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Sheila de Liz **Woman on Fire** Rowohlt Polaris 288 pages / September 2020

Menopause isn't the end of the world – it can be a great new beginning!

Few women look forward to menopause. But do we really need to go through hot flashes, weight gain and mood swings? Not according to Dr Sheila de Liz.

Our notion of perimenopause is hopelessly out-dated. Many women still suffer unnecessarily, but the days when women simply had to grit their teeth and bear it are long gone. If menopause symptoms are identified correctly at the outset, every woman can significantly improve her wellbeing.

As a medical doctor and researcher, Sheila de Liz has devoted years of intensive study to the subject of menopause and, from her own experience as a woman in her prime (oh, yes!), she knows what helps and what doesn't. She also knows that it's possible to feel healthy, strong and sexy as a woman in your forties and beyond.



Dr Sheila de Liz was born in New Jersey in 1969. She moved to Germany at age 15 and studied medicine there. Since 2006, she has maintained her own ob/gyn practice in Wiesbaden. Today, she is a recognised international expert on everything concerning women's health, as well as a best-selling author and television and internet personality.

- The new book by Germany's most beloved women's doctor.
- Entered #2 on Germany's SPIEGEL bestseller list!
- Over 40,000 copies since publication!
- English sample translation available.
- Her previous title, *Lips Unseales*, about the female body was also a #2 bestseller that sold more than 60,000 copies. It spent 21 weeks on the *SPIEGEL* bestseller list with international rights sold to China, Japan, Korea, the Netherlands and Russia with other countries pending.

SHEILA DE LIZ

WOMAN ON FIRE

CONTENTS

Preface

A Quick-start guide to this book

Part One: Lighting the Flame

1.) Handbook for your Personal Ignition

Hollywood of Hormones Sparkplugs: The Nuts and Bolts of the Female Cycle

Part Two: Ch-Ch-Changes in Life's Second Half

2.) Premenopause – I see Fire

Is it? Could it be? - The Mysteries of Premenopause

3.) Perimenopause - Woman on Fire

The Monthly Surprise Party – Periods Gone Haywire Crime Scene, Do Not Cross – Heavy Bleeding Summertime Sadness – on Inexplicable Blues Smashing Pumpkins – Anger and Mood Swings I Can't Get No Sleep – Insomnia and Sleeping Disorders Somebody Bring Me Some Water – Hot Flashes Free your Lady Marmalade – Libido on Fire A Dangerous Woman – on Clear Vision and No-Nonsense Action

4.) Postmenopause – It's raining Men (-opause)

Through the Desert on a Horse with no Name – the Tragic Fate of the Vagina Hold Back the River – Incontinence Sex, Lies and Menopause – is it all over now? (I Don't Like to) Move it, move it – Aching Joints Love on the Brain – Brain Fog and Forgetfulness Stuck in the Middle of You – Weight Gain Heavy on my Heart – Coronary Heart Disease and High Blood Pressure Don't Leave me this Way – Hair and Skin after 50 You're Hot, then you're Cold – Thyroid Issues Bad to the Bone – How Hormone Deficiency endangers our Independence

Part Three: Saving Ms Hotstuff

5.) Bioidentical Hormones

(You make me feel) Like a Natural Woman The Golden Window The Ghost in the Machine – Breast Cancer and Hormone Treatment How to Train your Dragon – Getting your HRT Groove on Hormone Replacement FAQ's Alternatives to Hormonal Replacement – what really works (and what is B.S.)

6.) Your Firestarter and You - finding the right Gynecologist

How and when to ask what? Mandatory procedures and additional exams

7.) Staying on Fire – Kicking Ass after 50

The four Cornerstones of your Health Tell me what you want (What you really, really want) Your Spidey-Sense Swiffer for the Soul – Happiness and Respect

Epilogue – Free At Last

Acknowledgements

PREFACE

Dear reader,

you probably picked up this book because you're in menopause. Or perhaps you're not sure, because it's just been a while since your last period. Maybe you're experiencing some bad symptoms, or only subtle ones, but you most likely have the feeling of not knowing enough of what it all means, and where things may go from here. After all, how the hell are you supposed to know? Information about what to expect in female midlife seems to be available only in fragments, and what's out there doesn't sound exactly fun. So why aren't we as a society talking about menopause more openly? Something's holding the conversation back; maybe reluctance among physicians, hesitating to initiate a dialogue (in part, because most have no medical training for menopause). Or perhaps there is still some stigma about the end of fertility which some dumb people may argue marks the biological end of female purpose. Add in the mix the notion of turning invisible to society, and dispensable at the workplace, and there you have the perfect cocktail which has silenced the conversation about menopause for generations. This culture around shaming menopause was already wrong and harmful in the seventies and eighties, but in this day-and-age, believe me, it is true bullshit.

Please allow me to introduce myself: my name is Dr Sheila de Liz. I am a gynecologist and a menopause revolutionary, and I am about to make you rethink everything you ever thought you knew about menopause. If I do my job right, you will not fear this phase of your life, but truly be excited and feel well equipped to roll with whatever punches, hormonal or otherwise, come your way. If I succeed, I will not only become your virtual menopause guide throughout the next years, but teach you how to kick the shit out of menopausal symptoms, and have a grand time along the way.

One disclaimer: I will be revealing to you secrets from the innermost areas of female medicine, which may be totally different from what you believed to be true about menopause. A lot of the content in this book may lead to discussions or even arguments with your family, friends and even physicians, but please believe me when I say it is all the truth. My advice is exactly what I give my family, friends and also everything I apply to myself. For too many years, women have been ignored, belittled and marginalized and perhaps, even worse: left out of the conversation about treatment and prevention guidelines. Decisions about our health – as well as what to tell us, and what to hold back – are made behind closed doors, often by scientific panels consisting mostly of men.

Modern female midlife medicine, however, must include you – and that only works if you have profound knowledge, know all your options and can make your own, truly informed decision.

Very often, we leave big medical decisions up to the professionals, doctors who specialize in the field, and we don't question things. If I sprain my ankle for example, I will ask and trust an orthopedic surgeon. But when planning how you want to live and feel in your changing years, you need to be an active participant, and that will only work if you have real facts. Not rumors from the internet, not scary stories from older relatives, but the whole truth about your body, which will become more and more fabulous with time, and however, now needs dedicated care.

With the right tools at hand, you can stay the bad-ass, cool, hilarious woman you are and have an even better, sexier second half of your life. I am dead serious, and yes, I can prove it.

Menopause is not the "autumn of life", the way it has been portrayed in magazines and TV.

This attitude is super-outdated and needs to go the same way as big hair of the 80-ies and gigantic Nokia cell phones of the 90-ties. Instead of being a season of windbreakers and dying foliage, your menopause can be more like the most sexiest, funniest, luscious summer you can remember, which I plan to show you on the next pages. All you need is knowledge, a real strategy, and medical guidance. Please join me! I will walk you through the different stages of your menopause, and be with you every step of the way. I'm excited! Because believe me, something big is waiting for you, something really huge: an awesome new version of you. Maybe even the woman you've always wanted to be, a woman that is strong, sexy if she wants to be, but most importantly – finally free. It would be my honor to introduce you to her.

So please, leave your fall sweaters in the closet, you won't be needing them for a while, and put on a bikini and flip flops instead! After all, you are about to enter what may become the best summer of your life. Ready? Let's do this!

PART 1: LIGHTING THE FLAME

1. Handbook for Your Personal Ignition

I have great news for you! You are part of a new generation of women. We live in unprecedented times in which women can stay fit and healthy for far longer and age more beautifully than ever before. Evolution, however, has not yet registered what we today consider to be normal. It's still stuck 150 years ago when menopause symptoms often did not play a major role in women's lives because by age forty-five, they had long surpassed the zenith of their lives and might well be dead by fifty. Even in the post-WWII era, and well into the 1980s, women were considered old at fifty and senior citizens at sixty. Any menopause complaints that might have come up were overshadowed by age-related illnesses or simply not mentioned because of the prevailing *Zeitgeist* reasons and therefore often ignored by society.

With their many roles, women in the middle of life today form the backbone of their communities and, in this age of overflowing to-do lists, hormonal changes can sneak in following their old, evolutionary programming. Some of them are hushed, subtle or mysterious; others, however, can knock our socks off and make our lives miserable. Despite the fact that we are today biologically "younger" than our mothers and grandmothers were at the same age, and we can do things that they would never have done like wear an old pair of Converse All Stars to a rock concert, the medical attitude towards menopause is still stuck somewhere in the 1980s. In other words, we're keeping pace with modernization, but medicine is lagging behind.

Moreover, what is also missing is a comprehensive educational model for women over forty. Current approaches to dealing with the menopause are similar to education about menstruation back in the 1950s – an admixture of fact and fiction whispered behind closed doors. Today, most mothers will sit down with their daughters when they enter puberty and have that "talk", maybe show them some pads and tampons and explain everything from A to Z. Where, however, is that critical educational talk when it comes to the massive hormonal change that takes place in midlife? In most cases, we no longer have that older, wiser woman who helps prepare us for menopause, nor do we usually have an appropriately open dialogue initiated by our gynecologist. Instead, we are symbolically shoved into the unknown, and the sparse information that is available doesn't sound like much fun, either. Hinting at irretrievable loss and sad farewells, menopause has been depicted as unpleasant, painful and depressing; just another dreaded "female curse" like menstrual pain or PMS, which we somehow must endure, preferably without complaining, and all proffered solutions are sub-optimal because this is what nature has dictated for us.

Stop. I am telling you here and now that this is not the way it has to be. You don't need to submit to the dismal idea of feeling worse and weaker from now on. Menopause is in urgent need of a long overdue update. I have another plan for you, a better one. There is an alternative that will make you feel better. Not only will you feel free of any negative symptoms, but you will feel truly fit and well. And the best part about it is that it is actually much easier to achieve true well-being than it is to let hormone deficiency drag you through days and months and years of suffering. In the long run, it's also much, much healthier. In the following chapters, we'll learn in detail why hormone deficiency is one of the main reasons for female illness as we get older that can prevent us from truly living with joy and passion, whether it's dancing exuberantly at our children's weddings or flirting with that cute waiter on a vacation holiday.

Starting even in our forties, there are numerous unexplained symptoms that result directly from hormone deficiency. These can include depression and other mental disorders, joint problems, cardiac arrhythmia, neurological diseases, curious skin complaints and many more issues, which don't manifest until a woman reaches this period in her life and quite often remain the only sign that this era has actually begun. More importantly, many women who do not experience hot flashes, and therefore categorize themselves as being "symptom-free" during hormonal transition, will have other serious issues, and nobody (yes, not even their doctors) will realize that a lack or imbalance of female hormones is the cause.

Good to Know!

For your next stage in life, you need a specific plan tailored to you. It needs to be comprehensible, and it needs to work! If you do everything right, and do it right now, your sixty-year old self will thank your present self with a warm hug.

The lack of knowledge regarding menopause is by no means restricted to medical laypeople. In most instances the topic of menopause is barely addressed during medical studies, and even gynecologists don't learn much about it during their specialized training. When I was in my early thirties and still a medical resident, I thought menopause complaints began with your last period. I also thought that it was only around fifty that hormonal transition begins, and hormones begin to decrease. By now, of course, I know that our hormone balance already begins to change slightly in our late thirties and that this causes discrete changes in our state of mind. This process, which is usually gradual, is known as the **Premenopause**, and often transitions smoothly into so-called **Perimenopause**. The second, rather long transitional phase relates to the years before *and* after your very last period is what is conventionally called **Menopause**, even though that term actually refers to the shorter time period surrounding the very last monthly bleeding.

Many women don't know why they feel bad during pre- and perimenopause, if you are still under forty, it can be especially difficult to find a sympathetic ear for your problems. Since I want to provide you, dear reader, with solid knowledge, we're going to take our first step today and learn all about our female hormones. These are just the basics, but they provide us with the key and the tools we will need to understand every aspect of how we work. Most of our bodily organs are influenced by our female hormones. Many emotional and psychological developments are also directly related to hormones. If you have teenage girls at home, you know how hormones can change a person. Those of you who have been pregnant will know the second form of hormonal change that can hit us with full force. No less impressive is the third form of hormonal change in the life of a woman, namely the changes that takes place in the body, mind and soul during menopause.

Good to Know!

Premenopause usually begins between age 38 and 44 – these are comparatively discrete changes in hormone balance.

Premenopause is often seamlessly followed by **Perimenopause**. These are the actual menopausal years, and they last until one or two years after your last period, which is what is actually called **Menopause**. Yes, "menopause" is the term for your last period if you have not had any additional bleeding for over twelve months!

Perimenopause then seamlessly passes into Postmenopause.

To understand your menopausal years and to manage them optimally, it is essential that you become familiar with your female hormones. For most of us, however, this is unfortunately not the case. Hormones in general, and female hormones in particular, have the reputation of being mysterious and moody, complicated and incomprehensible. Today we are going to change this! Every hormone is more than just a molecule, each has its own tasks, its own profile – yes, actually its own personality. And since every personality needs a face, we are going to get some help and take our minds to the city of dreams: off to Hollywood. Let's go!

Hollywood of Hormones

Among all the hormones that we humans have, there are three ladies who play the leading roles, so to speak, in the lives of all female beings in this world. They are responsible for our curves, our menstrual cycles and maybe even whether we like a particular man or prefer to mute him on WhatsApp. So, without any further ado, let's raise the curtain on our three hormone stars: estrogen, progesterone and testosterone!

Each of these three have their own distinct strengths and weaknesses, and if they are well adjusted and work together properly, everything runs like clockwork. In order to do justice to these ladies' special features, we are going to give them a face and use a Hollywood blockbuster from the year 2000: *Charlie's Angels*. In that film, Cameron Diaz, Lucy Liu and Drew Barrymore star as the iconic, savvy all-female detective team, using Kung-Fu and cool disguises to thwart criminals while on the lookout for the perfect man and outfit.

In our comparison, estrogen is our Drew Barrymore. In the movie, she's the one with the most curves, she's the most romantic and falls for every bad boy. She is a dreamer, she's cuddly and of the three angels, the most likely to be led by her heart. Estrogen is the hormone of femininity par excellence, the hormone of curves, of romance, of tangos on a balmy summer's night and of drama. Drew always hums along to all soft rock hits, loves songs like 'My Heart Will Go On' by Céline Dion and lets us melt away to 'Perfect' by Ed Sheeran. She is the patron saint of all curvy models and the secret brand ambassador of all Victoria's Secret stores.

Mentally and psychologically, estrogen is responsible for many things we call 'typical female' attributes: the need to take care of everyone, the pursuit of beauty and the desire to make oneself pretty, as well as the desire to have a family. Everyone needs to be satisfied – especially in our twenties and thirties – from the mother in law to the boss. There are also those quirks, like collecting shoes or going to the restroom in pairs, that probably have something to do with

estrogen. Unfortunately, though, estrogen is also responsible for certain other qualities that can infiltrate our brains, such as constant comparing and collating with our surroundings, wondering whether we are pretty/smart/good enough, as well as that stupid habit of attaching too great an importance to the opinions of others. As adults, we at some point acquire the tools to work against these issues, but during puberty it is anything but fun when self-confidence takes a heavy blow from physical changes on the one hand and a flooding of estrogen on the other.

Nerd Box

Estrogens are actually a generic term for several substances from the estrogen family:

- 1) Estradiol (also called 17-ß-estadiol, oestradiol or simply E2): the most active substance, it is produced by the ovaries and is the main component in body identical hormone replacement.
- 2) Estrone: a form of estrogen that is primarily formed by fatty tissue during postmenopause which is weaker in its affect than estradiol.
- 3) Estriol: the weakest form of estrogen, which is produced by the placenta and commonly found in vaginal creams.

All three are estrogens – just like Granny Smith, Honeycrisp and Golden Delicious are all types of apples.

Estrogen plays a leading role during reproduction and builds up the mucous lining in the uterus in preparation for a fertilized egg. Alongside reproduction, estrogen is not only responsible for our female curves, but also for rosy, plump skin, full breasts, supple joints, a moist vagina, a reliable closure of the urethral sphincter and stable bones. Estrogens influence almost every organ and cell in our body. Mentally and energetically, we women function better and differently under the influence of estrogen than without it; estrogen is our fuel, our ultra-fast Wi-Fi and, like the 5G network which supplies even the furthest corner of the world with high-speed Internet, we have estrogen receptors everywhere in our bodies. Estrogens therefore influence many organs – like the blood vessels, the heart, the brain, the joints, breasts, skin and bones – and they do so much more than previously assumed.

Good to Know!

The functions of estrogen:

- Water retention in the body in general, but especially in the breasts, hands and feet
- Increase of the mucose lining of the uterus during the first half of the menstrual cycle
- Feminine curves
- Breast development
- 'Caring' hormone
- Vaginal moistness and health
- Support of vaginal flora

- Collagen building in skin and connective tissue
- Emotionality, drama and mood
- Protection against atherosclerosis
- Brain protection
- Strong bones

In order to counteract the effects of estrogen such as mucosal build-up, water retention and mood swings, we have another hormone, namely progesterone. In our comparison with *Charlie's Angels*, progesterone is represented by Cameron Diaz, who in the film is the athletic, slender and relaxed angel. She likes to dance wildly in clubs or in front of the mirror at home wearing Spiderman underpants. She surfs, has an athletic-slim figure and is for the most part pretty chilled; just a typical California girl, easy like Sunday morning.

Progesterone is produced in the second half of the menstrual cycle, after ovulation. It helps prepare the "living room" in the uterine cavity for the implantation of a fertilized egg. It drains fluid from the body, thereby relieving aching breasts before a period and docks onto so-called GABA receptors in the brain to relax us and give us deep, restful sleep.

Progesterone allows us to turn a blind eye when someone is annoying us, and sometimes brings the urgently needed serenity into everyday life. However, if you have too much progesterone, that serenity can lead to social withdrawal and brooding. It's the healthy mixture that matters, but more about that later.

Good to Know!

The functions of progesterone:

- Builds up the lining of the uterus in the second half of the menstrual cycle with vessels and nutrients for a possibly arriving embryo
- Activates GABA receptors, docking sites in the brain, to relax the nerves
- Rids the body of fluid
- Relaxes the mammary gland

The third hormone in our group is testosterone. Wait a minute, many of you will probably be thinking right now, isn't that the men's anabolic steroids Arnold Schwarzenegger hormone? Yes, that too. But just like men have some small amounts of estrogen and progesterone, women also have amounts of testosterone, naturally in smaller quantities than men. Testosterone is nevertheless an important hormone for us women that is often overlooked and even more often underestimated. In our comparison, our testosterone avatar is not Arnie but the third angel in our trio, Lucy Liu. In the film, she is the definition of cool and sexy in her black leather jumpsuits and perfectly shiny hair. She studied in Harvard, is a chess and Kung-Fu master and bomb disposal expert. She keeps a cool head, often draws up the master plans and deals a mean and precise blow if necessary. Out of the three, she is the least likely to be wrapped around any man's finger.

Our Lucy Liu hormone, aka testosterone, is produced primarily in the ovaries, but also in the adrenal cortex (a fact that will gain more meaning later). Testosterone is produced together with estrogen and resonates with the fluctuations of estrogen during the menstrual cycle, but not as intensely. Testosterone helps to build muscles and sustain the basal metabolic rate, improving metabolism. Sugar molecules are more likely to be burned, and you don't gain weight as easily. In us women, testosterone is responsible for energy, an athletic figure, decisiveness, assertiveness – and libido. As it resonates with estrogen and rises accordingly around the time of ovulation, testosterone helps to ignite a fire in us, so that we feel sexy around ovulation. We are also more sociable around that time. We enjoy being out and about, find people more interesting than usual and are more likely to react to a good-looking or nice-smelling man who we find attractive.

Good to Know!

The functions of testosterone:

- Muscle-building
- Libido
- Clear head
- Energy

Interestingly, we often find our partner's smile more appealing around the time of ovulation than we do at the end of the cycle. Researchers have found that you are more likely to find your partner's smile annoying shortly before your period, although you thought it was cute around the middle of your cycle. So if you have enough testosterone, you feel good, are alert and in general open to a roll in the hay with your significant other. During menopause, testosterone has the most exciting effect of all on our mind – but more on that later.

In a nutshell

- Our most important hormones are estrogen, progesterone and testosterone.
- Estrogen is essential for nest-building, romance and female curves and is the 'carerhormone' par excellence.
- Progesterone is important for relaxation, ridding the body of water and good sleep.
- Testosterone plays an important role in muscle building, mental strength and for our libido.