

Getting Started with Endau Natural Progesterone Cream



I receive many requests for information about Natural Progesterone Here is some information will get you started. This addresses most of the questions I receive.

If you have any questions or concerns, please contact me.

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You are welcome to share this information with your friends and family.

Why do women need progesterone?

Progesterone is needed in hormone replacement therapy for premenopausal women for many reasons, but one of the most important roles is to balance or oppose the effects of estrogen. Unopposed estrogen creates a strong risk for breast cancer and reproductive cancers.

In the ten to fifteen years before menopause, many women continue to have regular menses in which they make enough estrogen to create menstruation, but they don't make progesterone, which sets the stage for estrogen dominance.

Women begin to have non-ovulating menstrual cycles in their mid-thirties. Any month that you do not ovulate you don't make any progesterone (although you will still have a menstrual period). Without progesterone you cannot maintain good estrogen receptor sensitivity, so even when there's plenty of estrogen available, your cells cannot use it as effectively. Treating the underlying progesterone deficiency first to reduce the overall hormone fluctuation allows you to take advantage of the estrogen you have.

Also PMS can occur despite normal progesterone levels when stress is present. Stress increases cortisol production, when this happens cortisol competes for progesterone receptors. To overcome this blockade additional progesterone is required.

***Why do pre-menopausal and menopausal women need progesterone?**

*Estrogen levels drop only 40-60% at menopause, which is just enough to stop the menstrual cycle. But progesterone levels may drop to near zero in some women. Because progesterone is the precursor to so many other steroid hormones, its use can greatly enhance overall hormone balance during menopause. Progesterone also stimulates bone building, which helps protect against osteoporosis.

***How long does it take for a woman to see a change in her symptoms after starting a good progesterone cream?**

*Most women see a noticeable difference within three months of being on the cream, some as soon as days or weeks.

***Why don't our doctors tell us about natural progesterone?**

*Unfortunately, many conventional doctors are not familiar with the benefits of natural progesterone. Dr. John Lee often points out in his seminars that the benefits of using progesterone is not covered very thoroughly in medical schools, if at all.

Unfortunately, profit comes from the sales of patent medicines. The system is not interested in natural (non-patentable) medicines, regardless of their potential health benefits. Thus the flow of research funding does not extend to products, which cannot be patented.

Information taken from books by Dr. John Lee

If Progesterone Is So Good Why Hasn't My Doctor Told Me About It?

This is the question most frequently asked of Dr. Lee during his more than 30 years of active clinical practice. To quote from Dr. Lee: "The medical-industrial complex refers to the close knit association of organized medicine with the pharmaceutical manufacturers and governmental medical regulatory agencies... The system taken together is neither necessarily corrupt nor evil, but, like any human agency, is subject to the frailties and faults of humankind. Medical research is dependent on the billions of dollars of grants from the National Institutes of Health (NIH) and the private pharmaceutical industry. The two are closely interlocked. Any given pharmaceutical company, like any private enterprise, must make a profit to stay alive. Profit comes from the sales of patent medicines. The system is not interested in natural (non-patentable) medicines, regardless of their potential health benefits. Thus the flow of research funding does not extend to products, which cannot be patented.

Few people know that the definition of malpractice hinges on whether or not the practice is common among one's medical peers and has little (usually nothing) to do with whether the practice is beneficial or not. A doctor willing to study, to learn the ins and outs of an alternative medical therapy, and to put what he has learned into practice in helping patients is potentially exposing himself to serious charges of malpractice.

But what does all this have to do with natural progesterone? The answer is quite simple, really. Ample medical research regarding progesterone was carried on from the 1940's through the 1960's, and amply reported in mainline, recognized medical literature. Since the early 1970's, however, medical research has become much more expensive and the grants subsidizing progesterone research, (or any unpatentable medicine or treatment technique), have dried up and been blown away by the contemporary trade winds of synthetic drugs, particularly the progestins. The potential market for patentable progestins is vast-- contraceptive pills, irregular menses, and osteoporosis--literally every woman through the age of puberty on is a target for a sale. Do you think the prevailing powers wish to see this lucrative market left to an over-the-counter natural product not in the hands of physician prescribers and not controlled by the pharmaceutical industry?

Thus, when he (the physician) hears of the use of natural progesterone, he wonders why none of his associates know about it. If it is not commonly known, 'it must in some way be false and/or unapproved.' Having given lectures on the role and medical uses of natural progesterone, I have observed numerous instances wherein perfectly fine physicians will inquire about obtaining product for use by their wives or mother-in-law but not for their patients. What can account for such behavior by professionals? I suspect that it is fear of alienation from the flock that is paramount in their minds.

If progestins were the equivalent of natural progesterone in effect and safety, the argument would be moot. But progestins are not the equivalent of natural progesterone and never will be."
Dr. John R. Lee, CA, USA

A Woman's Best Friend Natural Progesterone

You can't sleep at night. You wonder when or if your adult acne will ever go away. You have a horrible headache every few weeks. You think these things are just a part of being a woman – but you're wrong. These are all symptoms of a progesterone deficiency. Yet, sadly, when you go to the doctor looking for help, chances are you may come home either empty handed or prescribed the wrong drug. Many doctors simply don't know an accurate way to diagnose and treat hormone imbalances.

Hormone imbalances, particularly deficiencies in progesterone, are linked to many conditions unique to women such as osteoporosis, menopausal symptoms, insomnia, early miscarriages, anxiety, depression, lumps in the breasts, and the list goes on. While women have learned over the years how to survive with these conditions, survival is not the answer. The answer is to enjoy life to the fullest by educating yourself about breakthrough research on how natural progesterone can change your life. Let's start at the beginning.

The Two Sister Hormones

Like jam and peanut butter, estrogen and progesterone go together. One without the other just isn't as good. A woman's body thrives when these two hormones are found in correct proportions. What is more and more common, however, is that these hormones become off balanced, often in favor of estrogen, leaving many of our body's progesterone deficient. In fact, Dr. John Lee, a leading researcher of progesterone, estimates that 50 percent of women age 35 and older don't make enough progesterone.

(Source: What Your Doctor May Not Tell You About Premenopause: Balance Your Hormones and Your Life from Thirty to Fifty by John R. Lee, M. D., Jesse Hanley, M. D. and Virginia Hopkins, 1999)

Why the Imbalance?

While diet, lifestyle, and stress play a part in the imbalance, increasing scientific evidence supports the theory that progesterone deficiency is directly related to the toxins and commercial poisons found in our environment. A researcher at the University of Florida investigated why alligators in a particular surrounding lake were dying. He found that eight years previously large amounts of insecticide were deposited in the lake. The insecticide, which was fat soluble but not biodegradable, had made its way into the plants and animals off which the alligators fed. Consequently, the follicles in the female alligators' ovaries were damaged. The follicles are where the female alligators (and human females for that matter) make progesterone.

Another reason for the increasing number of women with incorrect hormone levels is that estrogen is found in so many of the household items and drugs that women use. For example, petroleum jelly contains estrogen, and the birth control pill is mainly made of estrogen. Many women are over-prescribed estrogen by their doctors in order to combat menopause. In actuality, perhaps what many of these women really need is a boost in progesterone.

What is Progesterone?

Progesterone is often considered a "sex" hormone because it plays a role in the conception and growth of a fetus. During the gestation time of a pregnant woman, her body's production of progesterone rises from 20 mg a day to 400 mg a day. But progesterone, which is made by the follicles in the ovaries and by the placenta, has many different functions in the body, some which researchers are still trying to understand.

A study done as early as the 1950s reported that progesterone has an important role in the function of the thyroid hormone. Research from the 1970s showed that progesterone helps women suffering from osteoporosis regain precious bone mass. Within the last decade medical journals have reported that progesterone helps strengthen the myelin sheath that surrounds the nerves in the central nervous system. This sheath is essential to protect the body from aches and pains. Scientists have found that brain cells seem to hoard progesterone, but they are not sure why. Brain cells have 20 times more progesterone in them than blood cells. All of this research points unequivocally to the fact that progesterone is important to all women in any stage of life.

Estrogen also has important functions. However, when there is an excess of estrogen, its related functions can turn against you. For example, estrogen is the survival hormone. Estrogen is made in the fat cells of the body, and in times of famine it is estrogen that will help a woman live much longer than any man around. Estrogen holds onto the body's fat storage. When there is too much estrogen, it can do the same thing, even if there is no shortage of food. Since estrogen is made in the fat cells, even after menopause, a woman's body still makes 40 percent of it before menopause levels. Progesterone, on the other hand, is made in the follicles of the ovary. If the uterus and ovaries are removed during menopause, this can lead to a complete decline in progesterone production.

Natural Progesterone Now that you see just how important it can be for you to supplement your body's production of progesterone, you are probably wondering how?

In the 1970s, a group of innovative scientists at the Mayo Clinic held a meeting at which they concluded that estrogen shouldn't be given without its counterpart progesterone. Of those few doctors who listened to the advice, most didn't know where to find the progesterone. There was a synthetic analogue of progesterone used by companies who made birth control pills, and some doctors used this. However, it wasn't until some revolutionary doctors started using a natural topical progesterone cream that the medical community realized there was a better form of progesterone available.

(Source: What Your Doctor May Not Tell You About Menopause by John R. Lee, M.D. and Virginia Hopkins, 1996)

Natural progesterone cream is made of the same composition as the progesterone in the female body. It is fat soluble and easily utilized in the body. And best of all this natural progesterone has one of the best-known delivery systems – through the skin.

From the Outside In - One of the best ways to get something inside your body is through the skin. Skin absorption is 40 to 70 times more efficient than taking a drug orally. The reason is because when you ingest something, before it gets into the blood and cells of the body it has to first pass through the liver. The liver often times excretes most of the ingested substance in bile. The skin can absorb something directly into the blood stream. This is why medications applied in a "patch" form are lower in potency than the same medication's oral counterpart.

Only a portion of the oral medication gets through while the "patch" medication has a direct pathway to the circulatory system.

A natural progesterone cream that is absorbed directly into the body can help you start feeling like yourself again. Educate yourself and take charge of your hormones.

Thousands of women have lost weight, regulated their menstrual cycles, reduced the size of fibroid cysts, and have had many other positive results in their lives with help from natural progesterone.

Estrogen dominance ~ What is it?

Many conventional doctors are STILL telling us women that menopause, and all of the frustrating symptoms that come along with it, are side effects of decreased levels in estrogen production. Their answers? Estrogen supplementation, or HRT, usually with synthetic hormones.

On the other hand, many alternative practitioners approach menopause from the belief that women have too much estrogen, leading to a condition known as "estrogen dominance." The late Dr. John Lee blazed a new trail for women when he declared that estrogen dominance is the real cause of menopause and pre-menopause symptoms, surprisingly, especially in younger women. It was his opinion that the obvious solution is progesterone supplementation to offset high levels of estrogen.

Let's look at the condition now known as estrogen dominance, the praises being sung by women around the world about progesterone supplementation, and how it all translates for you and your health.

What is estrogen dominance?

Estrogen dominance (a term first proposed by Dr. John R. Lee) is a situation in which there is too much estrogen in relation to progesterone. When a woman fails to ovulate, progesterone cannot reach the optimum 20 - 25 mg. during the final two weeks of a woman's monthly cycle. This allows estrogen to go unopposed the entire month and upsets the normal progesterone/estrogen balance. During his 30 years clinical practice, Dr. Lee discovered that estrogen dominance was responsible for a number of unpleasant side effects in his patients, among them: bloating, water retention, breast tenderness, and depression.

Progesterone's Role?

What's critical here is the role of progesterone, which "opposes" the estrogen by helping the body break it down into metabolites that are absorbed and removed in the process. Estrogen stimulates tissue growth, and progesterone signals the body to slough it off.

The original concept of estrogen dominance was very simple. Dr. Lee argued that the first sign of menopause is a drop in progesterone production (not estrogen deficiency!). Without enough "opposing" progesterone, estrogen levels stay unnaturally high in the second half of the menstrual cycle. This causes discomfort in a great many women and can lead over time to some severe health consequences.

(The history of HRT contains a tragic example of the effects of unopposed estrogen. For many years after the creation of synthetic estrogen, Premarin, it was prescribed to women without any accompanying progesterone. The result was an epidemic of uterine cancer that led to the coupling of Premarin with Provera, a synthetic

progesterone, i.e. a progestin, which was called PremPro, for decades now the most widely prescribed synthetic HRT in the world.)

Over time a second, powerful argument has been added to Dr. Lee's concept of estrogen dominance. This is the view that our overall estrogen levels (in women and men) are too high because of xenoestrogens, chemicals in the environment that mimic estrogen in our bodies and act as estrogen disruptors.

As evidence, it's often noted that women in Western Europe and the U.S. have estrogen levels that are much higher than women in underdeveloped countries. Many experts link these high levels of estrogen with the rise in breast cancer, autoimmune diseases, infertility and other health issues. They question whether or not xenoestrogens are the cause.

The facts about estrogen dominance ~

During pre-menopause it's common for estrogen levels to decrease slowly while progesterone levels plummet — a natural result of fewer ovulations, fewer burst follicles and less progesterone. This can cause many of our worst symptoms. There are usually multiple causes, including stress, emotional factors, and the estrogen-like chemicals in our environment called xenoestrogens.

What Health Risks are associated with Estrogen Dominance?

Another of Dr. Lee's contributions was to raise women's awareness of the profound connections between hormonal imbalance and health.

When estrogen levels are high in relation to our progesterone we experience many severe symptoms, among them: anxiety, breast tenderness, cyclical headaches or migraines, depression, digestive issues, fuzzy thinking, palpitations, food cravings, irregular bleeding, water retention, weight gain and more.

If estrogen levels stay unopposed, women may develop infertility, endometriosis, amenorrhea (skipped periods), hypermenorrhea (heavy bleeding), fibroids, uterine cancer, stroke, and decreased cognitive ability, among other conditions.

Toxic baths of xenoestrogens

For the most part, our bodies are amazingly resilient. What our bodies are not designed for is exposure to the many endocrine disruptors in our environment; among them are very serious classes of chemicals known as xenoestrogens.

Many of these xenoestrogens are proven carcinogens. They are also well known for their ability to damage the immune system and interrupt hormonal balance. Our cells can't fully distinguish between our own estrogen and xenoestrogens. Every cell

has estrogen receptors that recognize and open to the shape of an estrogen molecular chain, regardless of where it came from.

Pesticides are perhaps the biggest source of xenoestrogens: most bioaccumulate (meaning they are stored in fat cells of fish, poultry and animals in increasing concentration until they get to the top of the food chain, you and me!). They are highly estrogenic, and some experts estimate that the average American ingests over a pound of pesticides a year.

A second major source of xenoestrogens is the many growth hormones given to livestock and poultry, most of which contain fat-soluble estrogens. When we consume those animals or their milk, we ingest that estrogen. Organochlorides like dioxin (a by-product of chlorine when it is burned or processed), PCB's, PVC's, and some plasticizers are just a few of the many chemicals that act like estrogen in our bodies. (Many others have the effect of interrupting our normal endocrine function, hence the name "endocrine disruptors").

Mainstream medicine is finally paying attention because xenoestrogens not only affect the cells of women, but those of men and children. Sperm counts have dropped by 50% in some studies, a significant factor in the epidemic of infertility. The age at which girls develop secondary sex characteristics (breasts and pubic hair) is also dropping. It is not exactly clear what role endocrine disruptors as a whole have in the steady rise of chronic diseases in children (at earlier ages!) but studies are underway to evaluate this.

We live in an estrogen dipped world and it is easy to see why Dr. Lee's advice to support our bodies with extra progesterone makes some sense.

Benefits & Safety of Using Natural Progesterone

While natural progesterone has been referred to as a progestin because it maintains the lining of the uterus, it is technically separate and totally different from synthetic progestins. In addition, natural progesterone provides a number of biological actions, which progestins do not. Some additional benefits reported with the use of natural progesterone include:

- reduces joint pain and swelling
- enhances skin moisture
- fades liver spots
- heals wounds faster
- reduces yeast infections
- supports the immune system
- protects against the side effects of unopposed estrogen
- tranquilizes
- promotes sleep

Therapeutic Applications of Natural Progesterone

In fact, there are many therapeutic uses for progesterone that promote health and well-being.

Here is a short list of some of those benefits:

- helps to prevent osteoporosis, the formation of fibrocystic breasts, and breast cancer
- normalizes zinc and copper levels and maintains the secretory endometrium
- contributes to regulating the thyroid gland and blood clotting mechanisms
acts as an antidepressant and precursor to corticosterones- necessary for the proper production of adrenal hormones
- works to stabilize blood sugar and prevent salt retention
- enhances libido and thermogenesis (the burning of fat) protects the uterus and breasts from malignancies
- aids the survival and development of the fetus
- has a natural diuretic action
- is very hydrating to the skin in transdermal form

Safety of Natural Progesterone

Natural progesterone is one of the safest supplements available. In contrast to synthetic progestins, it has little or not side effects. Some women may experience an estrogen reaction upon first introducing natural progesterone to their system, and in these cases, estrogen-related symptoms may temporarily become worse. If this occurs, natural progesterone should be continued or dosages adjusted until hormonal balance is achieved. Incidental spotting between periods also may occur but is usually resolved within three to five cycles. The use of natural progesterone has not been linked to any form of human cancers.

There is no known interference or alteration from combining natural progesterone with other drugs. No adverse effects of natural progesterone have been reported on the developing fetus of pregnant women, unlike its synthetic counterparts, however its use in pregnant or nursing mothers has not been clinically documented.

The Natural and Safe Way to Hormonal Balance, by Rita Elkins M.H.

Dosing and Application for the Endau Herbal Harmonizing Cream

In general, it takes about 2 to 4 months for the progesterone in the body fat to reach physiological equilibrium for those who are menopausal and about 1 to 2 months for those who are pre-menopausal.

Progesterone is best absorbed where the skin is relatively thin and well supplied with capillary blood flow. Areas such as face, neck, upper chest, bottom of feet, top of hands and inner arms are good areas. Spread out to as big an area as possible for maximum absorption and allow as much time for absorption as possible. Therefore, bedtime application is best if you are applying it once a day. Twice a day application is best but it may be too troublesome for most. Rotate to different areas to avoid saturation in any one particular site.

Practically speaking, the best gauge for the ideal dose should not be determined by any laboratory test alone. It is important to rely on relief of symptoms when figuring out the ideal dose. ***The right dose is the dose that works.***

The following are general recommendations for topical progesterone cream application that may need to be modified for specific situation:

Women in premenopause - still ovulating:

Use: Progesterone cream can be used to relieve PMS, painful cramps with periods, menstrual irregularities, prevent cancer and to protect against osteoporosis later in life.

- **1/2 tsp. 2Xs a day, every day for two months straight (no break)**
- **3rd month, stop cream day period starts - stay off cream for 7 consecutive days.**
- **Continue with this type of dosing – 21 days on 7 days off each month. Smaller size woman would only use 1/4 tsp. 2Xs a day (same as above)**

Women in peri-menopause (still menstruating with menopausal symptoms and/or PMS but not ovulating):

- **Use:** Progesterone cream can be used to relieve PMS symptoms and prevent osteoporosis.
- **Directions:** Count the day the period begins as the first day. 1/2 ts. Twice daily from day 7 to day 27. If your period begins early, stop using Progesterone cream while you are bleeding.

Women in menopause (not menstruating):

Use: For prevention or reversal of osteoporosis and relief of menopausal symptoms.

- **1/2 Tsp. 2Xs a day, every day for one month straight (no break)**
- **2nd month, stop cream for 4 consecutive days - continue with this type of dosing (27 days on, 4 days off) each month**
- **Smaller size woman would only use 1/4 Tsp. 2Xs a day (same as above)**

Directions for those taking an estrogen and synthetic progestin (such as Provera) combination: Stop the synthetic progestin immediately when progesterone cream is added. Estrogen should be tapered off slowly.

Dosing Progesterone Cream PMS, Younger Women & Teens

- 1/2 Tsp. 2Xs (average size body type)
- Start dosing on day 12 (day1 being the day the period starts) then stop cream on day 26 - period should start on day 28
- Smaller Size Woman Would Only Use 1/4 Tsp. 2Xs a day (same as above)

Infertility

You may need to suppress your ovulation for the first two months to help stimulate egg production. You do this by using the progesterone cream every day, twice a day, right through your period for two months straight. . If you are average size or heavier use 1/2 tsp. 2xs a day. If you are on the thin side use 1/4 tsp. 2Xs a day.

The third month purchase an ovulation monitor. The day after you ovulate start dosing as mentioned above. If you do not get a period after starting the cream, DO NOT stop the cream, continue using it up to the 3rd trimester of the pregnancy. By the third trimester the placenta will be producing 300-350 mgs per day of progesterone. If you do not get pregnant, the day you start your period stop the cream, then start it back up again the day *after you ovulate and continue dosing like this until you get pregnant.*

Men 42 Or Older

1/4 tsp. once a day without taking a break. Apply to inner arms, behind the knee or on the neck.

Tapering Off the Patch:

At Powersurge, there is a transcript of an interview with Dr. Lee:

<http://www.power-surge.com/transcripts/johnlee.htm>

He said "The right dose of estrogen will be found to be about 1/10 of a patch." So you could start by having cutting her patches down right away!

Here are the recommendations at Powersurge for weaning off the patch:

To taper off the patch, it is suggested you should cut each one in half, tape the edges and continue using it that way for a month, changing it once or twice a week depending on your dosage, after which time you can stop. Or, the patches can also be cut into quarters and even eighths if symptoms persist. Other recommendations for weaning off the patch are to apply the patch every two weeks for awhile then every month to go off it.

Other Special Uses

- **Osteoporosis:** Use as above for both pre and post menopause. Baseline bone mineral density (BMD) test should be obtained. If after 1 year, if the bone density increased, the

amount can be reduced by half. If BMD does not increase, other factors such as exercise, diet and optimization of nutrition should be undertaken together with a full medical workup to identify other underlying causes.

- **Uterine cramps:** apply above the pubic area at onset of cramps.
- **Hormone related headaches:** apply creams to the sides of the neck just behind the earlobe at onset of headache. In addition to daily dosing, apply chocolate chip size doses on fingertips and massage into the sides of the head (temple area), every 20 minutes for up to 4 hours....hormonal headaches will subside or go away altogether.
- **During hot flashes:** apply a small dab to the inside of the wrist at the onset of hot flashes.
- **Polycystic ovary disease:** Use as stated above for you own specific circumstances~ Adjust accordingly if for longer or shorter cycle. As the hormonal balance is regained, facial hair and acne, two commonly associated symptoms, will disappear.
- **Progesterone cream and pregnancy:** According to Dr. Lee, one of the chief causes of early pregnancy loss is the failure of the body to increase progesterone production sufficiently during the first several weeks after fertilization. Women who are having difficulty conceiving or who may be at risk of a miscarriage may wish to discuss with their physician to begin natural progesterone supplementation after ovulation. Also...see above for infertility support.
- **Breast cancer prevention:** Breast cancer occurs most often during estrogen dominance. Dr. Graham Colditz of Harvard postulated that unopposed estrogen is responsible for 30% of breast cancer. Preventive low-dose progesterone supplementation (12-15 mg per day) can be used 24 to 25 days a month should be considered, especially for those at risk.
- **Breast cancer patient:** Progesterone supplementation should be maintained for life with all breast cancer patients, before, during and after surgery.
- **Uterine fibroids:** Use as stated above for your own specific circumstances. Ultrasound tests can be obtained initially as baseline and after 3 to 6 months of use. A 10-15% reduction in size is generally expected or at least the size should not increase further. Continue this treatment until menopause if it is successful. At menopause, progesterone application can be reduced. Fibroids normally atrophy after menopause as estrogen level reduces.
- **Breast Fibrocysts:** Use as above.... Also take 400 IU of vitamin E at bedtime, 600 mg of magnesium and 50 mg of vitamin B6 a day. Do also refrain from coffee and reduce sugar and fat intake.
- **Increase Libido:** Progesterone and testosterone are both important factors in libido. Testosterone is much more potent. Natural progesterone is the preferred choice.
- **Hair Loss:** When progesterone level drops due to ovarian follicle failure (lack of ovulation), the body responds by increasing the synthesis of androstenedione, an adrenal cortical steroid. This has some androgenic properties, resulting in male pattern hair loss. Natural progesterone supplementation for 6 months may be helpful to reduce the androstenedione level, at which time normal hair growth will resume.
- **Hypothyroid:** Thyroid hormones and estrogen have opposing actions. Progesterone also opposes estrogen. Symptoms of hypothyroid occurring in patients with unopposed estrogen or estrogen dominance (progesterone deficiency) become less symptomatic when progesterone is replaced.

Getting Off HRT

Questions and Answers About Getting Off HRT and Onto Natural Hormones What You Need to Know About Starting Bioidentical Hormone Therapy (BHRT)

How to have balanced hormones, and relief from menopausal symptoms, without using conventional HRT!

The Women's Health Initiative (WHI) study was canceled because of a high risk of breast cancer, heart disease and stroke associated with using HRT (hormone replacement therapy). The study analyzed the health of 16,000 women aged 50 to 79 years. After five years, those using HRT (Premarin and Provera or PremPro) had a 29 percent higher risk of breast cancer, a 26 percent higher risk of heart disease, and a 41 percent higher risk of stroke.

To personalize these numbers a bit more, of the 6 million women who are using PremPro, this translates to approximately 4,200 women who got breast cancer, 4,800 women who got heart disease, and 10,800 women who had a stroke in a five-year period because they were taking this form of HRT. If we extend these numbers out over a decade, nearly 40,000 women were harmed by taking these drugs. That's an epidemic, and doesn't include all the women who suffered from weight gain, fatigue, depression, irritability, headaches, insomnia, bloating, low thyroid, low libido, and gallbladder disease and blood clots.

One of the most disturbing aspects of this scenario is that it was created due to the carelessness of conventional medical practice, which dictated – without good supporting evidence of safety and efficacy – that any woman over 50 complaining about anything remotely related to menopause be put on HRT. Their hormones weren't measured to find out which ones they needed or how much, and they were subjected to a one-dose-fits-all mindset that created overdoses of estrogen for millions of women. Furthermore, the efficacy of progesterone in hormone replacement has been totally ignored in favor of the patentable (and therefore more profitable) synthetic counterparts known as progestins.

To readers of my books and newsletters, the risks and side effects of conventional HRT are not news – the evidence of harm has been showing up in research for at least a decade. This particular study was finally large and prestigious enough that conventional medicine was forced to pay attention.

Questions and Answers about Natural Hormone Replacement Therapy

Q: Do the results of the WHI apply your recommendations of using natural estrogen and progesterone?

A: Not at all. What I recommend is first measuring saliva hormone levels to find if there is a hormonal imbalance. Then, if necessary, correcting the imbalance using natural hormones in physiologic doses, which means ordinary doses that the body would naturally produce itself. (Please read one of our "What You Doctor May Not Tell You..." books for details.)

Another way to look at this is, from puberty until menopause, a healthy woman's body is making its own natural hormones in synchrony and balance, without giving her cancer, heart disease or strokes. What I recommend is attempting to regain this natural balance as closely as possible.

Conventional HRT not only fails to measure hormones and use physiologic doses, it uses synthetic, not-found-in-nature "hormones" that are foreign to the human body and cause a long list of unwanted side effects.

Q: How Do I Get Off PremPro?

A: Most women simply need to lower their dose of estrogen and replace the progestin (the "pro" part of the PremPro) with progesterone cream.

Estrogen is a prescription-only medication in the U.S., so you'll need to ask your doctor for a separate prescription for estrogen, preferably either estradiol, or a combination of estradiol and estriol, or estriol alone (please read our breast cancer book for details on using estriol). Even Premarin, although ethically objectionable in the way it is obtained from pregnant mares, will work if it is used in the lowest dose needed, and in combination with natural progesterone. If you discontinue estrogen suddenly, you're likely to suffer from hot flashes and night sweats. Hot flashes and night sweats are less likely if the estrogen dose is decreased in gradual steps.

Unless your doctor already has you on a low dose of estrogen, you can begin with half the dose you have been taking when you add progesterone cream in place of the progestin. Many menopausal women don't need any estrogen at all, and can gradually taper (over 3-4 months) their dose down to nothing. Although transdermal progesterone alone will alleviate menopausal symptoms for many women, some women may need a little bit of estrogen to control their symptoms. Symptoms of estrogen deficiency include hot flashes, night sweats, and vaginal dryness.

Q: My doctor says that I can't use estrogen and progesterone cream, because progesterone cream won't protect my uterus the way the progestins do.

A: Progesterone cream protects the uterus just fine. Not only did I not have any problems in my hundreds of menopausal patients before I retired from practice, I am in touch with dozens of physicians who have thousands of patients between them, who have never had a problem (some of them have been doing this for over a decade). Furthermore, soon-to-be published double-blind, placebo-controlled study by Helen Leonetti, M.D., proves that progesterone cream protects just fine. Her study compared the uterine protection of PremPro with an estrogen/progesterone cream combination. In short, the women on the progesterone cream came out just fine.

You might also ask your doctor how he thinks that your premenopausal body protected itself against estrogen effects! It was the progesterone that your ovaries made every month!

Q: My doctor says that because blood tests don't show a rise in progesterone when progesterone cream is used, that it doesn't work, and I should use oral progesterone.

A: Blood tests only measure the serum, which is the watery part of the blood, and progesterone that comes from cream use is carried in the red blood cells, not in the serum. The most accurate way to measure hormone levels is with a saliva hormone level test, which measures your active or bioavailable hormones. When you use progesterone cream, a saliva hormone test will show a gradual rise in hormone over a three-hour period, and then it reaches a plateau for several hours and then gradually drops such that 90-% is gone after 15 hours. This amount of time is an average, and can vary a bit from woman to woman.

Q: I read an article in a major magazine where a doctor is quoted as saying that natural progesterone stimulates tissue growth in the breast and therefore could contribute to breast cancer. Is this true?

A: We have tracked down the source of this information, and once again, it was a progestin, not progesterone, that stimulated the cell growth in the study being referred to. As you'll read in our books, progesterone stimulates cells to grow toward differentiation, which is an anti-cancer property. Cancer cells are undifferentiated, and thus grow without control. Progesterone also encourages cells to die when they're supposed to (which cancer cells don't do). This topic is covered in detail in What Your Doctor May Not Tell You About Breast Cancer. Dr. John Lee

What to look for in a good Progesterone Cream

These are Dr. John Lee's recommendations for finding quality natural progesterone cream. There are SO many on the market, many of which are nothing more than glorified moisturizing lotions. Do your homework when looking for one! We here at Women For Balance use a cream called Endau Harmonizing Cream.

A good cream must have 400-500mg of progesterone per ounce in it. (Not more, and not less.) It must contain "USP Progesterone" or "progesterone". Check the ingredient list to be sure it is listed as such. Anything else is not the converted hormone that your body can use.

- It must not contain any form of glycerin, petroleum or mineral oils in it, as these will clog the pores of the skin and make it hard for the progesterone to get into the bloodstream.
- It must not contain phyto-estrogens like Black Cohosh, Dong Quai, Red Clover, Licorice Root and Siberian Ginseng. These will stimulate our own estrogens and if we are already estrogen dominant, we don't want to use a product that is going to continually stimulate the estrogen.
- According to Dr. John Lee, compounded (prescription) creams are too concentrated and most women do better on OTC creams. Compounded creams usually have 10% progesterone, whereas most OTC creams have 3%. He says that when it comes to progesterone, less is best.
- We have also found that progesterone cream in a jar is not a good choice. Each time the jar is opened, the progesterone is exposed to air. This lessens the effectiveness of the progesterone. Also, each time you dip your finger into the cream, you introduce bacteria into it. Opt for a progesterone cream that is packaged in a tube.
- Dr. Lee also said that a progesterone cream with a pump is unnecessary. The dosage does not need to be that exact. You are essentially paying extra money for the convenience.

What is Spiking?

When a woman first begins to supplement with Natural Progesterone, it is not uncommon for her estrogen to spike up against it, in an effort to remain dominant. When this happens, the estrogen levels rise a bit and her estrogen dominant symptoms *may* worsen for a very brief period of time. In Dr. Lee's books, he mentions that she may even experience different symptoms than she originally had before going on the progesterone. This estrogen spike period usually shows up in the early weeks of use and it very rarely lasts more than 3 or 4 days.

This is NOT a time to panic and stop using the cream, but rather, be sure you are using the proper dosing for the cream or progesterone supplement you are using. If you back down or quit using the progesterone, it will allow your estrogen to remain dominant, and in its heightened state.

This is actually an indicator that the progesterone is working it's magic for you! Hang in there and press through your spike! The other side is WONDERFUL!!!

Also known as:

The Herxheimer Reaction

Is it ever good to feel bad? In some cases, yes. When you start a new treatment for an illness, your symptoms might increase at first, leaving you wondering if you're really getting healthier at all. This is called a Herxheimer reaction. This is the "die-off" effect that many people experience when they dramatically improve their diet and lifestyles. It is an allergic response to the toxic by-products

produced when the body's pH is changed for the better. When this happens, large numbers of dangerous bacteria and yeast organisms die and leave the body.

During this period, you won't feel very well, but in reality, you are responding positively to treatment. After this initial detoxification period, you should see significant improvement of your symptoms.

Endau™ Harmonizing Cream

Feel better now with Endau

If you're a woman, you know that each phase of your life cycle brings its own unique set of challenges. From youth to motherhood and beyond, balance is essential to true well-being.

Newly enhanced with improved moisturizing ingredients, Endau™ Harmonizing Cream is a light, fast-absorbing cream that incorporates progesterone with herbal extracts to promote balance and harmony. Endau™ Harmonizing Cream is a gentle cream that helps all women through the challenging phases of life by promoting balance and well-being. Welcome to the new definition of women's wellness.



BENEFITS

- Promotes balance
- Provides harmonizing capabilities
- Enhances moisturization and absorption
- Easy-to-use lotion

RECOMMENDED USE

Apply ¼-½ teaspoon to soft skin regions of the body. Use one to two times daily for 21 consecutive days and discontinue use for 7 consecutive days each month of use more often as directed by your physician. Each ¼ teaspoon contains 16mg of progesterone.

KEY INGREDIENTS

- **Progesterone**—USP grade progesterone, which is a naturally occurring chemical in the body.
- **Dioscorea villosa (Wild Yam) Root Extract**—A soothing skin conditioner with protective qualities for women's unique needs.
- **Prunus armeniaca (Apricot) Kernel Oil**—This skin-pampering moisturizer helps hydrate dry skin.
- **Musa sapientum (Banana) Flower Extract**—An effective antioxidant that helps the skin look radiant.
- **Hydrolyzed Oryza sativa (Rice) Protein**—A protein that supports firm, smooth skin.
- **Spent Grain Wax**—This natural ingredient contains antioxidants and vitamins that hydrate and vitalize the skin.
- **Aloe barbadensis Leaf Juice**—Promotes young, vibrant-looking skin.
- **Dimethicone**—Provides a soft, silky feel to the skin.
- **Stearyl Glyccerhetinate**—An extract from licorice that naturally soothes the skin.
- **Sorbitol**—Promotes moisture retention in the skin.

* The soy protein we use in Endau is a soy germ protein. The germ extract helps condition the skin and does not serve as a phytoestrogen. It is not standardized for any diosgenin.

REFERENCES:

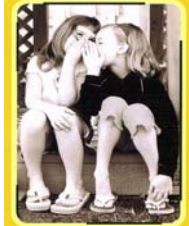
1. Mercurio G, et al. Am J Cardiol 1999 Jul 15;84(2):214–18. Effects of acute administration of natural progesterone on peripheral vascular responsiveness in healthy postmenopausal women.
2. Bayliss DA, Millhorn DE. J Appl Physiol 1992;73:393–404. Central neural mechanisms of progesterone action. Application to the respiratory system.
3. Chithra P, et al. Indian J Exp Biol 1998;36:896–901. Influence of Aloe Vera on collagen turnover in healing of dermal wounds in rats.
4. Oikarinen A. Photodermatol Photoimmunol Photomed 1994;10:47–52. Aging of the skin connective tissue: how to measure the biochemical and mechanical properties.

[Order Neways Endau – Natural Harmonizing Cream](#)

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I highly encourage you to read Dr. John R Lee's books:

- "What Your Doctor May Not Tell You About Premenopause"
- "What Your Doctor May Not Tell You About Menopause"
- "Hormone Balance Made Simple" The Essential How-to Guide to Symptoms, Dosage, Timing, and More John R. Lee M.D. and Virginia Hopkins
- [Frequently Asked Questions About Natural Progesterone Cream](#)
- [Progesterone Cream & Osteoporosis](#)
- [Estrogen Update](#)
- [Natural Progesterone Cream](#)
- [How many of these 50 symptoms are you experiencing?](#)
- [Where in Perimenopause are you?](#)
- [Endau Natural Progesterone Cream](#)

	<p>Hard Hitting Facts About How To balance hormones naturally - You Don't Want To Miss This! "Balance Hormones Naturally" Newsletter Click Here to Sign Up and Receive Your Free E-book which includes :</p> <ul style="list-style-type: none"><input checked="" type="checkbox"/> "A Cure Women Can Trust"<input checked="" type="checkbox"/> "The Secret of Natural Progesterone"<input checked="" type="checkbox"/> "The Natural Cure for Hormonal Imbalance"<input checked="" type="checkbox"/> "Conquering PMS" <p>and more.....</p>	<p>Contact Information</p> <p>Judy Tovey Neways Consultant 309-862-3624 or cell 309-826-2416 Website: http://antiagingchoices.com e-mail - judy@antiagingchoices.com</p>
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