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Introduction

While a woman’s health might seem like a hard to navigate winding road, filled with unexpected surprises, on the following pages you will receive clear instructions on how to steer through the four stages of your life successfully and without confusion, starting from conception through post-menopausal years.

As you follow this guide, whatever your age, you will find stage appropriate health and nutrition information to ensure you make health decisions which will make you thrive.
FOUR STAGES OF YOUR LIFE

conception to birth

birth to menarche

fertile years to menopause

post-menopause
Conception to birth

for the baby
Dear baby, you have not been conceived yet, but your parents are dreaming about you and planning your future. They are filled with hopes and expectations, but they have a few things they must do to ensure you have the best of environments to grow in, once you are conceived. As they prepare for your conception and arrival they must learn that the lifestyle and dietary choices they make now will directly affect your growth, development, and perhaps, the rest of your life. In fact, these very choices will determine how long it will take them to conceive you. For now, hang in there, while they are getting their life in order. Hopefully you won’t have to wait too long to make them happy.

for the mom | getting baby ready
Dear mommy to be, congratulations! Whether you are starting to plan a pregnancy or just found out that you have already been entrusted with one of the most intricate and sacred tasks in your lifetime—creating a new life, you have a vital task before you—you have to make your body the best environment your child could grow in.

In the next few chapters you will learn the best practices to prepare your body for pregnancy. You will also learn what foods to eat to make conception a breeze. (You will read about the best pregnancy practices in the birth to menarche | pregnancy chapter of this guide.)

While it is easy for most women to conceive, more and more are beginning to face infertility difficulties, most of which stem from lifestyle and dietary choices. While there are cases when genetics play a small role in a woman’s fertility, most infertility problems can be prevented, or resolved, by making optimal lifestyle and dietary choices.
lifestyle and dietary choices
If you are having difficulties conceiving, there are several factors to consider that might cause this:

- **taking prescription birth control medications**—they can cause or add to hormonal imbalances, leading to irregular cycles or complete amenorrhea (lack of a menstrual cycle)
- **you are overweight** due to dietary choices and/or lack of a regular exercise regimen
- **you are underweight** due to restricted caloric intake or excessive exercises
- **you are eating a mainstream American diet** which lacks many essential nutrients needed for hormone health and making your body conception ready
- **you have an existing medical condition** such as hypo- or hyperthyroidism, PCOS (polycystic ovary syndrome), or other medical conditions

Thankfully most of these problems can be resolved or improved, given time and proper lifestyle and dietary changes.

where to begin
If you are on prescription birth control, get off it as soon as you can. Your body needs time to heal. You should not rush into having a baby, but should take time to plan for developing the best possible environment for your future child’s conception and development inside your womb. To plan your fertility while your body is recovering from medications, read *Taking Charge of Your Fertility* by Toni Weschler. You will learn about your physiological processes and how to use your physical signals to achieve or avoid pregnancy.

While you are healing and educating yourself, if you have not yet implemented a regular fitness regimen, now is the time to do it. If you are carrying extra weight, you have to commit to slim down before committing to motherhood. Overweight women produce more estrogen than normal weight women. Exercise is great not only for weight loss—it also helps us to get rid of excess estrogen. Too much estrogen in your body can cause infertility. Exercising is also a great way to build strong bones.

If you are underweight (have too little body fat) you might have irregular or no menstrual cycles, consuming an extra meal a day will help you to increase body fat to achieve regular cycles, leading to a more fertile body.

Most importantly it is time for you learn about optimal diet for fertility. A properly structured diet rich in nutrients, can aid not only in achieving a healthy pregnancy, but also help to reverse or improve many medical conditions.
the best fertility diet

Is there such a thing as the best fertility diet? Absolutely! Studies have shown that women who consume more dietary fat and lower amounts of fiber have higher estrogen levels, and that a high-fat, high protein diet increases production of enzymes that free estrogen from the complexes, allowing it to be absorbed into the blood stream for circulation, increasing blood estrogen levels.\(^1\) Studies have also shown that consuming cow’s milk contributes to higher estrogen levels in humans.\(^2\)

Inversely, a low fat, high fiber diet in healthy premenopausal women can reduce estradiol and estrone (estrogen) levels without affecting ovulation.\(^3\) In other words, your body become healthier and fertile when you consume more plant foods, less dietary fat, eliminate dairy and eliminate or reduce flesh foods (meat, poultry, eggs and fish) intake to about 5% of your diet.

Studies have shown that vegetarians excrete three times more estrogen in their feces and have 15-20% lower plasma estrogen levels,\(^4\) which means that the best way to get rid of extra estrogen, which contributes to infertility, is to eat a plant-based whole food diet. A plant-based diet also increases production of sex hormone binding globulin (SHBG), which reduces amount and activity of hormones in your body.

Alcohol is another culprit factor to consider during this time. Studies have also shown that regular alcohol consumption is not optimal for hormonal health.\(^5\) Drastically reducing or cutting out alcohol in preparation for a healthy pregnancy is a good idea.

fertility diet plan

If you are new to the idea of consuming a whole food plant based diet, you might be worried whether it is sufficient to provide you and your future baby with essential nutrients. Do not worry! A plant based diet will provide you with sufficient nutrients, minerals and vitamins to achieve and sustain a healthy pregnancy. You will not even need to supplement with prenatal vitamins, since you will be getting enough vitamins from your diet. You will need a regular sun exposure (15-20 minutes out in the daily sun) to get sufficient vitamin D, and a vitamin B12 supplementation, which is readily available through most health food stores.

If you are not sure where to start transitioning to a plant-based diet, Physicians Committee for Responsible medicine (PCRM) created a very simple visual aid you can follow.
These four food groups provide the good nutrition you and your baby need. There is no need for animal-derived products in the diet, and you will be better off without them. Be sure to include a reliable source of vitamin B12 and get out in the sun. You will get your essential fatty acids from seeds. All you need is a couple of tablespoons of ground flax seeds a day to meet your and your future child’s needs.

chaste tree
While most fertility issues can be addressed with this dietary approach, given time, there are instances where some women might require a little extra help in balancing their hormones. A chaste tree* supplement has been used for centuries to promote ovulation and normalize menstrual cycles. It can be taken in a form of a tablet (500 mg, 1-2 per day) or as a tincture (1-5 ml per day, 20 drops best). If taken as tincture, a single dose taken once per day before breakfast is best. Higher doses should be avoided and the supplement should be discontinued as soon as problem resolved.

*chaste tree is a large shrub (up to 22 feet tall) native to the Mediterranean and southern Europe.
pregnancy ready
Having learned about the best lifestyle and diet for fertility, take the time to implement changes to prepare your body for your future baby.

You should also take this time to think about your birthing options:

- Do you want to have a doctor or a midwife attended birth?
- Do you want to have an at home or a hospital birth?
- Do you want to have a water birth?

You will learn more about these options in the next chapter. For now, do not rush the process. Take your time to be pregnancy ready. You will best serve your child by planning and making these changes before conception.
Birth to menarche

for the baby

Dear girl, your parents just found out they conceived you. While they are brimming with joy, the nutritional and lifestyle choices they make will inadvertently affect your health. If your Mom took advice from the previous chapter and implemented it, she is now exercising and eating a diet filled with whole foods: grains, vegetables, fruit, legumes and greens. If this is the case, you will developing wonderfully inside the womb and have an easier time coming into this world. If she did not and decides to take “eating for two” literally, treating herself to chocolate, donuts and other “treats”, you will be predisposed to certain childhood diseases and being born overweight, which means that you might be deprived of the wonderful opportunity coming out via a vaginal birth.

Your parents will also decide on how you will receive nourishment and vitamins needed for your development. Your mother might decide to get everything she needs from a plant-rich diet or opt to taking supplements, ingredients of which might not be optimal for your growth and development.

As the time draws near your “coming out” day, your mother will decide whether you will stay in the comfortable environment of the womb until you signal her you are ready to come out, or if she gets impatient or pressured into prematurely evicting you by inducing your birth, accepting the drugs that come with this process, taking an epidural, or even choosing (or being forced to choose) a C-section.

On the day you are born, you will have left the comfort and protection of your mother’s womb to become a part of humanity. While your birth is a joyous occasion, your parents will have a lot of decisions to make:
• will they vaccinate your?
• will you receive your nourishment through breastfeeding or formula?

In the months following they will have even more decisions to make:

• when will they introduce solids into your diet?
• what foods will you be offered? Will it be plant foods, or dairy, meats and processed junk?

It seems like a confusing world, I know, but let’s hope that your mother is a wise woman and has read this guide before conceiving you.

for the mom | pregnancy

You might have dreamt of this moment for years, or this might be a joyful surprise—either way, your growing baby will now need your full commitment. This means that you might have to make some adjustments to your lifestyle to provide the best environment to your child. Here are a few things you should know in addition to what you learned in the conception to birth chapter.

pregnancy is not a disease
You should continue to work, exercise, and do almost anything you want to while pregnant. There will be a period in your pregnancy when you might need to adjust some of the exercises and routines, but overall you are safe to continue with your life without major adjustments.

don’t eat for two!
• overweight and unhealthy women are at higher risk of pre-eclampsia and gestational diabetes and there are significant risks to both mother and fetus, so make sure not to take “eating for two” literally! You need only an average of 250—300 extra calories per day during the 2nd and 3rd trimesters to grow a healthy baby
• gaining too much weight increases the size of the baby, making vaginal birth more difficult, and might sometimes lead to otherwise
avoidable Cesarean birth (in many countries average weight gain is only 14 pounds)
• keeping your weight under control is important—obese pregnant women are 2 times more likely to develop pre-eclampsia and 6.5% of obese women suffer from gestational diabetes

best pregnancy diet
• plant-based diet or vegan diet is still the best option for pregnant women, just like it is for women wanting to achieve a pregnancy
• while your doctor, your family and friends might be concerned for you and try to pressure you into consuming animal foods, history and science have proven that a low or no meat intake actually reduce rates of pre-eclampsia and edema
• an analysis of 20 traditional societies in which morning sickness is common and 7 in which it has never been observed showed that in populations in which women do not experience morning sickness, people eat a plant-based diet
• avoid excess caffeine—over 300 mg of caffeine per day can increase the risk of miscarriage. Since caffeine content of coffee and tea varies greatly from batch to batch and from brand to brand, it is better to leave it out of your diet entirely during pregnancy

pre-natal vitamins
In the Western countries women feel it is their responsibility to supplement and that it is the wise thing to do. However, recent studies shows that isolated vitamins can cause more harm than benefits.

• calcium supplements are not necessary and not recommended: developing fetus requires about 30 grams of calcium for normal development: approx. 2.5% of a woman’s stored calcium. A woman’s body changes to allow for increased absorption and retention of calcium from foods during pregnancy.
• alpha-linolenic acid is needed for brain development of the fetus; however, too much intake of Omega-6 fatty acid (in animal and processed foods) interferes with conversion of ALA to EPA and DHA. All you need is 2 tablespoons of flax daily to meet your and your baby’s requirement.
• DHA/Omega-3—studies show that there is no evidence to support that increased DHA intake benefits the mother or the fetus.
• folic acid has been shown to reduce neural tube defects. You need 400-600 mcg of folic acid per day. Vegans take in adequate folate through legumes and green leafy vegetables, so no supplementation is needed. Some experts say that the risk of neural tube defects is 2 in 1000 for women who do not take folic acid, while others claim that the
risk is actually lower—1 in 10,000. Even if the former were true, the risk is reduced to 1 in 1000 for women who do take folic acid. However, there are risks associated with taking high doses of folic acid. Taken in supplement form during pregnancy, folic acid has been associated with an increased risk of childhood asthma.

- **Iron** deficiency often results from malabsorption or binding factors such as phytic acid in gluten-containing foods (in some people). Pregnant women need only about 5 mg of extra dietary iron, which is easily met with plant foods. Excess iron, in supplement form, can be toxic.

- **B12** is a vitamin that is not readily available in human diet. Deficiency of B12 during pregnancy can result in permanent damage to fetal nervous system. It is highly recommended to take B12 supplementation not only during birth, but throughout your life. One study stated that we need only about 2.6 mcg daily. However, the study included only 8 people and had its flaws. Some studies show that we retain only 1-4% of B12 taken, which means that we need much more than the recommended amount to actually retain that amount. Since there is not risk of overdosing with B12 (it is water soluble and safe), taking at least 1,000 mcgs/day of methylcobalamin is recommended.

**Avoiding and reducing pregnancy symptoms**

- **Morning sickness** is less likely to happen in women following a whole food plant based diet.

- **Nausea** improves with such a diet, as well as with hydration and eating more frequent meals, and can be lessened by using candied ginger, ginger ale or sparkling water, peppermint candy or tea and/or peppermint essential oil (rub it above the upper lip).

- **To reduce water retention** drink water, reduce salt intake and exercise.

- **Constipation**—a fiber rich plant based diet, water and exercise will help you avoid this unpleasant side effect faced by pregnant women eating a mainstream diet.

**For the mom | childbirth**

You can have a wonderful and active pregnancy. Childbirth, albeit a painful experience, can be a great experience as well. There is no need to fear it—women had delivered babies naturally, without the aid of pain medication, for thousands of years.

There are a few options you can choose from to bring your baby into this world:

- **Hospital birth attended by a doctor**—if you decide on a hospital birth, make a birthing plan and re-write the consent form. Have a family member or a doula watch the baby during the entire time spent in the
hospital. Do not allow formula-feeding, vaccinations, and unnecessary procedures. Remember that it is your baby and you are the only person responsible for keeping it safe and healthy. Once you deliver your baby, you can leave the hospital as soon as you want to—there is no reason to spend the night there, unless there is a medical necessity.

- **C-sections:**
  - Hospital births attended by medical doctors often lead to unnecessary C-sections. One in three American singletons is born by C-section, and U.S. women are 10 times more likely to have a second C-section vs. a vaginal birth following a C-section than women in other countries.
  - While C-sections might be a necessity for a very small percentage of women, for others they are a costly convenience. They increase the risk of abruptio placenta (the placenta separates from the uterine wall), placenta previa (the placenta implants abnormally and blocks the cervix), placenta accrete (the placenta abnormally invades the uterine muscle) and other complications.

- **Vaginal birth:**
  - During a vaginal birth the baby acquires initial microflora from the birth canal (bacterial population in the mother increases during the third trimester)
  - During C-sections, no microflora is acquired; babies acquire bacteria from hospital environment and are at a higher risk of childhood allergies

- **Hospital birth attended by a midwife**—while it is still rare, some hospitals allow for midwife attended births. Midwives are trained in delivering babies and can reduce the time you spend in the hospital.

- **Birthing center birth**—there are specialized birthing centers, which can be attended by a midwife or the center doctor. They are often more relaxed than hospitals, but have necessary equipment, should an emergency arise.

- **At home birth**—some studies show that home births are safer. They certainly are less intrusive. Should you choose a home birth, you will be in the comfort of your own home, exposed only to the environmental bacteria your body is already familiar with. You will also enjoy a more relaxed atmosphere—no one will rush you through the birthing process. You midwife will provide you with necessary guidance, but will allow you to lead the process. Women who give birth at home are 59% less likely to have assisted vaginal delivery; and 38% less likely to have postpartum hemorrhage than those in the hospital/midwife group.

- **At home water birth**—warm water helps to relieve some of the labor pain, and might be a good choice for some women.
for the mom | breastfeeding vs. formula feeding

Once you deliver your baby—the long awaited bundle of joy—there is hardly a better and more satisfying experience than breastfeeding. It is not only nutritionally beneficial to your baby, but it also serves as the most amazing bonding time, as you and your child will form the initial bond and create most memorable moments together.

breastfeeding—the perfect food

- Breast milk is the perfect food for infants—it has the perfect amounts of proteins, fats, vitamins and nutrients.
- Breastfed babies get their vitamin B12 through mother’s milk.
- Breast milk provides infants with immune cells and antibodies until their immune system develops, and it promotes the growth of friendly bacteria in the intestinal tract.
- Breast-fed babies have fewer ear infections, throat infections, episodes of flu and diarrhea than bottle-fed infants.
- Breastfed babies have less risk of inflammatory bowel diseases, juvenile diabetes and of sudden infant death syndrome.
- Breast milk is the best brain food! Studies have shown that the more breast milk a baby consumes, the higher the IQ later in life.
- The benefits of breastfeeding continue into adulthood. Adults who were breastfed have lower risk of allergies, asthma, eczema, food allergies, reduced risk of cancer and inflammatory bowel diseases.
- Breastfeeding is beneficial not only for babies, but also for you—the Mom!
  - Breastfeeding release prolactin, which shrinks the uterus.
  - Breastfeeding provides natural birth control (length of time varies for each woman), assisting in proper spacing of children, and
  - Reduces risk of breast and ovarian cancer later in life.
formula feeding

- Unlike breast milk, formula does not contain immune-building or protecting elements or hormones.
- If your baby is formula-fed, bacterial population in her intestinal tract is different than that in a breastfed baby.
- Formula causes stomach and intestinal disorders, and increases risk of SIDS, inflammatory bowel disease, celiac disease, anemia, appendicitis, tonsillitis, tooth decay, obesity, heart disease, juvenile diabetes, allergies, asthma, bed wetting, and MS.
- Babies born by C-section and/or who are bottle-fed should take probiotics (as long as bottle fed).

introducing solids

Do not rush to introduce solids into your baby’s diet. There is simply no need for it. World Health Organization (WHO) recommends exclusive breastfeeding up to 6 months of age, with continued breastfeeding along with appropriate complementary foods up to two years of age or beyond. Some women breastfeed exclusively up to 1 year of age with great success.

Exclusive breastfeeding reduces infant mortality due to common childhood illnesses such as diarrhea or pneumonia, and helps for a quicker recovery during illness.

There is no physiological need to rush introducing solids—your baby will get all of the nutrients she needs from breast milk, lacking nothing, especially if you consume a whole food plant based diet and supplement with B12. Inversely formula feeding and prematurely introducing solid foods, including grains, to infants, may contribute to the development of gluten sensitivity and/or Celiac disease.

When your baby is weaned and solids become her primary source of nutrition, be sure to include vitamin B12 into her diet.

reaching the age of menarche | for the child

While you have enjoyed the first years of your life doing what you love most—sleeping, eating, getting rewarded for going on the potty, playing and making new friends, you are now noticing some curious things happening to your body. If you are, you are reaching a new milestone in your development—puberty. Thankfully your Mom has lived through same experience, so she will be a great person to talk to.
reaching the age of menarche | for the mom
Your daughter is growing and time is flying by. Hopefully you have followed a whole food plant based diet through your pregnancy, while you were nursing and passed your plant wisdom to your daughter. The foods she eats now will determine her future—her very life and hormone health fringes on each bite she takes.

How does food relate to your daughter’s health? It determines how early in life she will reach the age of menarche (have her first menstrual bleeding).

While for centuries, and even now in countries where women consume little to no animal foods, girls have been reaching menarche as late as 14-17 years of age, today about 16% of girls enter puberty by the age of 7, and about 30% by the age of 8—a very scary statistic.\(^{11}\)

Menarche is associated with fertility. As your child reaches puberty, her body parts begin to morph—growth of underarm hair and breast buds begin to develop. A girl at 7-8 years of age barely knows how to spell, let alone be emotionally or mentally ready to be burdened with an adult body and the attention she would receive from the opposite sex. But there is more to be concerned about.

As the time span between sexual and emotional maturity and adulthood is increased, so will your daughter’s exposure to possible sexual activity. With earlier initiation of sexual activity, she will also face an earlier age of first pregnancy and will have an increased chance for sexually transmitted diseases.\(^{12}\) Teenage pregnancy increases risks of: single parenthood, lack of education, poverty, pregnancy complications, premature delivery and low birth weight babies, along with other possible complications.

Reaching menarche too early will expose your daughter to sex hormones for several extra years, which will lead to increased risks of cancer and other hormone related issues. Girls who reach menarche early have high estrogen levels—a problem often addressed by physicians with birth control pills, which do not come without serious side effects, sometimes resulting in infertility.

What could put your daughter at a risk of reaching early puberty? Her diet! Studies have shown that increased intake of animal protein, higher dietary fat intake and consuming cow’s milk products lower the age of menarche.\(^{13,14,15}\)

Every mother wishes only the best for her daughter. Knowing this information, you can actually do something about ensuring her lifelong health. Teach her the dietary principles you have learned earlier in this guide.
Fertile years to menopause

for the woman

Hopefully your Mom has taught you the best protective diet for hormone and lifelong health. If she has, you are now anywhere between 14-17 years of age and are emotionally ready to handle the changes happening to your body. You might have had your first menses. Welcome to womanhood! You are now also ready to take on some responsibilities for your diet and health.

Your childbearing years (the time in your life when you can become a mother), will depend on the foods you eat. If you eat a diet filled with animal and junk foods, you will produce estrogen for a longer period of your life, compared to women who enjoy a vegan or a near vegan, whole foods diet. If that is the case, you will also have more years to conceive and parent a child. But that is not all. While children can bring a lot of joy into your life, longer exposure to estrogen will also put you at a risk of developing certain female cancers, such as cancers of vagina, cervix, uterus, ovaries and breast. Eating animal foods also contributes to PMS (pre-menstrual syndrome) in women. But you do not want to face these avoidable difficulties. Thankfully, there are things you can do to ensure lifelong health.

choosing a diet for health and fertility

a diet to avoid

- A high-fat, low fiber diet causes the growth of bacteria in the bowel that can convert bile acids into sex hormones.16
- Women who consume more dietary fat and lower amounts of fiber have higher estrogen levels.17
- Consuming cow’s milk contributes to higher estrogen levels in humans.2
• A higher-fat, higher-animal food diet results in the drop in estrogen levels from the higher level being sharper, causing symptoms ranging from PMS and dysmenorrhea to menopausal symptoms.

• In addition to increasing risks of female cancers, a higher-fat, higher-animal food diet leads to cardiovascular diseases and hormone related diseases, such as hypo- and hyperthyroidism, amenorrhea, ovarian cysts, cervicitis, endometriosis, fibroids, vaginal infections, PMS and infertility. Some of these conditions will lead to medical interventions, which might be less than optimal for your long-term health (surgeries, partial of full hysterectomy, etc.)

• Researchers reported that two or more servings of low-fat dairy daily increased the risk of infertility by 85%.22

a diet to embrace

• Studies show that fiber in the vegetarian diet allows women to excrete three times more estrogen in their feces compared to women eating a Western diet, and had 15-20% lower plasma estrogen levels, thus reducing their estrogen exposure.4

• Women consuming more dietary fiber have lower estrogen levels.

• A study demonstrated that women placed on a near-vegan whole foods diet reduced insulin resistance, increased insulin sensitivity; reduced cholesterol levels, lost weight and decreased serum levels of testosterone and estradiol, while increasing sex hormone-binding globulin levels, which reduces amount and activity of hormones.18

• A review of 13 dietary intervention studies showed that low-fat diets (10–25% of total calories) can significantly reduce plasma estradiol levels.19

• Eating a plant-based diets increases fiber intake, which helps to excrete excess estrogen from the body.

• Women eating a plant-based diet have a significantly longer adjusted mean cycle length compared with those who eat a higher-fat, higher-animal food diet, which leads to reduction of estrogen exposure and PMS symptoms.

• According to one study women consuming more monounsaturated fats instead of trans fats, vegetable protein instead of animal protein, increased fiber, and low glycemic carbohydrates, had improved fertility outcomes.20

• Eating a low-fat, plant based diet and eliminating dairy foods will increase dietary fiber intake and reduce risks of cancers, including breast and ovarian cancers.

• Eating a cup of vegetables and legumes daily lowers the risk of ovarian cancer by 20%.23

• Every 10 grams of vegetable fiber added to a woman’s daily diet lowered the risk of ovarian cancer by 37%.23
If you want to enjoy a productive healthy life, while avoiding severe hormone related problems, embracing a vegan or a near vegan, whole food plant based diet is the best option. With it you will reduce your exposure to estrogen, reduce your child bearing years (women on a plant-based diet might reach menopause as early as 42 years of age), and free up the rest of your time to enjoy life, rearing your children and eventually going through an uneventful menopause.

other lifestyle factors to consider
While foods play the most important role in your hormone health, there are a couple other factors you should consider.

exercise
A regular exercise regimen, including weight training, will lead to reduced body fat, help your body excrete excess estrogen and toxins, and will also strengthen your bones. Staying active 5-6 days a weeks is advisable and is easy to accomplish. By finding 40-60 minutes in your day to take care of yourself, you can ensure a lifetime of health, vibrancy and bone vitality.

Along with an optimal diet, exercise helps to reduce body weight. Reducing body fat to 20% or less reduces risks of cardiovascular events and cancers. Even women who are diagnosed with breast cancer benefit from regular exercise. Exercise has been shown to reduce the absolute risk of death for women with breast cancer by 6% over 10 years.23

birth control
During childbearing years women often choose to engage the aid of prescription contraceptives to plan their family. Pills, patch, vaginal ring, and medical devices, such as IUDs are often employed to avoid pregnancies. All of these, however, should you choose to use them, come with a hefty price to your health. Side effects are wide and varied. Some of them are:

- nausea
- weight gain
- sore or swollen breasts
- small amount of blood, or spotting, between periods
- lighter periods
- mood changes
- abdominal pain
- chest pain
- headaches
- blurred vision
- swelling and/or aching in the legs and thighs
Birth control pills have been shown to lower folate levels and interfere with folate metabolism. Thankfully there are better alternatives. While they might require initial education or an investment, they come without harmful side effects.

**Advantages of Natural Birth Control**
- In addition to causing sometimes irreversible damage to your health, prescription contraceptives and devices put the entire burden of family planning on the woman. Natural family planning encourages shared responsibilities between partners, which leads to a more intimate relationship.
- When done properly, natural birth control methods can be as effective, or even more effective, than contraceptives.
- While contraceptives are used solely to avoid pregnancy, natural family planning (NFP) can be used to achieve or avoid pregnancy.
- NFP does not cause any side effects, since it does not interfere with your natural biological processes.

**NFP Methods**
There are three NFP methods:

- Creighton Model fertility method
- Billings Ovulation method, and
- Lady Comp

The first two (Creighton Model and Billings Ovulation methods) are based on the couple’s observation of the woman’s fertility signs. The woman’s cervical mucus is observed and, based on its quantity and quality, intercourse is avoided to avoid a pregnancy or not to achieve a pregnancy. The only notable difference between the two is that Creighton Model teaches women to touch and feel the cervical mucus, while in the Billings Ovulation method observation is done only visually and by learning the sensation of mucus. Both of these methods take only a couple of minutes of the woman’s day and carry no financial or health burden.

To learn more about the Creighton Model, visit [www.creightonmodel.com](http://www.creightonmodel.com).

To learn more about the Billings Ovulation method, visit [www.billingslife.org](http://www.billingslife.org).
Lady Comp is different than both of these methods. It is a device which can help you track your fertile and infertile days based on your waking temperatures. The information is then evaluated and is compared with more than 900,000 cycles, incorporating forecasting techniques. Once temperature is taken, a diagnosis is made regarding fertility for the next 24 hours. Lady Comp requires an initial investment of $495 dollars (it is expected to last 10 years), however this cost is comparable to the cost of birth control medications for the same period of time, while it spares you all negative health side effects associated with prescription contraceptives or devices.

Lady Comp can also be employed in planning a pregnancy. Lady Comp Baby costs $595 and is well worth the expanse for those who have irregular cycles and would like to achieve a pregnancy.

To learn more about Lady Comp, visit www.lady-comp.com.

All three of these methods have been clinically proven to be effective in planning and avoiding a pregnancy.

pap test
- The American Congress of Obstetrics and Gynaecologists recommends that most women should have a Pap test once every three to five years.
- On March 14, 2012 the US Preventive Services Task Force (USPSTF) issued recommendations for cervical cancer screening that advise against Pap tests for women older than 65 who are not at high risk for cervical cancer, and against screening for women younger than 21 years old.
- In the Netherlands, the test is only administered to women between the ages of 30 and 60.25
Menopause

While transition through menopause is dreaded by the millions of women in the Westernized countries, it is quiet uneventful in countries where women consume little animal foods and dietary fats. And it should be so. Menopause is not a disease you should fear, it is a normal life event for which your body is designed. Going through menopause does not make you less of a woman; you are simply transitioning to the next phase in your life.

Post-menopausal years bear a promise of liberty to women from the worries of planning a family and allow them to enjoy their families, their accomplishments, an unrestrained and spontaneous intimacy with their partners, while they finish rearing their children and pursue their dreams. In fact, menopause should be so liberating that women would throw “Menopause” parties.

The age of menopause differs between Westernized cultures and countries where women enjoy highly plant-based diets. In the U.S. women eating a Standard American Diet (SAD) go through menopause at the age of 50-53, while in places like Asia menopause happens earlier, at the of age 42-49.

Just like the age of menarche, the age menopause matters in many ways to a woman. The earlier puberty happens and the later menopause occurs in life, the longer you are exposed to estrogen, which causes unwanted health problems, ranging from hormonal issues, PMS symptoms and increased risks of cancers. Reducing the time a woman exposed to estrogen, which is needed during her childbearing years, will ensure a healthier and a more productive life. At menopause estrogen levels should fall just enough to stop reproduction but should remain high enough to facilitate proper physical function and prevent onset of adverse health symptoms.

diet and lifestyle for an uneventful menopause

Your lifelong eating and lifestyle habits will determine what kind of menopause you will experience.

- A diet low in dietary fats and animal foods and higher in dietary fiber will result in lower estrogen levels throughout reproductive life. With less
estrogen circulating in your body you will have less estrogen “withdrawal” results.

- In Japan, where women eat a predominantly plant-based diet, including soy foods, most women are asymptomatic during and after menopause.\(^{27}\)
- A low-fat, plant-based diet reduced hot flashes, night sweats and encourages lower body weight.\(^{28}\) Women who adopt this diet are three times more likely to lose weight than those who do not.
- A study of Greek and Mayan women showed that Greek women, whose diet included plant foods, but also contained meat, fish, cheese and milk, experienced menopause at age of 47. 75% of study’s subjects had hot flashes.\(^{29}\)
- Mayan women, whose diet consists of corn, beans, tomatoes, squash, sweet potatoes, radishes, and other vegetables, with very little meat and no dairy products, on an average, reached menopause at the age of 42. Menopausal hot flashes were totally unknown among Mayans.\(^{29}\)
- Lower body fat will result in less estrogen, also leading in a smoother hormonal transition. A study showed that women who switched to a low-fat diet with fruits, vegetables and whole grains lost weight (~10% of body weight) had fewer hot flashes and night sweats after a year and were more likely to eliminate symptoms than women who did not lose weight.\(^{30}\) (If you are not yet consuming a low-fat, plant based diet, you can still benefit by doing so as soon as you can.)

**hormone replacement therapy**

Hormone replacement therapy (HRT) is not a healthy option, as it is sold to be. HRT is often offered in these of forms:

- oral estrogen treatment
- estrogen and progestin taken sequentially but separately
- estrogen and progestin taken together
- trans dermal estrogen
- vaginal estrogen creams
- synthetic progesterone
- bioidentical hormones

**HRT risks**

- unopposed estrogen can raise triglyceride levels by as much as 40%
- synthetic progestin adversely affects cholesterol and triglycerides
- hormone therapy increases the risk for ovarian cancer regardless of the duration, use, dose, formulation or route of administration\(^{31}\)
- women taking estrogen pills for one year are 53% more likely to develop urinary incontinence; women taking combination pills with progestin were 39% more likely to develop urinary incontinence\(^{32}\)
• bioidentical hormones (BHRT) are not approved or recommended by FDA. There are no known studies to show that BHRT is a safe or an efficient option. However, women taking bioidentical estrogen who have a uterus must still take an FDA-approved progestin or micronized progesterone to prevent endometrial cancer.

relieving menopause symptoms

Optimal diet and exercise should be your first line of defense in avoiding and alleviate menopause symptoms. If it happens that you still suffer from menopause symptoms, there are a couple of natural things you can employ to obtain relief:

• for vaginal dryness use Multi-Gyn LiquiGel
• for overall menopause symptoms, use Black Cohosh tincture (80 drops of tincture per day for 6-8 weeks)
Lifelong health concerns

While certain hormonal changes happen at different stages in your life, there are some issues that are important during the entire span of your life, while others overlap between a couple of stages. They are all intricately connected and should not be overlooked.

mammography

Until 2009 women were instructed to get annual mammograms starting at the age of 40. In November 2009, the U.S. Preventive Services Task Force (USPSTF) updated its screening recommendations and said that women of average risk for breast cancer could wait until age 50 to start getting mammograms and then follow up only every two years, rather than annually, until the age of 74. The question you should explore however, is not when and how often to get mammograms, but if you should get them at all and if they are safe for your long-term health.

- Studies have shown that mammography tends to miss aggressive tumors that grow between screenings (interval cancers), while detecting small, benign tumors, such as carcinoma in situ, that are usually not cancers at all and are often referred to as “pseudo-cancers.” Fewer than 2% of these “pseudo-cancers” develop into cancers requiring treatment, but most women are advised to undergo lumpectomy, receive radiation and to take aromatase inhibitors or Tamoxifen.
- A Cochrane Review showed that for every 2000 women screened over a 10-year period: only one would experience a longer life; 10 would endure unnecessary and potentially harmful procedures. The study concluded that “there is no reliable evidence from large randomized trials to support screening mammography at any age.”
- Another study showed that 10.7 years of screening could potentially result in one less death per 2512 women who have annual mammograms.
- The chance of an over-diagnosis resulting from mammography screening is 3 times higher than the chance of avoiding death from breast cancer.
• The detection of early stage breast cancer does not lower the rate of advanced cancers.\textsuperscript{36}
• Some studies show that mammography may be four to five times more likely to induce breast cancers than has been recognized.\textsuperscript{37}

While it is understandable that what you have learned your entire life from the media and your doctor might be steering you in the opposite direction, mammography is useless and should be avoided. There is a better way to prevent breast and other female cancers.

**cancer prevention**

• postmenopausal women diagnosed with breast cancer, reduced dietary fat and increased fiber, vegetable, fruit, and other nutrient intakes associated with a plant-based, high-fiber diet improved overall survival after breast cancer diagnosis\textsuperscript{38}
• processed dietary fats of all forms reduce cancer survival rates
• exercise has been shown to reduce the absolute risk of death for women with breast cancer by 6\% over 10 years\textsuperscript{23}
• every 10 grams of saturated fat daily increases the risk of ovarian cancer by 20\%; lowering saturated fat consumption by 10 grams a day reduces risk by 20\%\textsuperscript{39}
• women who eat more fruits and vegetables have lower risk of cervical dysplasia\textsuperscript{40}

**hysterectomy**

Poor diet, extra weight and lack of exercise cause a host of hormone related health concerns. If not addressed immediately or properly, some will lead to unnecessary and, at times, excessive medical treatments.

While vaginal hysterectomies have been performed for centuries resulting in high mortality rates, abdominal hysterectomy was unsuccessfully introduced in 1843. Mortality rates from abdominal hysterectomy often resulted in up to 70\% rates.\textsuperscript{41} While the procedure has been refined and mortality rates have declined since, the symptoms, following women post-hysterectomy are still plaguing patients in more than one way.

You might want to know if hysterectomy is ever warranted.

Doctors often tell women that if they are not going to have more children, they do not need their uterus, and that hysterectomy will solve their health problems. This could not be further from the truth. The uterus produces hormones, supports the pelvis, and provides lubrication to facilitate sexual intercourse. It is not spare body part that is only needed for childbearing.
Hysterectomy is only warranted when a woman has cancer and is trying to save her life. However, in the USA alone, 600,000 hysterectomies are performed annually and only 10% of these are for cancer; the rest are unnecessary. Approximately half these women have their ovaries removed at the time of hysterectomy. Still, studies show that “Ovarian conservation until at least age 65 benefits long-term survival for women at average risk of ovarian cancer when undergoing hysterectomy for benign disease.”42

Even if a woman is faced with choosing hysterectomy she should choose to keep her ovaries. While egg production ceases with menopause, the hormone production does not stop—testosterone and androstenedione are made by the ovaries and some are converted by a woman’s own body fat into useful estrogens.

**bone health**

Female and male bodies alike are filled with bones, providing form to the body, protecting organs and tissues, acting as an incubator for red blood cells and the mineral bank for the body—making life possible.

While you might have been taught that you need to drink milk to get calcium, to build strong bones, there is more to the story. Bones need more than just calcium to be healthy. Bones are designed for strength and flexibility. Calcium is a brittle mineral. If your bones were made only of calcium you would encounter numerous fractures. However your bones need minerals: calcium, phosphorus, magnesium, zinc, manganese, copper, boron, silica and fluoride; vitamins: D, C, A, B6, B12, K, folic acid; essential fatty acids; protein and thousands of phytonutrients found in foods.

Bones also need to be challenged. They are a living tissue and develop strength based on demands placed on them—weight and exercise result in more dense bones; sedentary lifestyles result in weaker bones.

As we age, our bone density decreases. In itself this is not a cause for alarm. Calcium needs vary at different ages. Women need larger calcium stores in their bones for pregnancy and breastfeeding. After menopause, when there is no need for such large storages of calcium, the bones become less dense, but this is normal.

Overall there are several factors affecting bone health:

- Diet
- Acid/alkaline balance
- Exercise/Inactivity
- Malabsorption/GI health
- Sunlight/Vitamin D
- Kidney function
- Prescription drugs
- Disease conditions

**the calcium myth**

- There is no evidence to support a theory that people with lower calcium intake have any problems with bones or teeth.\(^{43}\)
- People consuming a diet with lower calcium intake do not show impaired health or bone development.\(^{44}\)
- High calcium diet results in lower calcium absorption; lower calcium intake results in higher calcium absorption.\(^{45}\)
- Higher protein intake results in increased urinary calcium loss; the higher the protein intake, the higher the calcium excretion.\(^{46}\)
- There is a direct correlation between increased hip fractures and excessive calcium intake.

![Fractures/100,000 person-years vs. Calcium intake (mg/day)](image)

- Taking calcium supplements results in more adverse cardiovascular events than reductions in the fractures they are supposed to prevent.\(^{48}\)

**lifestyle and dietary influence on bone health**

- While vitamin D is essential to your health, a Cochrane Review showed that there was no effect for vitamin D supplementation on bone
mineral content (BMC), hip bone mineral density, or forearm bone mineral density.\textsuperscript{50}

- Naturally obtained vitamin D is vital to bone health. Vitamin D synthesized from the sun creates a process that results in producing additional photoproducits in response to sun exposure that are not in the supplemental form of Vitamin D. Just 10-15 minutes in the sun is the equivalent of taking between 15,000 and 20,000 IU’s of Vitamin D, but without the potential for toxicity.
- Chronic stress and poor diet contribute to increased hormone production. Over-production of hormones like cortisol causes bone loss.
- Strenuous weight bearing activities make stronger bones.
- Women with irregularities menstrual cycles tend to have thinner bones.
- Over-medicating for certain diseases, such as hypothyroidism, causes bone loss.
- Vegetarian women have lower estrogen levels yet they have higher bone density than meat eaters.
- Vegans consume more calcium than they excrete, resulting in a positive calcium retention.\textsuperscript{47}
- Women who get their calcium from food sources have healthier bones than those getting it from supplements, even when supplementation users have higher calcium intakes.\textsuperscript{49}
Achieving lifelong health

Now you have learned that navigating the intricacies of female physiology does not have to be complicated. Following a low-fat, whole foods plant-based diet should ensure a lifetime of uneventful transitions from one stage of your life to the next. Whether you begin the follow a plant-based diet from the moment of your conception or make the transition during your menopause years, you should be able to enjoy the benefits and health protection such diet provides. The sooner you make the change, however, the less likely you are to deal with female health issues.

A Dietary Plan to Cure You

If you are ready to begin healing your body, or keeping it whole, ensuring that you enjoy lifelong health, perfectly balanced hormones, and having no fear of what being a woman might mean to millions of women around the world, get a copy of my program, called Body by Plants. It contains over 100 health promoting, hormone balancing recipes, menu planners, and education about the diet that will help you enjoy being a woman, without fearing the worst about your health.
References

31. McEliot A, Largent J, Ziogas A, Peel D, Anton-Culver H. “Dietary fat, fiber, vegetable, and micronutrients are associated with overall survival in
35. Welch G, Passow H. "Quantifying the Benefits and Harms of Screening Mammography." JAMA Intern Med published online Dec 30 2013

50. Winzenburg, T, Powell, S, Shaw, KA, Jones G. “Vitamin D supplementation for improving bone mineral density in children” Cochrane Database of Systematic Reviews Issue 10, Article Number: CD006944, doi