Women's Health Initiative and hormone therapy backlash

We talked about sources of medical information. When the Women's Health Initiative came out in 2002, when the results of it broke, we doctors were not informed.

That was the study that showed that women had, you know, a greatly increased risk of breast cancer on premarin and that synthetic progesterone provera.

And here's how it came down. This was in July of 2002. July 9, 2002 was a Sunday night. They called a press conference. and gave out the results, the preliminary results.

It was supposed to be an eight-year study. They stopped it after three years because they had a much higher rate of breast cancer in the women using Premarin with Provera.

And they held a press conference. So it got blasted out across the airwaves and in newspapers. I came to work on Monday morning and didn't know what hit.

That wasn't put out in a medical journal. We weren't given advanced information. What study, like, you know, what were the results? What were statistics?

And so that was a really incredible example. It was the National Institutes of Health, and I had the opportunity at a women's medical conference to ask the director of the Women's Health Initiative from the NIH whether she would do that again.

I said, You have no idea what it created, it create a pandemonium. Women went off their hormones, wholesale, I never had the opportunity to talk to people.

They just got scared and went off. And it's actually estimated that in the first 10 years after that result came out and women went of their hormones, there was anywhere from an excess 20,000 to 90,00 excess deaths in women aged 50 to 59 due to cardiovascular disease because they were not on their hormone.

Nobody thought about that. it was horrible you know and I had like I said all patients didn't contact me so I saw some people like for their annual exam a year later and they'd be like oh I haven't slept in a Let me tell you, sleep deprivation is not good for healthy longevity.

It will shorten your life and cause premature aging. So things that everybody makes fun of, you know, the hot flash, oh, there she goes again, get the fan, really has serious health implications.

If not just an inconvenience. So I had a particular bone to pick about how the Women's Health Initiative results came out. It did not come out in a professional way.

Big Pharma, low-T clinics, and testosterone controversy

And it put the country in pandemonium and women couldn't find out fast enough from a limited number of people who could give them information what to do and they went off their hormones.

Big Pharma, the pills in here are little dollar signs. They are really trying to close down compounding pharmacies. The makers of Premarin have been on a warpath for the last 15 years to close down compounding pharmacies, trying to get legislation in place, not wanting people to have the ability to choose what they want to do.

So big pharma plays a very big role in this whole issue of hormones. You asked about low T centers and low-T.

Everybody wants to cash in, right? So the pharmaceutical companies, Rob and I just looked at something.

You found a very nice website online talking about the effects of low T. And I said, Robin, this is like really slick. Let's look up who these ABV people are.

Sure enough, it was the manufacturers of Androgel, which is one of the commercial androgen testosterone preparations. So you've got like the pharmaceutical companies fomenting the low T.

You've this low-T clinic, which as far as I could tell, maybe there are physicians involved, but mainly it's physician assistants and nurse practitioners that staff those clinics.

And they have a formula. You get it done, you know, really fast, and you're back out. And they said, oh, here it is. At low T center, your testosterone replacement therapy is performed in a comfortable, casual atmosphere, not a stuffy doctor's office.

We can usually get you in and out quickly. Anyhow, I think being in the stuff doctor office, if it's a doctor that looks at your overall health, is a good thing.

Okay. Oh, then who else do we have in the mix? We have the lawyers. So I told you there were a couple of studies on testosterone that came out earlier this year.

And one of them was from the VA Medical Center. It was published in The Journal of the American Medical Association, called JAMA, J-A-M-E. It had men who were on testosterone.

They did not measure their levels. they didn't follow them up with levels or really any blood test. It just gave them testosterone I used to work at the Veterans Hospital.

I can tell you that is a very ill population and so they gave these really ill guys testosterone and some you know the older age group had higher incidence of heart attacks.

it turns out that And there was another study that showed older men had a higher incidence of heart attacks. One of the studies was published in JAMA, and a group of knowledgeable doctors, some of them anti-aging doctors got together and really delved into the statistics and found that the statistic were so poorly done, it actually showed the opposite, that it cut down on heart attack.

forced JAMA's editors to retract the article. That never happens. I can tell you that never happened that medical journals retract articles. that article got retracted.

Well, who knew that?

Myth vs. truth on estrogen, testosterone, and bioidentical hormones

Was that splashed all over the front pages? No. So who gets in the mix? The lawyers. Low T complication? Give us a call. Testosterone therapy heart attacks?

give us the call contact us today So you've got the lawyers, they're all over the internet. So of course you get scared, oh my god, my testosterone's gonna give me a heart attack.

You know, is it any wonder that people are confused? Female hormones are only for reproduction. Myth or truth? Myth. Myth, very good. We talked a lot about this.

You don't have any questions about that, do you? Okay. Low testosterone is only a problem for old men. Hormones should only be used in menopause for relief of hot flashes.

They should be at the lowest dose for the shortest time. Myth? Truth. Yeah, estrogen has over 400 functions in the

body. It does help with hot flash and night sweats, but it does a lot more than that, and we talked about that.

Helps to maintain muscle, enhance sleep, improve mood. Only men need testosterone. Testosterone, you know, muscle building is important for women, libido.

Women have an overall sense of well-being when their testosterone levels are adequate. This rather nondescript well being. What does that mean? I don't know.

They just, they feel good. Let's see. Myth versus truth. Estrogen is dangerous. It causes breast cancer. Okay. The wrong estrogen is dangerous, especially if it's paired with the wrong progesterone.

And that was the Premarin and the Provera that were in the Women's Health Initiative. Definitely increased risk of breast cancer. Okay, so that is the first thing that came out, you know, got blasted all over the place July 9, 2002. What then came, I don't know how many years later, four years Oh, we reworked the data and looked at it, and the women who were only on Premarin, they didn't have any increased risk of breast cancer.

That didn' get blasted all over the place. So it turns out it really wasn't the Premrin. It wasn' the estrogen. it was that progesterone. A product that causes like double to triple the rate of cancer, why is it still on the market?

Ask yourself that, the Provera. Why is that not off the mark? It's a known carcinogen. Big Pharma. Okay. Estrogen causes heart attacks and strokes myth or truth?

Okay, the wrong estrogen causes heart attacks and stroke. Premarin was given as a pill. You had asked about oral testosterone. Well, oral estrogen for women ends up causing increased blood clotting.

It thickens your blood. And so what the Women's Health Initiative did, um, The average age of the women that were enrolled was age 67. So remember I said the usual age in menopause is 51. They were 16 years into menoppause.

Remember what I said about once you hit menopause for women, your protection against cardiovascular disease really drops. So there were 16 years into menoppause.

They probably had a bunch of plaque. Now we're giving them a pill that thickens their blood. And yes, they had an increased risk of clot, venous thrombosis in their legs, heart attacks, and dementia, not Alzheimer's, dementia caused by many strokes.

Why is that estrogen still on the market? Okay. Testosterone is only involved in sexual function in men. Myth or truth? Myth. Okay, testosterone is dangerous.

It causes prostate cancer. Okay, this is where it gets a little muddy. Okay. What we do think is like what your oncologist said about breast cancer is that if you have a prostate cancer, testosterone may help it grow.

It does not actually cause it. But then there are all of these contradictions. Men with low T have more prostate cancers. Giving testosterone after prostate cancer treatment when things are stabilized does not increase recurrence.

So it's a little hard to figure out and there's some theories about either very high levels of testosterone or very low maybe the problem and in the middle is okay.

It hasn't all been worked out. So I agree with if someone's been, we just had a gentleman who got started on hormones who had high PSA at his first visit and I said you really, you need to get this checked and he has an early prostate cancer.

His doctor said come off testosterone. I agreed with that. But after a period of time, if his PSA goes down and stays down, I would feel comfortable reinstituting it.

Okay, now the last myth. Bioidentical is just a marketing term. Biodentical hormones are the same as synthetic ones. Yeah, that's a myth. And I used to think that before I got into this field.

I was like, oh, and I tell my patients that, Oh, bioidentical hormones, it's just a marketing term. It's no different than, than the commercial product.

There are some commercial products that are bio identical. Prometrium is a progesterone that is bioidentical natural progesterone. And there are some of the skin gels in women that are bio identical estradiol, but they don't have a balance with the protective estrogen in them.

The androgel in men, that's a bio-idental testosterone. So I don' necessarily knock that, But to say that they're the same as the synthetic ones, like the oral testosterone, That is not true.

Their risk breakdown is totally different. So, let's see, any other things that I wanna, oh yeah, the Premarin-only users in the Women's Health Initiative actually had 20% reduced breast cancer risk.

So they had less breast on estrogen. 50% reduce Alzheimer's risk in estrogen users.