

Do You Need to Eliminate PMS From Your Life?



By: Frank Nuber

It's said, "Seventy-five percent of women suffer from headaches, mood swings, bloating and other problems that threaten their relationships, work life and well being." Most of us unconsciously accept this statement without a second thought. But is it a fact? No Way!

It's true that the symptoms of premenstrual syndrome (PMS), such as mood swings, irritability, depression, anxiety, fluid retention, bloating, breast tenderness, sugar cravings, headaches and sleep disturbances, affect a large number of women. In about 20% of those women, the symptoms are so severe that they need medical treatment. About 8% have such extreme symptoms that the problem has been given a new name: premenstrual dysphoric disorder (PMDD).

Just because you're a woman doesn't mean you have to live with these symptoms. The real fact is that suffering related to menstrual cycles is unnecessary and not caused by bad luck, but by bad habits, environmental toxins and stress - things that can usually be corrected with little to no drug intervention. Drug companies don't want you to know that! So the conventional treatments for PMS range from

anti-inflammatory drugs such as Advil or Aleve to birth control pills.

When these don't work, doctors pull out the big guns such as danazol, a prescription medication that suppresses ovulation and causes increased facial hair, acne and a deep voice or gonadotropin releasing hormone (GnRH) analogs. These newer, very expensive drugs actually change the brain's chemistry, turning off the ovaries' production of estrogen and progesterone. But they also lead to osteoporosis.

Sometimes, diuretics like spironolactone are used to treat fluid retention and bromocriptine, which stops prolactin production, is used to treat breast tenderness. No wonder the drug companies want you to believe that PMS is inevitable. Recently, they even helped create a new disease (PMDD) and a new indication for Prozac (now called Serafem after its patent ran out).

What's wrong with this picture?

It's based on the assumption that these symptoms are an inevitable part of being a woman, requiring "medical intervention" with serious medication to correct. Nothing could be further from the truth! It is absurd to think that so many women have a design flaw that requires medical treatment to live a normal life.

Let me tell you about a client of mine, Jennie, diagnosed with PMDD. She was barely able to work or function in her family and suffered three weeks each month. At 37 years old, she was severely depressed, fatigued, and anxious; suffering from severe food and sugar cravings, which led to overeating and weight gain. She had joint pain, breast tenderness, heavy periods, hot flashes, dry skin, acne and hair loss, memory problems, foggy

thinking, poor sleep, bloating and no sex drive.

She often started her day with a bagel and cheese, ate a cafeteria lunch, snacked on chocolates, had a healthy dinner but would binge later on ice cream, chips and Cheerios. She also ate a lot of dairy and was a big coffee drinker. One thing in her favor was that she didn't drink alcohol.

We know that sugar, caffeine, alcohol, stress and lack of exercise contribute to worsening PMS & PMDD. And, because of the hormones present in most dairy products, its consumption can worsen hormonal imbalances.

I had her change her diet, start exercising, asked her physician to give Bi-identical progesterone (after determining her level with a saliva test) and a few supplements; the results were dramatic in just 2 cycles. She lost weight, her energy dramatically increased, her moods stabilized and her acne and dry skin cleared up.

How did we do this without prescription drugs? We defined the imbalance, addressed the causes (diet, lifestyle, progesterone shortage) and then helped her body repair and regain balance. My client continued following these changes and was able to stop taking the progesterone four months later because that imbalance had been corrected. Her body's natural intelligence took care of the rest - All this without prescription drugs.

Since diet issues are so common in the women I counsel, I'm proud to announce our newest member of the team: Denise Graham, BS, MS.

Denise has her Masters in Holistic Nutrition from Clayton College of Natural Health and Bachelors in Psychology from Washington University - the perfect combination to



*Denise Graham,
BS, MS.*

do her life's mission and enhance our services to you.

For the last 20 years Denise has been in the health field, including animal health, medical research, enhancing and saving lives through organ and tissue donation, prevention, raising four children and navigating her own personal health journey. She understands the struggles individuals experience trying to find their way through the confusing maze of health options. Her passion is helping people live healthier lives by empowering them with education, guiding with practical wellness ideas and giving them the encouragement to instill new habits from a "Holistic" viewpoint.

Denise is currently taking appointments - call today to set up your appointment to begin your journey to better health.

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Call me at (636)278-6561 or
visit our convenient location:
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Frank Nuber, graduate of St. Louis College of Pharmacy, has been a compounding pharmacist for 23 years. He's been providing hormone consulting for over six years utilizing Salivary Testing and is a nationally known speaker. Wendy Bader, R.Ph. graduate of UMKC, has completed several courses on compounding and also is a hormone counselor.

