

Bruce Rind, M.D.

Center for Health and Healing, 800 South Frederick Ave., Suite 212, Gaithersburg, MD 20877 301-821-4325

ESTROGEN DOMINANCE QUESTIONNAIRE

Name _____

Date _____

CONCEPT

DEFINITION

Estrogen and Progesterone work with each other either as opposites or as complementing hormones. **Estrogen** is a stimulant (anxiety, insomnia, cellular proliferation at breast, uterus etc) and **Progesterone** is a calmer (patience, sleep, inhibits cell division). They also complement each other (estrogen→decreases bone loss while Progesterone→promotes bone growth)

Estrogen dominance is a condition in which a woman can have *deficient, normal, or excessive* levels of estrogen, but has *too little progesterone to balance the estrogen level*. It means a **predominance** of estrogenic effect as opposed to progesterone effects. It is the *balance of the two that matters more than how much we have*. A woman can have a low estrogen but a lower progesterone (re. effects) and be estrogen dominant.

COMMON SYMPTOMS OF ESTROGEN DOMINANCE

Please check off the # that pertain to you Please circle, underline or highlight the symptoms that pertain to you

- | | |
|--|---|
| 1. <input type="checkbox"/> Anxiety, irritability, anger, agitation | 14. <input type="checkbox"/> Irregular periods |
| 2. <input type="checkbox"/> Cramps, heavy bleeding, prolonged bleeding, clots | 15. <input type="checkbox"/> Decrease sex drive |
| 3. <input type="checkbox"/> Water retention/weight gain, bloating | 16. <input type="checkbox"/> Gall bladder problems |
| 4. <input type="checkbox"/> Breast tenderness, lumpiness, enlargement, fibrocystic breasts | 17. <input type="checkbox"/> Infertility |
| 5. <input type="checkbox"/> Mood swings, depression, weepiness | 18. <input type="checkbox"/> Insomnia |
| 6. <input type="checkbox"/> Headaches/migraines | 19. <input type="checkbox"/> Osteoporosis |
| 7. <input type="checkbox"/> Food cravings, sweet cravings, chocolate cravings | 20. <input type="checkbox"/> Endometriosis |
| 8. <input type="checkbox"/> Muscle pains, joint pains, back pain | 21. <input type="checkbox"/> Polycystic ovaries |
| 9. <input type="checkbox"/> Acne | 22. <input type="checkbox"/> Uterine fibroids |
| 10. <input type="checkbox"/> Foggy thinking, memory difficulties | 23. <input type="checkbox"/> Cervical dysplasia (abnormal cells on PAP smear) |
| 11. <input type="checkbox"/> Fat gain, especially in abdomen, hips and thighs | 24. <input type="checkbox"/> Allergic tendencies. |
| 12. <input type="checkbox"/> Cold hands and feet (i.e., stressed adrenals) | 25. <input type="checkbox"/> Autoimmune disorder |
| 13. <input type="checkbox"/> Blood sugar instability, Insulin Resistance | 26. <input type="checkbox"/> Breast, uterine, cervical, or ovarian cancer |

_____ number of boxes checked

COMMON CAUSES

- Stress (excessive need for cortisol depletes progesterone as some of it is converted to cortisol to support stressed/tired adrenal glands)
- Xenohormone exposure (non-human hormones, synthetic/non—bio-identical hormones, chemicals and plastics with hormonal properties)
- Use of oral or injected contraceptives
- Conventional HRT (using horse hormones and/or synthetic/non—bio-identical hormones)
- Adrenal Fatigue
- Poor diet (usually high in carbos, low fat)
- Consumption of trans-fats (margarine, hydrogenated oils)
- Nutritional deficiencies (especially magnesium, zinc, copper and B complex vitamins)
- Luteal Insufficiency (insufficient ovarian progesterone production, i.e. poor Corpus Luteum making too little progesterone)
- Anovulatory cycles (cycles where menstruation occurs, but no ovulation, and therefore no ovarian progesterone is produced)
- Obesity (in postmenopausal women, estrogen is made in the fat cells: **excess** fat cells make **excess estrogen**.)