

Bio-identical Hormone Replacement Therapy (BHRT)

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As men and women age, many suffer from symptoms caused by decreasing levels of vital hormones. Hormone pellets, placed under the skin, continuously release small physiologic doses of bio-identical hormones providing optimal therapy if...

You are a woman and have:

Mood Swings
Brain Fog
Decreased Sex Drive
Headaches / Migraines
Weight Gain
Fatigue
Sleep Problems
Always Feel Cold
Hair Loss / Breakage
Dry / Wrinkly Skin
Decreased Mental Ability
Vaginal Dryness
Urinary incontinence /Urgency

You are a man and have:

Sleep Problems
Weight Gain
Decreased Sex Drive
Poor Sexual Performance
Depressed Mood
Mood Swings
Brain Fog
Decreased Mental Ability
Decreased Muscle Strength
Joint Pain / Muscle Aches
Irritability
Lack of Motivation
Andropause (male form of menopause)

Hormone pellets may aid in reducing the impact & treatment of hormonal conditions such as:

Thyroid Health Osteoporosis Heart Disease High Cholesterol Diabetes

Pellets may provide additional benefits for women who are experiencing:

Peri-Menopause

Menopause

Have Had a Hysterectomy

BHRT treatment differs from nearly all other medical treatments in that it involves simply adding back to the body a hormone that is already present, albeit in reduced amounts. For this reason, hormone treatment is often referred to as Hormone Supplementation.

Synthetic Hormones Verses Bio-identical Hormones?

- We have known for decades that correcting hormone levels can improve the above symptoms and quality of life.
- The pharmaceutical industry took advantage of this opportunity, creating synthetic hormones such as Premarin and Provera (Prempro).
- Unlike bio-identical hormones, synthetics are different structurally from human hormones. This difference allows the patenting of synthetic hormones which generate big profits for the pharmaceutical industry.
- These NON-identical (Synthetic) imitators do reduce some symptoms of deficiencies but they DO NOT RESTORE BALANCE in a way that the body recognizes.
- Studies link synthetic hormones to risks such as blood clots, hormone heart attacks and breast cancer.
- Bio-identicals are compounded to meet the DOSAGE NEEDS OF EACH INDIVIDUAL, based on your blood hormone levels and your symptoms. That isn't always possible with mass-produced pharmaceutical synthetics.

Benefits of Bio-identical Hormone Replacement

- The only method that allows the body to control the release of hormones, raising levels when more is needed and decreasing levels when the body requires more.
- Delivers a low dosage continuously, 24/7. During exercise or periods of stress, hormone pellets deliver more when the body needs it.
- No more changing patches, rubbing on creams, or remembering to take a pill.
- Releases testosterone and/or estradiol directly into the bloodstream, thereby bypassing the gastrointestinal system and liver.
- Consistently proven more effective than oral, injectable, or topical methods with regard to sexual function, mood and cognitive function, metabolic function, bone density, urinary and vaginal problems, lipid profiles, breast health and hormone ratios.
- Precise dosing to meet the dosage needs of each individual.
- The only form of delivery that closely mirrors the way in which the ovaries and testicles produce hormones.
- This method ensures the same steady, around the clock, low dosages in amounts that the body once created, you won't experience the surges and drops in blood levels as with other methods.

Lasts 3 to 4 months in females

Lasts 5 to 7 months in males

BIO-IDENTICAL HORMONE REPLACEMENT THERAPY FAQ

What are pellets?

Pellets are plant-based hormone substances. They are derived from yams, precisely matching the molecular structure and function of the human hormones.

Pellets are made up of either estradiol or testosterone. The hormones estradiol or testosterone are pressed or fused into very small cylinders (Pellets). These pellets are slightly larger than a grain of rice. In the United States, pellets are made by a licensed compounding pharmacist and delivered in sterile glass vial.

Where were pellets first used for hormone replacement?

Pellets have been used in both men and women since the late 1930's. In fact, there is more data to support the use of pellets than any other method of hormone delivery. Pellets are not patented in the United States. They are frequently used in Europe and Australia where pharmaceutical companies produce pellets. Most of the research on pellets is out of England and Australia with some from Germany and the Netherlands. Pellets were frequently used in the United States from about 1940 through the late 70's, early 80's when patented estrogens were marketed to the public.

Why are pellets optimal for hormone replacement?

The body recognizes bio-identical hormones as being natural. This enables them to bind appropriately to the same receptors as the human counterparts.

The body metabolizes bio-identical hormones in the way it was designed to do and these hormones produce the same physiologic responses. Thus, bio-identicals can provide vital support to the body's organs, tissues, and cells.

Pellets deliver consistent healthy levels of hormones for 3-4 months for females and 5-7 months for males, depending on the dosage. They avoid the fluctuations, or ups and downs, of hormone levels seen with every other method of delivery. It is the fluctuation in hormones that causes many of the unwanted side effects and symptoms a patient can experience. Pellets do not increase the risk of blood clots like conventional or synthetic hormone replacement therapy.

In studies, when compared to conventional hormone replacement therapy, pellets have been shown to be superior for relief of menopausal symptoms, maintenance of bone density, restoration of sleep patterns, and improvement in sex drive, libido, sexual response and performance. Even patients who have failed other types of hormone therapy have a high success rate with pellets. In addition, there is no other method of hormone delivery that is as convenient for the patient as pellets.

How and where do you insert the pellets?

The insertion of pellets is a simple, relatively painless procedure. The pellets are inserted under the skin in the hip area through a small incision which is steri-strip closed. Dr. Lemon has had specialized training in determining the correct formulation of the dosage of hormones to be used in each individual.

What are the potential complications from inserting pellets?

A large study (Women's Health Initiative) was published in 2002 that showed that the risks (blood clots, breast cancer, and heart attacks) of treatment with oral synthetic hormones outweighed the benefits patients might receive. Unfortunately, this conclusion was also assumed for bio-identical hormones (BHRT), despite the fact that bio-identical hormones have not been shown to have the same risks as synthetic hormones.

Complications are rare but can occur from the insertion of pellets, which include minor bleeding, bruising, and discoloration of the skin, infection, and possible extrusion of the pellet. If a patient is diabetic or recently had a joint replaced, antibiotics may be given.

Concerns about a possible link between testosterone replacement and heart attacks was contradicted by a larger, more recent study that indicates an optimal level of testosterone protects men from heart attacks and can lower cholesterol.

What can I expect after pellet insertion?

After pellets are inserted, patients may notice that they have more energy, sleep better and feel happier. Muscle mass and bone density will increase while fatty tissue decreases. Patients may notice increased strength, coordination and physical performance. They may see an improvement in skin tone and hair texture. Concentration and memory may improve as will overall physical and sexual health.

Extended exposure to moisture (swimming, hot tubs or baths) should be avoided for 4 to 5 days, and vigorous physical activity should be avoided for 48 hours in women and up to 5 to 7 days in men.

What are the most common side effects when the pellets are first inserted?

When a patient first starts hormone therapy there may be mild, temporary breast tenderness. Hormone receptors may be very sensitive and take time to adjust. There may be temporary water weight gain, which will also resolve on its own. The body will tone up, as bone density and muscle mass increase and fatty tissue decreases. Patients may experience a mild form of "puberty" as their hormonal levels come up into normal ranges.

How soon will I feel the effects of the pellets?

Some patients begin to "feel better" within 24-48 hours while others may take a week or two to notice a difference. A New Me Reno will always be interested in your wellbeing and progress.

How long do the pellets last?

The pellets usually last between 3-4 months in women and 5-7 months in men. High levels of stress, physical activity, some medications and lack of sleep may increase the rate at which the pellet absorbs and may require that pellets are inserted sooner in some patients.

Do the pellets need to be removed every 3-6 months?

The pellets do not need to be removed as they are time released and your body will only absorb what is needed and they will dissolve on their own. The more active you are the more your body will absorb.

Do men need hormone replacement?

Testosterone levels begin to decline in men beginning in their 30's. Most men maintain adequate levels of testosterone into their mid-40's to mid-50's, some into their 70's or early 80's. Men should be tested when they begin to show signs of testosterone deficiency. Even men in their 30's can be testosterone deficient and show signs of bone loss. Most men need to be tested around 50 years of age. It is never too late to benefit from hormone therapy.

Do patients need progesterone when they use the pellets?

Any time estradiol is prescribed, progesterone is also prescribed. There are progesterone (not progestin) receptors in the bone, brain, heart, breast, and uterus. Progesterone can be used as a topical cream, a vaginal cream, oral capsule, or sublingual drops or capsules. If a patient is pre-menopausal she will use progesterone the last two weeks of her menstrual cycle.

Do I have to be in menopause to benefit from the pellets?

Hormone therapy with pellets is not just used for menopause. Women at any age may experience hormone imbalance. Levels decline or fluctuate contributing to debilitating symptoms. Pellets are useful in severe PMS, post partum depression, menstrual or migraine headaches, and sleeping disorders. Pellets may also be used to treat hormone deficiencies caused by the birth control pill.

How are my hormone levels monitored during Hormone Replacement Therapy?

Hormone blood levels will be evaluated before therapy is started. This will include a FSH, estradiol, testosterone and free testosterone for women. Men need a PSA, estradiol, free estradiol, testosterone and possibly estrogen prior to starting therapy. Levels will be re-evaluated during hormone therapy at 4-6 weeks and again in 3-5 months. After the first year of therapy, hormone levels are checked less frequently. The PSA in men is checked every 6-12 months.

Do pellets have the same danger of breast cancer as other forms of hormone replacement?

Pellets do not have the same risk of breast cancer as high doses of oral estrogens, like Premarin, that do not maintain the correct estrogen ratio or hormone metabolites. Nor, do they increase the risk of breast cancer like the synthetic, chemical progestin's used in the Women's Health Initiative Trial.

Clinical studies show that bio-identical testosterone balances estrogen and is breast protective.

This is not true of oral, synthetic methyl-testosterone found in Estratest, which gets converted to a potent synthetic estrogen, which can stimulate breast tissue. In the past, testosterone implants have been used to treat patients with advanced breast cancer. In 1940, it was theorized that treating patients with testosterone implants earlier, at the time of diagnosis, would have an even greater benefit, preventing recurrence. Androgens have also been shown to enhance the effect of Tamoxifen therapy in breast cancer patients.

Why do many providers say, "There is no data to support the use of pellets?"

If your health care practitioner says that there is no data to support the use of pellets, he or she is wrong. There is a big difference between "no data" and not having read the data. It is much easier for busy practitioners to say this and dismiss the patient, than it is to question their beliefs and do the research.

There is also data that supports the "long term" safety of hormones delivered by pellets. Please reference Abraham Morgentaler, M.D. (Harvard Professor and world expert) "Testosterone for Life". (<https://www.amazon.com/Testosterone-Life-Recharge-Vitality-Overall/dp/0071494804>)