



HORMONE HAVOC

Darla is a 49-year-old business attorney. She has good relationships with her colleagues and a steady flow of clients. She is married and has two children in college. For most of the last 18 years, Darla has balanced a demanding work schedule with raising her kids and maintaining a home. In the last couple of years, she has realized that she needs to find more enjoyment or meaning in her work – or at least a new challenge. She is starting to resent the time spent at work and knows there is something else she “needs to be doing.”

Although Darla has a history of making decisions in her life relatively easily, these days she feels totally “stuck.” She hears people talking about “building your dreams” or “doing what you’ve always wanted to do in life,” but these concepts ring hollow. Although she wants to contribute to her children’s college costs, she could afford to make a career or lifestyle shift if she could just “get going.” Instead, she feels sluggish, under-motivated, overwhelmed, and unable to focus well enough on new ideas to solve her own dilemma. She is also worried about the quality of her marriage, which seems to have deteriorated seriously within the last four or five years.

A HIDDEN ENEMY

Five years ago, Darla had a total hysterectomy. Although no pre-surgical levels of hormones were measured, she was given a standard dose of conjugated equine estrogen for her hormone replacement. At her post-surgical checkup, she complained of teariness, vaginal dryness, uncontrollable outbursts of anger, and a “fuzziness” in her thought processes. She asked her doctor if she should have a bone-density scan since her mother had developed severe osteoporosis at age 55. Her doctor increased the level of estrogen in her prescription, referred her

for a heel scan, and told her to have an annual mammogram.

As it turned out, Darla’s physiological functioning had been severely compromised. Her estradiol levels were below the normal range for a woman her age, regardless of menopausal status. Her testosterone levels were practically non-existent. She already had moderate osteoporosis. These factors combined to make Darla feel miserable.

FACTS ABOUT HORMONES

The ovarian hormones (estrogen, testosterone, and progesterone) control over 300 functions in the female body. When the level or quality of these chemical messengers changes, be it through puberty, trauma, or menopause (natural or surgical), the “master control panel” cannot work properly and many symptoms result. Women can detect some of these symptoms but not others. Prudent preventive health care is needed to guard against serious mental and physical problems.

The signs of hormone changes in mid-life women include: short-term memory loss, cognitive changes, headache (including migraines), fatigue, hot flashes, “crawling skin,” vaginal dryness, loss of interest in sex, weight gain, food or alcohol cravings, fibromyalgia, outbursts of anger, depression, incontinence, sleep difficulties, bone loss, decrease in HDL, and other symptoms of undiagnosed origin.

When these symptoms go undiagnosed, the result is; loss of confidence, courage, and a “can do” attitude; self-doubt; isolation; and hatred of one’s body. Relationships are affected and creativity is non-existent.

CLASSIC CASE

Darla’s situation was a classic case of hormone havoc. Once Darla’s hormone prescriptions were adjusted to include 17-beta estradiol and testosterone,

Darla felt energized and focused. She got a DEXA (Dual Energy X-Ray Absorptometry) bone scan, even though the test was not paid for by her insurance. The scan revealed that she had significant bone loss. All of these factors were critical to Darla's health, welfare, and emotional well being.

If you want to learn more about women's health, come to *Health, Balance and Well Being for Women*, sponsored by the OAAP on February 9, 2001 in Portland. (See box this page.)

Debora Landforce, M.S.
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HORMONE LEVEL SYMPTOMS CHECKLIST

Do you experience any of these on an on-going basis?

- night sweats
- sleep disturbances
- fatigue
- bladder infections
- headaches or migraines
- fibromyalgia
- increasing PMS
- chronic yeast infections
- hot flashes
- urinary incontinence
- food or alcohol cravings
- weight gain
- loss of libido
- dry skin or "crawly" skin
- depression
- apathy
- memory loss
- moodiness, anger and irritation
- "fuzzy" cognition, indecisiveness
- other symptoms of undiagnosed origin

All of these symptoms can be associated with ovarian hormonal-level fluctuations (estrogen, progesterone and testosterone). Knowing and understanding your own hormone levels can be essential to maintaining your health and vitality.

Source: Screaming To Be Heard - Hormonal Connections That Women Suspect and Doctors Ignore by Elizabeth Lee Vliet, M.D.