Menopause; A Natural Phenomenon

Menopause is a natural phenomenon in a woman’s life, usually occurring between the ages of 40 and 50. The word menopause is derived from the Greek *meno* (month or menses) and *pausis* (pause). This refers to the cessation of menses or the periodic discharge of uterine tissue in women (Lindsay, 1999). The actual changes preceding and following this time occur over several years. This paper will compare the Western perspective to the Traditional Chinese (TCM) understanding of the same event.

Prior to menopause, much of a woman’s estrogen is made in the ovaries. Skin, fatty tissue and the adrenal glands also make and release small amounts of estrogen. At the onset of menopause, estrogen production from the ovaries decreases (Lindsay, 1999). Most signs and symptoms of menopause are due to the decrease in circulating estrogen. Some of the more common signs and symptoms include vasomotor irritability, vaginal dryness and irritation, a decrease in size of the breasts and uterus, and pain and stiffness in the joints. Most, but not all, women have vasomotor and vaginal symptoms. These phenomena can cause a variety of emotional upsets including anxiety, depression, reduced libido, and insomnia. (Jin, 1998).

According to Zand (1999), approximately 95 % of women in the Western nations spend approximately one third of their lives in a state of estrogen deficiency. It is estimated that today as many as 30% of these women seek out some kind of hormone replacement therapy (HRT). HRT has been used to alleviate hot flashes, night sweats, depression and anxiety. It is no longer recommended for prevention of cardiovascular disease but it can prevent osteoporosis in menopausal and post-menopausal women. In the United States, HRT is commonly prescribed in doses ranging from 0.3 milligrams to 1.25 milligrams for the first 25 days of the month with progestin added for days 16-25 in doses of 2.5-10 milligrams. Some women have opted for the transdermal patch, which is applied to the skin twice weekly. There are various combinations of the estrogen/progestin regimens. Using a combination of progestin and estrogen, HRT is protective against uterine cancer.

Results from several studies indicate that HRT provides some health benefits for women who have entered the menopause. It reduces risk of hip fracture by as much as 60 %. The same studies show that the therapy also increases the risk of cancer in the uterus and breast (About Menopause, 1998).

Natural medicine therapies have a long tradition of use in the United States and in other countries to provide support for menopausal women. In the past five to ten years that there has been an increased awareness and respect for these alternative approaches during menopause. Many American women take nutritional products on their own with various degrees of success. The most common supplements that are used are evening primrose oil, vitamin B complex, vitamin E and remifemin, a commercial extract of Cimicifuga (Lindsay, 1999). The more popular alternative approaches include stress management, relaxation techniques, biofeedback, acupuncture, nutritional supplementation, exercise, botanical therapy, natural hormone preparations, and lifestyle changes.
TCM AND MENOPAUSE

The concept of Yin (vital essence) and Yang (vital function) is probably the single most important and distinctive theory of TCM. It is the source of both life and death. Yin and Yang represent opposite but complementary qualities. Each thing or phenomenon could be itself and its contrary. (Maciocia, 1989).

TCM theory is based on recognizing the symptom complex, which indicates the whole health profile of the person, rather than simply naming a disease, as in the Western medical approach. TCM treats the whole person, not just one symptom. It is based on the principle of reharmonizing bodily imbalance. TCM incorporates the presenting symptoms of the entire person as they relate to their environment, social situations, and personal emotional responses. This may account for the smaller number of women in Asian countries with menopausal symptoms. In addition to physical symptoms, tongue and pulse diagnoses are also used to determine the profile of each woman (Beers, 1999). As a result, a Western pathological disease state may be explained by a single TCM pattern of disharmony.

TCM theory talks about the Chong, Ren and kidney channels rather than the pituitary gland, ovarian and estrogen levels. In this theory, there are 7-year cycles for women. The Kidney-Qi begins to decline at around age 49, or the 7th cycle and the Tian Gui becomes exhausted, and at this time the Chong and Ren channels are no longer nourished. This is seen in the irregular nature a woman’s menstrual periods (Lyttleton, 1990). Menses help preserve the body and delay aging. If there is a menses each month, then the body’s store of jing-essence (vital substance which maintains the life activities) will not be depleted so quickly. However, some essence is lost with the flow of the period.

TCM sees menopause as a natural progression of aging, and not as a disorder that needs correcting. This TCM pattern includes symptoms such as hot flashes, night sweats with fever, irritability, palpitations, insomnia and thirst. This constellation of vasomotor disturbances, as it is in Western medicine, is not the only key to TCM treatment. It is the cause of these symptoms, rather than the symptoms themselves that will determine the treatment principle. This pattern most closely fits the TCM disharmony known as Kidney and Liver yin weakness with XU fire flaring upwards. Treatment of this pattern employs herbs to nourish the Kidney and Liver yin and to bring down the weak fire (Beer, 1999).

The range of formulas for symptomatic treatment in Chinese Medicine is as varied as the whole pattern of each individual woman. There are several treatment formulas. TCM does not mimic hormone therapy, which continues to artificially maintain hormone levels. Instead, it aims to treat a woman’s entire health and well being by selecting the most suitable formula for each individual. Menses are not re-introduced with the herbal medicine treatment of menopausal symptoms. To use herbal medicines safely, a qualified practitioner must be certain that the Chinese diagnosis confirms that the formula is suited to the individual. As a result, these formulas are not available over the counter (Beer, 1999).
Acupuncture is also suitable for women in the menopausal period because of its action for yin and yang adjustment (Lianzhong and Xin, 1998). Oriental medicine views health as a constantly changing flow of energy, or "Qi", (pronounced “chee”). It is believed that an imbalance in the natural flow of energy results in the yin and yang out of balance which results in symptoms. TCM’s goal is to keep the “Qi” in balance to maintain health and provide energy to balance the body.

Acupuncture is an effective way to create balance in the body. An acupuncturist inserts flexible sterile needles at specific points along channels to strengthen the flow of Qi or remove any blockages. This process is believed to stimulate the body’s natural healing response.

There are several common acupuncture points to treat menopausal patterns. It is beyond the scope of this paper to give you all the potential combinations of points since each case is individualized. Some of the common points and general locations (note these are not the exact locations only your licensed acupuncturist should locate these properly I am giving you a rough idea where in the body needling could potentially be done) are:

- **St 36**, located slightly below (3 cun) the bottom of the knee and slightly (1 fingerbreadth) lateral side of the tibia
- **Sp 6**, located above (3 cun) the tip of the ankle bone (malleolus) on the inside (medial) of the leg
- **Liv 3**, located on the dorsum (top) of the foot at the junction of the first and second metatarsal (foot) bones
- **K 3**, located in the depression between the inside ankle bone (medial malleolus) and the tendon on the back of your leg (tendocalcaneus) level with the tip of your ankle bone (medial malleolus).
- **Ht 7**, located on the inside end of the transverse crease of the wrist (ulnar end) in the depression on the thumb side (radial side) of the tendon at the end of the wrist (flexor carpi ulnaris).

Both Western and Chinese philosophies agree that prevention is better than a cure. Excessive consumption of sweet foods, alcohol and hot stimulating foods can aggravate symptoms. It is best to cut back on coffee, chocolate, cola and sugar. TCM encourages eating more tryptophan rich foods such as: turkey, bananas, figs, dates, whole grain crackers and dates. Most Asian women eat soy three times a day and consume on average 50-60 gms a day while the typical American woman eats less than 5 gms a day of soy. Some soy products are soybeans, soy milk and tofu. Soy flour, beans, red clover, sprouts, yams and linseed contain phytoestrogen which have estrogenic activity. Western medicine stresses the importance of adequate intake of calcium rich foods, avoiding smoking and excess consumption of alcohol and caffeine.

Alternative treatments have only recently become more accepted in the Western world. The importance of diet, exercise and lifestyle changes has received more credence in recent years. TCM practitioners have been aware of the importance of diet, exercise and lifestyle changes. Chinese herbal formulas and acupuncture have been used along with the above mentioned lifestyle changes for thousands of years for symptomatic relief and prevention. The number of Western medical providers that prescribe and discuss HRT as the only treatment as dwindled in the last few years due to the studies showing no cardiovascular protection is obtained from them. Women have recently been trying to find alternative
approaches to help them through menopause and beyond. I hope by reading this paper you can see there are many beneficial options things to explore in your journey to a healthy and happy life.

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ALTERNATIVE APPROACHES TO MENOPAUSE

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