

Live Healthy and Be Well!

“Hope for Hot Flashes”

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This month’s article comes from a recommendation by Lisa Romanello, who lives and deals with grapes in Rabun Gap. She wanted to know more about hot flashes – and not the good kind that others may write about in this “month of love,” but the really annoying kind that make you sweat and can keep you up at night.

“Hot flashes” can be experienced as a feeling of intense heat from within, and can be experienced along with increase in heart rate. They are typically experienced by women during the periods of peri-menopause (before and after) or during menopause itself. They may last from a couple minutes to a half hour or more. They often begin with “flushing” of the face and chest, but may spread over the entire body. Some women may have them infrequently and to a mild degree, and others may experience this several times a day and during the night.

Hot flashes are caused by a lack or decline of circulating estrogen. This is what happens during menopause as the ovaries begin to taper off hormone production. It is thought by many that this change in hormones brings about changes in the *hypothalamus* (organ within the brain) and the *autonomic nervous system*, both of which act to regulate and control temperature in the body.

As natural hormone levels always reach their *nadir* (lowest point) during the night, many women notice this problem more when sleeping. They experience “night sweats” and throw off the covers, only to get chilled in a bit as the flash passes. When this happens several times a night, it can significantly interfere with needed sleep, and lead to reduced quality of life overall. Does this sound familiar to anyone out there?

Men are not off the hook! Many may experience similar symptoms as their male hormones, mainly testosterone, begin to decline and decrease levels. This has been called “MANopause” or more accurately, andropause (as sex hormones are known as androgens). Men treated for certain type of cancers with “anti-androgen” drugs may also have this problem.

Women who have surgically lost their ovaries may also experience this problem at a younger age than normal. If a younger woman still having her regular cycle starts to have hot flashes, it should be investigated to rule out thyroid problems or perhaps an issue with the pituitary gland.

Treatment of hot flashes centers on replacing the hormone(s) that are becoming deficient. This is known as HRT – Hormone Replacement Therapy. In women, this involves replacing estrogen usually by giving them *estradiol*. It is available in pills, topical films or patches, and gels that can be applied to the skin. It is not without risk, though, as the oral forms can increase the risk of certain conditions, namely breast cancer, dementia, stroke, and formation of blood clots. There is some good evidence that the transdermal types that absorb through the skin such as a cream, gel, or patch, can provide the beneficial effects and minimize the adverse risks better than oral forms. But, if a woman is taking HRT, and still has a uterus, there is a need to take some

progesterone to minimize the risk of endometrial (uterine) cancer. Men may find some relief by taking testosterone, as long as they are a good candidate after a discussion with their provider.

It is a good idea, depending on the severity of your symptoms, to first try some alternative therapies that are more natural, before actual moving to HRT. *Phytoestrogens* are a class of substances found in ginseng, yams, red clover, and soy. While no studies have shown the level of statistical significance needed to imply a true effect, they have given relief to many and show a trend toward improvement.

Also, *flaxseed* has been very promising as it contains a type of phytoestrogen known as *lignans*, which have fairly potent effects on estrogen modulation, and may even be able to be used in the prevention and treatment of breast cancer. A large study is now being conducted by the National Cancer Institute to this end. There is hope that this substance may bestow the positive effects of limiting hot flashes and improving quality of life without increasing the risk of breast cancer.

There are some other medicines that are occasionally used in place of estrogen – clonidine, SSRI's (anti-depressants), and gabapentin. These have effects on either the blood vessels directly, or the autonomic nervous system which regulates temperature in the body. If you are interested, have a discussion with your doctor and find out more about what might be right for you based upon your family history, personal history, and other factors. If hot flashes are limiting your quality of life – don't settle for that!

We really do enjoy hearing from you with any questions, concerns, or ideas for future columns and/or health and wellness related issues for the *Georgia Mountain Laurel*. Please send an email to [rabundoctor@gmail.com](mailto:rabundoctor@gmail.com), or call us at 706-782-3572, and we will be sure to consider your input. This and previous articles can be now be found on the web at [www.rabundoctor.com](http://www.rabundoctor.com) in an archived format. If you use Twitter, then follow us for health tips and wellness advice @rabundoctor. Like and follow our Facebook page at facebook.com/rabundoctor. Until next month, live healthy and be well!