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How to Stay Healthy and Happy Through Menopause

By Dr. Joseph Mercola
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Mercola

Theme: Science and Medicine

Menopause typically occurs between ages 45 and 55, causing hormonal changes that lead to symptoms like hot flashes and night sweats, significantly impacting daily life and well-being

Research shows diets rich in healthy carbohydrates reduce hot flashes by 88%, with participants experiencing better overall physical and emotional well-being

Low-carbohydrate diets likely harm postmenopausal women by increasing bone breakdown markers and inflammation, while decreasing bone formation, raising osteoporosis risk

Contrary to common belief, low estrogen isn't the main menopause issue; studies suggest low progesterone causes night sweats and excess estrogen is problematic

Natural progesterone supplementation may effectively manage menopausal symptoms and support overall health; natural remedies like ashwagandha root extract, daily sauna use and cognitive behavioral therapy are also useful

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Menopause is a natural phase in a woman's life, marking the end of menstrual cycles and reproductive years. Typically occurring between ages 45 and 55, menopause is confirmed after 12 consecutive months without a menstrual period. This transition triggers fluctuations in estrogen and progesterone levels, leading to physical and emotional changes.

While menopause is a natural process, its symptoms may significantly impact your daily life and overall well-being. Common experiences during the menopausal transition include irregular periods, night sweats, mood swings and sleep disturbances. Among these, vasomotor symptoms like hot flashes and night sweats may be particularly challenging.

These sudden waves of heat last from a few seconds to several minutes, occurring multiple times a day or night. The unpredictability and frequency of hot flashes often lead to discomfort, interrupted sleep and a diminished quality of life. Fortunately, there are many effective strategies to stay healthy and happy during this transition.

The Impact of Diet on Menopausal Symptoms

Your diet plays a key role in managing menopausal symptoms and maintaining overall health. Research highlights the connection between dietary habits and the severity of vasomotor symptoms, offering promising strategies for natural symptom relief.

Diets rich in healthy carbohydrates have been associated with a lower prevalence of hot flashes, especially in regions like Japan and China, where traditional diets emphasize rice, vegetables and other plant-based foods.[1]

One study, published in Menopause journal, demonstrated that greater increases in carbohydrate and fiber consumption were directly associated with reductions in severe hot flashes experienced by menopausal women.[2]

Specifically, the more you incorporate healthy carbs into your diet, the more you may alleviate the intensity and frequency of these distressing symptoms. Conducted over 12 weeks, this randomized, controlled trial involved 84 women experiencing at least two moderate-to-severe hot flashes daily.

Participants were divided into two groups: an intervention group and a control group maintaining their usual diet without specific changes. The intervention focused on minimizing oil and fatty foods while increasing the intake of whole grains, fruits and vegetables. Weekly virtual meetings provided support and guidance, helping participants adhere to the dietary changes.

Increasing Carbohydrate Intake Reduced Hot Flashes

Using a mobile application, participants tracked their hot flash frequency and severity, alongside completing the Menopause-Specific Quality of Life (MENQOL) questionnaire to assess broader impacts on their well-being. This comprehensive approach evaluated both the direct and holistic effects of dietary modifications on menopausal symptoms.

The study yielded impressive results. Women in the intervention group experienced an 88% reduction in moderate-to-severe hot flashes over the 12-week period, compared to a 34% decrease in the control group. Remarkably, by the study's end, half of the participants in the intervention group reported being free of moderate-to-severe hot flashes entirely, a stark contrast to the control group, where such occurrences remained virtually unchanged.

Beyond hot flash reduction, the dietary intervention led to significant weight loss, with participants shedding an average of 7.9 pounds (3.6 kilograms). Improvements were also noted across various domains of the MENQOL questionnaire, particularly in vasomotor, physical and sexual health.

These enhancements suggest that the benefits of a healthy carbohydrate-rich diet extend beyond symptom relief, contributing to overall physical and emotional well-being. According to the study, "[T]he greater the reduction in fat intake and the greater the increases in carbohydrate and fiber consumption, the greater the reduction in severe hot flashes."[3]

The Role of Carbohydrate Quality in Menopausal Health

The quality of the carbohydrates you consume is important for managing menopausal symptoms. Research conducted in Tehran, Iran, highlighted the significance of the Carbohydrate Quality Index (CQI) in alleviating both somatic and psychological symptoms of menopause.[4]

CQI assesses the quality of carbohydrates in your diet based on factors such as dietary fiber

intake, glycemic index (GI) and the ratio of solid carbohydrates to total carbohydrates. Higher CQI scores indicate a diet rich in high-fiber, low-GI foods, which help maintain stable blood sugar levels and reduce inflammation.

The study, involving 393 postmenopausal women, found a strong inverse relationship between CQI and the severity of menopausal symptoms. Women with higher CQI scores experienced fewer total menopausal symptoms, including hot flashes, mood swings and sleep disturbances.

In other words, the quality of your carbohydrate intake — not just the quantity — plays an important role in enhancing your menopausal experience. By choosing carbohydrates that are nutrient-dense, you support your body's hormonal balance and reduce the frequency and intensity of uncomfortable menopausal symptoms.

On the other hand, eating a diet high in refined carbohydrates, such as sweetened beverages and other ultraprocessed foods, is linked to depression in postmenopausal women[5] and may have a similar affect during perimenopause. This is because processed foods commonly contain seed oils, rich in polyunsaturated fatty acids (PUFAs) like linoleic acid, which mimic estrogen, contributing to estrogen dominance. As a result, PUFAs disrupt hormonal balance and mitochondrial function.

Low-Carbohydrate Diets Harm Bone Health in Postmenopausal Women

Adopting a low-carbohydrate, high-fat (LCHF) diet might offer short-term weight loss benefits, but research raises concerns about its impact on bone health, particularly for postmenopausal women. A study on athletes revealed that a short-term ketogenic LCHF diet impaired markers of bone formation and increased markers of bone resorption.[6]

Specifically, participants on the LCHF diet showed elevated levels of C-terminal telopeptide of type I collagen (CTX), a marker indicating increased bone breakdown, alongside reduced levels of procollagen 1 N-terminal propeptide (P1NP) and osteocalcin (OC), which are essential for bone formation and metabolism.

For postmenopausal women, who are already at an increased risk of osteoporosis, these findings are particularly relevant. Chronic bone resorption without adequate formation leads to decreased bone mineral density, increasing the risk of fractures and osteoporosis.

Cutting carbohydrates through a low-carb diet may also have unintended consequences on your immune system. Research shows that LCHF diets led to increased levels of interleukin-6 (IL-6) and cortisol post-exercise.[7] IL-6 is a cytokine involved in inflammation, and elevated levels indicate an inflammatory state that compromises immune function.

The fact is your body fundamentally requires glucose to operate effectively. When you don't consume enough carbohydrates for an extended period, your body begins to produce glucose from cortisol through a process called gluconeogenesis.[8] In this process, cortisol breaks down amino acids, including those present in your muscles.

Cortisol is part of a group of steroid hormones known as glucocorticoids. The prefix "gluco"

refers to glucose (sugar), while “cortico” indicates its origin from the adrenal glands. Although commonly recognized as a stress hormone, cortisol’s primary role is to raise blood sugar levels when glucose is scarce and your liver’s glycogen stores are depleted.

When your body senses low glucose levels, cortisol triggers the expression of the PEPCK enzyme, initiating gluconeogenesis.[9] However, if cortisol levels remain persistently high due to inadequate carbohydrate intake, it leads to increased inflammation and eventually weakens your immune system. This scenario is clearly undesirable. I used to advocate for a low-carb diet, but I now understand that it is not the best strategy for achieving optimal health.

Which Carbs Are Best?

To fuel your body during perimenopause and menopause, your body needs to meet a certain carbohydrate threshold, approximately 250 grams a day, to support metabolic functions. Healthy gut bacteria play an important role in breaking down the beneficial fibers present in nutritious carbohydrates such as fruits, vegetables and whole grains.

Unfortunately, many individuals lack an optimal balance of these beneficial microbes. When this equilibrium is disturbed, consuming these otherwise wholesome foods leads to a disease in your health. This occurs because harmful bacteria proliferate, releasing toxic endotoxins that significantly disrupt mitochondrial function.

If you’re struggling to digest healthy carbohydrates, consider incorporating pure glucose, also known as dextrose, into your diet for a few weeks. This strategy is especially useful if your digestive system is severely impaired and you find it difficult to consume any carbohydrates.

Sipping dextrose water can add a safe form of carbohydrates that do not increase endotoxin production. This allows you to gradually reintroduce a broader range of carbohydrates into your meals. Over time, this gradual reintroduction supports the restoration of your mitochondrial function.

For those with particularly compromised gut health, begin with dextrose water, sipping it slowly throughout the day. As your tolerance builds, transition to consuming fruit juice with pulp or whole fruits. Ultimately, as your gut health strengthens, you will be able to incorporate more fiber-rich fruits, vegetables and starches into your diet, enhancing your overall well-being and carbohydrate tolerance.

My newest book, “Your Guide to Cellular Health: Unlocking the Science of Longevity and Joy,” goes into this topic in detail. By categorizing carbs into a traffic light system of green, yellow and red, it provides a practical framework for you to identify and incorporate beneficial carbohydrates into your diet.

Why Boosting Estrogen Isn’t the Answer

Low estrogen levels are frequently identified as a key feature of menopause and addressed with hormone replacement therapy that includes estrogen — a treatment I advise against. In our interview, bioenergetic researcher Georgi Dinkov explained that estrogen is both carcinogenic and antimetabolic.

It significantly hampers your mitochondria's ability to produce cellular energy in the form of ATP by relying on aerobic glycolysis (known as the Warburg effect), which severely disrupts oxidative phosphorylation. This disruption further enhances estrogen's carcinogenic effects.

Moreover, Dinkov emphasizes that estrogen production typically does not decrease with age, suggesting that administering estrogen is not the universal solution for relieving menopausal symptoms as it is often portrayed.[10] Despite this, estrogen is conventionally used to reduce hot flashes, even though this is problematic. Research shows that it's low progesterone — not low estrogen — that's linked with night sweats.

In one study, progesterone supplementation significantly improved night sweats and sleep quality among perimenopausal women.[11] Further, blocking estrogen and/or taking dehydroepiandrosterone (DHEA) prevents many menopausal symptoms and related conditions, including obesity and insulin resistance.[12]

Unfortunately, many people believe they are low in estrogen due to bloodwork, when they actually have high levels in their organs. This is because serum estrogen levels are not representative of estrogen that's stored in tissues. Estrogen can be low in plasma but high in tissues. Prolactin levels serve as a reliable indicator of estrogen activity, as estrogen directly stimulates your pituitary gland to produce prolactin.

When prolactin levels are elevated, it signals increased estrogen receptor activation, whether from the body's own estrogen production or environmental exposures like microplastics. This relationship is particularly significant when combined with low thyroid function, making prolactin an important marker for identifying hormonal imbalance.

Progesterone and Other Natural Strategies for Menopause Symptom Relief

Many natural therapies provide relief from menopausal symptoms. Ashwagandha root extract may relieve mild to moderate menopausal symptoms in women who are perimenopausal.[13] Additionally, therapies such as hypnosis and cognitive behavioral therapy have been effective in easing vasomotor symptoms, sexual dysfunction and sleep disturbances associated with menopause.[14]

To further support mental and emotional well-being during this transitional phase, incorporating relaxation practices and mindfulness-based stress reduction techniques is recommended.[15] Daily sauna use may also help menopausal women avoid weight gain by improving insulin sensitivity and fat metabolism.[16]

That said, for perimenopausal and menopausal women, natural progesterone, which is an estrogen antagonist, may be especially useful. Its benefits extend far beyond menopause, effectively modulating your stress, supporting neurological health and reducing allergic responses, making it a hormone I believe nearly every adult could benefit from.

How to Use Progesterone

Before you consider using progesterone, it is important to understand that it is not a magic bullet, and that you get the most benefit by implementing a Bioenergetic diet approach that

allows you to effectively burn glucose as your primary fuel without backing up electrons in your mitochondria that reduces your energy production. My new book, "Your Guide to Cellular Health: Unlocking the Science of Longevity and Joy," covers this process in great detail.

Once you have dialed in your diet, an effective strategy that can help counteract estrogen excess is to take transmucosal progesterone (i.e., applied to your gums, not oral or transdermal), which is a natural estrogen antagonist. Progesterone is one of only four hormones I believe many adults can benefit from. (The other three are thyroid hormone T3, DHEA and pregnenolone.)

I do not recommend transdermal progesterone, as your skin expresses high levels of 5-alpha reductase enzyme, which causes a significant portion of the progesterone you're taking to be irreversibly converted primarily into allopregnanolone and cannot be converted back into progesterone.

Ideal Way to Administer Progesterone

Please note that when progesterone is used transmucosally on your gums as I advise, the FDA believes that somehow converts it into a drug and prohibits any company from advising that on its label. This is why companies like Health Natura promotes their progesterone products as "topical."

However, please understand that it is perfectly legal for any physician to recommend an off-label indication for a drug to their patient. In this case, progesterone is a natural hormone and not a drug and is very safe even in high doses. This is unlike synthetic progesterone called progestins that are used by drug companies, but frequently, and incorrectly, referred.

Dr. Ray Peat has done the seminal work in progesterone and probably was the world's greatest expert on progesterone. He wrote his Ph.D. on estrogen in 1982 and spent most of his professional career documenting the need to counteract the dangers of excess estrogen with low-LA diets and transmucosal progesterone supplementation.

He determined that most solvents do not dissolve progesterone well and discovered that vitamin E is the best solvent to optimally provide progesterone in your tissue. Vitamin E also protects you against damage from LA. You just need to be very careful about which vitamin E you use as most supplemental vitamin E on the market is worse than worthless and will cause you harm not benefit.

It is imperative to avoid using any synthetic vitamin E (alpha tocopherol acetate — the acetate indicates that it's synthetic). Natural vitamin E will be labeled "d alpha tocopherol." This is the pure D isomer, which is what your body can use.

There are also other vitamin E isomers, and you want the complete spectrum of tocopherols and tocotrienols, specifically the beta, gamma, and delta types, in the effective D isomer. As an example of an ideal vitamin E, you can look at the label on our vitamin E in our store. You can use any brand that has a similar label.

You can purchase pharmaceutical grade bioidentical progesterone as Progesterone Powder, Bioidentical Micronized Powder, 10 grams for about $40 on many online stores like Amazon. That is nearly a year's supply, depending on the dose you choose.

However, you will need to purchase some small stainless steel measuring spoons as you will need a 1/64 tsp, which is 25 mg and a 1/32 tsp, which is 50 mg. A normal dose is typically 25 to 50 mg and is taken 30 minutes before bed, as it has an anti-cortisol function and will increase GABA levels for a good night's sleep.

Unfortunately, this vendor frequently runs out of product, and if that's the case, then you can use Simply Progesterone by Health Natura. It's premixed with vitamin E and MCT oil. Again, while Health Natura states that its product is for "topical use only," I recommend applying it transmucosally, by rubbing it on your gums.

If you are a menstruating woman, you should take the progesterone during the luteal phase or the last half of your cycle, which can be determined by starting 10 days after the first day of your period and stopping the progesterone when your period starts.

If you are a male or non-menstruating woman, you can take the progesterone every day for four to six months and then cycle off for one week. The best time of day to take progesterone is 30 minutes before bed as it has an anti-cortisol function and will increase GABA levels for a good night's sleep.

This is what I have been personally doing for over a year with very good results. I am a physician so do not have any problems doing this. If you aren't a physician, you should consult one before using this therapy, as transmucosal progesterone therapy requires a doctor's prescription.

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Notes

[1, 2, 3] Menopause, 30(1):p 80-87, January 2023

[4] Maturitas. 2021 Aug:150:42-48. doi: 10.1016/j.maturitas.2021.05.006. Epub 2021 May 29

[5] Am J Clin Nutr. 2015 Aug;102(2):454-63. doi: 10.3945/ajcn.114.103846. Epub 2015 Jun 24

[6] Front Endocrinol (Lausanne). 2020 Jan 21;10:880, doi: 10.3389/fendo.2019.00880

[7] Med Sci Sports Exerc. 2022 Mar 1;54(3):377-387

[8] StatPearls [Internet], Physiology, Fasting, Cellular Level

[9] StatPearls [Internet], Physiology, Glucocorticoids, Function

[10] Youtube, Dr. Mercola, What You Need to Know About Estrogen and Serotonin – Interview with Georgi Dinkov

[11] Scientific Reports, Volume 13, Article number: 9082 (2023)

[12] To Extract Knowledge from Matter, May 9, 2023 (Archived)

[13] J Obstet Gynaecol Res. 2021 Dec;47(12):4414-4425

[14, 15] J Evid Based Integr Med. 2019; 24: 2515690X19829380, Conclusions

[16] American Society for Nutrition, July 1, 2024

Articles by: **Dr. Joseph Mercola**