



Women's 'change of life'

by Homeopath Nancy Naujocks



A considerable number of female patients with menopausal problems seek help in our practice. Is the change of life really such a problem?

The physical side of menopausal problems

What symptoms cause the women to come to our practice?

In my patient file tiredness, feelings of exhaustion, lowered efficiency, headaches, hot flushes, sweats and problems with the locomotor system head the list, far ahead of actual bodily manifestations such as myomas or cysts, which otherwise represent the most massive mental problems (unshed tears).

Physiologically major restructuring is taking place at this age, and naturally this will have its effects. The normal cycle runs as follows: the anterior lobe of the pituitary gland releases follicle-stimulating hormone (FSH), which leads to the growth of the follicle in the ovaries and the production of oestrogen in the follicles is triggered. The oestrogen causes luteinizing hormone (LH) to be released, which induces the maturation of the follicles: ovulation follows. After ovulation the remains of the follicle left in the ovary form the Corpus luteum. In this and the adrenals progesterone is then formed, which prepares the lining of the womb to receive the fertilised egg. If there is no pregnancy, the Corpus luteum shrinks. Progesterone drops and in the monthly period the superfluous mucous membrane of the womb is expelled.

Then in the menopause the following occurs: the ovaries react less and less to the FSH. Follicle growth is

reduced and thus also oestrogen production. Owing to a lack of oestrogen, no LH is released and therefore the follicles no longer mature. So ovulation does not take place and nor does the formation of the Corpus luteum or the progesterone produced there. Thus the uterus is no longer stimulated to produce the mucous membrane in preparation for pregnancy and the withdrawal bleed (menses) does not take place.

This hormonal change is also of considerable significance to the metabolism. During the fertile period the female organism retains acids and metabolic wastes in depots (hips, upper thighs, buttocks) and then eliminates them in the monthly bleed. When this monthly cleansing ceases, the female organism is forced to convert to a “direct“ metabolism, in other words everything fed into the organism is now no longer deposited but metabolised in a direct way. Acids have to be neutralised immediately.

To do this, in the initial period of the change the organism uses certain aids: through hot flushes the waste products are burnt off, sweats eliminate toxins through the skin – a valuable trade-off until the organism has switched to a direct metabolism. To neutralise acids the organism calls on mineral depots: the bones. This is the source of all kinds of problems in the locomotor system, in the dental structure, nail and hair growth and skin nutrition.

If then these phenomena – admittedly often unpleasant – are suppressed with medication, the system is deprived of an important elimination route and moves slowly

but surely towards poisoning. Headaches, feeling cold, weight gain, depression and much more are the result.

Usually women are then prescribed hormones which maintain an artificial cycle. This sometimes causes the bleeding to start again and the women feel better in the short term. The improvement lasts until the hormones supplied start to affect other organs. The intrusion into the endocrinium is seldom without accompanying negative circumstances. Blood pressure anomalies, arrhythmia, water retention, joint pain (often then treated as “rheumatism“), nausea, dizziness and even balance disorders, digestive problems, thyroid disruptions and much more occur. Exogenous hormones are acid-forming!

Measures for physical menopausal problems

Since the body has been robbed of an important option for elimination, it is necessary to encourage women to ingest as few acid-forming substances as possible and/or to eliminate waste products by suitable means. Here it is important first of all to subject the diet to close scrutiny: extreme acid-forming substances such as coffee, sugar, alcohol, white flour, meat, dairy products, nicotine etc. must be reduced as much as possible. Exercise, light sport (please no strenuous sport because it creates a lot of acid), gymnastics, yoga, massage, dry scrubs, saunas etc. eliminate waste products in natural ways. With this support the body no longer needs to use up a lot of energy disposing of so many waste



products and many of the problems experienced disappear by themselves.

The indication for the reduction of dairy products seems particularly important to me. In many quarters people claim that it is precisely women during and after the menopause who need to consume a lot of dairy products, in order to avoid osteoporosis. This is quite simply wrong.

For one thing a lot of people have a latent allergy to cows milk, which is expressed in an atrophying of the mucous membrane (see various articles by Dr. Werthmann). For another, the metabolising of lactic protein leads to considerable acid formation. These acids then have to be neutralised, for which the body resorts to the mineral deposits in the bones. Thus dairy products cause precisely the opposite of the desired effect: namely demineralisation of the bones and not stabilisation. There is also a third point to be mentioned, namely that the highly prized calcium in dairy products can only be broken down in this form with difficulty by the body and thus very little can be absorbed. This leads to its deposition in the vessels. The first to be affected are the fine capillaries in the kidneys. They become blocked and the consequence is high blood pressure... It is better to obtain calcium from plant sources such as e.g. brown rice and/or wild rice.

Many women, who nowadays have a lot more spare time, are far too ready to devote themselves to idleness and the excessive consumption of coffee and cream

cakes, without compensating in any way with corresponding physical exercise. The fact that this too is of course another extreme acid boost surely does not need explaining here. This is where our consultation should begin.

Sometimes bloodletting has also proved effective. Initially after the periods have ceased I do this once a month in accordance with the woman's previous cycle. Then quarterly three times, then twice at six month intervals. After that the patient should be bled once a year on a favourable day (Hildegard v. Bingen on certain days of the lunar cycle), to generally remove waste products and allow fresh juices to form. The patient should not drink immediately after bloodletting, but allow an hour to elapse. Through the (minimal) loss of volume this produces a kind of suction effect, which mobilises the waste substances. Then flush with e.g. nettle tea. Never carry out bloodletting on people who are already poorly!

Difficulties in the locomotor system can be dealt with by gentle manual therapies such as e.g. osteopathy, cranio-sacral therapy, thorn therapy etc.

If it really is necessary to use medication, nature offers us so many aids that we can certainly do without synthetically produced hormones.

For bleeding disorders and hormonally triggered headaches for example, there is the highly effective corn fungus, contained in the USTILAKEHL remedy. Phyto-oestrogens such as those e.g. in soya, red clover flowers or black

cohoosh, can help to alleviate the difficult phase of change. High doses of vitamin E eliminate metabolic toxins and ensure a balanced energy supply. High doses of vitamin C act as vascular cleansing agents and stabilisers and also keep the immune system active.

Classic homeopathy also offers very effective support, with lachesis, sepia, cimicifuga being just the "main" menopausal remedies.

There are enough options to produce an individual therapy for each patient.

Psychological problems in the change of life

Are we really talking only about hormonal changes at the physical level in the menopause, or are there quite different things happening too?

The change occurs also in the woman's environment: the children are grown up. One is no longer needed as much. Perhaps mental stresses have arisen through one or other stroke of fate: the loss of a loved one, a partnership beginning to change (men too are subject to a period of change, even though they often do not want to admit it). These are years of complete restructuring and a change of direction in the life of a woman.

Many return to their earlier profession, others venture a fresh start in the professional field or in their private life.

And here the woman has a great opportunity too: the opportunity to start all over again, to venture into something new, with the maturity and experience she has gained along the way.



Elisabeth Haich writes in one of her books that the woman is actually a privileged being, since she has the possibility of experiencing both sides in a single life: the feminine side during the years of physical fertility and the masculine side through the change in her hormonal situation.

If a woman manages to transfer her fertility from the physical to the spiritual side, she will not experience the menopausal years as frightening and depressing. She will joyfully embrace and exploit the new side to her fertility.

This transformation need not necessarily involve university study or the burning of bridges. A woman can quite well carry on working fruitfully in her existing field, by passing on the experience and wisdom she has acquired over the years to others.

An example which occurs to me is that of my great grandmother. She represented the “mother figure“ for the whole family. When anyone had a problem they went to her with it and she knew exactly what to say. When she died, at 88 years of age, she left an emotional gap in the family structure. It would never have occurred to her that she was of no use in her old age or that life had nothing more to offer her.

Measures for psychological menopausal problems

So we can see that the psychological factor plays a very considerable part: one of our tasks as therapists is to support and help women, who come to us in our practice with menopausal problems, to discover and develop their personalities. For quite often women

have completely forgotten their own personality while bringing up the children, running the household and so on. Showing women the way forward to a new phase of life and showing them how they can develop and make use of it wisely is one of our most important tasks in treating menopausal problems.

In addition to the therapeutic consultation, the catathymic image experience for example offers a possibility of relieving the woman’s psychological situation.

One important task is to allow the woman to realise that the end of the physically fertile period does not mean the end of life. Perhaps these fears are rooted deep inside us, since in ancient times a woman often really did live little beyond her age of fertility. In our present age of longevity however the end of physical fertility is the opportunity for a new start. Helping someone to find meaningful new life’s work for us as therapists.

Mental ill health can also respond very well to colour and light therapy. Sunlight is naturally to be preferred to light therapy using artificial bio-lamps. But in the dark winter months even bio-lamps can be a valuable aid. When recommending time in the open air, make sure that at least for part of the time the patient does not wear glasses. Even untinted spectacles with a strength of more than 1.5 diopters filter the light rays affecting the psyche in such a way that biologically it is as if one were in darkness.

Colour therapy uses not only coloured light but also encourages

the patient to surround herself with the therapeutically indicated colours: in her clothes, her home décor and also foodstuffs. Mood-lightening colours are yellow and orange. Red boosts energy too much, blue is calming and green balancing.

If in addition to the psychogenic measures, medication is nonetheless required, here too phyto-oestrogens offer an option. St. Johns wort is a suitable anti-depressant.

Naturally here too homeopathy is a wide field in which individual patient-oriented therapies can be found.

For severe mental disorders the product MUCEDOKEHL has proven very useful - it can have a positive effect on the limbic system, which is the seat of anxiety and many forms of depression. RECARCIN acts as a mood enhancer and balancer.

Therapy suggestions

The following therapy suggestions have proved useful with my patients, but have no claim to be definitive.

The organs of the liver, gall bladder, kidneys, lymph, gut, spleen and pancreas should always be supported at the same time. The remedies Devils Claw (strong de-acidifier but BEWARE: vent./ duodenal ulcers), Menomen (Nahani) or Orthomol Femin can be used for all the problems of the menopause. Drinking a cup of lady’s mantle tea daily is also recommended. It regulates the female hormone system. Schüssler salts or Neukönigsförder mineral tablets are also a very effective support.



Bleeding anomalies:

USTILAKEHL 3x5 drops to 3x20 drops

PEFRAKEHL capsules 2x1

FORTAKEHL tablets 3x1 1 pack each then:

MUCOKEHL supp. alternating daily with NIGERSAN supp.

Support for gut, gall bladder, lymph, kidneys, liver, spleen, pancreas

Cold enemas

For very heavy bleeding: Millefolium C30 – until it clears!

Possibly Ferr. phos. 3X 3x2 for restorative effect.

Headaches in the menopause

USTILAKEHL 3x10 drops

Colonic irrigation

Support for the liver, gall bladder, kidneys, lymph, spleen, pancreas

Mineral products (e.g. Substigam or Orthomol Femin)

Amino-mix 2x1 (Nahani)

Vitamins E, C, B, zinc

Luke warm enemas, hot footbaths, immersion baths with Orgon salts, respiratory therapy.

Problems of the locomotor system

Mixed injections: NOTAKEHL 5X, QUENTAKEHL 5X, Myogelotikum, SANUVIS whealing at the site of the respective problem.

Anabol Loges 3x2

Devil's Claw capsules 3x1

Shark cartilage capsules 3x1

Glucosamine sulphate 2x1 or Ortho osteo

Gentle gymnastics e.g. „The 5 Tibetans“, immersion baths with Orgon salts, Orgon salt poultices to the relevant area, massages,

movement exercises, respiratory therapy.

Nervousness/sleep disorders

PEFRAKEHL capsules 3x1

QUENTAKEHL capsules 2x1

Thyreo-loges 2x1

Dysto-loges 3x1

Hogweed 3x1 (Nahani)

VITAMIN B Complex SANUM inj. Calcium phos. 6X 3x1,

magnesium phos. 6X 3x1, potassium phos. 6X 3x1

Hot and cold baths, arm and foot baths, hot immersion bath in the evening, walking.

Hot flushes/sweats

Black cohosh 3x1

Devil's Claw 3x1

SANUVIS drops 3x 1 teaspoon

Red clover capsules 3x1

Colonic irrigation, support for the liver, gall bladder, spleen, pancreas, kidneys

Minerals

Manganum sulfuric. 6X 3x2

Lukewarm lavages, cool arm and foot baths.

Blood pressure anomalies

- high

MUCOKEHL supp. alternating on a daily basis with

NIGERSAN supp.

NOTAKEHL supp.

Amino-mix 3x1

Hewert antihypertonic adjusted as required

Dysto-loges 3x2

Potassium chlor. 6X 3x1

Gentle gymnastics, walks, cool baths, energy work

- low

SANKOMBI 3x10 drops

Vitamins, minerals (e.g. Ortho vital F)

Movement training, hot and cold baths and showers, massage.

Low moods/depression

PEFRAKEHL tablets 3x1

FORTAKEHL tablets 3x1

Colonic irrigation, support for kidneys, heart, liver, gall bladder, spleen, lymph.

ZINKOKEHL 3x5 drops

Vitamins, minerals

MUCEDOKEHL capsules 3x1

RECARCIN capsules 1x1 weekly

St. John's wort, red clover, cimicifuga, Menomen (Nahani) or Orthomol Femin, magnesium phos. 6X 3x2, potassium phos. 6X 3x1

Daily enemas, walks, movement therapy, gymnastics, energy work.

Libido disorders

Damiana (Nahani) 2x1

Mangan. sulph. 6X 2x1

RECARCIN 2x1 weekly capsules

For stubborn depressive cases – in addition to counselling, catathymic image experience etc. – I draw up an individual nutritional and daily programme in consultation with the patient. The nutrition should of course mainly be the basic foods but the patient should not be allowed to miss out on little treats. A little bit of chocolate or cake now and again helps to lift the mood.

The daily programme should be tailor-made for the patient and may range from gymnastic exercises, swimming and walks to really long hikes. But hobbies are also included. It is important to work together with the patient to draw up a programme in which specific daily tasks provide structures which can



serve as a support for a certain transitional period.

If there is a fear of osteoporosis, calcium phos. 6X may be prescribed or if the patient already has problems, Orthomol osteo or shark cartilage and glucosamine sulphate (Nahani). In addition NIGERSAN tablets 2x1.

It is also worth mentioning fluid supply: uncarbonated WATER before meals – not at the same time and not immediately afterwards – otherwise the digestive juices are diluted.

It is also advisable to examine the vertebral column. If the lumbar spinal column is displaced, particularly L3 (uterus/bladder vertebrae) repositioning will provide considerable relief. The meridian vertebra related to the problem should also be examined. Often just a back massage with the

corresponding treatment of the bladder meridian, which is implicated in all kinds of tensions, provides relief.

Summary

The menopause is a natural process. We cannot tell our patients this often enough and emphatically enough. The more normally they react to the circumstances, the less difficulty they will experience. Often a precise explanation of the physiological processes and changes involved is helpful. Ignorance is frequently a source of anxiety that discomforts experienced might perhaps be due to a serious illness. Above all it is important to counter panic and exercise the spectre of 'the change' = osteoporosis, conveyed by many different media.

An understanding of the changes and a readiness to deal with them and accept them are the best tools

for surviving these years (change does not mean end) without major difficulties. Each day is a new opportunity. Let us make our patients curious about this novelty!

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