

# Freedom to Choose

While drug companies, politicians, doctors and health gurus argue what's in the best interest of women's health, women themselves are rarely given a voice in the hormonal health debate, an arena that sees women the casualties of exploitation and victims of political agendas.

**CATHERINE ROLLIS** argues the case for natural progesterone ...

Women are big business in the healthcare industry. Which explains why female baby boomers are led to believe menopause is a disease that requires synthetic hormone replacement therapy (HRT) for the rest of our lives. Rarely is it clarified that these drugs carry significant side-effects, all too often negating any benefit.

If we're to offer our bodies to science in the trial of any drug, synthetic or otherwise — as is often the case — it should be with our consent. We're told synthetic HRT dosage is individualised — based on a woman's tolerance to the drug. Nonetheless, HRT makes some of us quite ill. We need a more natural alternative.

All too often our food chain is laced with toxic pesticides, herbicides and growth hormones — a sea of hormone-disrupting chemicals that mimic oestrogen in our body. Our adrenal hormone, androstenedione, is converted into oestrone and stored in fat. A visit to our GP for the odd hot flush or missed period can result in a prescription for synthetic oestrogen pills, patches or implant. And yet unopposed oestrogen in our bodies, sometimes coupled with synthetic progestin analogues, results in all sorts of hormone-related health problems such as pre-menstrual stress (PMS), endometriosis, uterine fibroids, and so on.

Synthesised progesterone, however, is identical to the progesterone molecule found in our bodies and therefore has a great safety margin, is non-toxic and has no recorded side-effects. It's the drug of choice to offset oestrogen dominance — the inevitable result of our environment and lifestyle.

## Silencing the Word

Creams containing synthesised progesterone, a Schedule 4 drug which under normal circumstances in Australia, is available only through a doctor's prescription, are, for the most part, produced in the United States and imported by Australian distributors and multi-level marketing companies. These creams listed progesterone as an active ingredient and, via technical bulletins, distributors could outline what impact their product would have on a woman's hormonal health.

That was until March 1997 when the Therapeutic Goods Administration (TGA) in Canberra reassessed its position. It forced many smaller progesterone distributors out of the picture while allowing a select few to stay — providing these companies removed the word progesterone from their list of ingredients. The TGA also prohibited therapeutic claims and any or all reference to progesterone in written literature. Interestingly, the progesterone content in these creams remained unchanged but creams were now reclassified a 'cosmetic'. Distributors risked hefty fines and product seizure if they stepped outside TGA guidelines.

So for about ten months women could continue to buy cream — we just weren't allowed to know what was in it. And each time a woman purchased a tub of cream, she was self-medicating without her doctor's supervision. Be that as it may, women using progesterone cream are realising fantastic results and feel no need to return to see their doctors.

Which would go a long way to

explaining why in December 1997, without warning, the TGA seized all imported progesterone creams, possibly submitting to pressure from doctors and/or pharmaceutical companies, or makers of Wild Yam cream.

Apparently progesterone creams are not available for purchase within Australia without prescription because they contain a listed drug. If that's the case, why didn't the TGA prohibit commercial distribution in Australia from day one? Why was the TGA more concerned with the way these progesterone creams were marketed rather than their general effect on women's health? What course of events led to the seizure of the cream? Even now the Government has given women the 'go ahead' to continue self-medicating with the onus of education squarely on our shoulders. We can order three tubs of cream at a time from outside Australia at a cost of around \$50 a tub, pushing cream further out of reach for many women, representing a price hike of roughly \$20 a tub since the TGA's decision.

It's far from a luxury product and very overpriced as a cosmetic, yet everyone wins except the women who rely on progesterone to maintain good health.

Which begs the question, why aren't doctors prescribing progesterone transdermal cream as a safe, non-toxic alternative to synthetic HRT? Why must we sneak around behind our physicians' backs? Why can't we just 'own up' to using progesterone cream, particularly when all evidence suggests it is restoring our health? Because we fear our doctor's

retribution, that's why.

### Wild Yam Scammers

As a patient, I know that a Wild Yam Extract cream containing diosgenin is not a precursor to progesterone. And that a synthetic progestin analogue such as Provera (medroxyprogesterone acetate) is a molecular modification beyond synthesised progesterone. But most physicians do not. They derive their knowledge of drugs from pharmaceutical companies who, for obvious reasons, focus their marketing pitch on patented products only — such as synthetic HRT and the contraceptive pill. Progesterone, on the other hand, is a naturally occurring medicine that cannot be patented. Drug companies cannot slap their logo on progesterone as their own exclusive product and generate commercial application.

How then can physicians prescribe progesterone, a drug they know virtually nothing about, much less provide support and encouragement? Further, why are physicians blindly following the medical model when evidence suggests they should at least read some of the primary medical references on progesterone?

Pharmaceutical companies and politicians aren't the only ones guilty of exploitation of women. A good example would be the growing popularity of Wild Yam Extract creams available across Australia. Word has caught on that progesterone, derived from Wild Yam Extract (referred to as diosgenin), is restoring women's health.

Manufacturers of Wild Yam creams, unable to get access to progesterone, a listed S4 drug, have sold women the notion that diosgenin in its 'natural' Wild Yam state can be converted into progesterone in the body. Flying in the face of Dr John Lee's research and top hormone-testing facilities in America who confirm this is not possible because there's no enzyme (or receptor site) in the body that takes up diosgenin.

Diosgenin first needs to be 'synthesised' in the laboratory to render it identical to a human hormone.

These Wild Yam creams are sold through health food outlets and naturopaths as complying with Dr John Lee's protocol and research on progesterone. Yet chats with Dr Lee have revealed a different story. Evidence now suggests Wild Yam Extract creams have a phyto-oestrogen effect. Beneficial, indeed, but having no impact on a woman's biological progesterone levels.

### Personal Choice Penalised

Doctors on the other hand are off the hook. Officially, they don't need to know what they don't know. Nor are they required to actually 'listen' to what their patients have to say. One doctor commented that we're making the medical profession look ridiculous! How can that be, I wonder? Because we want to move away from compliance and ignorance? Take more responsibility for our own health?

Where is the justice for women who've undertaken this responsibility and in doing so are being pushed further underground? We're penalised because our choice to use progesterone is not necessarily understood by the medical profession, or commercially viable and/or pharmaceutically endorsed. Moreover, it's in direct competition with HRT and Wild Yam creams.

A case in point: you can purchase a jar of Wild Yam cream or script for HRT at the chemist for about \$30. A tub of progesterone cream, however, will cost you twice that much — assuming you know how to go about ordering it offshore, can afford the cost, have a cheque or Visa account, and are prepared to wait 7-10 days turnaround.

We're after answers. Accountability. Who has our best interests at heart? Why do we have to justify the good health that occurs as a result of tenacity, diligence and an intuitive understanding of our bodies? We're on the cusp of change in women's health. Changes that are not without struggle, ostracism, penalty and great personal cost — already exacted from some of us.

We need to educate the medical profession in the use of progesterone, as distinct from progestins. Feedback and testimonials must be presented from thousands of women networked around Australia who are realising exceptional results.

We're urging all women embroiled in this debate to write to us. We, in turn, promise to keep you informed of clinical trials happening here in Australia.

