

The Natural Pharmacy Newsletter *In The News*

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Hormone Replacement Therapy

Hormone Replacement Therapy (HRT) can help combat many symptoms of hormone imbalance. For males and females levels of estrogen (estradiol, estrone, & estriol), progesterone, testosterone, DHEA, cortisol and thyroid hormones can significantly affect your health. Symptoms such as depression, mood swings, water retention, weight gain, sugar cravings, breast tenderness, PMS, fibroids, endometriosis, heavy bleeding, and irregular bleeding can be a sign of too much estrogen or not enough progesterone. Symptoms such as hot flashes, night sweats, urinary tract infections, vaginal dryness, poor concentration, difficulty falling asleep, forgetfulness, bone loss, headaches, emotional instability, fatigue, and irregular bleeding can be a sign of too much progesterone or not enough estrogen. A deficiency of androgens which include DHEA and testosterone can cause loss of energy, depression, memory lapses, vaginal dryness, loss of libido, incontinence, dry skin, brittle hair, loss of muscle tone, and decreased bone density. It is advisable to test levels of saliva hormones before starting therapy to see which



hormones need replaced. Blood levels can also be taken but are not as accurate as saliva testing because saliva testing looks at free active hormone levels. A test kit can be picked up in the store anytime the store is open.

The difference in benefit between traditional hormone replacement and bio-identical hormone replacement can be significant. For example, our bodies make progesterone which can support pregnancies, decrease water retention, increase body temperature, relieve anxiety and depression, increase insulin levels, promotes normal cell death, promotes cell maturity, decreased estrogen induced cell division, and can improve sleep. Many traditional hormone replacement medication contain synthetic progestins. These compounds work differently and can cause hair loss, dizziness, nervousness, menstrual irregularities, weight gain, breast pain, insomnia, depression, headache, decreased libido, abdominal pain, weakness, fatigue, pain, acne, and irritability. They also oppose pregnancies, contribute to cardiovascular disease, and increase breast cancer risk. Compounds can be made in various forms and adjusted to fit each person's specific needs. Most bio-identical hormones can be made into capsules, lozenges, suppositories, or creams. Creams are the preferred route because they get absorbed better and doses can be easily adjusted if needed. Compounding also allows dosing to be more accurate

than traditional hormone replacement. The goal is to give the least amount of estrogen possible to control symptoms, so that we can keep the risk of cancer low.

References:

1. Paoletti J. Homeostasis of Estrogens and Cancer Risk. The Pharmacists' Link; Winter 2010: 8-9.
2. Taylor E. Hormone Replacement: A Scientific, Evidence Based Approach. Confessions of a Gynecologist. Gibby Media Group Inc, 2006.

Bisphosphonates and fracture risk

A small study on the medication Fosamax (alendronate) used to treat or prevent osteoporosis has shown to increase rare leg fractures after prolonged use. The FDA has been investigating this since June 2008. At

this time they state that there is no clear evidence that links these drugs to thigh fractures.

However it is known that bisphosphonates enter the bone and decrease bone turnover and remodeling. This risk seems to increase after 5 years of taking this drug. It is recommended to take a 5 year drug holiday after 5 years of bisphosphonate therapy. This does not appear to increase fracture risk. At this point most studies have tested long term alendronate therapy because it was the first bisphosphonate on the market. This does not necessarily mean that it is the only bisphosphonate that causes this problem, just that it is the one that has been studied the most in long term therapy. It is already known that long term bisphosphonate therapy can cause osteonecrosis of the jaw, which means a breakdown of the jaw bone. This is why it is important to notify your dentist if you are taking these medications. More studies are needed to determine the relationship between long term bisphosphonate use, femur fractures, and osteonecrosis of the jaw. At this time, it is not recommended that you stop your bisphosphonate without first talking to your doctor. However consider other therapies that may



decrease bone loss. Low estrogen and testosterone can cause bone loss. It may be important for you to test your levels of these hormones. Another consideration is weight bearing exercise, because it has also been shown to improve bone density

References:

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Dietary supplements legislation

The senate has recently proposed new legislation named the Dietary Supplement Safety Act (S. 3002) that was officially released on February 3rd 2010. The bill would require that all dietary supplements, including multi-vitamins, to go through a government review process to be able to stay on the shelves. At this point in time the government has no supplements on their approved list. So if the bill went into affect today everything would have to be taken off the shelf. The National Products Association has set up a website (www.NPAinfo.org) to help email senators about this issue. They have also reached an agreement with senator McCain, who proposed this act, to help control anabolic steroid abuse a different way but still recommend contacting your senator to help keep the bill from coming back. Other helpful websites to get more information are www.saveoursupplements.org and senator McCain's website.

References:

1. Gay J & Fabricant D. NPA Conference Call on Legislative Threat to the Industry. 5 March 2010.
2. NPA Welcomes Senate Deal on S.3002. 11 March 2010. www.NPAinfo.org

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