



Dr. Anna Cabeza

The **Menopause &
Hormone**
Expert

Hormones, Testing and Self Discovery



Dr. Anna Cabeza

Balancing Hormones – Why?



The Seven Dwarves of Menopause!



**Itchy, Witchy, Sweaty, Sleepy,
Bloated, Forgetful & Moody**

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Haywire hormones
Weight
Energy/Vitality/Endurance
Moods /Self Esteem
Sleep
Hot flashes and Night Sweats
Memory
Libido/Intimacy
Skin Health (Looking Younger)
Dry eyes

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Hormones are the body's
control mechanism and we're
100% dependant on them.

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- Relief of hot flashes, night sweats
- Treatment of vulvar & vaginal atrophy
 - Bone health
 - Fracture prevention
 - Heart health
 - Brain & Memory
- Cancer risk reduction

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**We want to
achieve a
balance**

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So many things affect your
hormones like...



Food



Sleep



Hormone disrupting chemicals



Stress

Physiology
drives behavior.



**Stress
causes...**

cortiso



oxytoci
n

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Fight
Flight
Freeze

Rest

Life

Living

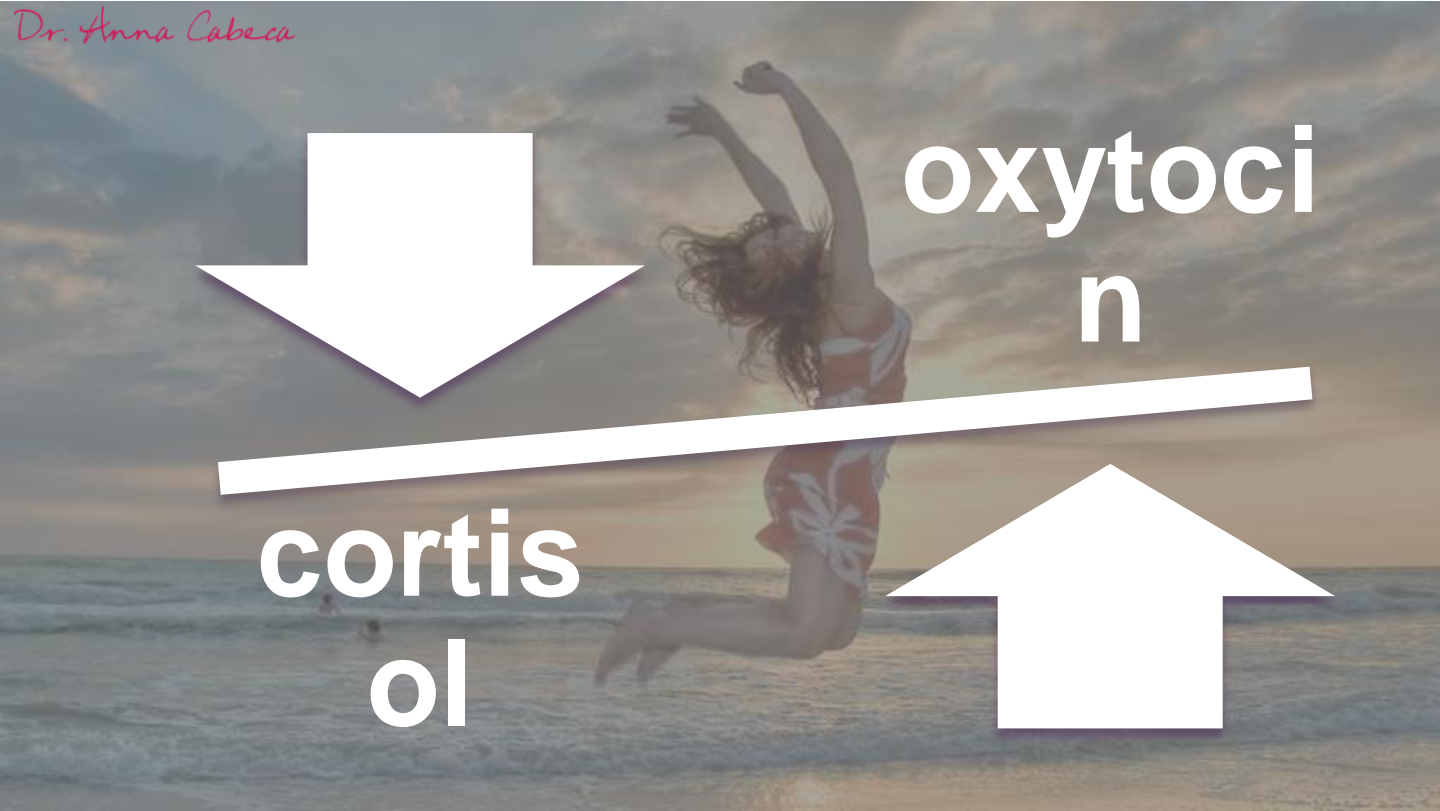


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**cortis
ol**

**oxytoci
n**



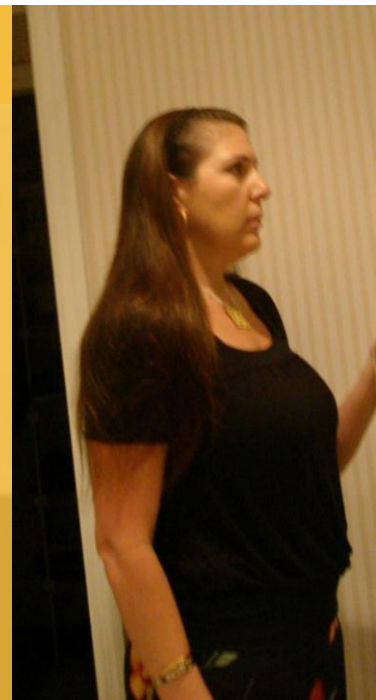
My mom :)



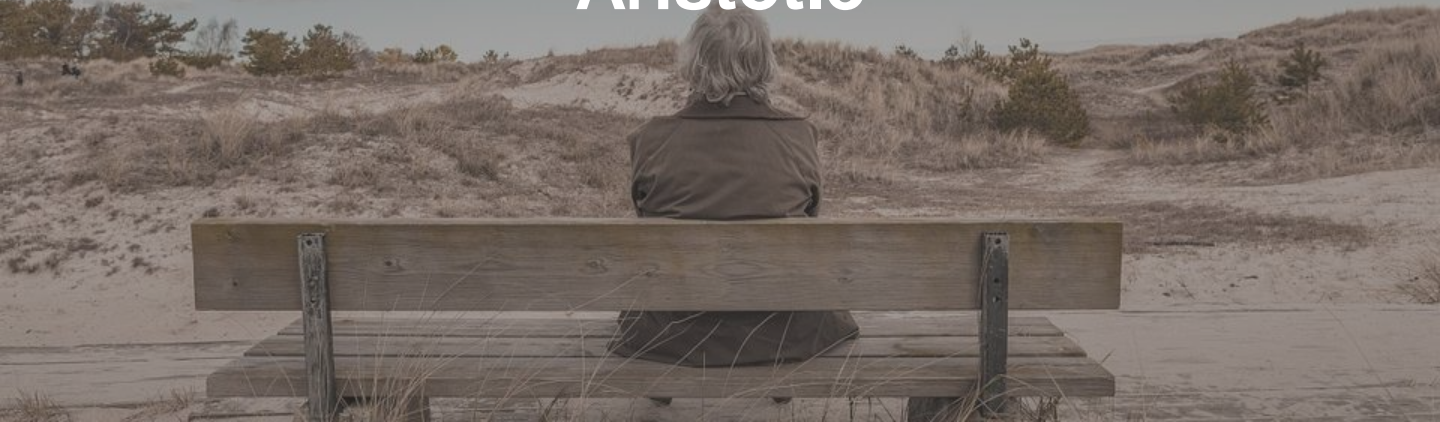


MY STORY - ***BEFORE***

- 40 years old with 4 children
- Worked over 80 hrs/week
- Primary bread winner
- Losing hair
- 80 lbs overweight
- Menopausal and infertile
- Depressed



“The **soul** suffers when the body is diseased or traumatized, while the **body** suffers when the soul is ailing”
Aristotle



MY STORY -

AFTER!

Hair grew back

Lost over 80 lbs


Fertile again... meet my
miracle!

Wake up excited each
morning

Reclaimed sex drive

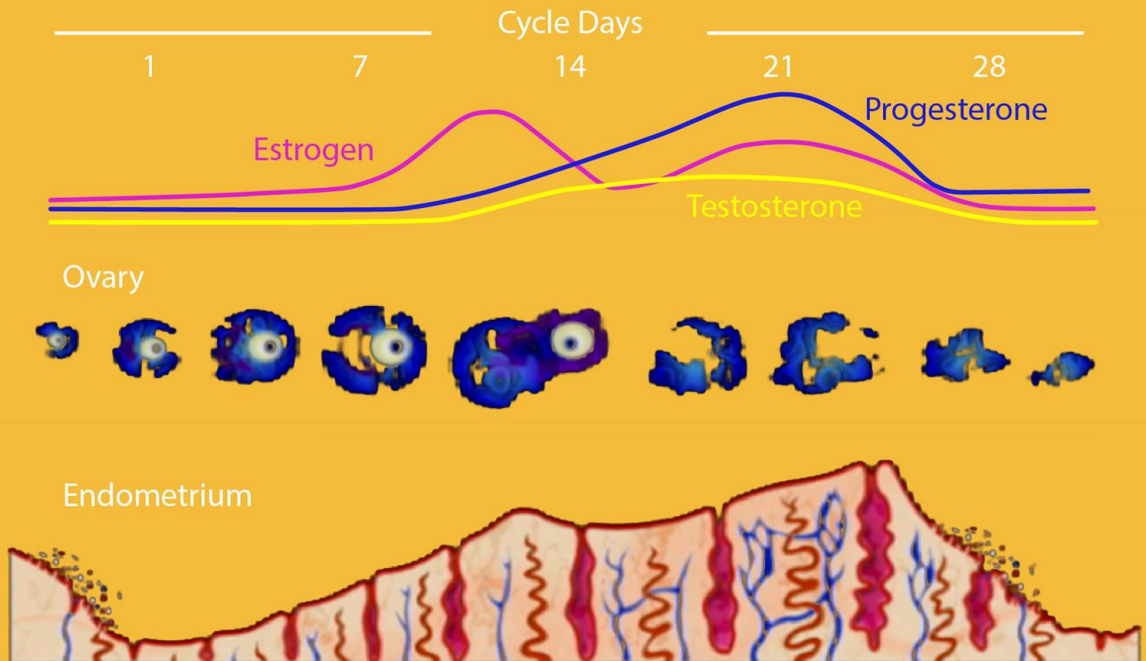


AND WHAT'S MORE...

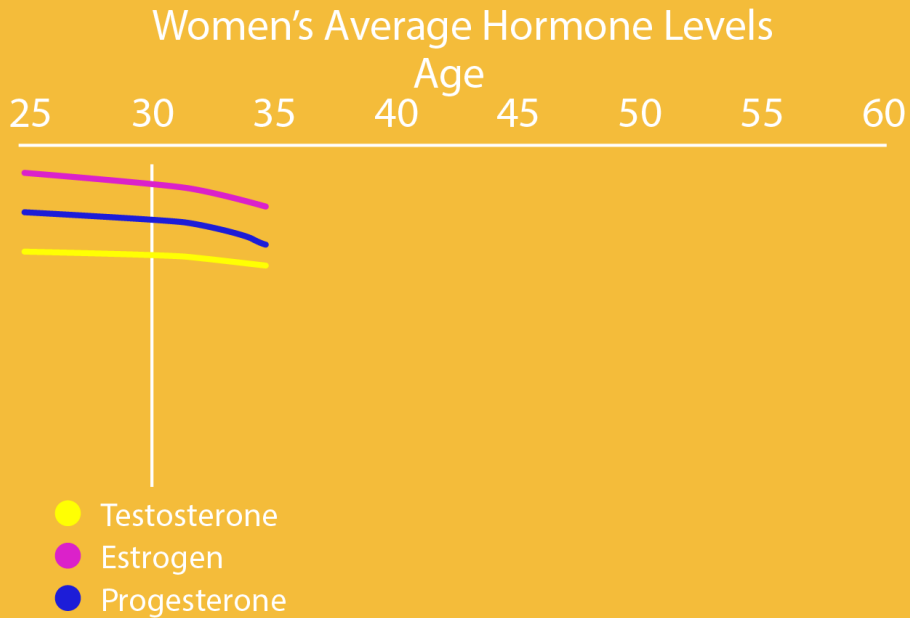


I knew I was missing
something.

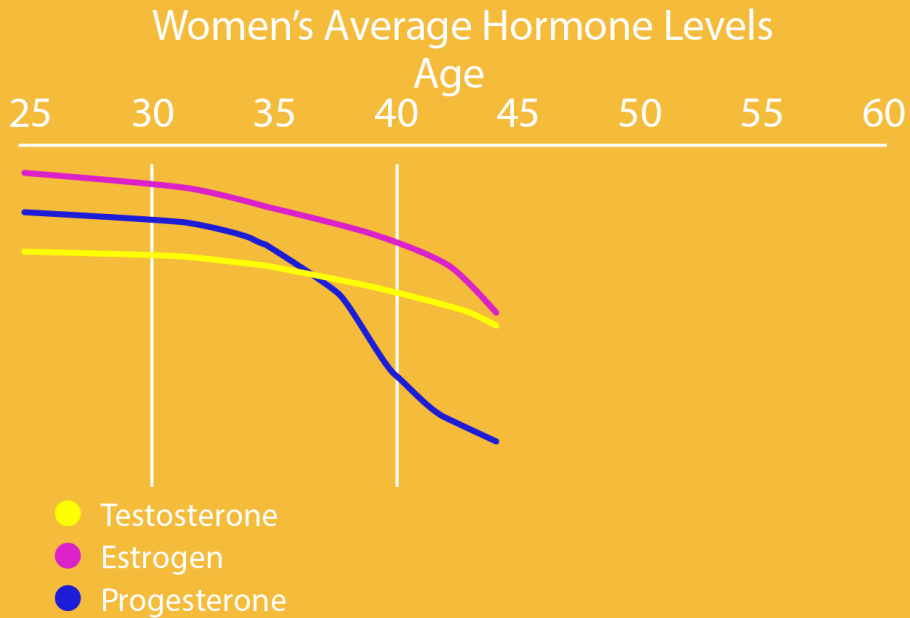
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Symptoms of Estrogen Dominance

- ☆ Mood Swings
 - ☆ Irritability
 - ☆ Depression

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Proza

C

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Symptoms of Estrogen Dominance

- ☆ Irregular Periods
- ☆ Heavy Menstrual Bleeding
- ☆ Dysmenorrhea
- ☆ Ovarian Cysts

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OCP's



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Hysterectomy

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Symptoms of Estrogen Dominance

- ☆ Decreased Libido
- ☆ Headaches
- ☆ Fatigue
- ☆ Short-term Memory Loss
- ☆ Lack of Concentration
- ☆ Thinning of Scalp Hair

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Symptoms of Estrogen Dominance

- ☆ Dry, Thin, Wrinkly Skin
- ☆ Increased Facial Hair
- ☆ Diffuse Aches and Pain
 - ☆ Vaginal Dryness
 - ☆ Water Retention
- ☆ Weight Gain: Hips, Thighs, and Abdomen

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Proza

C

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OCP's



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Hysterectomy

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Divorce

A photograph of a man and a woman sitting on a couch, facing each other in a tense conversation. The woman, on the left, has her hands raised to her face in a defensive or distressed gesture. The man, on the right, has his hands open in a pleading or explanatory gesture. The image is overlaid with a semi-transparent pink band containing the word "Divorce" in white text. The entire image is framed by a yellow border at the top and bottom.

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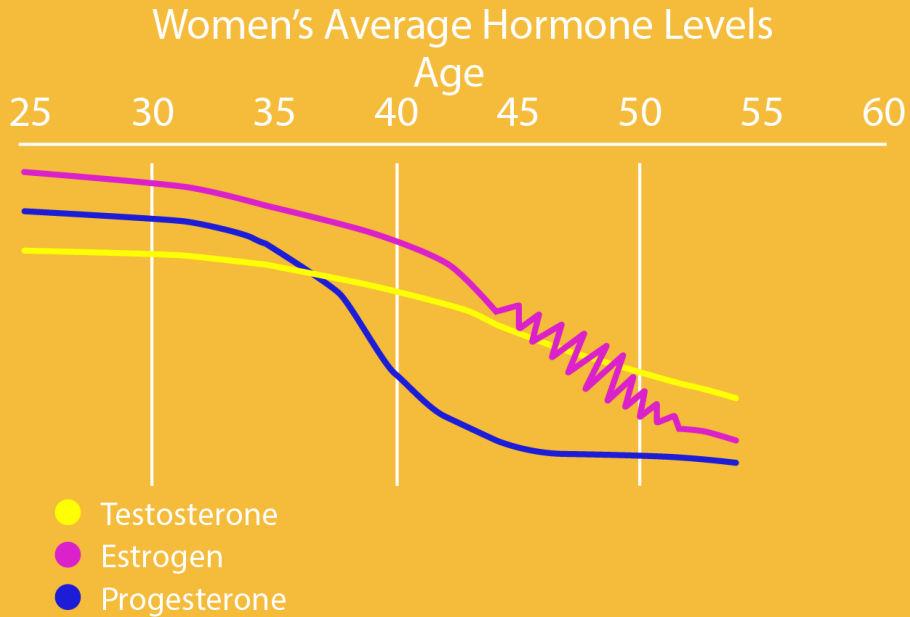
Estrogens Functions

- Development of sex characteristics
 - Stores fat
 - Increases Serotonin
 - Improves insulin sensitivity
- Stimulates growth of endometrial tissue
- Stimulates development of follicle
- Stimulates growth of breast tissue
 - Supports vaginal integrity
- Maintains collagen in the skin and connective tissue

Carol found her own way
of coping with the hot
flushes



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The background of the slide is a classical painting depicting a woman with long, wavy hair, her face in profile, gently cradling a sleeping child. The child's head is resting against the woman's cheek. The painting is rendered in soft, warm tones. A semi-transparent pink horizontal band is overlaid across the middle of the image, containing the title text in white.

Progesterone

Our Mother Hormone

Progesterone Functions

- Stabilizes the endometrium
- Essential for maintaining pregnancy “Hormone of Pregnancy”
 - Supports Th2 immunity
 - Neuroprotective
 - Anti-inflammatory
 - Promotes normal sleep patterns
- Calming effect on the brain/GABA receptors

Progesterone Functions

- Reduces cholesterol
- Inhibits coronary vasospasm
 - Diuretic
- Enhances thyroid hormone activity, ↓TBG
 - Anti-depressant
 - Promotes Osteoblasts
- Promotes cell differentiation
- Promotes normal cell death (apoptosis)

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Progesterone

Need it with or without a
uterus!!!!

Association with breast cancer

- **May be protective pre-menopause**
- **Undetermined risk post menopause**
 - **Induces apoptosis (programmed cell death) - Up regulates P53**

Fournier 2005 – French study: 54,548 PM ♀

- Little or no increased risk with oral or transdermal E alone or combined with oral micronized Progesterone
- Increased risk when combined with synthetic progestins.
- Conclusion: “The association between HRT use and breast cancer risk most likely varies according to progestogen used.”

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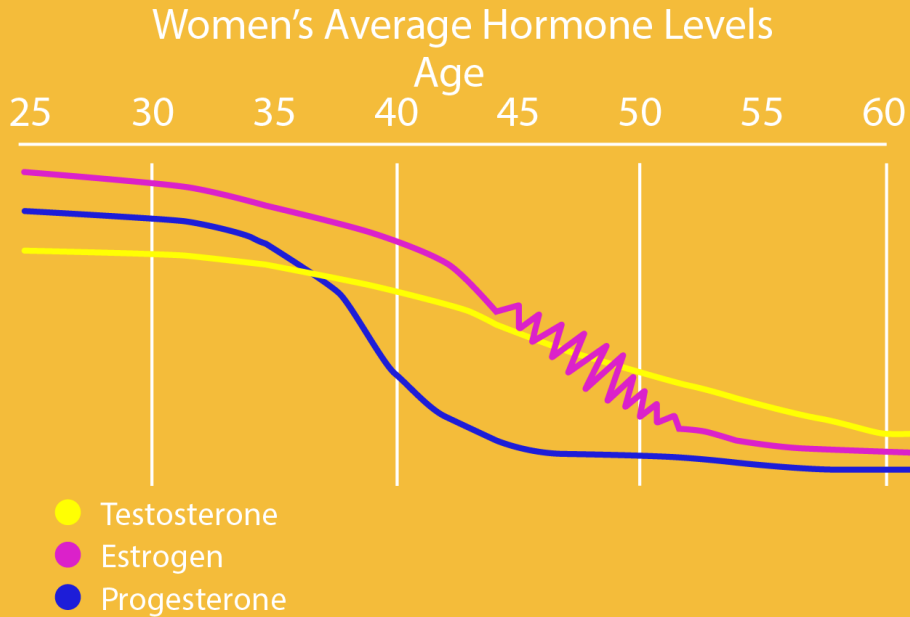
No increased risk was apparent among EP therapy users treated with natural micronized progesterone. Among users of EP therapy containing a synthetic progestin, the odds ratio was 1.57 (0.99-2.49) for progesterone-derived and 3.35 (1.07-10.4) for testosterone-derived progestagen.

Conclusion: “Formulation of EP therapies containing natural progesterone, frequently prescribed in France, was not associated with increased risk of breast cancer.”

Cordina-Duverger E, Truong T, Anger A, Sanchez M, Arveux P, Kerbrat P, et al (2013) Risk of Breast Cancer by Type of Menopausal Hormone Therapy: a Case-Control Study among Post-Menopausal Women in France.

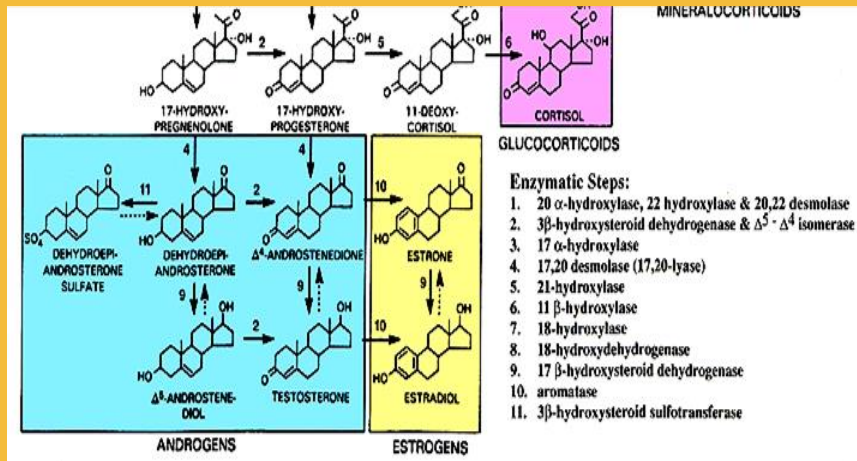
PLoS ONE 8(11): e78016. doi:10.1371/journal.pone.0078016 French study: 1555 PM

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Testosterone

- Secreted by adrenal glands and ovaries ♀ and testis ♂
- Converted to E2 to E1 via aromatase



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Testosteron e

The background image is a photograph of a male athlete in a wrestling singlet, captured in a dynamic pose during a match. He is wearing a singlet with "ARMY" visible on the sleeve. The image is overlaid with a semi-transparent pink horizontal band that serves as a background for the text. The entire composition is framed by yellow borders at the top and bottom.

Functions

Improves sleep

Improves sense of well being and vitality

Essential for libido, arousal, and orgasm

Inhibits fat accumulation

Improves bone density

Helps to maintain lean muscle mass

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Reported Effects of Low Testosterone



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- **Decreased libido and potency**
 - **Memory failure**
- **Loss of ability to concentrate**
 - **Moodiness/emotionality**
 - **Depression**
 - **Reduced activity**
 - **Passive attitudes**
 - **“General tiredness”**
 - **Nervousness, anxiety**
 - **Irritability**

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Statin tx lowers libido


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April 16, 2010 -- Statin therapy prescribed to lower cholesterol also appears to lower testosterone, according to a study that evaluated nearly 3,500 men who had erectile dysfunction or ED.

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"Current statin therapy is associated with a twofold increased prevalence of hypogonadism," - Giovanni Corona, MD, PHD, a researcher at the University of Florence in Italy

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Stress and Hair loss

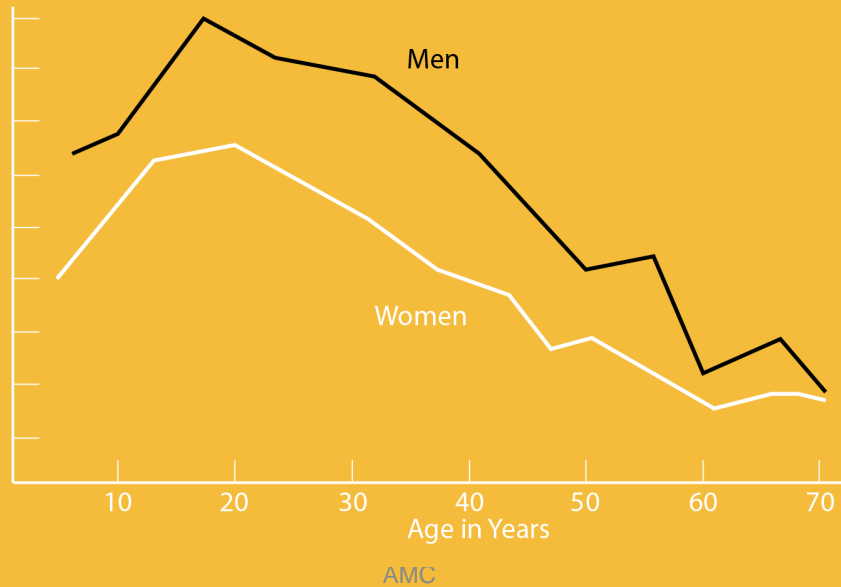
A woman with long dark hair, eyes closed, holding her head in her hand, suggesting stress or pain. The image is overlaid with a semi-transparent pink banner containing the title 'Stress and Hair loss'.

Causes

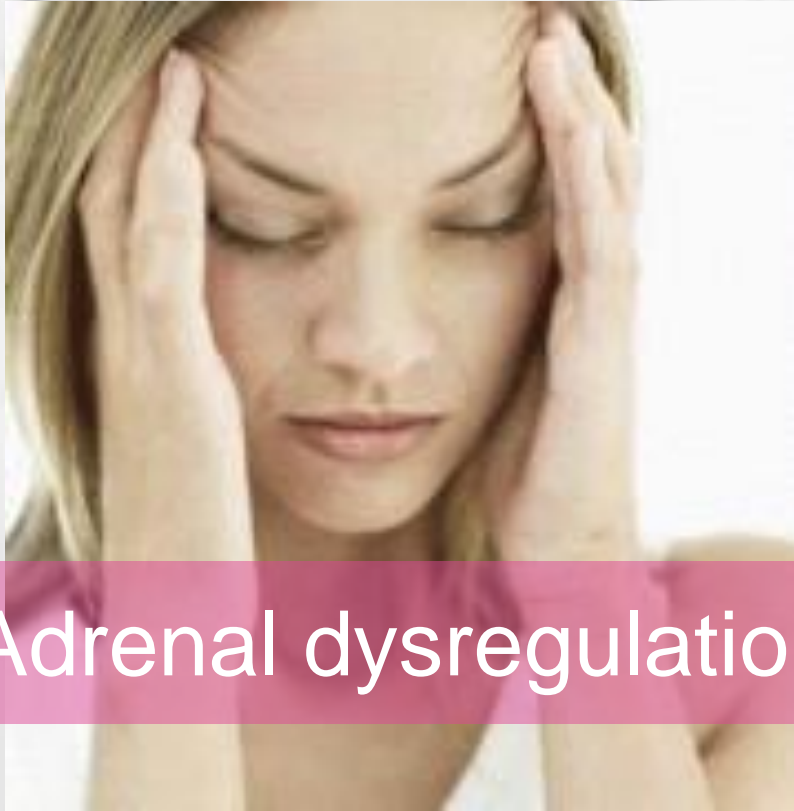
- Stress -> 5-alpha reductase
- B vitamin deficiency
- Protein deficiency
 - High fat diet
- Thyroid disease

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Decline of DHEA with aging



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Adrenal dysregulation

Testing is key



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Test - don't Guess

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Why What Where How When



Evaluating & Balancing Hormones

- What do you want to know and test for?
- When should you test for it?
- Where should you test for it?
- How should you test for it?
- What information is the test giving you?
- How will you use this information to treat the patient?
- What follow up testing should you do?

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Practice medicine
that makes sense!

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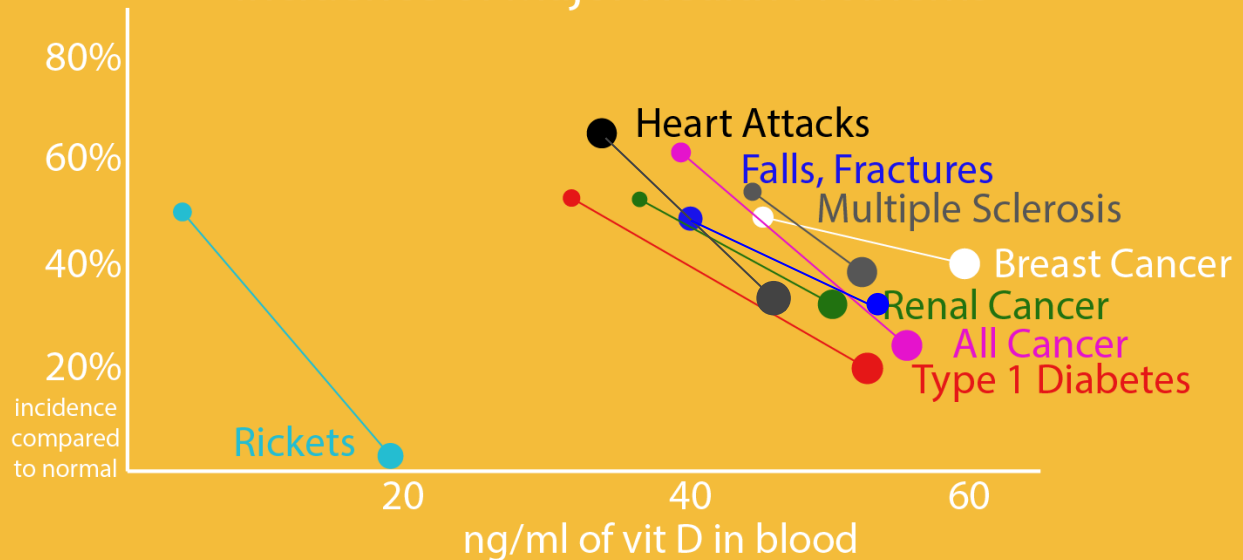
Blood testing

- Estradiol
- Total estrogens
- Progesterone
- Free and total testosterone
- DHEA-S
- Cortisol



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More Vitamin D in Blood Reduces Incidence of Major Health Problems



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- DHEA
- Cortisol (morning or 4 point)
- TSH
- freeT3
- freeT4
- Reverse T3
- Thyroid antibodies
- Nutritional status
- rbc Mg

- HS CRP
- Homocysteine
- Vit D 25 OH
- Ferritin
- Hgb A1c
- Sex hormone binding globulin
- Complete lipid analysis

What hormones do we see where?

Serum

vs.

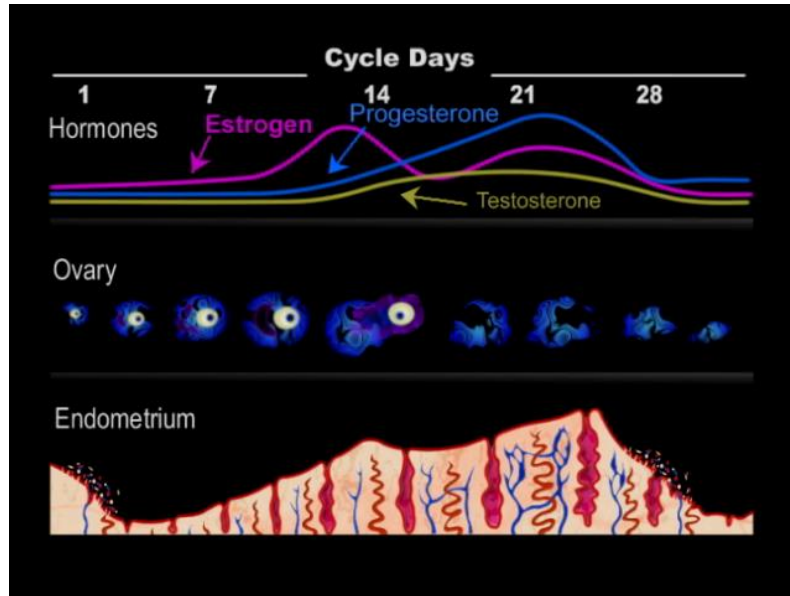
Saliva

vs.

Urine

68

When do we want to test it?



When do we want to test it?

- In a menstruating woman
 - Cd 19 – 21: Peak luteal phase hormone levels
 - Cd 3: Baseline levels ex. FSH, E2
- Diurnal variation
- Trough levels
- Consistency
- “ We must draw the specimen at the same time every time”

Instruct Patient on Proper Sample Collection

- Serum:

- Collect blood 8-10 hours after last dose of HRT (all forms except patch).
- Once/week patch collect ~3 days after applying.
- Twice/week patch collect ~19 hours after applying.

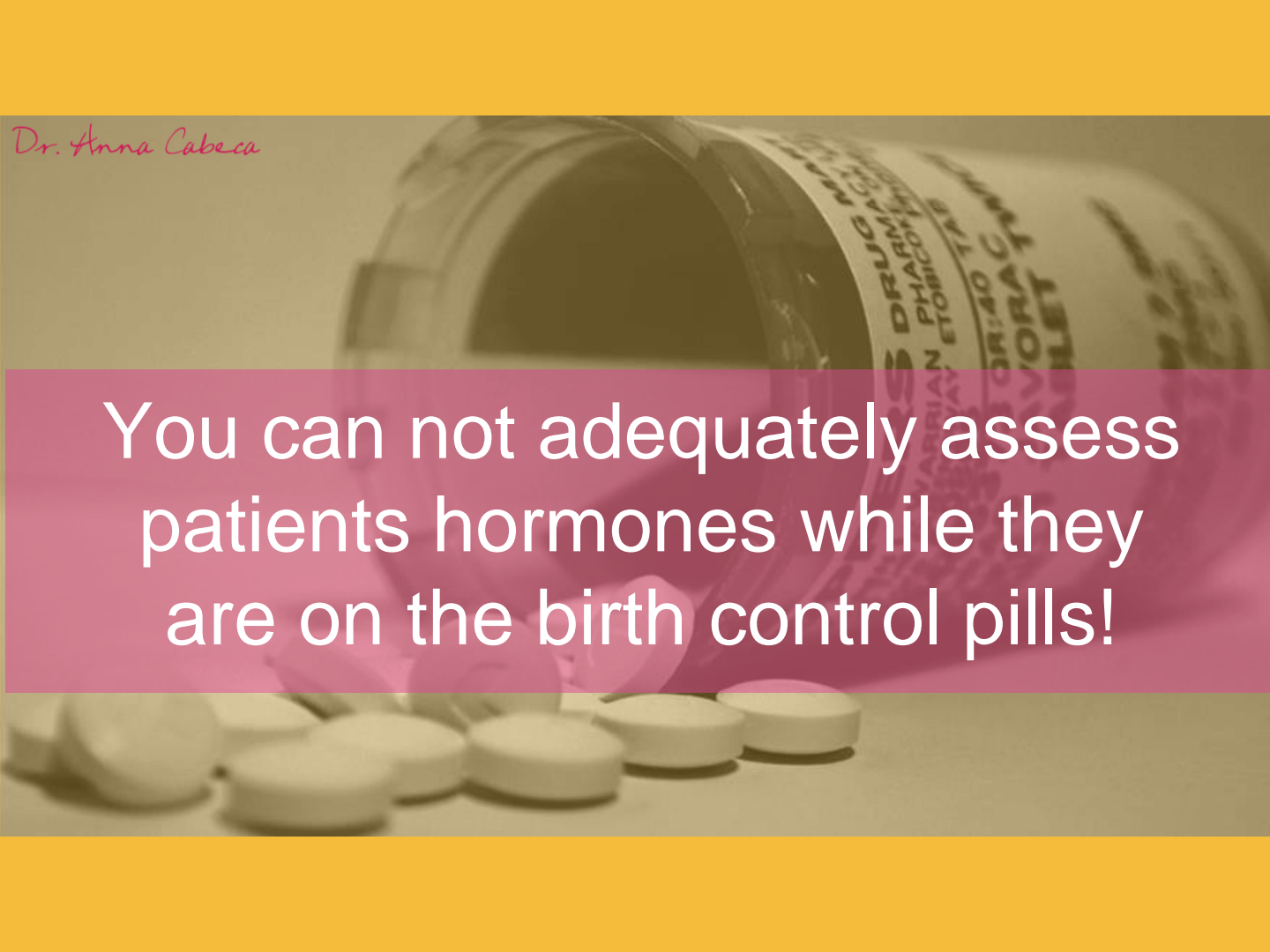
- Saliva:

- Collect saliva 8-12 hours after last
- dose of HRT (all forms except patch).

- Urine:

- 24 hour urine collections should be used with HRT, in order to average hormone peaks and troughs with once or twice a day dosing.

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You can not adequately assess
patients hormones while they
are on the birth control pills!

**Treat the
patient, NOT
the labs**





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*“In medicine, **90%** of our diagnoses is based on our H&P*



*In healing, **90%** of the cure is through therapeutic lifestyle changes (TLCs)”*

Be optimal not Normal



Home Testing



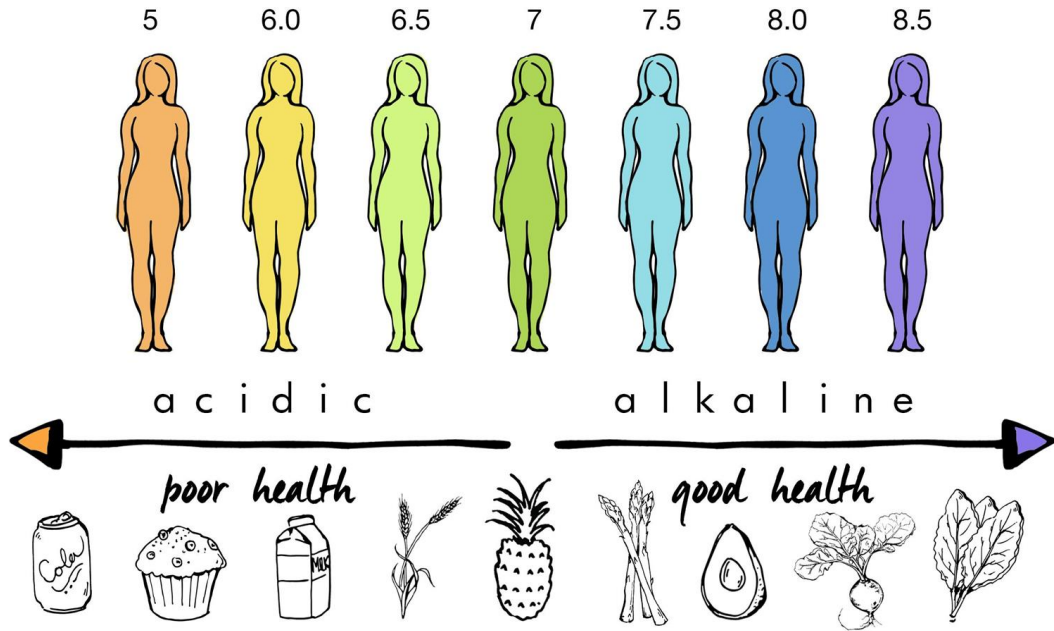
The background image shows two pH test strips. The top strip is yellow, indicating an alkaline pH, and the bottom strip is red, indicating an acidic pH. A semi-transparent grey banner is overlaid across the middle of the image, containing the title text.

Getting KetoAlkaline

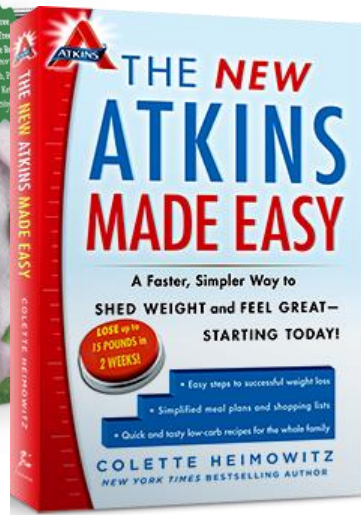
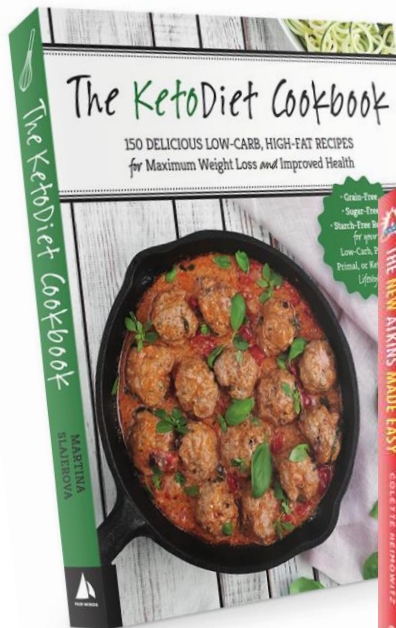
1. Staying Alkaline

A vibrant, high-resolution photograph of a tropical jungle. In the foreground, a calm stream reflects the surrounding greenery. The banks are covered in dense, lush vegetation, including large, heart-shaped leaves, various ferns, and palm trees. The background is a thick wall of green, with sunlight filtering through the canopy. A semi-transparent dark green banner is overlaid across the middle of the image, containing the title text in white.

Maintaining Alkalinity & Discovery



2. Getting into ketosis



**Keto is
everywhere...**

What is Ketosis (and why do I want it)?

A space shuttle is shown launching, ascending vertically against a blue sky with scattered white clouds. A large, dense plume of white and yellow smoke and fire is visible at the base of the shuttle, indicating the point of liftoff. A yellow service structure is visible to the left of the shuttle. The text "What your body uses as fuel" is overlaid in the center of the image.

What your body uses as fuel

Research shows improved...

Memory



Immune system health



Weight loss



Lack of hunger & cravings





20%

5%

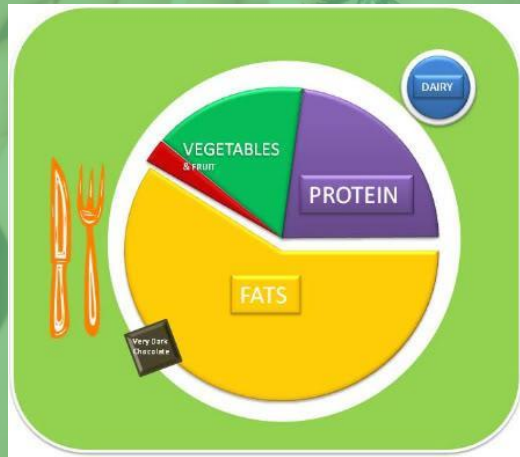
65-70%

PROTEINS

CARBS

FATS

Keto-Alkaline™ Lifestyle



Intermittent fasting



Getting the Magic Started



10 Day Keto-Alkaline Menu Plan Week 2

Connect	1	2	3	4	5	6	7	8	9	10
Grateful for:										
My cheer word is:										
Connect with:										
Movement today:										
Oxytocin*										
Morning	Good Morning Shake ☺	Good Morning Shake ☺	Good Morning Shake ☺	Good Morning Shake ☺	Good Morning Shake ☺	Good Morning Shake ☺	Good Morning Shake ☺	Good Morning Shake ☺	Good Morning Shake ☺	Good Morning Shake ☺
Mid-day	Kale salad with tuna or beef	Spring Cobb Salad	Tomato soup (DF) with tuna salad	Egg salad & broccoli slaw	Cleansing spring soup salad	Avocado stuffed with chicken salad	Anytime salad, with pumpkin seeds	Bone broth + 1-2sc KA shake	Spring Cobb Salad	Salmon cakes
Evening	Pistachio Mahi mahi w veggies	Shish kabob Cauliflower mash	Sauteed Shrimp, eggplant, onions	Bone broth + 1sc KA shake	Oysters or shrimp, w Cole slaw	Crock pot chicken & veggies	Bone broth + 1sc KA shake	Bone broth + 1sc KA shake	Salmon Cakes with greens	Lettuce taco night
pH										
Ketones										
Water										

Keto-Alkaline™ concept is revolutionary and brings us into energized enlightenment - Current science and all the hundreds of diet plans, missed this basic research.

A photograph of a lightbulb hanging in a laboratory setting, with a teal overlay. The lightbulb is the central focus, and the background is blurred, showing other laboratory equipment. The text "When we put the two together." is written in white, bold, sans-serif font across the middle of the image.

When we put the two together.

This benefits **insulin**, and **cortisol** and activates healthy anti-inflammatory pathways, improving memory,
Body shape and weight, flexibility, mental clarity and mood.

...And what we find too is improved organ function, less reliance (or reduced dosages of) thyroid and other hormones, our body performs and functions better!!!



What gets **measured...**
...gets **managed**



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Keto-Alkaline Weight Loss Solution

TESTING AND READING TIME

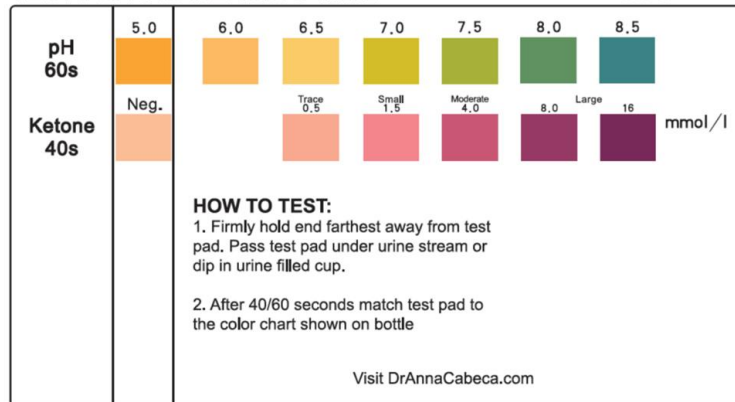
Rev.01/2016

100 Strips

IMPORTANT:

Keep away from light and moisture.
Promptly replace cap after taking out strips.
Do not remove desiccants.
Do not touch test areas of reagent strips.
Use it within the expiration date.
Read insert carefully before use.

LOT



IVD



Keep track with the app

Keto pH
Free :-)



Here's a quick preview



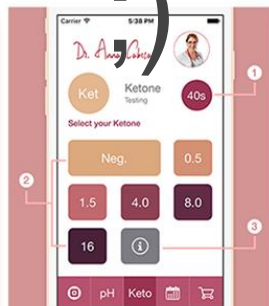
Record your pH and Keto

1. Tap on pH to record your pH.
2. Tap on Keto to record your urine Ketones.
3. Return to this screen by tapping on home button.



pH test dashboard

1. Tap to start 60 sec count down as you start pH testing.
2. Select a score that matches your test.
3. Tap info button to know how to do the test.



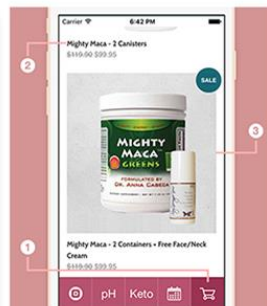
Ketone test dashboard

1. Tap to start 40 sec count down as you start Ketone testing.
2. Select a score that matches your test.
3. Tap info button to know how to do the test.



Magic Nutrition Plan

1. Tap to open Magic nutrition plan screen.
2. Tap to select a date to start your first 10 day plan.
3. Select on each day to answer questions.
4. Check your total points.
5. See line graph of your progress.



Online store

1. Tap to open Online store.
2. Name of product.
3. Image of product. Tap on the image to buy product.

Keep track of your progress...

Sprint LTE 6:42 PM Day 1 80/100
05-07-2016

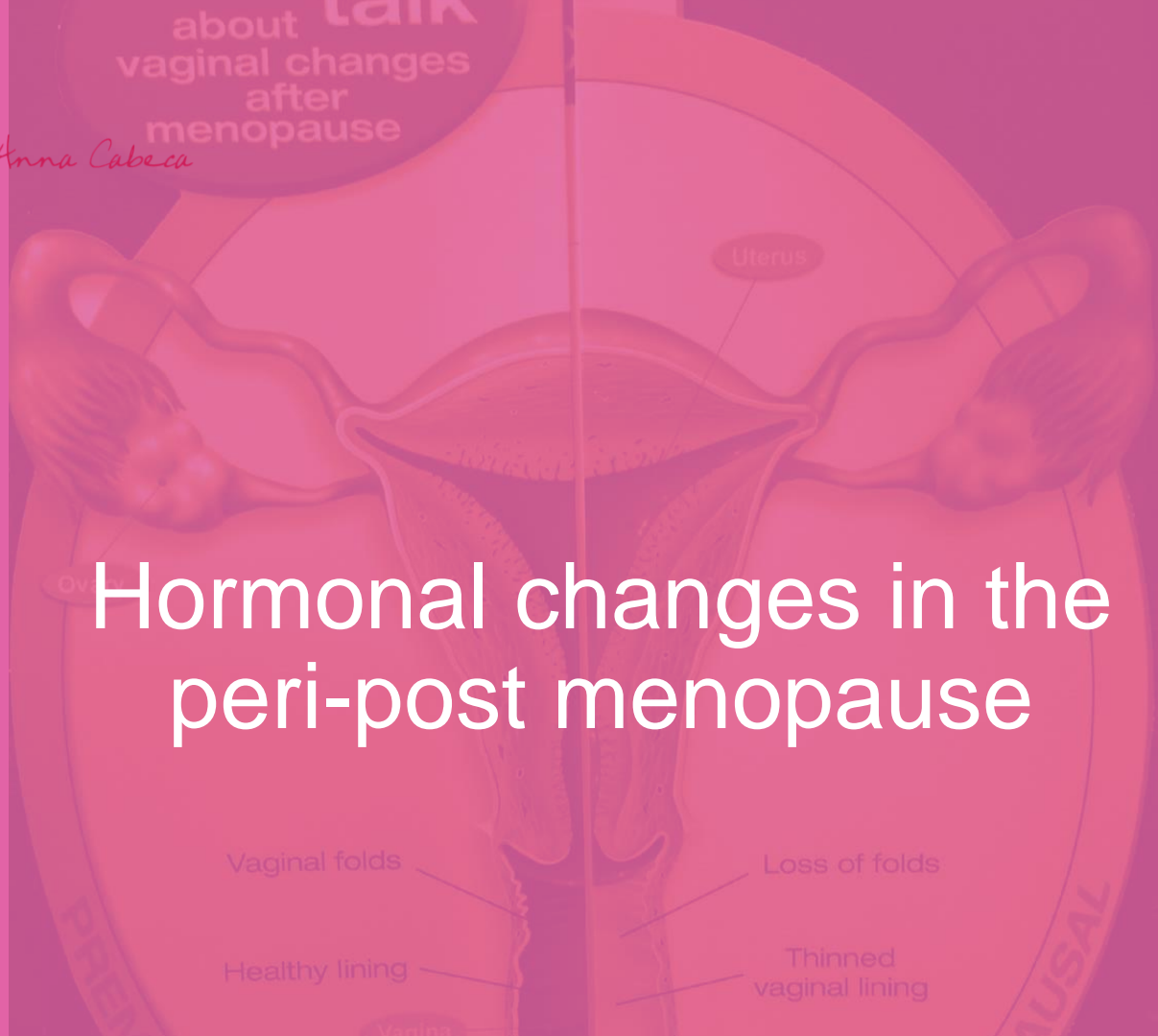
Done

- ☒ Expressed Gratitude Today
- ☒ Was Cheerful Today
- ☐ Connected with Someone
- ☒ Weight in Control
- ☒ Oxytocin Increasing Activity
- ☒ My pH is 7 or Greater
- ☒ My Ketones are Positive
- ☐ Had 8 Glasses of Water Today
- ☒ Slept 7 or more hours
- ☒ Bowel Movements

talk
about
vaginal changes
after
menopause

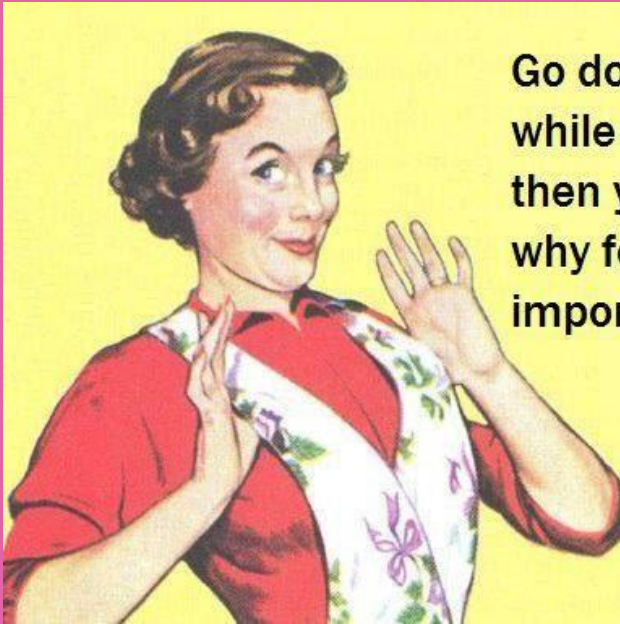
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Hormonal changes in the peri-post menopause



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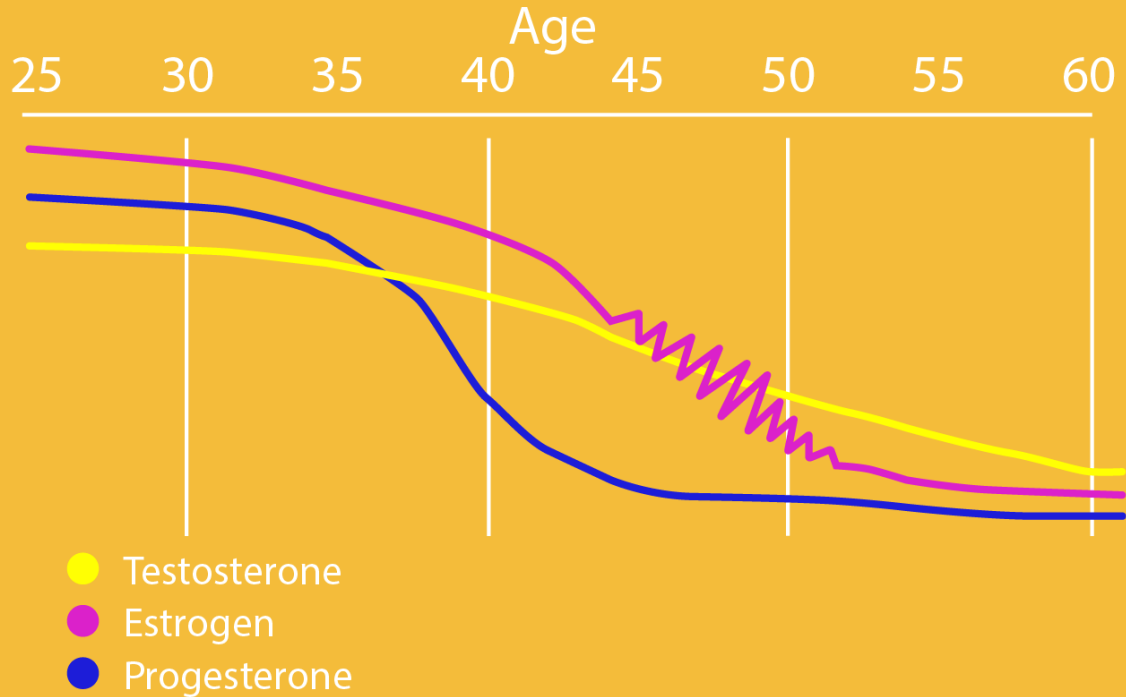
Hormonal Therapies



Go down a waterslide
while it isn't wet and
then you'll understand
why foreplay is so
important.....;)

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Women's Average Hormone Levels



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Balancing Hormones

Hormonal Causes of Sexual
Dysfunction

OXYTOCIN

Adrenaline Cortisol Insulin

Estrogen

Progesterone

Testosterone

DHEA

Melatonin

Vitamin D

Pregnenolone

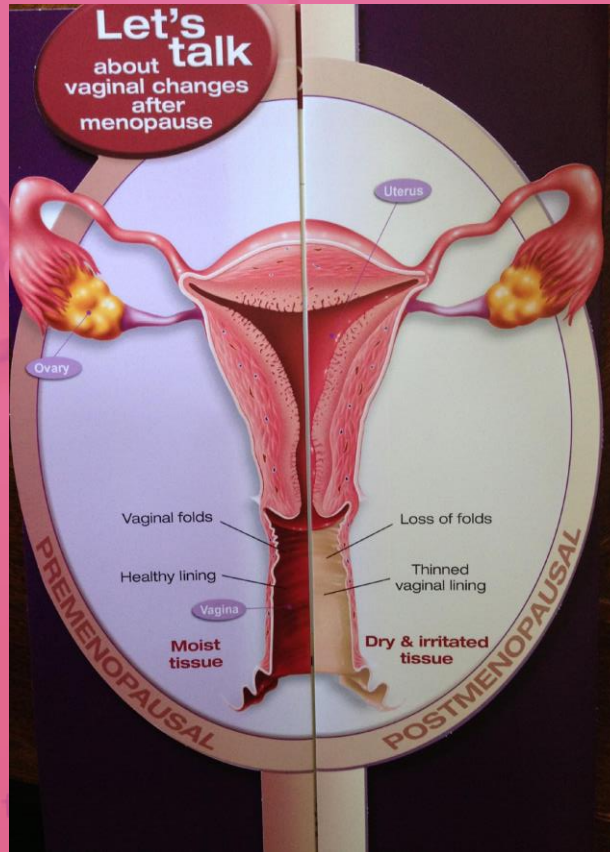
whatever
happened to
our sexual
relations?

I don't know.
I don't even
think we got
a Christmas
card from them
this year.



menopause

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Healthy Vagina!

- pH: 3.5- 4.5
- **Flora: predominantly lactobacilli – multiple strains**
- **Secretions:**
 - **Glandular: vulvar, sebaceous, sweat, Bartholin's and Skene's**
 - **Exfoliated cells**
- **Secretions of the cervix, endometrial cavity, fallopian tubes**

menopause

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What effects the Vagina

- Declining hormone levels
- Estrogen, progesterone, testosterone, DHEA
 - Atrophic epithelium
 - Decreased musculature
 - Increase in pH: alkaline
- Decline in glycogen levels
- Decreased normal flora

Vaginal folds

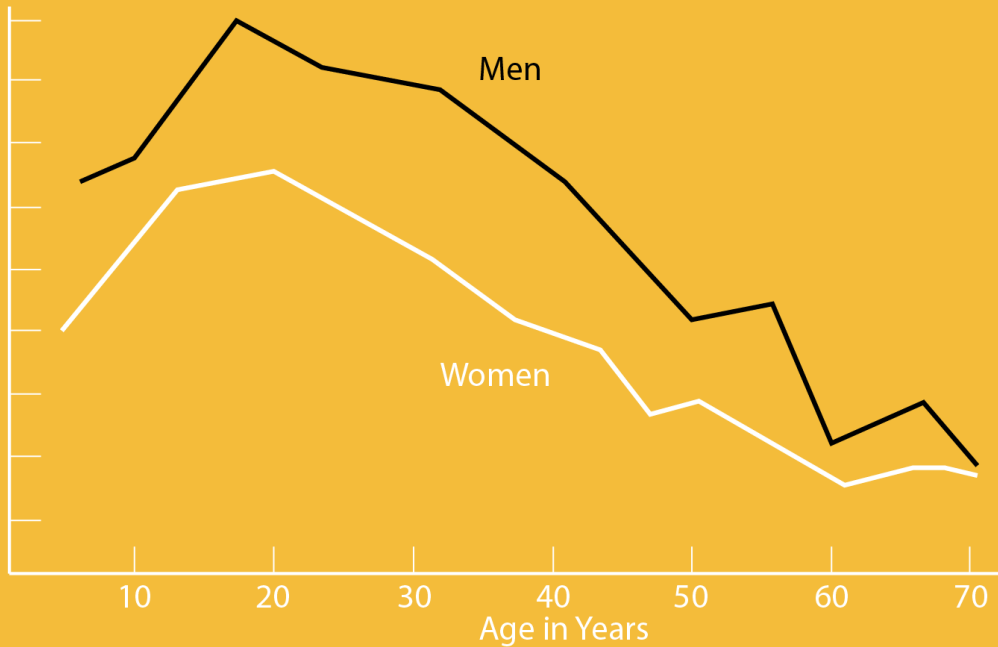
Loss of folds

Healthy lining

Thinned

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Decline of DHEA with aging



Dr. Anna Cabeca **Effect of intravaginal
dehydroepiandrosterone (Prasterone) on
libido and sexual dysfunction in
postmenopausal women**

Conclusions

By a local action in the vagina, DHEA applied daily at doses at which serum steroids remain well within normal postmenopausal values exerts relatively potent beneficial effects on all four aspects of sexual dysfunction. Such data indicate that combined androgenic/estrogenic stimulation in the three layers of the vagina exerts important beneficial effects on sexual function in women without systemic action on the brain and other extra-vaginal tissues.

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Endocrine and intracrine sources of androgens in women: inhibition of breast cancer and other roles of androgens and their precursor dehydroepiandrosterone

• Endocr Rev. 2003 Apr;24(2):152-82.

• [Labrie F, Luu-The V, Labrie C, Bélanger A, Simard J, Lin SX, Pelletier G.](#)

• Molecular Endocrinology and Oncology Research Center, Laval University Medical Center (Centre Hospitalier de l'Université Laval) 1050 Avenue de la Médecine, Québec City, Québec G1V 4G2 Canada; fanny.labrie@chulaval.ca

- Serum androgens as well as their precursors and metabolites decrease from the age of 30-40 yr in women, thus suggesting that a more physiological hormone replacement therapy at menopause should contain an androgenic compound. It is important to consider, however, that most of the androgens in women, at least at menopause, are synthesized in peripheral intracrine tissues from the inactive precursor dehydroepiandrosterone (DHEA). Androgen and DHEA research has progressed in this new area of endocrine physiology called intracrinology has followed the cloning and characterization of most of the enzymes responsible for the transformation of DHEA and DHEA-S into androgens and estrogens in peripheral target tissues, where the locally produced sex steroids are then inactivated in the same target tissues or are inactivated locally, thus preventing their diffusion into the circulation, thus serving the role of intracrine androgens and estrogens. Sex steroids made in peripheral tissues are then inactivated locally into more water-soluble compounds that diffuse into the general circulation where they can be measured. In a series of animal models, androgens and DHEA have been found to inhibit breast cancer development and growth and to stimulate bone formation, while the herbicide androstane derivative, flutamide, can stimulate vaginal maturation without acting on the hypothalamic-pituitary-gonadal axis. The advantage of DHEA over other androgenic compounds is that DHEA, at physiological doses, is converted into androgens and/or estrogens only in the specific intracrine target tissues that possess the appropriate physiological enzymatic machinery, thus limiting the action of the sex steroids to those tissues. This type of hormone replacement therapy is therefore suitable for their formation, while leaving the other tissues unaffected. Intracrine androgenic compounds are also suitable for the treatment of androgens or estrogens administered systemically.

In a series of animal models, androgens and DHEA have been found to inhibit breast cancer development and growth and to stimulate bone formation.

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Endocrine and intracrine sources of androgens in women: inhibition of breast cancer and other roles of androgens and their precursor dehydroepiandrosterone

• [Endocr Rev. 2003 Apr;24\(2\):152-82](#)

• [Labrie F](#), [Luu-The V](#), [Labrie C](#), [Bélanger A](#), [Simard J](#), [Lin SX](#), [Pelletier G](#)

• Molecular Endocrinology and Oncology Research Center, Laval University Medical Center (Centre Hospitalier de l'Université Laval) and Laval University, Québec City, Québec G1V 4G2, Canada. fernand.labrie@crchul.ulaval.ca

In clinical studies, DHEA has been found to increase bone mineral density and to stimulate vaginal maturation without affecting the endometrium, while improving well-being and libido with no significant side effects.

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DHEA and the intracrine formation of androgens and estrogens in peripheral target tissues: its role during aging.

- Steroids. 1998 May-Jun;63(5-6):322-8.
- [Labrie F, Bélanger A, Luu-The V, Labrie C, Simard J, Cusan L, Gomez JL, Candas B.](#)
- Laboratory of Molecular Endocrinology, CHUL (Le Centre Hospitalier de l'Université Laval) Research Center, Québec, Canada. fernand.labrie@crchul.ulaval.ca

Human and some other primates are unique since their adrenals secrete large amounts of dehydroepiandrosterone (DHEA) and its sulfate (DHEA-S), which are converted into androstenedione (4-dione) and then into potent androgens and estrogens in peripheral tissues, therefore providing autonomous intracrine control to target tissues that can adjust the formation and metabolism of active sex steroids according to local requirements. Knowledge in this area has recently made rapid progress with the elucidation of the structure of most of the tissue-specific cDNAs and genes that encode the steroidogenic enzymes involved in the conversion of DHEA and DHEA-S into androgens and estrogens. It is estimated that 30 to 50% of total androgen and estrogen formation in the peripheral target tissues is derived from the intracrine action of DHEA and DHEA-S by the adrenals during aging, especially before the age of 50 years, results in a dramatic fall in the formation of active sex steroids in peripheral target tissues, a fall that is thought to be associated with a long series of age-related decreases such as insulin resistance, obesity, osteoporosis, cardiovascular morbidity, loss of muscle mass, and a decline in bone density and bone mineral density. The fall in DHEA and DHEA-S is also associated with a fall in the beneficial effects of DHEA and DHEA-S on the cardiovascular system, the immune system, and the nervous system. This relatively rapid change was associated with an increase in plasma osteocalcin, a marker of bone formation, while a decrease in bone resorption reflected by a decrease in urinary hydroxyproline excretion was observed in parallel. In addition, the estrogenic stimulation of vaginal cytology in the absence of any sign of estrogenic stimulation by the ovaries was observed. These findings support the beneficial use of DHEA as a hormone replacement therapy in women.

Furthermore, the inhibitory effect of DHEA on the growth of human breast cancer xenografts in vivo in nude mice supports the beneficial use of DHEA as hormone replacement therapy in women.

• PMID: 9718795 (2) bMed - indexed for MEDLINE

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Management of sexual dysfunction in postmenopausal breast cancer patients taking adjuvant aromatase inhibitor therapy.

- Curr Oncol. 2007 Dec;14 Suppl 1:320-40.
- [Derzko C](#), [Elliott S](#), [Lam W](#).
- Obstetrics and Gynecology and Reproductive Endocrinology, St. Michael's Hospital, and University of Toronto, Toronto, Ontario.

In patients with estrogen-dependent breast cancer (notably those receiving anti-estrogenic adjuvant therapies) and severely symptomatic vaginal atrophy that fails to respond to non-hormonal options, menopausal hormone replacement or prescription vaginal estrogen therapy may be considered.

may be highly effective, the concern remains that in patients with estrogen-dependent breast cancer, including those receiving anti-estrogenic adjuvant therapies, the use of these hormones may be attended with potential risk. Therefore, non-hormonal alternatives should in all cases be initially tried with the expectation that symptomatic relief can often be achieved. First-line therapy for urogenital symptoms, notably vaginal dryness and dyspareunia, should be the non-hormonal group of preparations such as moisturizers and pre-coital vaginal lubricants. In patients with estrogen-dependent breast cancer (notably those receiving anti-estrogenic adjuvant therapies) and severely symptomatic vaginal atrophy that fails to respond to non-hormonal options, menopausal hormone replacement or prescription vaginal estrogen therapy may be considered. Systemic estrogen may be associated with risk and thus is best avoided. Judicious use of hormones may be appropriate in the well-informed patient who gives informed consent, but given the potential risk, these agents should be prescribed only after mutual agreement of the patient and her oncologist.

Dr. Anna Cabeca **Julv**

a

Alpine Rose plant

stem cells

DHEA

Emu oil

Coconut oil

Rose essence



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Normal Sexual Function

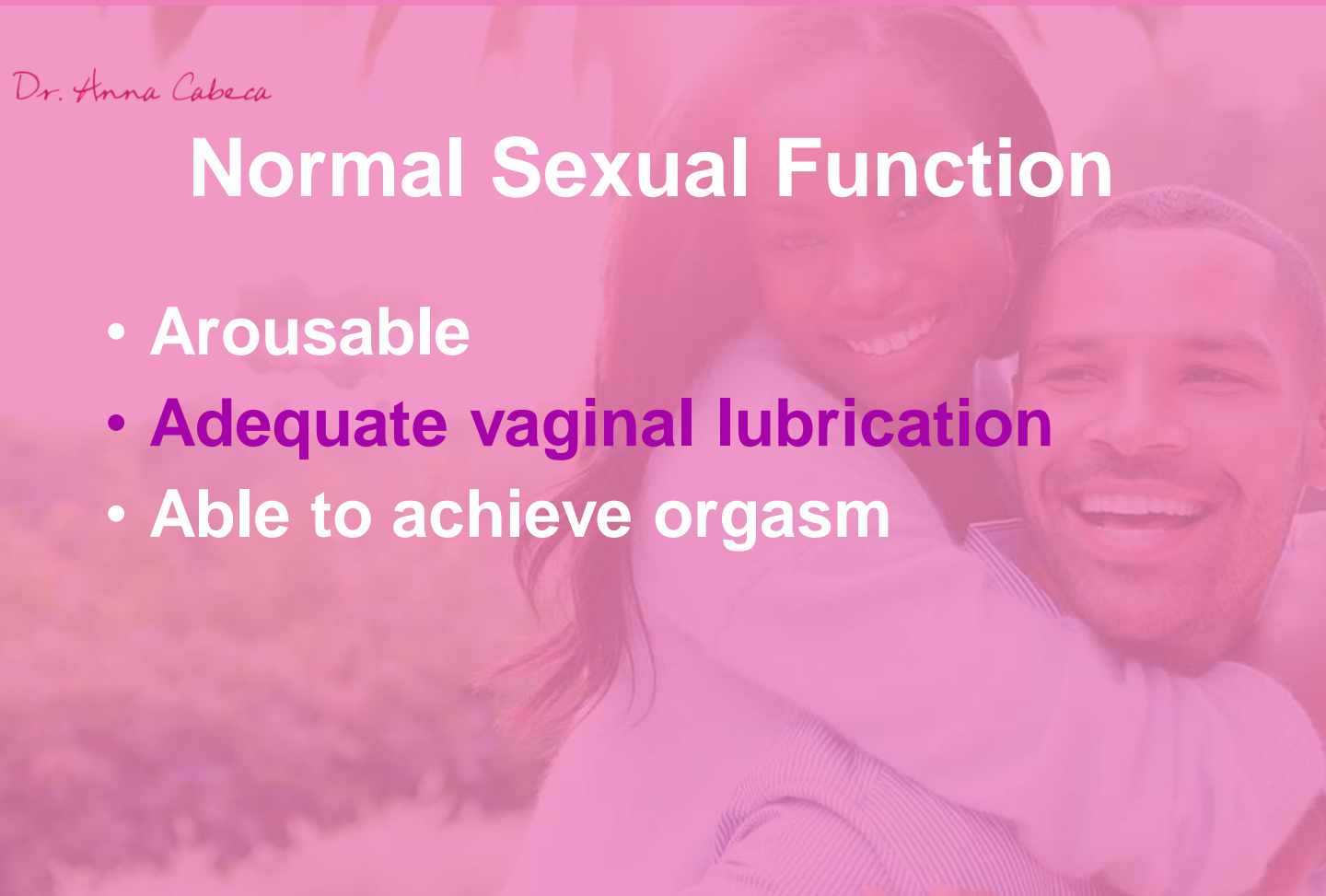
- **Good Health**
- **Hormone Balance**
- **Comfortable with body**
- **Able to communicate desires**
- **Has an interest in sex**



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Normal Sexual Function

- Arousable
- Adequate vaginal lubrication
- Able to achieve orgasm



Dr. Anna Cabeza

7 Key Areas of Sexual Health



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Treatment Options

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- **Hormonal balance (Bigger is not Better)**
 - Address adrenaline, cortisol, insulin, oxytocin & thyroid
 - Progesterone
 - Progesterone therapies are available in pill, cream, and vaginal forms. Consult with your physician about which form is correct for you

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Treatment Options

Hormonal balance

DHEA

Testosterone ♀

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Treatment Options

Pregnenolone

Melatonin

D3

Vitamin

menopause

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Vaginal hormonal treatment options

- Compounded DHEA vaginal suppositories/tablets or topical cream
 - 5-10 mg
- Testosterone
 - 0.5 – 10 mg suppository (higher doses with incontinence)

Ovary

Vaginal folds

Loss of folds

Healthy lining

Thinned

menopause

Dr. Anna Cabeca

Vaginal hormonal treatment options

- Estriol/Estradiol
- Progesterone
- Oxytocin
- Ex: Bi-est 0.5 mg+ T 2mg + DHEA 3mg combined

Ovary

Vaginal folds

Loss of folds

Healthy lining

Thinned

menopause

Dr. Anna Cabeca

Non-hormonal treatments for vaginal dryness

- Coconut oil
- Ayurvedic Ghee
- Probiotics

Vaginal folds

Loss of folds

Healthy lining

Thinned

Dr. Anna Cabeca



Practice medicine
that makes sense!

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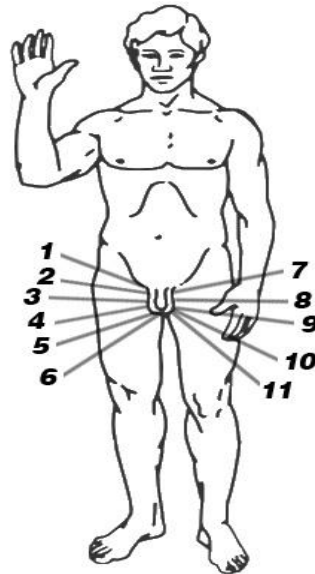
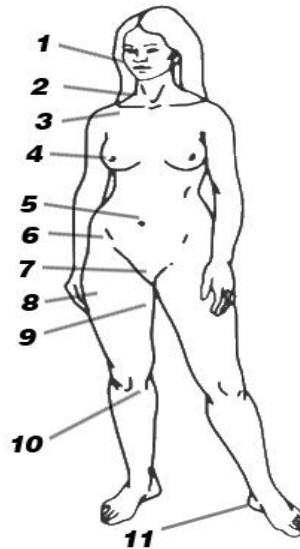


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THE HUMAN BODY

MOST EROGENOUS ZONES



Dr. Anna Cabeca



Dr. Anna Cabeca

Morning Takeaways

- Nutrients to decrease inflammation, support cell membrane integrity and function and adrenal function
 - DHA
 - Maca
 - Quercetin
 - Resveratrol
 - Grape Seed extract
 - Turmeric

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Morning Takeaways

- Supplements
 - Vit D
 - Progesterone and/or Pregnenolone
 - DHEA
 - Probiotics

MACA

- Menopause. 2008 Nov-Dec;15(6):1157-62. [Links](#)

- **Beneficial effects of *Lepidium meyenii* (Maca) on psychological symptoms and measures**

Preliminary findings show that *Lepidium meyenii* (Maca) (3.5 g/d) reduces psychological symptoms, including anxiety and depression, and lowers measures of sexual dysfunction in postmenopausal women independent of estrogenic and androgenic activity.

employing up to 4 mg/mL maca extract (equivalent to 200 mg/mL Maca). **CONCLUSIONS:** Preliminary findings show that *Lepidium meyenii* (Maca) (3.5 g/d) reduces psychological symptoms, including anxiety and depression, and lowers measures of sexual dysfunction in postmenopausal women independent of estrogenic and androgenic activity.

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Did you know that 90% of all disease begins with inflammation and hormone imbalance within the body?

BRAIN/NEUROLOGICAL SYSTEM
MACA, TURMERIC, FLAX,
OAT BETA GLUCAN

HEART/CIRCULATORY
MANGOSTEEN, RESVERATROL,
QUERCETIN, FLAX

IMMUNITY
MACA, MANGOSTEEN,
SPIRULINA, CHLORELLA,
OAT BETA GLUCAN, CAT'S
CLAW, GRAPE SEED EXTRACT

METABOLISM
CINNAMON, GREEN TEA

DETOXIFICATION
SPIRULINA,
CHLORELLA, MILK
THISTLE, CAT'S CLAW

BLOOD SUGAR
CINNAMON

INFLAMMATION
MACA, MANGOSTEEN, OAT BETA
GLUCAN, CAT'S CLAW,
RESVERATROL, SPIRULINA,
CHLORELLA, BROMELAIN,
PAPAIN, AMYLASE

GI/DIGESTIVE SYSTEM
BROMELAIN, PAPAIN, AMYLASE

HORMONES/ADRENALS
MACA, FLAX, LICORICE



Power Up!

Power Up!



MIGHTY
MACA
GREENS
FORMULATED BY
DR. ANNA CABECA

26g
Supp
Shake

Morning Takeaways

- Empower your patients with Self Discovery!
- Get Alkaline first
- Bump into keto-alkaline
- Empower our body, mind, spirits, and relationships



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Gifts for DrRitamarie's Audience!

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get 50% off Mighty Maca (exp. 11/15)



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