdomen as well. Hirsutism can be caused by hormones or it can be caused by heredity. Hirsutism itself isn't serious, but it can be indicative of more serious problems such as:

- **Virilization** – This is a process in which a female will develop the secondary sexual characteristics of a male. Other symptoms include balding, deepening of the voice, a decrease in breast size and enlargement of the clitoris, increased muscle mass and acne.
- **Polycystic ovarian syndrome (PCOS)** – PCOS is caused by an imbalance of hormones and is a common cause of hirsutism. Other symptoms include obesity, infertility and ovarian cysts.

### Rare Causes

With any condition, there are always rare causes that could indeed be the reason for your facial hair. Those causes include:

- **Cushing's syndrome** – This occurs when the body is exposed to too much cortisol, a hormone that plays a part in the body's response to stress. In most cases, the overexposure comes from medication used to treat asthma or **rheumatoid arthritis**. Cushing syndrome can cause hirsutism as well as a moon-shaped face, acne and an irregular menstrual cycle.
- **Congenital adrenal hyperplasia** – People with this condition have problems producing the hormones cortisol and androgen. This can also be a cause of hirsutism.
- **Tumors** – In some cases, tumors or cancer may trigger hirsutism.

- **Medications** – Also in rare cases, medications can trigger hirsutism. The medication danazol, which is used to treat endometriosis, is one of these medications, along with anabolic steroids, glucocorticoids, testosterone, cyclosporine, minoxidil and phenytoin.
- **Hyperthecosis** – This disorder is caused by the oversecretion of androgens in the ovaries. Women who are postmenopausal and have gone through virilization are mostly affected by hyperthecosis. Insulin resistance and hyperandrogenism are the defining characteristics of this disorder.

It is also possible to have normal levels of androgens and hirsutism at the same time. This condition is called idiopathic hirsutism and it is not caused by any underlying condition. In fact, in these rare cases, the cause of facial hair has no identifiable cause.

## Treatment

In most cases, facial hair in women isn't serious. It may be embarrassing or annoying to deal with, but it isn't always a sign of something bad. Luckily, hair is easy to remove and there are laser treatments that can rid your face of terminal hair permanently. However, if other, abnormal signs have started to appear, the cause of your facial hair may in fact be hirsutism. Check with your doctor to find out what the underlying cause may be and how it should be treated.

## 10 Natural Remedies for Menopausal Hot Flashes



The room starts to feel a little warm. Your face starts to flush, followed by your neck and chest. It gets a little hotter and you begin to sweat. You've just experienced a hot flash, most likely caused by menopause. Hot flashes can be annoying, especially if they keep you up at night or occur most often in public. The good news is that there are many ways to prevent them. If you've had trouble keeping menopausal hot flashes at bay, follow these 10 tips.

## Practice Relaxation Techniques

Relaxation techniques, such as deep-breathing exercises, yoga and biofeedback, can relieve the symptoms of menopausal hot flashes as well as other symptoms of menopause. One exercise in particular, known as paced respiration, can reduce hot flashes as well as some of the emotional symptoms of menopause.

## Eat Soy

Studies show that soy can have positive effects on hot flashes and other menopausal symptoms. That's because soy contains phytoestrogens, compounds that mimic the effects of estrogen. If you plan to incorporate more soy into your diet, stick with products that are less processed and are made from whole soybeans, such as tofu, tempeh and miso.



## **Lose Weight**

Women who carry extra weight tend to have more hot flashes because the excess fat traps heat and their blood vessels dilate more in reaction to stress and heat. Studies show that overweight women who lose weight tend to lose their hot flashes as well.

Even if you don't need to lose weight, exercising in general can reduce the symptoms of hot flashes. One study, conducted by the American College of Sports Medicine, found that women who exercise on a regular basis can reduce the occurrence of hot flashes and headaches by up to 50 percent.

## **Keep Your Environment Cool**

Keep the temperature in your home a little cooler than you normally would and keep a small fan at the office if you can't control the temperature at work. To cool yourself from the inside out, sip on cold drinks and snack on cold foods.

## **Dress In Layers**

Hot flashes can make you want to peel your clothes off, but that may not be appropriate to do while at work or at the grocery store. To keep yourself cool during a hot flash, dress in layers. That way, when you feel a hot flash coming on, you can peel a layer off without shedding your dignity as well. It's also helpful to dress in light, breathable fabrics like cotton and silk.

## **Don't Smoke and Limit Alcohol Consumption**

There are many things that can trigger a hot flash and triggers vary from person to person. But cigarettes and alcohol are two triggers that are almost universal. Studies show that both smoking and drinking are linked to an increase in hot flashes.

## **Avoid Hot and Spicy Foods**

Avoid spicy foods to minimize hot flashes. You should also avoid hot foods and drinks when you can as they can easily trigger a hot flash. You may also want to eat smaller meals throughout the day to reduce the amount of heat caused by digestion.

## **Certain Foods Can Prevent Menopausal Hot Flashes**

You can also add a few foods to your diet that will help control those flashes of heat. One of those foods is flaxseed, which also contains phytoestrogens. Researchers have found that women who eat at least 1.5 ounces of crushed flaxseed a day for six weeks can reduce the occurrence of hot flashes by 20 percent and the severity of hot flashes by 57 percent. You can buy flaxseed already crushed or you can buy it whole, crush it yourself and add it to cereal or yogurt.

Another hot flash-preventing food is sage, which also greatly reduces the occurrence and severity of hot flashes. Add this herb to a few meals or brew a pot of sage tea with lemon and honey.

## **Try Acupuncture**

It's not really known why acupuncture works for reducing hot flashes, but studies show that it does work. Acupuncture can also relieve any pain and can help you to sleep better. However, the results won't be seen overnight. This remedy may take a few sessions to produce the desired results.

## **Vitamin E and Black Cohosh**

Vitamin E has anti-inflammatory properties, which makes it a great tool for fighting hot flashes. Studies show that women who took vitamin E had hot flashes less frequently and less severely than those who took a placebo. It's best to get vitamin E from food sources, but if you prefer to take a supplement, take no more than 400 IU a day.



Another supplement that can reduce hot flashes is black cohosh. Black cohosh is actually a member of the buttercup family and can reduce hot flashes by up to 84 percent. You can take 40 milligrams of it once a day or 20 mg of it twice a day.

## **Bottom Line**

If, after trying these remedies, you don't see any improvement or reduction in your hot flashes, you may want to seek medical treatment. Talk with your doctor about taking a medication or trying a treatment such as hormone therapy.



## Herbal Program for Menopause

The physiological cessation of menstruation as a result of decreasing ovarian function. As estrogen decreases and hormone balances with progesterone change post-menopausal women may choose to supplement in addition to or instead of hormone replacement therapy (HRT). Imbalances can cause hot flashes, vaginal dryness/atrophy or pain with sexual intercourse.

### **Primary Formula:**

- Natural Changes (Menopause Packets)
- (Brenda is taking this and the hot flashes are gone!)

### **Herbals:**

- Pro-G-Yam Cream – For progesterone balance
- Dong Quai – For hot flashes, pelvic pain, insomnia, mood changes, vaginal dryness
- Wild Yam/Chaste Tree – For progesterone
- C-X or Black Cohosh - For female hormone balance
- Breast Assured – For female hormone balance
- Female Comfort or FCS II (Female Correctives)
- X-A (Hormone Balance) or Damiana
- Sarsaparilla (Glandular Tonic)
- Phyto-Soy - For estrogen-like properties
- Herbal CA – To prevent bone loss and Osteoporosis
- Licorice Root – For Adrenal Support and to assist in estrogen production
- Wild American Ginseng - For hot flashes and night sweats
- Maca

### **Vitamins, Minerals & Other Supplements:**

- Vitamin E Complete w/Selenium (Antioxidant/Female)
- Skeletal Strength, Calcium-Magnesium, Liquid Calcium, Coral Calcium, Nature's Sea Calcium or Magnesium Complex – To prevent bone loss and Osteoporosis
- IGF-1 – To raise hormone levels and increase bone density
- Super GLA, Flax Seed Oil or Super Omega-3 (Fatty Acids)
- L-Glutamine (Energy Regulating Amino Acid)
- Pregnenolone or DHEA-F – For Adrenal support and as a precursor to progesterone

### **Hot Flashes:**

- Flash-Ease (Menopause Hot Flashes)
- HY-C (Chinese Heat, Dryness & Thirst)
- MSM + Vitamin C – To eliminate hot flashes
- SUMA Combination – Helps many women
- Adrenal Support, Licorice Root or DHEA-F (Adults only)
- Eleuthero

### **Essential Oils:**

- Peppermint (For hot flashes and night sweats) – Diffused, on cotton ball on pillow, or in massage oil over lower abdomen and lower back
- Roman Chamomile, Clary Sage, Rose Bulgaria, Geranium

**Homeopathic:**

- Menopause Remedy

**Other:**

- Consider cleansing the liver and the bowels

**CERTIFIED WOMEN'S HEALTH COUNSELOR ONLINE COURSE - SESSION 8  
QUESTION & ANSWERS**

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY, STATE, ZIP, PC: \_\_\_\_\_  
PHONE: \_\_\_\_\_  
FAX: \_\_\_\_\_  
E-MAIL: \_\_\_\_\_

Please be sure to fill out the information above, complete the test and e-mail or mail it back to us at [iridology@netzero.net](mailto:iridology@netzero.net) or P.O. Box 485, Weimar, CA, 95736-0485. We will grade your question & answer session and will let you know if we have any questions or concerns. **Please use a separate sheet to do this assignment.**

1. What is menopause?
2. When is a woman considered to be in menopause?
3. What causes menopause?
4. What causes hot flashes?
5. What can be done alternatively for hot flashes?
6. What can be done alternatively for menopause?
7. What is vaginal atrophy?
8. What is HRT?
9. What are the possible side effects of HRT?
10. What can be used instead of HRT?