UTERINE FIBROIDS: THE SURPRISING STARTING POINT
Uterine fibroids affect a large number of women in their 40’s and 50’s. How many exactly? It’s hard to tell as estimates range from 20 to 80%. Uterine fibroids can vary in size from as small as a pumpkin seed to as large as a grapefruit or even larger.

If you’ve been diagnosed as having uterine fibroids, your natural first question will be, “Is it cancerous?” Every fibroid case is unique and should be investigated to rule out any nasty possibilities, but in the vast majority of cases, the answer is no. Fibroids are largely benign growths. While some larger and more problematic fibroids can cause symptoms and require surgical intervention, others don’t cause problems. Health repercussions will vary greatly from woman to woman.

While the exact cause that triggers fibroid growth is yet unknown, we do know that the hormones oestrogen and progesterone have a bearing on the issue. These two hormones must exist in balance with each-other or problems arise. In the case of uterine fibroids, the ratio of oestrogen to progesterone is thrown out of balance, which can then lead to annovulatory cycles (when ovulation does not occur) and thus the thickening of the endometrial lining. This is where the fibroid can begin.

Over the course of my career, I’ve learned to look behind the symptoms or presenting illnesses and see what else is going on. The body is very much interlinked and while so many health conditions can leave us guessing, there’s one health truth we can’t escape: that nothing happens in isolation.

Over nearly three decades in clinical practice, I’ve observed a concerning trend with regard to health conditions that seem random and disconnected. However, there is really no such thing as a random symptom.

Physical or structural health affects chemical and hormonal health. Emotional and mental health affects physical well-being. It’s called the health triangle and, when it falls out of balance, uterine fibroids are just one possible manifestation.

In fact, there are many health mysteries that can all be solved when we start to understand a simple concept called Sympathetic Dominance.

Some women won’t feel their fibroids as they are too small to cause significant pain or cause other health repercussions. In the cases where the fibroid is big enough to cause symptoms, the woman may notice any of the following:

- Pressure on the bowel
- Frequent urination
- A feeling of fullness in the pelvic area
- Lower back pain
- Heavy or painful menstrual periods
- Pain during sex
- Difficulty during pregnancy or delivery (including an increased risk of Caesarean)
There is a well-documented link between the oestrogen-progesterone balance and uterine fibroid growth. If we are going to solve the uterine fibroid puzzle, there are a few questions that need answering:

- What could cause Oestrogen and Progesterone to become out of balance?
- What can trigger Sympathetic Dominance and subsequent fibroid growth?
- What other health conditions are linked to Sympathetic Dominance?

This is a look at one possible cause, not only for uterine fibroids, but for many other health conditions that you will discover are linked.

1. What could cause Oestrogen and Progesterone to fall out of balance?

Every person, regardless of gender, has an inbuilt crisis management system. It is a set of neurological responses that cause changes in our bodies whenever our brain receives the message that something is wrong. The technical term for this is the Sympathetic Nervous System, but you might know some of its effects by a more familiar term: the ‘fight or flight’ response.

One of the first things that happens in the fight or flight response is the suppression of the reproductive system. Why? No one needs to be making babies at the exact time they are running from the lion or the bear. Here’s where the issue is though: The fight or flight response is only supposed to fire up until the threat is resolved. We aren’t supposed to stay in this mode for too long. When we do, there are knock on effects throughout the body. Not the least of which is the fact that our hormones can be suppressed for long enough to suppress ovulation.

Progesterone is a hormone that created by the ovaries in the lead up to, and in the days directly after ovulation. When ovulation doesn’t occur, oestrogen can increase and the healthy ratio of oestrogen and progesterone is thrown out of balance. This is when we start to see the thickening of the endometrial lining as well as heavy, irregular or painful periods. High oestrogen is a risk factor in uterine fibroid growth.
2. What can trigger Sympathetic Dominance and subsequent fibroid growth?

When most people think of the fight or flight response, their mind goes straight to the dramatic things that cause us to panic: a child running out in front of a car, a loud noise, a barking dog and the like. However, in modern life, our stressors differ and can include a wide range of triggers.

Did you know that the same set of reactions that are programmed to kick in at the point of crisis also kick in for any stressor? Stress, when referred to in this situation, is anything that puts demand on mental, emotional or physical energy.

With this in mind, do you ever:

>- Feel wound-up and unable to relax
>- Feel like you are going from one thing to another all day
>- Lie awake at night worrying about your to-do list for the next day
>- Worry over a relationship, financial or health stressor
>- Work a physically or mentally demanding job
>- Have an injury or illness you are recovering from
>- Care for someone with an injury or illness.

All of these are examples of stress. So too are exam nerves, or interview jitters. All of us feel stress. When we do, our sympathetic nervous system winds up. When the sympathetic nervous system is wound up, the reproductive system is suppressed. Our hormones get thrown out of balance. When this happens, the flow-on effects can eventually hit many areas of our health.

When you stay in fight or flight mode, your sympathetic nervous system stays dominant. This means your parasympathetic nervous system (that handles your rest, digest, repair and reproduce functions) is suppressed. This is called Sympathetic Dominance and it can be the reason many people find themselves chasing so-called ‘random’ symptoms.
3. What other health conditions are linked to Sympathetic Dominance?

Sympathetic Dominance always implicates the adrenal system. The glands that are programmed to pump stress hormones at the point of crisis are also integral to the production of many hormones. When someone is in a chronic state of stress (or is wound-up), these glands will get driven and driven until eventually they tire out. Our adrenal glands are integral in the production of many hormones and enzymes including these:

- Progesterone and oestrogen as we have already discussed
- Aldosterone which is to do with the fluid balance in the blood (blood pressure)
- DHEA which is a precursor to testosterone and the Oestrogens
- Cortisol and cortisone, being the stress hormones and the hormones that respond to inflammation and more.

If your adrenal glands run out of puff, your body won’t have the reserves to mop up inflammation the way it should. You’ll feel tired, you’ll get run down, and when inflammation pops up in your body, it won’t have the same ability to respond to it. This forms another possible starting point for uterine fibroids.

Adrenal glands can recover if you give them the opportunity to do so. But before I move on to that, let me outline some typical symptoms of Sympathetic Dominance. These issues seem random, leaving sufferers feeling like hypochondriacs constantly chasing unrelated symptoms. However, I am here to tell you the following symptoms can be very much linked:

- Headaches and irritability
- Tightness in the neck area and shoulders that feel like concrete
- Feelings of being wound up or wired
- Feeling cold even when you shouldn’t
- High blood pressure
- Increased blood clotting factors (including increased risk of Deep Vein Thrombosis and stroke)
- Tiredness and low energy
- Adrenal exhaustion or fatigue
- Water retention
- Polycystic Ovarian Syndrome
- Hormonal issues, including issues with your menstrual cycle (if female) or low testosterone (if male)
- Light sleep and vivid dreams
- Tight calf muscles, buttocks or Achilles tendons
- Difficulty relaxing or calming down
- Cravings for sugar or salt
- Food sensitivities or allergies
- Digestive issues including bowel issues (bloating, constipation, IBS or diarrhoea)
- Difficulty losing weight
- Gallbladder disease or thyroid imbalances
- Hair loss
- Uterine Fibroids
Any one of these issues can cause discomfort, or even distress. In the overwhelming majority of Sympathetic Dominance cases I’ve seen, it hasn’t been one single issue that has popped up. It has been multiple health conditions. This can be frankly overwhelming.

The best course of action is to attack the issue from all angles. This can be done using a set of simple tools that can be easily included in your lifestyle. They have been developed to target specific areas of your brain, and support important systems within your body in order to arrest the physiological changes that occur in a prolonged fight or flight state. This can bring you back to more desirable alternative to Sympathetic Dominance: rest, digest, repair and reproduce mode.

You don’t have to live at the mercy of these conditions. Simple interventions can put you back in control of your health.

Yours for better health
Dr. Wayne Todd

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