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AUTHOR INTERVIEW

I'm Too Young For This! The Natural Hormone Solution to Enjoy Perimenopause

By Life Extension

Suzanne Somers has been dubbed a health “pioneer” by Oprah Winfrey and been told by Dr. Mehmet Oz that she is “crazy smart.” She is the author of twenty-four books and has appeared on hundreds of national broadcasts to discuss her cutting-edge views on how medicine should be practiced. The *Wall Street Journal* says she writes with “the passion of a prophet.”

In this interview, Somers sits down with *Life Extension*® to discuss some of the highlights of her latest book, *I'm Too Young For This! The Natural Hormone Solution to Enjoy Perimenopause*.

LE: In your book you talk a lot about understanding how hormone loss can affect women as they age. You talk specifically about a period known as *perimenopause* that may make women feel very unlike themselves. What happens during this phase?

SS: Hormonal loss can make you feel like you are going crazy. You don't know who you are anymore, and you can't rely on feeling good each day. Perimenopause is the transitional stage from normal menstrual periods to no periods at all. It may start in your thirties or forties and it will continue until you reach the final stage, menopause, probably sometime in your fifties. You are transitioning. This process and the cluster of symptoms that often come with it can start ten years before full-blown menopause. Perimenopause is a natural phase of life, and in many cases it is a difficult transition. When you don't understand what's happening and don't know how to manage it, then your health and your sanity can be challenged.



abdomen to just above your knees.

LE: How does having low thyroid levels affect weight gain during perimenopause?

SS: One of the most common complaints of perimenopause is unexplained weight gain. You start getting “thick,” especially around the middle. Your belly bloats and you retain water, even when you never did before. You may eat less and exercise more yet you still can't lose the weight; instead, often you gain weight. Low thyroid, a major metabolic hormone, is usually the culprit. When it's too low, you don't metabolize food effectively and the calories you consume turn into fat instead of being used for energy; this is why exercising and dieting helps a little, but you just can't achieve the weight loss you desire. Low thyroid weight tends to be distributed evenly on your body. When low pituitary function is at the root of your low thyroid function it's generally confined to the area from your



LE: Other problems many women face include foggy thinking and forgetfulness. Why are these such common symptoms?

SS: Brain fog is a result of a complex series of events that happens to women. First, it's about estrogen depletion. The brain needs estrogen to function properly. When a woman is deficient in estrogen, she develops senior moments—whatever description you can handle to take the edge off your embarrassment with your friends and make for a big laugh. You may be laughing off your embarrassment on the outside, but on the inside there is nothing funny about it.

When it happened to me, I secretly harbored a fear that that this was the first stage of Alzheimer's, the most frightening of all diseases to me. Estrogen depletion also causes headaches and migraines.

LE: You talk about depression relief in your book. What are maturing women missing other than their hormones?

SS: Serotonin profoundly affects the brain, where it impacts brain cells by various mechanisms. Serotonin activity is essential for enjoying a relaxed and happy brain. This is the feel-good neurotransmitter that many women lack.

LE: Many women may not understand the essential role that neurotransmitters play in vital brain function. Specifically, what are we talking about here?

SS: Neurotransmitters that become depleted as we women age include dopamine, serotonin, and GABA. PMS symptoms are really an indicator of serotonin deficiency, and because a woman's levels are deficient or low, she will experience depression, anxiety, insomnia, and often brain fog. Most women at this point need something to take the "pain" of anxiety, worry, and bodily aches away. So they go to alcohol or over-the-counter or prescription drugs like Prozac[®], Oxycontin[®], or Xanax[®].

LE: It's no wonder then that even something as simple as headaches can be a result of a hormonal imbalance.

SS: Headaches, sadly, are part of the perimenopausal and menopausal experience for so many women. Women suffer migraines, a particularly debilitating type of headache, about three times more frequently than men, affecting up to **60%** of all women at some point in their lives. They occur before, during, or immediately after a period, or during ovulation. They range from mild to "migraine fierce." Why do these debilitating headaches occur more frequently during perimenopause? The brain requires estrogen to operate optimally. Low, imbalanced, or fluctuating estrogen levels can trigger migraines; menstrual migraines are primarily caused by estrogen, and when the levels of estrogen and progesterone change, women are more vulnerable to migraine headaches. Too much or too little estrogen causes blood vessels to dilate. If your progesterone is too low to balance your estrogen, leaving you estrogen dominant, the swelling blood vessel dilation caused by unchallenged estrogen can be a catalyst.

LE: You also write that magnesium intake may be related to headaches as well. How so?

SS: Insufficient magnesium levels make arteries more susceptible to spasm and are another common cause of other types of headaches. One possible reason for this deficiency in magnesium is a chronic imbalance of estrogen to progesterone. This imbalance is not only uncomfortable, but a dangerous setup for cancer.

LE: You recommend to your readers that getting blood tests is of the utmost importance. Why do you feel this way?

SS: It's crucial to test your blood hormone levels so your doctor can initiate a customized bioidentical hormone program that's just right for you. After you are placed on bioidentical hormones, some doctors will suggest a urine test that monitors the amount of estrogen and other hormones you are making over a twenty-four-hour period to get a more accurate picture of where you are hormonally. The first step is to identify your baseline hormone status. This is to know the ranges of all your hormones and gives you and your doctor the best picture for your symptoms. If you suspect you are entering perimenopause, it is extremely important to test your hormone levels.

LE: You spoke to Life Extension's own Bill Faloon on this very topic, correct?

SS: Yes. My question to him was: If a woman concludes that she is symptomatic and her decline has begun, should she get hormones replaced without testing her hormone levels? He replied: "Think about this. . . . Would you drive your car without being able to see outside the windshield? That, regrettably, is how most conventional doctors treat their patients' problems. When a woman complains of symptoms related to sex hormone deficiency, if she's not with a qualified doctor, he may prescribe the same dose of estrogen, and possibly a synthetic progestin drug. The doctor hopes this blindly prescribed dose will alleviate perimenopausal symptoms. In other cases, the physician may not recognize the symptoms as being a hormone deficit and instead prescribes side-effect-laden antidepressant drugs, addictive anti-anxiety drugs, and/or sleeping pills. But with blood test results in hand, a qualified physician can determine the best individualized dose of natural estrogen, natural progesterone, DHEA, and other hormones required for preservation of healthy vitality."

LE: Your book, *I'm Too Young for This*, offers incredible information, however, one of the takeaways seems to be that mainstream medicine is falling woefully short in terms of helping out aging women. How has this happened and what does it mean moving forward?

SS: At present, our medical schools are teaching fifty-year-old medicine. Every answer to every disease and condition has a pill attached to it. If you look around at our senior generation, you see for yourselves that they are not doing very well on all the pills

they have been given over the years. It's a cruel hoax; they trusted and they believed that medicine knew best. We get confused because we have been raised to believe doctors are supposed to know everything. That's a lot of pressure for your doctor. Stay with your doctor for the things he or she knows, but go to the right doctor if you are looking for hormone balance (someone who specializes in BHRT). Doctors are good people we hire to take care of our bodies. But they are not *in charge* of our bodies . . . that is our responsibility.



LE: Is personal responsibility the main message you want women to take away from your new book?

SS: The message in this book is not to go to the doctor as a child anymore. Empower yourself with information about how your body works; it will allow you to discuss your health intelligently with your doctor. Together you can decide a personalized plan for your ongoing health. It's up to you to choose optimal health. Remember, you hire your doctor! *You* are the contractor. As you continue to age, you will hire other doctors specializing in new medicine to manage and maintain all your other parts. Perimenopause is a passage . . . a passage into the next phase of your life called menopause.

LE: What has been your greatest frustration in recommending maturing women replace their sex hormones?

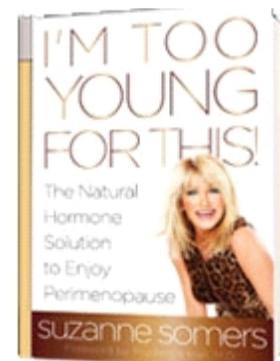
SS: I never worried about the criticism. I always knew they just didn't understand that I was advocating a natural individualized approach to hormone replacement, whereas conventional doctors were prescribing synthetic drugs on a one-size-fits-all basis. The problem was women were reading my books and asking their doctor for natural hormones, but most doctors didn't know the difference and either refused to prescribe sex hormones or put women on drugs like Premarin[®], Provera[®] or Prempro[®], which are unnatural to the human body and dangerous as far as I was concerned.

LE: So after ten years of being on the right side of the science, what is your solution to the problem of widespread physician apathy and ignorance?

SS: For the first time, I believe the problem in finding knowledgeable physicians has been solved. A network of anti-aging doctors has been established so that women can log onto a website (ForeverHealth.com) and find a doctor in their area who will interpret their blood test results and prescribe the precise amount of natural estrogen and progesterone to meet each woman's individual requirements.

LE: This would be unprecedented. For the past 33 years we at Life Extension have been challenged in identifying knowledgeable physicians to refer our members to. If women can take their blood test results to a physician who can individually restore youthful hormone balance, the age-reversal impact on a societal scale would be monumental.

SS: That's my dream. There are now ForeverHealth.com doctors in most major cities with more coming on board. These anti-aging physicians are dedicated to addressing the hormonal replacement needs of maturing women on an individualized basis. The quality-of-life enhancements I and other women I've helped have experienced are profound. Most say they have never felt better. All women have to do to see if a doctor is in their area is log on to ForeverHealth.com



LE: That's tremendous, Suzanne. With your new book (*I'm Too Young For This!*), the incredible amount of media attention you're now receiving, and the availability of knowledgeable physicians, the average female now has an opportunity to enjoy the multiple anti-aging effects of natural hormone replacement.

If you have any questions on the scientific content of this article, or you'd like to order a copy of *I'm Too Young For This!*, please call a **Life Extension[®]** Health Advisor at 1-866-864-3027.

Suzanne Somers is the author of twenty-four books including numerous *New York Times* best sellers.

treat, cure or prevent any disease.

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