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### Are Fibroids the Cause of Perimenopausal Heavy Flow?

By Alicia Armeli

Heavy and irregular periods are common among perimenopausal women. And uterine fibroids are often blamed as the culprit. But as experts and literature suggest, the cause of abnormal bleeding could be something else entirely.

According to the *Journal of Steroid Biochemistry and Molecular Biology*, a woman could be considered perimenopausal if, at a certain age—usually 45 years and older, she experiences menopausal-like symptoms such as hot flushes, achy joints, difficulty sleeping, night sweats, and changes to her menstrual cycle.<sup>1</sup> For some perimenopausal women, periods can vary between 14 and 50 days. Along with being irregular, these periods can be abnormally heavy.

Uterine fibroids also seem to be prevalent during this stage of life. But are they solely responsible for heavy bleeding as some may think?

“Perimenopausal heavy flow is so common that it could almost be called normal. But there’s a physical reason why fibroids causing this bleeding doesn’t make sense,” says Dr. Jerilynn C. Prior Professor of Medicine and Endocrinology at the University of British Columbia and the Founder of the Center for Menstrual Cycle and Ovulation Research. “Fibroids grow within the muscle of the uterine wall and most of the time they’re far from the lining of the uterus—or the endometrium—which is what bleeds.”

Only one type of fibroid, submucosal, grows just under the uterine lining and can be responsible for the most dramatic and noticeable symptoms like heavy prolonged bleeding. But less than 10 percent of fibroids are submucosal.<sup>2</sup>

A landmark study published in the *Journal of American Medical Women’s Association* found similar and supportive data.<sup>3</sup> Seltzer and colleagues looked at the medical charts of 500 perimenopausal women. Of those, 91 were found to have heavy, prolonged, and irregular periods. But a closer look found that only six of the 91 women actually had uterine fibroids.

“Fibroids and heavy bleeding can co-occur at this time because of the hormonal changes of perimenopause,” explains Dr. Prior. “Namely higher estrogen and lower progesterone cause both heavy bleeding and fibroids to grow. During perimenopause, estrogen is on average 30% higher and progesterone is 50% lower. This amount of progesterone is not adequate for the amount of estrogen.”

Estrogen runs high during perimenopause because the body wants to rid itself of all potential ovarian follicles in preparation for menopause. And every follicle makes estrogen. With each cycle, more follicles are recruited, dissolved, and the result is higher estrogen. “Estrogen is what makes tissues grow,” continues Dr. Prior. “It makes the muscle cells of fibroids grow and it makes the lining of the uterus thicken. But you need progesterone to counterbalance estrogen’s action and to make the endometrium secretory and more mature.”

Knowing this, what’s the first step a perimenopausal woman can take to tame her period?

Before tackling any hormonal imbalance, Dr. Prior offers an even simpler solution that can be used at any age for heavy periods: Ordinary over the counter ibuprofen.

“There’s a balance of prostaglandins—a fatty hormone—in the uterus,” says Dr. Prior. “And if these two prostaglandins are out of balance, that is part of causing heavy flow.” Ibuprofen is a drug that can alter this imbalance.<sup>2</sup> “Taking 200-400 milligrams of ibuprofen with each meal—breakfast, lunch, and dinner—on every heavy flow day decreases flow by a quarter to a half. Every woman everywhere should know that.”

If a woman is still bleeding heavily and chooses hormone therapy, Dr. Prior prescribes progesterone, which shouldn’t be confused with progestin—a synthetic form of progesterone that has been linked to breast cancer.<sup>4</sup> Length of time taking progesterone along with prescribed amounts will vary amongst women, but this regimen does show promise.

Along with alleviating heavy bleeding, “progesterone usually improves sleep and decreases anxiety and stress responses,” adds Dr. Prior. But, she admits, progesterone can be expensive.

There's also concern in the medical community that taking progesterone may upset the hormonal balance in women with regularly occurring periods and could result in worsening fibroids. This is a broad generalization Dr. Prior wants to clarify.

"The assumption is if you have a regular period you are making progesterone as well as estrogen—this isn't correct," Dr. Prior argues. Earlier this year, Dr. Prior and colleagues published a study that examined progesterone levels in over 3000 women, average age of 41 years, with clinically normal menstrual cycles.<sup>5</sup>

"One-third did not have a high enough progesterone level—in other words, did not have a high enough level to say they ovulated. You can have perfectly regular cycles and not ovulate" and, therefore, not be making adequate progesterone. Since every woman's hormone levels differ, progesterone therapy may be a viable option to control perimenopausal heavy bleeding while not adversely affecting fibroids.

At any age, heavy menstrual bleeding takes a great toll on a woman's life, but it doesn't have to. Understanding the cause and receiving appropriate treatment can provide necessary relief.

**ABOUT THE AUTHOR** *Alicia Armeli is a Freelance Writer and Photographer, Registered Dietitian Nutritionist, and Certified Holistic Life Coach. She has master's degrees in English Education and Nutrition. Through her writing, she empowers readers to live optimally by building awareness surrounding issues that impact health and wellbeing. In addition to writing, she enjoys singing, traveling abroad and volunteering with her local animal shelter.*

**ABOUT THE DOCTOR** Jerilynn C. Prior is a Professor of Medicine and Endocrinology at the University of British Columbia and the Founder of the Center for Menstrual Cycle and Ovulation Research (CeMCOR). By publishing several research papers that examine the effects of women's hormone levels through the changing life cycles as well as public speaking, Dr. Prior continuously works with the goal of educating the public about important topics surrounding women's health. Dr. Prior is author of the award-winning book, *Estrogen's Storm Season: Stories of Perimenopause* and co-author of the book, *Why Progesterone Is Better for Women's Health*.

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