

BREAKTHROUGH
Eight Steps to Wellness
(Life-Altering Secrets from Today's Cutting-Edge Doctors)
Suzanne Somers

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Review by P. Anthony Chapdelaine, Jr., MD, MSPH

Why does it take an actress to tell us what we should be hearing from our own doctors?

The explanation, of course, is well-explained in this incredible book, along with (as promised) detailed interviews with thirteen prominent Integrative Medicine Physicians, an innovative Scientist, a Publisher and chief of a non-profit health/nutrition organization, and a Nutritionist/consultant.

Breakthrough is the most readable, intriguing health book to be published in the last 10 years. It contains truth. Suzanne, already known for popularizing “bioidentical hormone replacement” (one of the doctors she interviews originated this technique), shows a passion about health that few doctors can match. Her keen observations and interpretations, obviously stemming from years of study with “cutting-edge” doctors and scientists, are right on target.

You will read this book, because it may save your life.

You will read this book, because it describes how to avoid the pain, disabilities, drugs and rapid decline most of us experience as we age. We face early death and the nursing home, as Suzanne so well explains, through not understanding that what we eat, how well we sleep, at what point we start replacing our deficient hormones, and how well we avoid drugs and doctors (who only know to prescribe them) are some of the keys to a long, fruitful life.

You will read this book, because your doctor may well be killing you – only you don't know it. Isn't it time to avoid the mistakes your doctor and the big-business drug cartel routinely make? Isn't it time that you make the well-informed decisions that affect your own health, instead of handing these decisions over to profit-driven businesses? After all, who cares more about your health than you?

Each patient who comes to my clinic is encouraged to read this book. Suzanne and the doctors she interviews eloquently say what I spend so much time trying to explain during each clinic visit. When my patients read *Breakthrough*, we will be on the same page, which will help me to help you care for yourself.

Thank you, Suzanne, for the courage and insight to continue to speak the truth in your new book, *Breakthrough*.

The following excerpts are from Suzanne Somers' new book, *Breakthrough: Eight Steps to Wellness*. Please read the book, as there is so much more that you need to know.

Pages 60-61 Suzanne Somers (SS): “Let's talk about hormone replacement.

Dr. Ron Rothenberg (RR): I thought you'd never ask. The benefits of bioidentical hormone replacement in women are overwhelming. Once again, we are not 'throwing hormones at you,' we are treating a deficiency disease when present by replacing the hormones that are missing. Many excellent

physicians are not aware of the current data supporting this medical intervention. The benefits include elimination of vasomotor symptoms such as hot flashes and night sweats, the reversal of bone loss, improved sleep, emotional stability, better brain function, increased libido, and improved quality of life.

SS: But everyone still seems to be worried about increasing the chances of breast cancer.

RR: They shouldn't be. In 2005, the Fournier Study in the *International Journal of Cancer* followed 54,000 women who were taking bioidentical estrogen and either bioidentical progesterone or *progestin*. Progestins are nonbioidentical fake progesterone. The women taking the bioidentical progesterone had a 10 percent *decrease* in the risk of breast cancer and the women taking the synthetic progestin had a 40 percent *increase* in the risk of breast cancer. An extension of this study, published in 2007 in *Breast Cancer Research and Treatment*, looked at 80,000 women. Those on bioidentical estrogen and progesterone had no increase in the rate of breast cancer, those on an artificial progestin had an increase of 69 percent in the risk of breast cancer.

SS: I know of this study and the information is significant and impressive. If this information were mainstream, it would eliminate the fear that doctors have due to lack of proper information. As a result of ignorance, patients get frightened away from hormones, which is truly unfortunate because it causes so many to suffer needlessly. I suspect the pharmaceutical companies have something to do with these significant studies getting buried. It is not in their interest for us to have access to inexpensive nonpatentable medicine. We only hear about the horrors of synthetic hormones from groups like the Women's Health Initiative, but that study and others never offer an alternative; they never do studies on bioidentical hormones and their tremendous benefits, so patients, and women in particular, are afraid and confused. As a result, women are suffering needlessly.

RR: Exactly. . . It's very clear to me that the problem is with synthetic progestin. . . .

SS: Well, that would explain my scenario. I was estrogen dominant in my thirties and forties. I suspect it was brought on by the nasty birth control pills I took for so long that contained progestins. . . I was diagnosed with breast cancer when I was in my early fifties, but was told that my tumor was ten years old. . . If only I had known two things: not to have taken birth control pills, and to *have* taken bioidentical progesterone to make up for what my body was not producing in perimenopause. When I think back on it, I had so many symptoms: irritability, depression, weight gain, lack of libido, tender cystic breasts. Progesterone replacement would have balanced out the ration of estrogen to progesterone to levels dictated by nature in health women. . . .”

Page 63 RR: “As I said earlier, a lot of my patients are docs and they were the ones who saw that I was changing when I started my antiaging preventive/regenerative program over ten years ago. They asked things like ‘Hey, what pill are you taking?’ But it's not a pill, it's nothing you can just mention while casually walking through hospital corridors. It's a whole spectrum: nutrition, exercise, replacing hormones, detoxification, sleep, eliminating stress, taking advantage of the new cutting-edge approach to health. It's true health care. It's not about drugs, it's not about surgery, it's all of the above, and a true commitment to your health.”

Pages 78-79 Bill Faloon (BF): “Our magazine [[Life Extension](#)] has been publishing this kind of information going back to 1985 about the benefits for many types of novel cancer therapies, yet oncologists have routinely ignored this lifesaving data despite its being published in their own medical journals.

SS: It's ignored because it's over the counter?

BF: It's ignored because there is no drug company recommending it to the oncologists. The doctors don't hear about it at their seminars; they seldom have the time to read their own medical journals; and when they do read them, they fail to translate that material into the patient setting. There is just a lot of apathy in the medical profession these days. . . It turns out that a big part of these doctors' salaries comes in the form of how much chemotherapy they administer. Chemo is big profit.

SS: If the public knew this, they would be shocked. I'm shocked. When you are diagnosed with cancer, you are so vulnerable and trusting.

BF: When Life Extension tried to open a world-class cancer center in 2000, we had all these doctors telling us how much money we could make if we just set up the assembly line. We kept telling them, that's not why we are doing this. Interestingly, most of these doctors confidentially told us, 'If someone in my family had cancer, I would send them here.' That's how little confidence they had in their own practice.

The most shocking call I received was from someone who had the most efficient moneymaking business of all. He had an 'in home' chemotherapy setup. He felt with Life Extension's credibility we would be sending his nurses all over town administering chemo to hundreds of cancer patients. He was talking to the wrong person, of course, but he really thought he was going to share gigantic profits with me by us recommending his in-home chemo services. So it's very clear that cancer treatment has become a huge assembly-line business. We're challenging that in major ways, and as you can imagine, the 'establishment' doesn't appreciate that."

Page 79-81 BF: "Back in 2002, we published favorable data about a prostate cancer drug called Provenge and questioned why the FDA had not approved it for advanced cases. Here we are in 2008, and the FDA has still not approved it. Some prostate cancer support groups are involved in litigation against the FDA. They feel this is out-and-out murder, denying terminally ill prostate cancer patients access to a drug with proven efficacy. . . .

It's not just chemo—it's radiation. So often we hear of a patient who has undergone radiation treatment when it was totally inappropriate. Can you imagine a patient with metastatic disease in every part of his body and the radiation oncologist says, 'Well, let me try to treat your primary tumor.' They then bill Medicare tens of thousands of dollars! Not only does this do no good for the patient, but it weakens them further—it does put a lot of dollars into the clinic's pocket, and that's the problem. You've got these big centers set up to administer radiation to cancer patients, and, of course, the more cancer patients they can run through, the more money they make.

SS: Shocking, sad, disillusioning, disheartening, wrong.

BF: As I said before, the way cancer is administered today is via assembly-line medicine. It often involves a repetitive 'all cancer patients are the same' process that's very profitable. There are actually well-substantiated allegations that mainstream oncology centers don't want to introduce better therapies because that would take away from the profits of existing therapies.

One of the causes of action in the lawsuit on the Provenge drug is that there were supposed conflicts of interest within the FDA, based on the fact that if Provenge were approved, then some other popular cancer drugs wouldn't be used as much.

There are very strong suspicions, if not factual events, that you can point to indicating that the pharmaceutical companies don't have a strong interest in curing the disease. The really disheartening fact is that the pharmaceutical companies have such strong lobbying influence over both the FDA and Congress that they can restrict what Americans are allowed to have access to. This is something that Life Extension has been battling our entire existence; the fact that we don't have free choice in health care." . . .

Page 85 SS: "As a layperson at home watching TV, one would think all the answers lie in pharmaceutical drugs. They have commercials for everything, and when you listen, you can actually hear yourself saying, 'Well, I have that. I didn't know that was a disease. I better get this pharmaceutical.' . . .

BF: Well, a good rule of thumb is if you see it advertised on TV, don't use it. Especially food—food that is advertised on TV is not the food you want to be eating. For most of the drugs advertised on TV, unless you have a very specific medical condition, there are often much safer and more effective alternatives in the natural field. Of course, you never see these advertised, because, for instance, many of the makers of pomegranate juice don't have the money to run national TV ads.

The FDA allows pharmaceutical companies to advertise but makes it illegal for companies that sell dietary supplements to make the same claims. So, you've got government restrictions against the natural supplement industry, and you have the pharmaceutical companies who pretty much own Congress and the FDA. So, yes, as an average consumer, if you're going to rely on TV to dictate what you do, you are condemning yourself to a premature death." . . .

Pages 88-90 SS: "Let's talk about hormones. . . .Why are bioidenticals ignored by virtually every study that has been done?"

BF: We know that you can take all the vitamins you want, you can follow a very good diet, but if you don't balance your hormones and get yourself into a youthful hormone profile, you're going to feel lousy, you're going to age prematurely, you're going to contract diseases that all the other good things you are doing for yourself aren't going to prevent. In other words, hormone balance is the cornerstone of an antiaging program. You balance your hormones and then you add on all these other ways to protect yourself against lethal age-related disease. . . .

With a lot of people, once we get their hormones balanced, they no longer need sleep medications, anti-inflammatories, and statin drugs. We've seen cases of high cholesterol disappear once testosterone is restored and hormone balance is achieved in both men and women. We published a study four years ago showing that if sex hormones are restored in aging people to youthful ranges, in each and every case they were able to get the LDL and cholesterol down to a safe range, and, in turn, each of these people got off the statin drugs. That was a controlled study.

SS: Then why the ignorance?

BF: Because the drug companies educate the doctors. The drug company can't treat heart disease with testosterone, because the FDA has not approved it. The other reason is that many doctors lack the curiosity to look at the medical literature to see hundreds of published studies that document the critical need of the vascular system and the heart muscle itself for adequate testosterone levels. Doctors are inundated with pharmaceutical companies touting all kinds of medications, but testosterone just isn't one of them.

SS: When was the FDA was put in charge of our health, and how did the pharmaceutical companies get this power?

BF: I will say it in one word. . . .corruption! The drug companies have lobbied the FDA to keep competitive products out of this country. We at Life Extension almost went to jail for life because we were promoting European medications—some of which were later approved in this country as being highly effective—but they wanted to incarcerate us. Those drugs would have competed with existing products.

Life Extension understands that we have a very corrupt regulatory system in this country, which wants to keep out competitive but more effective products and keep their less effective products on the front line. The criteria for a pharmaceutical company to seek FDA approval are not predicated on whether the new drug is particularly safe; it is not about the new drug being significantly effective. It's all about 'can we patent it?' Is the patent strong enough for the pharmaceutical company to risk spending all this money to see if it is barely safe and effective enough to receive FDA approval." . . .

Page 91 BF: "I'd like to think that with the individual health adviser service that Life Extension offers, people can call us and we can help a little bit or at least help them understand something that doesn't make sense to them. It's a free service for anybody. We feel it is part of our nonprofit philosophy to be available to make sure people have the accurate information they need. . . .to educate those who might not have the background they need to help themselves overcome a problem." . . .

Page 94 SS: If I choose to live a nondrug life, and if I choose to replace my hormones with bioidentical hormones, I want to be able to do that.

BF: There's no question that our conventional medical system, weakened by regulation and the influence of the insurance and pharmaceutical industries, has failed many people. It's like putting a Band-Aid on a gaping wound. But I do think the American public is smarter than we think, and they have, in fact, made some positive changes in their dietary patterns already. People have started eating

their fruits and vegetables. They are eating fish a couple of times a week, and most of them are taking fish oil capsules.

People are recognizing that they can do something right now, and they are not accepting aging as an inevitable consequence of growing old. . . .Now it's pretty commonplace—people are eating differently, taking supplements, replacing hormones—so we've made a major step forward. But as far as the medical profession, they haven't advanced very far at all.”

Pages 152-153 SS: “It is amazing to me that people like this couple have to search out bioidentical hormone treatment—I can't believe that the medical establishment is so resistant to natural bioidentical hormone replacement. It's not as if they have found the answer to this passage in pharmaceuticals. In fact, the main FDA-approved drugs for menopause have been proven by the Women's Health Initiative to be 'dangerous, harmful, and even fatal.' This particular study suggests that 'a woman would be better off taking nothing at all than to take these dangerous drugs.'”

Then suddenly, like a godsend, a body of doctors (let's call them antiaging doctors) appears from different parts of this country and the world, Western trained, from all the A-list schools, and they are saying, “Hey, we found the answer, and it's been around for fifty years’: If you put back a person's hormones with real bioidentical hormones (biologically identical to the human hormone, an exact replica), then he or she will start to feel great again. . . .”

The medical establishment has been trained to have a pharmaceutical drug for every problem or ailment. That is the nature of allopathic medicine. So, instead of replacing a woman's or a man's sex hormones with estrogen, progesterone, and testosterone, and then regulating your cortisol with bioidentical cortisol to 'turn off the noise' that keeps you tossing and turning and awake at night, you are given a sleeping pill like Ambien or Lunesta (or how about Prozac for the depression that accompanies lack of sleep?), plus a continuing series of drugs for new ailments to deal with the side effects of the drugs you are presently taking, when in reality all you need is hormones. Enough already! Stop the insanity! There has never been a person who has a Prozac deficiency!

The drugs we are given from middle age on will most likely overtake the bulk of us and require that we end up in a nursing home. Think about that! The cumulative effect of antidepressants, blood pressure medications, diabetes medications, allergy medicine, statins (nasty drugs) will eventually leave us so confused and disoriented that our families will have to put us in nursing homes (for our own good). Nice, huh?”

Pages 202-203 SS: “Ah, yes, statin drugs. Lipitor and the gang; what is your feeling about them?”

Dr. Russell Blaylock (RB): I think statin drugs should be outlawed. They are one of the most harmful drugs ever created and have no more benefit than taking an aspirin a day as far as heart attacks. It's a scam. Number one, cholesterol is NOT the cause of arteriosclerosis. These conditions are due to oxidation of every lipid in the vessel wall. All of the lipids are oxidized, not just cholesterol, and it is oxidation of these lipids that results in the atherosclerotic crud (plaque) that we see in coronary arteries and blood vessels to the brain. If you look at an arteriosclerosis lesion, the number one cause is overconsumption of dietary omega-6 fatty acids, and no one is telling the public.

SS: Why are people getting excess amounts of fatty acids?

RB: Because food sources high in omega-6 fatty acids are oils such as corn oil, safflower oil, sunflower oil, soybean oil, canola oil, cottonseed oil and several other related oils. The very oils they are telling everybody they should eat because they're heart-healthy, yet they contribute significantly to atherosclerosis! Canola oil is a mixture of omega-3 and omega-6 but has been shown to promote cancer and, because it is easily oxidized, could promote atherosclerosis. So I do not endorse its use.

SS: Why are these oils bad for us and why do they cause atherosclerosis?

RB: Because they oxidize very easily and this leads to inflammation that damages the arterial wall, which is considered the major mechanism for formation of atherosclerotic plaques and eventual

blockage of the vessel by blood clots. This has been shown in a number of experiments. The most abundant oxidized oil in the wall of atherosclerotic blood vessels is omega-6 oil and NOT CHOLESTEROL!”

Pages 204-205 SS: “The whole fluoride thing astounds me. . . .

RB: You have to understand it’s all a payoff system. Fluoride is a waste product. Communities keep trying to refuse it and they come back every year and try again. They offer the city contracts, government contracts, and dangle the possibility that they are going to do a big project if this community agrees to fluoridate the water supply. One of the biggest chapters in my *Health and Nutrition Secrets* book is about fluoride. We now know beyond any doubt that fluoride does not reduce cavities; in fact, it increases cavities, so there is no justification for putting fluoride in the water. Even the ADA (American Dental Association) admits it, because the studies were so overwhelming that there was no benefit whatsoever from drinking fluoridated water. The ADA has been lying to dentists and the public all these years.

Fluoride is one of the most poisonous substances on earth. It tends to accumulate, particularly in the bones and the thyroid gland, and in the brain. It lowers IQ. It’s associated with Down syndrome and it triggers excitotoxicity. But the people who are promoting it, primarily the government and the ADA, have so much influence through the media that you really can’t get the truth out. People are just not aware how enormously toxic fluoride is, particularly when combined with aluminum. When you mix them together, which they do in drinking water, where they combine chemically. . . .so this connects to the finding that fluoride increases cancer growth and cancer mortality. . . .

When you fluoridate whole communities, you are just assuring a lot of cancer patients that their cancer is going to recur or it’s going to be more difficult to control because of the fluoride.”

Page 207 RB: “Studies show this: Mammograms increase the incidence of breast cancer from 1 percent to 3 percent, and one radiation oncologist said it’s actually higher than that—it may be as high as 10 percent a year.

SS: Wow. I’m sure a lot of women will feel as I do right now. I believed them and I faithfully had mammograms for ten years before I was diagnosed with cancer. This is wrong. This is the information that has to get out, but business is in the way. Radiation and chem. And mammograms are big business, and not many women can afford MRIs.

RB: And that is a tragedy. But what rational woman would say, ‘I have normal breasts, but I’m going to go out of my way to increase my risk of developing breast cancer by 30 percent over the next ten years by having my breasts irradiated?’”

Page 212 SS: “Tell me what is wrong with the approach of conventional medicine?. . . .

Dr. Eric Braverman (EB): You see traditional medicine has become a death industry, where the hospitals are addicted to government money, so basically what we’re doing is making expensive deaths. Hospitals have also gotten addicted to the drug industry (and this applies not only to hospitals but also to the patients) and the idea that the drug solves every problem. We have become a country that has lost faith and is unable to cope with death, so medicine has taken over the role of religion and medicine has taken over the process of dying. All this is because as a society we can’t cope with death anymore because we have not faith. As a result we have decided to spend all our money on dying rather than on improving our lives.

SS: “What about vaccinations?”

EB: More people are vaccinated now than are baptized or circumcised. It’s crazy, and we are ruining people’s immune systems with over-vaccinations.”

Page 214 SS: So you’re saying mixed up priorities. What did birth control pills do to us?

EB: Well, they raised sex hormone-binding globulin, created a lot of emotionality in women, a lot of depression and anxiety, blood clots, heart disease, and liability. Women kind of came out the loser.”

Pages 215-216 EB: “No one should be surprised by any disease. In the future, there will be no need for tragic situations like the premature deaths of Tim Russert, Peter Jennings, John Ritter, or Dana Reeves (Christopher Reeve’s wife). . . .Why doesn’t everyone have transcranial ultrasounds as we do in my office as part of our physical? In doing so, I find there aneurysms all the time. Why aren’t these being done routinely?”

SS: I’m sure the answer is insurance. . . .which I am beginning to believe doesn’t really give us any insurance on *health*; rather, we get insurance on *disease*. Insurance will pay for us when we are sick, but will not pay to prevent us from getting sick, which doesn’t make sense. It’s a plan without vision. We have all these incredible preventive tests, but non everyone has the luxury to afford them. . . .or the good sense.

EB: I see it all the time. I have patients who spend a hundred grand on designer watches, but don’t want to spend anything on health care. This is the individual’s mistake. The government cannot possible cover discretionary health care.

SS: So this is money you just have to put aside. . . .I believe the way we are practicing traditional medicine in this country is a direct route to the nursing home.

EB: There’s no question. There’s a lot of dementia and frailty and all of that is preventable today. We have parathyroid injections and growth hormones. We have so much available that is preventative. I believe you can end human frailty, meaning the person who is shriveled up, shrunken, dried out and skinny.”

Pages 222-223 SS: “Can hormones be addictive?”

EB: Yes, they change brain chemistry in a way that person may want more than is good for them. For instance, I have seen men take too much testosterone and growth hormone because they think big is better.

SS: I think the only time a woman would take too much human growth hormone is if she thought it would make her thinner.

EB: But, of course, it usually doesn’t. Too much GH in a woman causes bloating if they are not on the correct amounts of estrogen. There has to be the correct ration in all hormone replacement.

SS: I always say not too much, not too little. . . .has to be just right.”

Page 224 EB: “It’s crazy, we have children down the block here in New York City who can’t afford vaccines or vegetables, and we spend these ridiculous amounts of money on dying. Our priorities are skewed. . . .America’s child knows more about Viagra than vegetables, and the average American adult will buy Viagra sooner than he buys vegetables. We have a society that has a value-structure problem. We need to reconstruct health care. We have to tackle faith, mistrained doctors, the environment, the role of the pharmaceutical industry, the failure of education, the addiction industry’s role, the lifestyle role, the hospital’s role, the food industry’s role, the insurance industry’s role, and the clergy’s failure to make an impact on anyone.”

Pages 255-256 SS: “But most everyone of middle age is taking sleeping pills like Ambien or Lunesta. That little butterfly in the commercial that comes and sits softly on your shoulder. . . .ahh, sleep. What’s that going to do in the long term?”

Dr. Howard Liebowitz (HL): Well, these are toxic substances in your system. Your liver is your primary detox organ, and it is going to have to deal with this toxic load. Ambien is not a natural substance, so basically you are just drugging yourself to sleep, which becomes a vicious cycle and it’s hard to break.

Patients come to me with years of unhealthy and bad lifestyles that have led them to this situation. They now find themselves overweight, unhappy, and unable to sleep. We work on their diets, we detoxify them, we put them on melatonin, and they’ll come back in two or three weeks and say it isn’t working. I try to explain to them that it took years and years to get this unhealthy, and it is going

to take a while to restore them. But for a lot of people they lose patience if it doesn't work immediately and they lose interest in it.

SS: How does that make you feel?

HL: I've learned over the years in medicine that things in nature and things in the human body actually change very slowly when we are trying to change major systems like circadian rhythm or bioidentical hormone rhythms or dietary rhythms. The digestive tract has its own rhythm of when things are secreted. All these functions take a long time to find their rhythms, especially when the rhythms have been out of line for so long. So, yes, it's frustrating when patients don't have the patience, but of course I encourage them to keep going. I know their health will turn around if it is given time.

SS: It's difficult to connect the dots. Pharmaceuticals work fast. If they stop working a person can get something stronger and so on. It's rare for a person to be able to see down the road to the long-term consequences of constant pharmaceuticals. It's a direct and sure route to the nursing home, but none of us ever believe that that could actually happen to us. But *you* know and I know that it's more a probability than not.

HL: That's one of the reasons allopathic medicine is favored. They want to go home, take the pill, and be done with it."

Pages 258-259 SS: "How do you strengthen the adrenals?"

HL: To strengthen the adrenals you have to rid the body of everything that is stressing the adrenals in the first place. You have to be on an optimal diet, you have to get enough rest and sleep. These things are paramount to adrenal healing.

SS: Well, that must fall on deaf ears. We laypeople are told this so often by our doctors that we don't hear it anymore. You know, yeah, yeah, yeah. . .sleep and rest and diet. But I've been burned out; I flatlined my adrenals four times in my career. That's when I started 'hearing.' Burned-out adrenals feel like death. It feels like the end of the road: inability to sleep, depression, weight gain, irregular periods, no energy, no ability to think, racing heart, sadness. Just awful. In fact, my last bout of burnout was real 'come to Jesus' moment for me. My doctor told me that I was on my way to a heart attack. I was forty-five years old. I had no plaque in my heart or arteries. The child of an alcoholic in me had almost worked me to death.

HL: Yes it's that serious. Skin rashes, irritability, high blood pressure, the list goes on.

There are supplements we use: high doses of vitamins B, B₅, B₆, vitamin C, biotin, Co-Q₁₀, sometimes carnosine. These are all nutritional supports. Sometimes we use acupuncture and other modalities that distress, like meditation, calming exercises, stretching exercises, and yoga. A lot of these things help to calm the mind and the body. I try to impress upon my patients to get into some sort of spiritual pursuit and take time to be introspective. These things can help quite a bit, and of course if a person is not sleeping that presents a huge challenge because sleep is key to healing the adrenals.

But there's also more to it. You have to avoid toxic substances. I call them SNAC: sugar, nicotine, alcohol, caffeine. There are the common substances that many, many people are using and they are highly toxic to the body."

Pages 269-270 SS: "Are these problems [hormones, digestion, food allergies, yeast, libido, insomnia] just a natural part of aging?"

Dr. Prudence Hall (PH): There's a wonderful study coming out of Sweden that looked at 23,000 women for causes of death. They identified twelve major categories. Women on bioidentical natural hormones had a decrease in every single category of death compared to women not using bioidentical hormones. For example, main causes of death were stroke, heart attack, breast cancer, colon cancer. It was incredible: In all the different categories there was a 12 percent to 86 percent decrease in terms of death.

So is it important to balance your female hormones? Absolutely it is. There are a lot of good studies showing there's no increased risk of breast cancer with bioidentical hormones. The Mission

study came out last July, looking at 6,700 women in the U.S., and their conclusion was no increased risk of breast cancer in giving transdermal bioidentical hormones.

SS: Why isn't this in the news? All you ever hear are the negative reports on synthetic hormones, and women, not knowing the difference, get frightened, choose not to replace hormones, and then live with the uncomfortable and often fatal consequences.

PH: I don't know why, because it is big news. There was also a study in France in 2003.

Frenchwomen have been using bioidentical hormones for a long time; they looked at bioidenticals after ten years of use and connected great benefit to the heart, decreased osteoporosis, and no increase risk of breast cancer. Their conclusion was that there was no reason for women to stop their hormones given these positive results.

SS: I guess the European pharmaceutical companies do not have the hold on their government regulatory agencies like our do here. In our country, pharmaceutical companies know that bioidentical hormone replacement has such positive and profound effects on women's health, but these studies get buried. If we don't see them we can still be frightened into taking synthetic hormones, which have been proven harmful and fatal. I will never understand how this happened. There is nothing positive about synthetic hormones, and yet they are the only menopause hormones that are approved by the FDA.

PH: Well, the European studies are very exciting and validating. We see the profound effects on our patients who take them, and when these studies come out it gives us peace of mind. Synthetic hormones, such as Premarin and Provera, have been shown to cause three times the amount of breast cancer. It's critical to balance hormones naturally, to prevent death and morbidity."