

Discussion: Academic Studies on Estrogen Risks and Why They Can Not Determine a Standard of Care

1) Estrogen requires Progesterin for the Cell Receptors to function. With low levels of Pregesterone in Menopause and beyond, available weak Estrone (E1) is no longer protective. Not adding enough Progesterin (High Serum E/P ratio) increases the Stroke Risk.

2) The FDA warnings have over-generalized every Estrogen product without regard to dosing, mostly based on the flawed 2002 WHI study. This used Premarin (Conjugated Estrogen) and Provera (Medroxygesterone).

- Provera is the synthetic form of Progesterone. It is found to increase the Estrogen effect for Premarin. As such, the WHO overdosed women on the 0.625/2.5 dose.

“In the Nurses’ Health Study, low dose conjugated estrogens (0.3 mg/ d) — unlike higher doses — was unassociated with stroke risk (RR 0.9, 95% CI 0.6 to 1.4).”

Hormone therapy and the risk of stroke: perspectives ten years after the Women’s Health Initiative trials

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3675220/>

3) The Prempro Hormone group started out at 25% increased risk at baseline, contrary to the claims of randomization.

4) Excess Estrogen may increase the risk of Ischemic Stroke, but 90% of Stroke Mortality is associated with Hemorrhagic Stroke not Ischemic Stroke, and is not increased by Prempro.

-Hemorrhagic and ischemic strokes compared: stroke severity, mortality, and risk factors

<https://pubmed.ncbi.nlm.nih.gov/19359645/>

5) These Statistical Studies of Estrogen ignore other major Stroke factors. In particular, Thyroid Hormone is modulated by Estrogen, with Triiodothyronine a causative factor in clotting problems. These studies do not measure Thyroid.

-Low triiodothyronine syndrome is associated with hemorrhagic transformation in patients with acute ischaemic stroke

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6738409/pdf/aging-11-102195.pdf>

6) Another important factor Vitamin D3 is ignored in these studies,

“The results showed that there is a significant improvement in the stroke outcome after three months in those patients who were supplemented with vitamin D. Thus screening for vitamin D deficiency in stroke patients is essential and vitamin D replenishment will improve the stroke outcome.”

Role of Vitamin D in the Outcome of Ischemic Stroke- A Randomized Controlled Trial

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5376887/>

Low Vitamin D Levels Are Associated With the Development of Deep Venous Thromboembolic Events in Patients With Ischemic Stroke

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6714856/>

7) From The 2020 Menopausal Hormone Therapy Guidelines - The Korean Society of Menopause Pages

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7475284/>

-A meta-analysis including the WHI study found no increased risk of stroke in women aged less than 60 years or who were fewer than 10 years from menopausal onset.

-For EPT the risk of stroke for women who initiated hormone therapy when aged younger than 60 years and/or who within 10 years of menopause [was] statistically insignificant.

-For ET, initiation of hormone therapy at the age of 50–59 years, reduced stroke by 1/100,000 person-year,. For women fewer than 10 years from menopause onset results were inconsistent and not statistically insignificant.

-For women who initiate HT when aged above 60 years and/or more than 10 years from menopause onset ...there was no statistical significance difference.

-In long-term follow-up observation up to 13 years after completing the WHI study, stroke risks did not differ significantly between women formerly assigned to hormones and women formerly assigned to placebo. The increased risk of stroke due to hormone therapy may be limited to ischemic stroke and has no effect on hemorrhagic stroke.

**Discussion: Academic Studies on Estrogen Risks
and Why They Can Not Determine a Standard of Care (cont)**

USEFUL REFERENCES - THE MOVING TARGET ON ESTROGEN

- A critique of Women's Health Initiative Studies (2002-2006)

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1630688/>

- Women's Health Initiative reaffirms use of short-term hormone replacement therapy for younger women (2013)

<https://www.nih.gov/news-events/news-releases/whi-study-data-confirm-short-term-heart-disease-risks-combination-hormone-therapy-postmenopausal-women>

**- Principal Investigators of 2002 WHI Study Reverse Findings - HRT vindicated in new JAMA article _
HuffPost Contributor (2017)**

https://www.huffpost.com/entry/principal-investigators-of-2002-whi-study-reverse-findings_b_59bf0771e4b06b71800c3aed

March 2024