

Owning Choices

by Yvonne Bowman Burton

Twelve years ago, I was sitting across the desk from my gynecologist. He was telling me I should have a hysterectomy and then take replacement hormones. Some questions came to my mind as soon as the surge of fear abated. Could you take my uterus out vaginally, I wanted to know? "No," he said, "the right way to do you is through the abdomen." Would you take my ovaries out, too, I asked? "Yes," he said, "why leave them in to get cancer later on?"

I was frightened then annoyed. "Are there any alternatives?" I queried. "Well, you could wait out the condition until menopause in about five or six years and the condition will take care of itself. However, women don't want to withstand that much discomfort for so long, so the hysterectomy is the answer" he replied. The "condition" which had brought me to see him in the first place was an increase in the amount of menstrual flow and the passing of what I considered to be very large clots. The diagnosis was dysplasia.

Since I really did not quite understand what that meant or what ramifications might go with it, I decided to do some research. I found out as much as I could about dysplasia. I looked at statistics which showed that it did not significantly increase the risk of uterine or cervical cancer. I also read about estrogen replacement therapy. In the literature of that time, there did seem to be an increased risk for breast cancer with the use of synthetic estrogen. As my maternal aunt died at the age of 32 of a misdiagnosed breast cancer, that was not good news to me and I decided not to have the hysterectomy. At that time, it was somewhat unusual for a woman to make a decision which did not coincide with her doctor's advice. Some years later, my mother had a breast skin cancer. So, when I became menopausal, I again refused replacement hormones. Even today, as I see a different doctor at Kaiser (my health plan) I am always asked why I am not on Hormone Replacement Therapy. "It could protect you from heart disease, stroke

and osteoporosis", I am told by the medical profession. Last year, my doctor ordered a bone scan, presumably to prove to me that I had already suffered bone loss. No discernible bone loss was discovered. I did not think there would be. I eat well and walk miles in the hills behind my home. Therefore, I continue to choose what feels right for my body and decline.

I did look for ways to help myself naturally through menopause. Some complementary health care techniques which were helpful to me included the following. The list is not meant to be comprehensive, just ways which were helpful to me.

1. Breathing Technique for hot flashes, The Cooling Breath Method: moisten lips well with saliva, purse lips to form a very small o shaped opening. Inhale deeply through this opening and exhale through the nose. Repeat several times.
2. The Relaxing Breath (may calm racing heart rate associated with hormonal changes), Method: draw in a breath through the nose to a count of four, hold the breath to a count of seven and release the breath through the mouth to a count of eight. The tongue should be placed just in back of the front teeth throughout this breath. It may take practice to exhale with the tongue behind the teeth. The count is important to remember, 4-7-8, i.e., inhale, hold, exhale.
3. To keep the skin cool to relieve hot flashes, carry lotion and moist towelettes with you;
 - a) Moisturize back of upper arms and back of neck with lotion. Lotion evaporates quickly, helping to cool the skin.
 - b) With moist towelettes, dampen back of neck, back of ears, forehead and back of upper arms for quick evaporation and cooling.

c) For TFHers, balance Triple Warmer meridian and other related systems.

4. Nutrition: Eat plant forms of phytoestrogens such as soy products, and arguably, wild mexican yams, and drink raspberry leaf tea . A balanced diet low in fat, sugar, caffeine and alcohol is always good.

5. Exercise: Regular exercise of 1/2 to one hour at least three times per week. Walking is an excellent form.

6. Complementary Health Care: Get "Touch for Health" balances and allergy identification and clearing; acupressure and/or acupuncture can be helpful in body balancing and pain relief; relaxing bodywork such as massage or Trager R work; stretching or Yoga; use positions to minimize abdominal cramping and pain such as lying on back and bringing knees to chest and holding and/or lying on back very near a comfortable sofa, bring buttocks to edge of sofa and place knees and feet on the sofa. Relax and do the relaxing breath mentioned above in addition.

I used the above with the notion that menopause is normal and natural and that there are simple ways to help myself be more comfortable through this phase of my life. Remember, too that this took place for me before we had most of the wonderful books now available on the subject. Two such books are Christiane Northrup's "Women's Bodies, Women's Wisdom" and Lonnie Barback's "The Pause".

Further back in my life, during my first pregnancy, I read that it was healthier for the newborn if the mother did not have drugs during labor and delivery. I decided to have natural childbirth but still to have an OB/GYN in attendance. He agreed to "go along with it, as long as the childbirth proceeded without complications." That year was 1958 and I sought out and attended natural childbirth classes. My son was born

using natural childbirth and I had an episiotomy I did not need. In retrospect, now I would even question the blanket use of the episiotomy.

Recognizing my choices are not right for every woman, the point is, we, as women, are faced with bodily changes in puberty, childbearing and menopause. There may be additional traumas and illnesses of the reproductive system to contend with. Given all of that, we are faced with either choices-action-and-intervention, or no action. Then if action is chosen, what action? Choices are highly personal. The handout shows the steps I followed in coming to my decisions. They may be helpful as a guide to anyone facing changes or medical interventions in the reproductive arena. Here again, are the steps:

1. Gather information. Find out all you can about the condition. Look at allopathic and complementary sources.

2. Look at Pro's and Con's. Make a list showing both and use as many sources as you can find. For example, America's Pharmaceutical Research Companies put out a series of booklets called HEALTH GUIDE. While they give some risk factors, their primary purpose is to sell the hormones they manufacture. Therefore consider sources and their biases.

3. Family History. See how the Pro's and Con's from above match up with family history and genetics (In my case, there was a family history of breast cancer but no known history of osteoporosis or stroke).

4. Feel and think about what feels right for you. In Kinesiology, we can even ask the body/mind!

It is in making informed choices about what is to be done to our bodies, that we take charge of, and responsibility for, our own lives.