

Article date: 2014

written by Michelle J. Pouliot N.D.

Menopause Naturally for Woman with Breast Cancer Concerns

Since 2000, two million American women yearly have entered menopause. By 2015, 50% of women in the U.S. will be menopausal. Menopausal symptoms affect 80% of women with different presentations and intensity. Women experience these symptoms for months to years, while for some symptoms can be life-long. Conventional medical approaches include hormone therapies, antidepressants and sleep medications. Integrative and naturopathic care offers botanical medicines, vitamins, minerals, and acupuncture, diet and lifestyle changes.

Women who have had breast cancer have special considerations when dealing with menopause concerns. As a naturopathic physician, the women I see who've been treated for breast cancer want to know how they can be healthier, reduce their risk for recurrence, and what therapies can help with their perimenopausal/menopausal symptoms. Most of these women choose not to use hormonal therapies since many of their breast cancers have been estrogen and /or progesterone receptor positive. They're asking good questions. What are phytoestrogens and is soy safe to include in their diet? Are there herbs and supplements that can help with hot flashes, night sweats, sleep disturbance and mood swings that won't interfere with drug therapies such as Tamoxifen and aromatase inhibitors.

No two women have had the same journey with their breast cancer. They differ in age at the time of their diagnosis, the type and pathology of their cancer, their perimenopausal/menopausal status before and after treatment, and of course, in their life styles. I rarely prescribe the same therapies to my patients, but there are some herbs and nutrients that many menopausal post breast cancer women can benefit from.

Phytoestrogens are plant constituents that biochemically resemble estrogen in such a way that they can bind, though more weakly than actual hormones, to estrogen receptors and activate them. They are not nearly as potent as hormones, are less than 1/200th as stimulating as estrogen, and in the case of soy, tend to bind more to the type of estrogen receptors, the Beta receptors, not found as much in breast tissue. The human body cannot convert phytoestrogens into the actual hormone estrogen, which is a common misconception. In other words, our bodies don't make estrogen from tofu. Some other plants known to contain phytohormones include Ginseng, Licorice, Red Clover, Alfalfa, and Mexican Wild Yam (not to be confused with the yams and sweet potatoes we eat).

Michelle J. Pouliot N.D.
New Hartford Naturopathic Health Center, LLC
Phone: 860.238.7983

In the past 2 decades, research on the role of soy consumption and its effects on breast cancer has varied. In the 1990s, soy intake appeared to possibly be protective against the development of breast cancer. In the early 2000s, women in treatment for breast cancer, were advised to avoid soy foods because it was theorized to interfere with Tamoxifen. More recently, in 2009 and 2011, two breast cancer survivor studies showed that women consuming soy, either on or off Tamoxifen, had lower breast cancer recurrence than women not consuming soy. This is not to say I recommend soy foods to all my breast cancer patients, because it may not be a good choice for everyone, but for vegetarian and vegan patients, this information is reassuring about their diet lifestyles.

There are many herbs and nutrients not containing phytoestrogens that can help with menopausal symptoms. In the past 25 years, Black Cohosh has been one of the most researched herbs for the treatment of menopausal hot flashes. Extensive research has shown that Black Cohosh does not stimulate estrogen receptors in the breast or uterus and has no effect on blood levels of estrogen or progesterone. Lab data has shown that Black Cohosh inhibited growth in estrogen receptor breast cancer cells in vitro and this effect was augmented by tamoxifen. In a 2011 study, breast cancer survivors were given post treatment Black Cohosh for 6 months. These women had significantly fewer hot flashes, less anxiety, and improved sleep quality compared to women who didn't take the herb. I've been prescribing Black Cohosh to many menopausal women in my practice for the past 15 years and I've seen it help most patients with hot flashes and night sweats. Black Cohosh doesn't work quickly, so I advise taking a reputable brand for at least 2 months to determine its efficacy.

Magnesium supplementation has been shown to decrease hot flash frequency and severity. In a 2011 study of women who had been treated for breast cancer and having hot flashes, magnesium was found to bring some relief. Daily magnesium of 250 to 500mg was the dosage given. There are many forms of magnesium available. I recommend trying magnesium citrate, magnesium aspartate, or magnesium glycinate to determine which form is best absorbed. There are few side effects to taking magnesium, though taking too much or not the right form can cause loose bowels.

Evening primrose is another plant that can provide some relief for night sweats of menopause. Evening primrose oil (EPO) comes from flower seeds and contains omega 6 oil, which is one of the essential fatty acids, and doesn't have any phytoestrogen properties. Historically, EPO has been used to treat breast pain, heavy menses, and menstrual cramps. It's also very nutritive to the skin. I usually prescribe 1000mg daily if indicated.

Sleep disturbance is another common concern for menopausal women. Good sleep is essential to having good health. Research has shown that insomnia is associated with increased risk for cardiovascular disease, cancer, depression and weight gain. Many menopausal women are bothered by night sweats or flushes, wake frequently and can't get back to sleep, or report they don't sleep deeply and are restless most of the night. I believe this menopausal sleep deprivation accounts for a lot of the mood shifts, memory glitches, fatigue and probably some of the weight gain struggles contributing to the menopausal midriff.

Michelle J. Pouliot N.D.
New Hartford Naturopathic Health Center, LLC
Phone: 860.238.7983

There are many supplements that can help with insomnia. I often recommend melatonin, 3 to 10 mg before bed, to my patients during and after breast cancer treatment. Melatonin is known for its effect of resetting normal sleep cycles, but even more importantly, it helps with the body's immune system biorhythms. Herbs such as chamomile, passion flower, and lemon balm are gentle calmatives to the nervous system that can help with restless sleep. Magnesium glycinate is a mineral supplement that patients have noticed helps with falling back to sleep if they're troubled by sleep disruption. The amino acid, 5 hydroxy-tryptophan 50 to 100 mg before bed, aids some of my patients in falling asleep. 5 Hydroxy tryptophan is a precursor for the body's production of neurotransmitter serotonin. Ironically, if we don't get enough sleep, we don't make enough serotonin, yet without enough serotonin, we have poor sleep. Prescribed antidepressants, such as Prozac and Paxil, are selective serotonin reuptake inhibitors (SSRI). SSRIs elevate serotonin levels which can improve mood, and may help with insomnia and hot flashes/ night sweats. Some SSRIs may interfere with tamoxifen. Women taking prescribed medications for depression and anxiety need to discuss with their health care providers, any possible supplement and drug interaction.

Of all the ways to help with menopause, research shows exercise to positively affect the most symptoms and concerns. Women of all ages and fitness levels can exercise and without the complications of drug side effects. Exercise has been shown to decrease hot flashes and night sweats, improve sleep, increase bone density, reduce cardio vascular risks and help with menopausal weight gain. For women who have had breast cancer, exercise provides a specific benefit. Breast cancer survivors who walk for at least 3 hours per week, are 40% less likely to die from a breast cancer recurrence than women who don't exercise. This is an impressive and inspiring reason for all women to exercise for a minimum of 3 hours weekly. Yoga is another form of exercise that greatly improves women's menopausal transition. Two recent studies found yoga decreased several menopausal symptoms. A yoga study in a Geriatric journal showed that doing 10 minutes of yoga daily significantly increased bone density. I encourage my patients to incorporate regular walking and yoga into their daily lifestyle, and for breast cancer patients, I believe it's essential to their long term health.

Menopause is a momentous transition in women's lives. Many of my patients are relieved they're no longer getting their menses or riding the hormonal roller coaster. It's a time when we're (I'm 55 years old, so I'm including myself) entering midlife. We are evaluating what really matters, and how we want to direct the next half of our lives. I'm glad to say, I've seen hundreds of women go through menopause and beyond. Many of these women have overcome serious health challenges, and go on to embrace vital, passionate and energetic lives.