Demystifying Your Menstrual Cycle

When we begin to affect the hormones by regulating the state of the physiology, hormones change. For most women, they have no experience of what “normal” is so we can expect that as we regulate and influence the hormones, there are going to be fluctuations. For many, adaptation will take months.

Your job is to create as much balance, both internally and externally, using the tools of this program. In doing so, there will be fluctuations (it’s just part of the change) but those fluctuations will be much less extreme and you will be 100% aware of the cause and fully capable of recovering.

Most of the women taking part in this program have hormonal imbalances which have developed over time, some are trans-generational.

As Dr. John Lee states in his book, more than fifty-million women are going through pre-menopause (which can begin as early as the mid-thirties) a collection of symptoms women experience for 10-20 years before menopause ie. Fibroids, tender or lumpy breasts, endometriosis, PMS, difficulty conceiving, sudden weight gain, fatigue, irritability, very heavy or light periods, cold hands and feet, headaches, irregular cycles.

All of these symptoms are a result of hormone imbalances— typically an estrogen dominance/progesterone deficiency caused by chronic stress and/or the liver’s inability to detoxify estrogen. Both of which are very common in adrenal/thyroid compromised women.

Unfortunately, it is not just about the biochemistry. The women experiencing the symptoms of pre-menopause are typically between the ages of thirty and fifty. Most are out of touch with the cycles and rhythms of their bodies, their feelings, and their souls. These are women who struggle to balance families and work and forget to take care of themselves.

There is a cycle to our life that is important to understand as we navigate these natural fluctuations. There was a time when a woman’s mother, grandmother, and aunts would quietly let her know what to expect during each phase of her life with herbs and other good old time-tested wisdom. Today, unfortunately, the medical industry has taken the place of the family, and women are being subjected to personality-altering drugs and surgery.
Here are some common questions we get on this topic:

**What does it mean if my cycle used to be every 30 days and now it is every 27?**
There is nothing wrong when the length of your cycles change. Things are regulating. Avoid getting too attached to these changes. Stay in tune with your body, what it feels like and how that correlates with the objective assessment of body temperature and pulse. Up to the age of forty, some 90% of women have regular periods. Between 40-50 only 10% of women have regular cycles. It is quite normal to have irregular periods when you are pre-menopausal. Chronobiologist William Hrushesky who has closely studied the timing of women’s hormone cycles has found it is perfectly normal for a woman’s cycle to be as short as 18 days and as long as 36.

**Should our period/flow increase (become heavier) or decrease (become lighter)? And what does it mean for both?**
Heavier cycles come with the premenopausal territory and are often a complaint in a year or two before menopause. Often, when this complaint is taken to the doctor, he/she will recommend a hysterectomy. Heavy bleeding can also be a result of a fibroid or an enlarged uterus but it is usually caused by too much estrogen stimulating the uterus to keep on growing.

Weight gain sometimes correlates with heavy bleeding, which makes sense as the fat cells are producing estrogen in addition to what is being produced by the ovaries. The more estrogen present, the more the uterus lining will be stimulated to grow the blood-rich lining and the heavier the bleeding will be.

Some women will do really well on progesterone supplementation to assist in recovering the balance once they have achieved a strong nutritional foundation.

A vast majority of the time, irregular cycles—heavy, light, missed, painful, etc., are a sign of progesterone deficiency.

Let's not forget that progesterone is a precursor to cortisol so when stress is in excess, the body will prioritize what is most important. In this way, keeping you alive is much more important than ovulation and gestation.

Thyroid imbalances, overactive/under-active adrenal glands, and disturbance to the HPA axis, particularly the pituitary gland (we cannot have one issue without the other and all of these imbalances are taking place at varying degrees under chronic stress)—these all contribute to hormonal imbalances—estrogen dominance/progesterone deficiency OR low hormones as a result of exhausted adrenals and the inability to produce steroidal hormones.
Not only are these issues the result of chronic stress to the system, but they also cause chronic stress to the system.

**If PMS symptoms stay the same or become worse, what should I do? Add more carbs?**

Find more balance to assist in regulating your blood sugar. Doing so will reduce the stress hormones blocking the body's ability to maintain proper hormonal rhythms.

Typically when symptoms get worse it is because someone is moving too quickly for the state of their physiology and there are too many carbs being added to the diet too quickly.

**Is there an overall goal for our menstrual cycle? Ie. NO PMS, 28 days in between and light flow?**

Unfortunately, we cannot block the natural cycles of life from happening. All we can do is to become aware of our own personal hormonal patterns and influences. So much of this is going to depend on the individual. Bottom line, when you begin to regulate the system, the system is more in balance hormonally, which should result in less overall symptoms. If you are someone who has experienced a lot of the symptoms associated with pre-menopause, your body will require more of your attention.

**Is it normal to get light cramping and bloating?**

Yes.

**If I'm someone who does not get a consistent period, should I automatically start off with high fat? Higher carbs?**

Based on the information above, we now have a little more clear understanding as to why this person might have irregular cycles. It depends on the phase of life this person is in, the state of the physiology, and what feels best for her.

Does she feel more balanced on high fat? Higher carbs? Working The Adrenal ReCode program in the way it is presented will provide the answers to a question like this.

What she should automatically start off doing is what she has been doing with very minor adaptations ie. introducing new foods. If she has been on a low carb diet—start simply by adding a tablespoon of carbs to each meal, establish food frequency, eat carbs, protein, and fat at each meal.

Observing how these small changes feel in the body will continue to guide the direction.